

Enhancing Access to Prevention and Health Care for Syrian Refugees in Jordan

Despite its already overburdened social and health care services, Jordan has kept its borders open for Syrians fleeing their country, including those seeking health care and other essential, life-sustaining services. As the Syrian crisis intensifies, the influx of refugees crossing into Jordan, whether based in camps, transit sites or in host communities, will continue to overstretch Jordan's human and financial resources in primary and secondary health care services, and may have particularly negative consequences on the host communities' access to existing systems in the northern cities of Ramtha, Mafrqa, Irbid and all other communities hosting refugees. The IOM contributes to collective efforts by supporting the Ministry of Health with funding from IOM donors to carry out the following projects.

TB Prevention and Continuity of Care

IOM has developed a TB control program among the refugee camps and host communities in Jordan in response to the mass influx of refugees to the country since the Syrian Civil War that started in 2011. There are currently approximately 604,000 refugees registered in Jordan, with approximately 84% living within the host community and 16% living in the camps; Za'atri camp, Emirates Jordanian Camp and Azraq camp. Many people receiving TB treatment in Syria have had their treatment discontinued due to the war, leading to the possibility of MDR-TB becoming a threat among the refugee population. In response to the increased threat of TB among the refugees, IOM has created screening, diagnostic, and treatment protocols in the refugee camps and in Jordanian host communities. The "Public Health Strategy for Tuberculosis among Syrian Refugees in Jordan" is a strategy that was developed and signed by IOM, MOH/NTP, UNHCR and WHO aims to reduce susceptible and resistant tuberculosis transmission, morbidity, and mortality among Syrian refugees residing in Jordan.



Children waiting in line to be screened for TB in Za'atri refugee camp in Jordan, © IOM 2014

TB Awareness Raising



IOM has been conducting TB awareness raising sessions, where refugees in the camps and those that have integrated into the community are taught the symptoms of TB, where to go to seek medical care, and best practices to avoid the spread of the disease. IOM works with community health workers who provide awareness raising sessions and refer any suspected case to the IOM mobile team. In addition, IOM conducts TB training to the health providers as part of the capacity building activities. To date, **312,776 people** have received the awareness sessions.

HEALTH RESPONSE

416,650 screened for TB

326,966 received TB awareness sessions

137 TB cases diagnosed

83 cases completed the treatment successfully through DOTS

63,775 vaccinated against polio

115,823 vaccinated against measles

35,262 provided with Vitamin A supplements

Strategies to Improve Access to TB Care and Case Management

1. Provide active and early TB detection among Syrians through mobile units;

2. Conduct chest x-ray diagnostics and sputum sample collection/ testing, as indicated;

3. Suspected TB cases referred to IOM by the primary health care providers in the camp and hospitals, through an agreed-upon referral mechanism.

Active & Early TB Detection (mobile units)

TB awareness raising & prevention (mobile teams)

Chest X-ray, sputum sample collection & testing

Facilitate TB treatment, DOTS follow up & contact tracing

Presumptive TB cases referred to IOM by health providers/ community focals

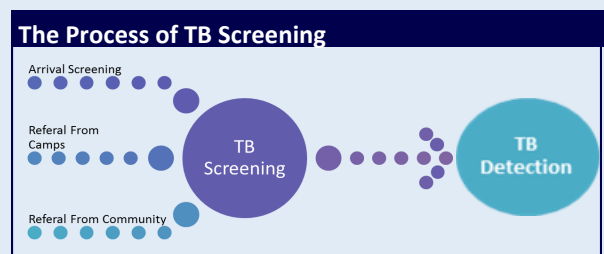
4. Facilitate health referral services for those diagnosed with TB, and ensure follow-up for those receiving TB treatment to local TB centres, including contact tracing.

5. Engage refugees and health providers in TB awareness-raising and prevention activities through a mobile awareness team operating in and outside camps.

TB Screening and Detection

IOM conducts TB screening in **four different levels** to address the possible spread of TB infection.

An IOM health team, **firstly**, conducts first health screening for Syrian refugees, including TB, upon arrival to Raba al Sarhan Transit Centre (RSTC) and refer any suspected case to the B mobile team.



Females waiting in line to be screened for TB , Za'atri Refugee Camp

On the **second level** and inside refugee camps, IOM works in coordination with community health workers and other health NGOs who refer any suspected TB cases to the IOM mobile team .

On the **third level** and outside camps, IOM has a mobile medical team that conducts screening for those Syrians that have settled in the community.

On the **fourth level** and in the coordination with MOH and through the use of a mobile X-ray unit (X-Ray machine mounted on a vehicle), the mobile medical team conducts chest X ray (CXR) screening for suspected cases that are forthcoming, or are referred to IOM by the mentioned parties mentioned above; first health screening team , community health workers and other health NGOs , suspected cases identified by the mobile team.

TB Diagnosis and Treatment

Diagnosis - IOM medical team conducts diagnostic investigations to individuals who present or report past history of tuberculosis, history of contact with a case of active pulmonary tuberculosis, and for individuals who reported having clinical signs and symptoms of tuberculosis during the screening process. TB diagnostic activities include the following investigations: Chest X- ray (CXR), PPD test and Sputum Investigations (direct smear and culture/Gene Xpert) then the Ministry of health / National TB program and Annoor Sanatorium diagnose the patients having TB disease. Since March 2012, 130 Syrians have been confirmed to have TB, 91 with Pulmonary TB and 39 with Extra Pulmonary TB.

Treatment - When a positive TB case has been confirmed, the patient then starts treatment, which is monitored and administered by the IOM health team. They undergo Directly Observed Therapy, DOT, and all patients are observed by the IOM staff. IOM is currently monitoring 36 cases and is following up with the 66 people that have completed treatment.



PPD test conducted to a suspected TB case , MOH facility , Mafraq

Immunizations and Vitamin A

Due to interrupted immunization services in Syria and a measles outbreak that was reported at Za'atri camp, IOM collaborated with health partner agencies to enhance immunization services for the camp-based refugees. In addition, in October 2013, 10 polio virus infections (AFP) were reported by the Syrian Ministry of Health and since then the number has increased to 38 cases of AFP polio virus. Since April 2013, IOM has started immunizations for newly arrived Syrian refugees against measles and polio in addition to providing vitamin A.

Immunizations

Immunizations have been a part of the emergency health response by IOM since April 2013. All newly arrived Syrian refugees receive immunizations at Raba al Sarhan Transit Centre (RSTC), before reaching camps. IOM nurses support Ministry of Health (MOH) in providing routine vaccination inside Za'atri Camp and Emirates Jordanian Camp (EJC).

Measles Vaccination

In principle, all refugees between the ages of 6 months and 15 years receive the measles vaccine. Between April 2013 and June 2014, a total number of **115,823 newly arrived Syrian refugees were vaccinated** except for contraindication cases such as pregnant women.

Polio

Polio vaccinations are given to refugees under the age of 5 years. Between April 2013 and June 2014 a total number of **63,775 children were immunized against polio**. National immunization campaigns took place in November and December 2013, and in March and June 2014, in response to a polio outbreak in Syria in October 2013. All children under the age of 5 were targeted for vaccination, with IOM covering the areas including Amman, Karak, Ma'an, Aqaba, Tafeileh, Irbid, Azraq, Zarqa, Salt, Ramtha and Mafraq in Jordan. IOM also supported the MOH efforts through transportation assistance and vaccination services.



Vitamin A

Vitamin A supplements are given to refugees that are between the ages of 6 months and 59 months. During the period of April 2013 -June 2014, **35,262 children received these supplements**.



Funding and Partners

Funding for these programs comes from several sources. TB screening and awareness services are funded by UNHCR and the Bureau of Populations, Refugees, and Migration BPRM, New arrivals immunization is funded by UNHCR, New arrivals Screening is funded by DIFID, Triage is funded by Kuwaiti funds and UNHCR, and the Polio National immunization campaigns were funded by OCHA, UNHCR, Kuwaiti funds and Bureau of Populations, Refugees, and Migration BPRM.

The vaccines are provided by the Jordanian Ministry of Health based in Mafraq.

IOM works in close conjuncture with the Jordanian Ministry of Health, the National TB Programs, UNHCR, UNICEF and other health partners to continue to provide the health services.

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Triage and First Health Screening

The First Health Screening and Triage (FHST) is an essential process in the health care of Syrians seeking refugees in Jordan, particularly for those vulnerable individuals and acute and/or chronic health conditions or disabilities. Conducting these FHST activities ensures that people requiring urgent or continued medical attention are linked to the right type and level of health care services depending on their needs. Triage is the process of determining whether the person requires urgent medical attention. Without an appropriate triage process in place, Syrian refugees will not have access to correct care delivered in a timely manner. Triage saves lives and reduces health costs especially in emergency settings and for the individuals suffering from urgent life-threatening health conditions.

First Health Screening

In addition to screening for TB, IOM Jordan also conducts first health screenings for all Syrians upon arrival to Raba'a Al Sarhan Transit Center (RSTC). Since July, 2012 IOM has screened **405,191 Syrian refugees** upon arrival and there have been a total of **5,811 (1.4%) refugee individuals at high risk** and/or with urgent life threatening conditions requiring immediate medical attention (red cases) and **32,215 (8.0%) individuals identified for follow-up treatment** with medical conditions requiring non-urgent consultation (yellow cases).

Triage

The triage team in Jordan is used in conjuncture with the screening program. They ensure that people requiring urgent or continued medical attention are linked to the right type of health care services depending on their needs and determine the urgency of the individuals medical condition. Once the urgency is determined, the medical team responds with either a referral to a medical partner in RSTC or a direct transfer to that partner.

Screening Systemic Conditions

(1 August 2013-31 July 2014)



Screening Systemic Conditions identified from 1 August 2013 to 31 July 2014



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