

August 11, 2021

Background

The background to the circumstances of COVID-19 in <u>Jordan</u> can be found on Anera's latest <u>COVID-19 Situation Report (March 23)</u>.

Overview

Since 2010, the overall health of Jordan's population has significantly improved. Vaccination rates not related to COVID-19 now cover 95% of children, and rates of maternal and child mortality decreased. However, poorer mothers and children are at a greater risk for premature death due to socioeconomic inequalities that affect access to and quality of healthcare.¹ The emergence of COVID-19 and the lockdown put in place by the government left almost 75% of the surveyed population struggling to meet basic needs and access healthcare.²

COVID-19

The World Health Organization (WHO) confirmed 773,657 total cases of COVID-19 and 10,071 deaths in Jordan, as of August 4, 2021, out of a total population of some 10.2 million people. As of July 26, vaccination clinics and centers administered 4.9 million vaccine doses.³

The Jordanian government implemented a mask mandate and social distancing regulations in businesses, public transportation, and government facilities. The mask mandate began with the onset of the COVID-19 pandemic, and the government is strictly enforcing the mandate due to an expected third wave of COVID-19. A curfew began on July 1, 2021, which is in force from 12 am for businesses and 1 am for individuals and ends at 6 am. Individuals who received their first vaccination dose at least 21 days prior to July 1 are exempt from adhering to the curfew. The government looks set to continue the curfew for the foreseeable future.

Jordan's vaccination campaign began on January 13, 2020. The government strives to vaccinate 75% of its adult population in order to facilitate an early recovery from the pandemic. Jordan's COVID-19 Emergency Response project includes equitable vaccine access for refugees, making it one of the first countries to include refugees as vaccine beneficiaries. **As of June 23, 33% of the eligible adult population is fully vaccinated.** The COVAX program provided Jordan with 290,400 doses of the

¹ Health and nutrition | UNICEF Jordan

² In Jordan, survey finds most struggle to meet basic needs and access health care under lockdown | UNDP

³ Jordan: WHO Coronavirus Disease (COVID-19) Dashboard | WHO

⁴ COVID-19 Information | US Embassy in Jordan

⁵ Jordan: Authorities further relax domestic COVID-19 restrictions (July 1 Update) | Garda

⁶ US\$63.75 Million Additional Financing to Support COVID-19 Vaccination in Jordan | The World Bank

AstraZeneca vaccine and 40,950 doses of Pfizer-BioNTech, as of July 2021,⁷ and 436,800 doses of AstraZeneca are still allocated for shipment to Jordan.⁸ The US directly sent Jordan an additional 500,000 doses of the Pfizer vaccine on July 15.⁹ By the end of 2021, Jordan will receive a total of 10.2 million doses of various vaccines, including Sinopharm, Sputnik, AstraZeneca, and Pfizer, in order to meet its vaccination goals.¹⁰

To encourage Jordanians to receive the COVID-19 vaccination, key health partners are conducting community-wide door-to-door campaigns to disseminate knowledge about the benefits of the vaccination. The campaign, supported by USAID and the Royal Health Awareness Society, targets everyone over 16 and has led to a significant increase of vaccinations in Jordan.¹¹

Refugees

Refugees in Jordan face unique challenges due to poverty and a lack of sufficient access to healthcare. In order to meet basic needs, most Syrian refugee families rely on humanitarian aid, although 86% of Syrian refugees live outside of refugee camps. Four out of five Syrian refugees in Jordan¹² live below the poverty line. In order to limit the spread of COVID-19, the Jordanian government imposed movement restrictions to control access to refugee camps. The government stopped granting leave and work permits to Syrians in refugee camps following a rise in cases, thus exacerbating movement restrictions for refugees and unemployment.

A group of around 10,000 people, most of whom are Syrian women and children, are stranded in the informal settlement Rukban, on the north-eastern border. The refugees in Rukban are completely cut off from critical health and nutrition services.¹³

The Palestinian residents of Jerash Camp in Jordan face significant health concerns other than COVID-19 due to their poor living conditions. More than 65% of the buildings in the camp contain asbestos, exposing a high percentage of the camp's 37,000 inhabitants to harmful carcinogens. A pay reduction for sanitation workers by 75% in 2018 allowed trash and pests, including rats and flies, to take over the streets, exacerbating additional health risk factors for residents.

According to UNRWA, 88% of Jerash Camp inhabitants lack access to health insurance. ¹⁶ Children under the age of six are eligible for free public health insurance, which covers treatment at government facilities. However, transportation limits the ability of inhabitants to access these facilities. Local UNRWA clinics provide basic

⁷ Jordan receives a new shipment of COVID-19 vaccines from COVAX Facility | EU Neighbors

⁸ COVAX vaccine roll-out- Jordan | Gavi

⁹ US sends half million Covid vaccines to Jordan | France 24

¹⁰ Jordan to receive 10.2 million doses of coronavirus vaccines this year | Arab News

¹¹ New COVID vaccination campaign targets people above 16 | The Jordan Times

¹² Bevond Refugee Camps- Jordan | IRC

¹³ Jordan | ECHO

¹⁴ Decades of Resilience: Stateless Gazan Refugees in Jordan | Palestinian Return Centre

¹⁵ The Prevalence of Refugee Poverty in Jordan | Borgen Project

¹⁶ Progress, Challenges, Diversity: the socio-economic conditions of Palestinian refugees in Jordan | UNRWA

healthcare for the remaining inhabitants of Jerash Camp. But refugees in need of more specialized treatment must go to government hospitals, where they must pay guest fees comparable to those paid by foreign nationals. While UNRWA subsidizes some of these costs, many refugees still cannot afford treatment at government hospitals, effectively excluding them from specialized medical care. Temergency services are limited in the camp, as ambulances cannot access many areas. Due to the inaccessibility of healthcare, camp inhabitants reported relying on the ID cards of sympathetic Jordanians in order to receive treatment. Services are limited in the receive treatment.

Around 5,500 persons with disabilities in Jerash Camp lack access to necessary healthcare and rehabilitation services. The rate of children with disabilities is 3.8%, making it the highest of the ten Palestinian refugee camps in Jordan.

Life Expectancy

The top cause of death in Jordan is ischemic heart disease, followed by stroke, diabetes, chronic kidney disease, hypertensive heart disease, neonatal disorders, congenital defects, road injuries, lower respiratory infections, and lung cancer. Around one third of Jordanians over 25 suffer from one or more chronic illnesses, many of which result from tobacco use. According to data from 2017, 38.2% of Jordanians used tobacco, which included 65.5% of males over the age of 15.20 As of 2020, the smoking rates in Jordan are the highest in the world, with 80% of men using nicotine regularly.

Nutrition

According to Global Nutrition Report, Jordan is not on course to meet the targets for maternal, infant, and young child nutrition. Jordan failed to make progress in meeting the targets for reducing anemia among reproductive-aged women, reducing the percentage of low birth weights, and increasing the percentage of exclusively-breastfed babies.²² Low nutrient diets, inadequate healthcare access, and poor water and sanitation lead to prevalent micronutrient deficiencies among Jordanian and Syrian refugee women and children.²³ It is estimated that 43.1% of adult women and 28.2% of adult men in Jordan live with obesity, compared to the regional average of only 8.7% of women and 6% of men. Additionally, 17.2% of adult women and 16.5% of adult men suffer from diabetes.²⁴

Cancer

In 2020, medical facilities reported 11,559 new cases of cancer in Jordan. Breast cancer made up 20.8% of new cases, followed by colorectal cancer at 10.9%, lung cancer at 9.1%, bladder cancer at 4.9%, and leukaemia at 4.9%. The King Hussein Cancer Center is the only comprehensive cancer center in the country, and it is located in Amman.

¹⁷ Decades of Resilience: Stateless Gazan Refugees in Jordan | Palestinian Return Centre

¹⁸ In Jerash refugee camp, lockdown means 'living without eating' | 972 Magazine

¹⁹ Jordan | Institute for Health Metrics and Evaluation

²⁰ 7 Facts About Life Expectancy in Jordan | The Borgen Project

²¹ Jordan smoking rates highest in world amid claims of big tobacco interference | The Guardian

²² Country Nutrition Profiles: Jordan | Global Nutrition Report

²³ Health and nutrition | UNICEF Jordan

²⁴ Country Nutrition Profiles: Jordan | Global Nutrition Report

²⁵ Jordan Fact Sheet | WHO International Agency for Research on Cancer

Anera has worked with the King Hussein Cancer Center previously to provide early breast cancer detection awareness. Quality of care varies outside of Amman, as the country lacks a national system to ensure high quality cancer care on a nationwide level.²⁶

Disability

2018 data estimated that between 11% and 15% of Jordanians suffer from disabilities. As of 2017, the employment rates of men and women with disabilities totaled 33% and 5%, respectively. In comparison, the employment rate for men without disabilities reached 61%, and the employment rate of women without disabilities totaled more than 13%.

Between 85% and 95% of children with disabilities face exclusion from the general education system. While only 11% of the total population of Jordan is illiterate, more than 35% of persons with disabilities are illiterate. Among females with disabilities, 40% are illiterate, compared to 32% of males with disabilities. The gaps in education and employment between men and women reveal the limited nature of opportunities for women, especially those with disabilities, which highlights their vulnerability.

The government of Jordan offers health insurance for persons with disabilities, but an estimated one third of persons with disabilities still lack access to healthcare insurance in practice. Although many medical centers in Jordan are now built to be accessible, with staff trained to provide disability care, challenges remain in transporting Jordanians with disabilities to and from medical facilities.

Disability data and the needs of persons with disabilities remain largely underreported in Jordan, especially regarding Syrian refugees. Among refugees, a significant number of persons are believed to suffer from disabilities due to conflict, and existing data suggests that refugees face an unmet demand for health services.²⁷

Women

In the 2020 Global Gender Index's Economic Participation and Opportunity subindex, Jordan ranked 145th out of 153 countries. ²⁸ COVID-19 in Jordan exacerbates the limited participation of women in the labor force and increased gender-based violence. Job losses among women force them to remain at home, where some are at heightened risk of being subject to violence. Additionally, lockdowns and curfews prevent protection teams and NGOs from regularly checking in on vulnerable families and domestic violence victims. ²⁹

As a result of pandemic lockdowns, women are losing income and face increased violence, food insecurity, and responsibilities in the home. Women must now care for children who no longer attend in-person school and family members infected with COVID-19, in addition to their previous duties (including both paid and unpaid labor).

²⁶ Breast Cancer Care in Jordan | JCO Global Oncology

²⁷ Disability Inclusive Development Situational Analysis for Jordan | Institute of Development Studies (IDS)

Women's informal employment in Jordan | UN Jordan

²⁹ Jordanian women have come a long way, but much work remains to be done | Arab News

Additionally, the COVID-19 pandemic limits opportunities for women to work informally, thus preventing some from working to cope with violence and support themselves.³⁰

Poverty

Beginning in 2013, the percent of Jordanians living below the poverty line increased steadily. The percent of people living on less than \$3.20 a day increased from 1.8% in 2013 to 2.5% in 2015 and 2.7% in 2018.³¹ According to the World Bank and UNHCR, the COVID-19 pandemic increased poverty among Jordanians by 38 percentage points as of December 2020. **More than 1.5 million Jordanians became newly poor at the beginning of the pandemic.** International Labor Organisation Surveys reported that 39% of vulnerable workers no longer worked following the beginning of the pandemic, 31% of vulnerable Jordanians faced temporary lay-offs and 17% faced permanent lay-offs, and 4% of vulnerable Jordanians went on paid leave.³²

Anera's Response Medical Donations

In early 2020, Anera resumed shipments of in-kind medical donations to Jordan (after an eight year pause) by completing two shipments of medicines to local partners. The medical donation to Syrian American Medical Society in the Zaatari Refugee Camp, donated by International Health Partners UK was valued at \$12,000 and included asthma treatment medications, medicines for bacterial and parasitic worm infections, and vitamin D droplets. The provision of vitamin D supplements is necessary to address deficiencies, which are common across refugee communities and can cause long-term health problems if left unaddressed. Anera completed another shipment of medicines to Jordan Medical Aid for Palestinians (JMAP) in Jerash Refugee Camp. The shipment, valued at \$18,000, included chronic medicines and vitamin D droplets. On May 4, Anera completed a shipment of chronic medicines to International Medical Corps, the Jordanian Red Cross, and JMAP. The \$168,000 shipment targeted vulnerable Jordanians and refugees, both in- and out-of-camp.

Education

Anera partnered with Thaki to provide laptops preloaded with educational materials and resources for vulnerable refugee and host community students and teachers in Jordan. The donated laptops contain offline learning content for teacher training and students' education. The 12-month program, funded by the Catalyst Foundation for Universal Education, began in February 2021 and aims to ensure that students have access to remote and digital learning and address internet connectivity restraints. The program will provide accessible enrichment materials and teacher training resources to teach skills and methods necessary to create digital learning opportunities for students. The Center for Lebanese Studies will monitor and evaluate the program to track its impact on teacher instruction and student learning. Five cohorts, with an average of 25 to 30 students, and 18 teachers in Jordan will benefit from the donated laptops and educational materials.

³⁰ Women's informal employment in Jordan | UN Jordan

³¹ Country Nutrition Profiles: Jordan | Global Nutrition Report

³² Pandemic pushes up poverty rates in Jordan - Study | The Jordan Times