Background
The background to the circumstances in Jordan can be found on Anera’s latest Situation Report (August 11).

Overview
As a result of the COVID-19 pandemic, Jordan faces significant economic and health challenges. It also continues to host a sizable refugee population. In response to these crises, the government launched two social protection programs in 2020 and 2021 to support vulnerable households and businesses. In June, 2021, the World Bank approved $63.75 million in additional funding to support the ongoing Jordan COVID-19 Emergency Response Project (ERP), designed to ensure safe, efficient and equitable access to COVID-19 vaccines. The additional funding played a crucial role in accelerating the opening of hard-hit sectors like tourism and hospitality, as well as schools. In addition, the World Bank funding aims to enable Jordan to vaccinate 75 percent of its adult population, which will contribute to an early recovery. Despite its economic and social challenges, Jordan takes pride in being one of the first countries in the world to include refugees as vaccine recipients. With additional funding support, the ERP will improve COVID-19 case management for Syrian refugees living in-camp and in host communities.

COVID-19 and Vaccine Distribution
Jordan lifted midnight curfews and eased other lockdown policies in April 2021. Citing improvement in the epidemiological situation, the Jordanian Government announced that most sectors will be allowed to work in full capacity at all times, and that schools and universities can return to in-person teaching. The lifting of restrictions in all sectors officially came into effect on September 1st, 2021, after nearly 18 months of lockdown.

As of October 13th, 2021 there are an estimated 15,165 active cases of COVID-19 in Jordan, reflecting a slight increase in recent weeks but well below the spring highs. Cumulative cases total 835,969, with more than 10,827 confirmed deaths since the beginning of the pandemic to date. Jordan started its COVID-19 vaccination program on January 13th, 2021, and has since administered 7,019,525 doses of various COVID-19 vaccines, which is enough to have vaccinated only 33% of the population. Through additional financial support, Jordan aims to acquire vaccines from a range of sources to provide its citizens with safe, regulated access to a variety of vaccination options.¹

¹ Jordan: the latest coronavirus counts, charts and maps | Reuters
The UN High Commissioner for Refugees (UNHCR) has resumed a number of activities, using a hybrid of in-person and remote formats. Vaccinations against COVID-19 continued throughout August, reaching over 27,000 refugees in camps. Overall, COVID-19 cases among refugees living in camps remains well below the national average, with 3.1% of the refugee in-camp population testing positive, compared to 7.8% of the total Jordanian populations. As of August 31st, 2021, a total of 4,058 refugees had tested positive since the onset of the pandemic, of which 98% recovered and 49 died. These numbers indicate a positive and successful response plan to manage and impede the spread of the virus, especially in overcrowded and vulnerable settings where cases could have been much higher. International organizations continue to push vaccination campaigns that target refugee populations.²

In September 2021, Pfizer and BioNTech SE donated a large shipment of 200,000 doses to Jordan in coordination with the Ministry of Health and the UNHCR. “We have included refugees in every aspect of the Ministry of Health’s response to the COVID-19 pandemic. Jordan grants any person living in the Kingdom the right to receive the vaccine free of cost, giving refugees the exact same access to the vaccine as Jordanian citizens,” said Jordan’s Minister of Health, Firas Al-Hawari.³

Food Security
While the Government of Jordan implemented a concerted effort to keep the COVID-19 pandemic under control, the number of people going hungry continues to increase. According to the World Food Programme, 53% of Jordanians are food insecure, translating to approximately 3 million individuals or around 3% of Jordanian households. Rural governorates are especially susceptible to food insecurity, with Al-Tafilah being by far the most food insecure region with 20% of households being food insecure. With Jordan’s economy already in crisis, Jordanian households are adopting harmful coping strategies to adapt to food insecurity. Over 50% of households are economizing food using consumption-based coping strategies. Food insecurity afflicts both Jordanian communities and refugee communities. Data from 2020-2021 suggests that 21% of refugee households in host communities are food insecure, presenting extreme food consumption gaps.⁴

In September 2021, the United Nations published a policy brief detailing key recommendations to support sustainable food systems and healthy diets for all. According to the policy brief, Healthy Diet For All In Jordan, the Government of Jordan developed a National Food Security Strategy for 2021 through 2030. The strategy includes results provided by the UN from the Global Nutrition Report 2020, which suggests that, “Jordan suffers from a double burden of micronutrient deficiencies and overweight/obesity, with women presenting the worst rates in both, pointing to a serious gender gap in nutrition.”⁵

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²Jordan: Operational Update | UNHCR
³Pfizer Supplies Jordan, Lebanon With COVID Vaccines for Refugees | BNN Bloomberg
⁴Jordan Food Security Update | WFP
⁵UN Jordan releases 'Healthy Diet for All in Jordan' policy brief in conjunction with Global Food Summit | MENA FN
According to the Global Nutrition Report, 84% of Jordanian and Syrian adults consume unhealthy diets. In addition to this, anemia is highly prevalent among children and 34% of women of reproductive age. Breastfeeding rates are also low, with only 25% of infants aged 0-5 months being breastfed. The *Healthy Diet For All In Jordan* policy brief, in conjunction with the Global Food Summit, put forward recommendations to help Jordan combat food unavailability, inaccessibility, and inadequacy. Some of these recommendations include guaranteeing economic and physical access to and availability of affordable food and the importance of food adequacy in satisfying dietary needs relevant to the individual’s age, living conditions, sex and occupation. Some of the specific recommendations in the policy brief include:

- Promoting the adoptions of agro ecological practices more effectively.
- Allocating resources to address social protection programs that mainstream gender (especially targeting women that are the most vulnerable).
- Reducing and restricting the marketing of low quality foods high in saturated fats, salt, and sugar to children and families.
- Providing balanced schools meals and prohibiting the sale of processed foods in schools, supporting the implementation of the national school feeding program.
- Developing a comprehensive national nutrition strategy and action plan to implement the school health strategy, the national food security strategy, and the action plan.
- Scaling up the provision of health foods in public institutions and vulnerable communities.
- Adopting domestic legislation and complying with the International Code of Marketing of Breast-Milk substitutes in reference to the WHO’s recommendations on formula products and foods for infants.⁶

### Economy

Despite Jordan’s steady progress on vaccine developments to combat the COVID-19 pandemic, its economic recovery remains uncertain. The pandemic worsened Jordan’s fragile economy. The GDP grew exceptionally slowly during the past four years due to eroding productivity before the pandemic surfaced. COVID-19 exacerbated already existing economic challenges. In response, the Government of Jordan responded with various measures to alleviate the socioeconomic impact of the COVID-19 economic shock.

Jordan’s high poverty rate is driven by high unemployment, which in turn reflects a labour market unable to keep up with a steady population growth. The official unemployment rate in Jordan stands at 24.7% and is higher for Syrians and some Palestinians than Jordanians due to restrictions on employment for refugees. According to the UN, 83% of host community Syrian refugees are living below the poverty line. Most Syrian families rely on humanitarian aid to meet their basic needs at a time of aid cuts and economic crisis, compounded by the COVID-19 pandemic. In refugee camp

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⁶ UN Jordan releases ‘Healthy Diet for All in Jordan’ policy brief in conjunction with Global Food Summit | MENA FN
settings, aid organizations continue to maintain essential services and implement health safety precautions to combat the spread of COVID-19. However, in host communities and urban settings, refugees and vulnerable Jordanians struggle to access basic services and earn an income. Instead of going to school, many vulnerable children are exploited to work or get married at a young age, threatening the well-being and development of vulnerable children.

In order to mitigate the repercussions of the pandemic, the Government of Jordan, the Central Bank of Jordan, and the Social Security Corporation adopted timely and rapid economic measures targeting individuals and hard-hit sectors, aiming to protect jobs and avert sustainable damage to the economy. For example, the government utilized regular cash transfers to provide cash support to vulnerable households through the National Aid Fund. Moreover, cash and voucher assistance programs continue to play an integral role in enhancing social protection and inclusivity.

While Jordan appears to be a region of political stability, it is economically stagnant. Jordan's GDP per capita has steadily declined since 2009, and the absence of structural economic reforms constrains the country’s potential. Jordan’s sky-high unemployment continues to increase in the midst of a rapidly growing population. Jordan faces some of the highest levels of public debt in the Middle East, at over 100% of its GDP — the result of its inefficient public sector and dependence on costly foreign energy imports. The resource-poor kingdom is the second most water scarce country in the world, and local agricultural production is alarmingly low with total annual production sufficient for only one week of domestic consumption. COVID-19 greatly impacted Jordan’s economy due to its heavy dependence on the tourism sector, which it effectively lost during the pandemic. Jordan is the Middle Eastern country most dependent upon tourism, which accounts for nearly 20% of its GDP.

Vulnerable populations in Jordan, such as refugees, women, and children, have been hardest hit by the economic impact of the pandemic. Since the majority of refugees rely solely or primarily on international assistance for income, the economic freeze caused refugee resources to dry up. Syrian refugees work mainly in construction, manufacturing, and retail, all of which are jobs that cannot be done remotely. On March 14th, 2020, Syrians living in Jordan’s refugee camps received notice that they would be prevented from leaving the camp until further notice, even those with valid work permits. International organizations also suspended salaries for many refugees as programs shut down. Without access to income, many refugees could not afford to purchase necessities or pay for rent during a lockdown of just one month. As the government lifts restrictions, many refugees are able to return to work, and the government plans to institute programs aimed at returning Jordan to pre-pandemic conditions.

**Education**

A 2021 UNICEF report identifies household poverty as a major barrier to school enrollment, especially at the pre-primary and secondary levels and for families who

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7 Refuges at Risk in Jordan’s Response to COVID-19 | MERP
must pay tuition. Typically, schools waive tuition fees for Syrian refugee children, but not for other minority refugee nationalities such as Iraqis, Yemenis, Sudanese and Somalis.

The experience of the COVID-19 pandemic reveals that a lack of technology and connectivity precludes distance education for the most vulnerable households. **Students living in informal tented settlements, refugee students, and students in female-headed households were the most likely to be excluded from online learning.** Despite some recent improvement, Jordan faced low learning outcomes even prior to the COVID-19 pandemic. This is true for all children, even for Jordanians and especially for boys.

Palestinian refugee students in Jordan also returned to school in September. More than 119,000 children attend the 161 schools run by the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) in Jordan. UNRWA schools are opening their doors to students in line with the health and safety regulations of the Government of Jordan. There are currently 238,038 refugee children of school age in Jordan, and the government is working with UNHCR to launch many programs that will help raise the education levels among refugee children. For example, UNHCR, in association with its partner groups, is working on the TIGER Girls initiative in the Zaatari and Azraq camps to encourage refugee girls who dropped out to return to school. Other UNHCR initiatives include the Student Refugee Programme and the Columbia University Scholarships for Displaced People.

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8 [Palestine refugee students in Jordan go back to school after months of distant learning | UNRWA](https://www.unrwa.org/news/palestine-refugee-students-jordan-go-back-school-after-months-distant-learning)

9 [Education: Jordan (January-March 2021) | UNHCR](https://www.unhcr.org/publications/5e700f9c/education-jordan-january-march-2021.html)
Children return to classrooms in Jordan after a year away | Arab News

**Water, Sanitation and Hygiene (WASH)**
With annual water resources at less than 100 cubic meters per person, Jordan falls significantly below the threshold that defines water scarcity. Due to its low levels of annual water resources, Jordan ranks number two among the most water scarce countries in the world. Only 86% of Jordan’s population has access to a piped water network. In rural areas, water is only available less than every two weeks, compared to once a week in urban areas. Two thirds of Jordanian schools lack basic sanitation services, and more than 20% of existing sanitation systems are not managed safely. In addition, water demands continue to increase as Jordan’s population and industrial and agricultural capacities steadily grow. Increased water demands exacerbate existing water scarcity and sanitation issues, causing a long-term decrease in groundwater levels that will continue to threaten Jordan’s vulnerable populations in the coming years. Water leaks, illegal connections to water networks, meter loss, and high subsidies create additional barriers to water access.10

**Mental Health**

In Jordan, the International Medical Corps (IMC) is playing a central role in providing psychosocial support services for Syrian refugees both in camp and out of camp settings, as well as for vulnerable Jordanians. Mental health efforts are coordinated with the Ministry of Health (MoH) and the Jordanian Psychiatric Society. In addition to this, IMC established a 24/7 support hotline to respond to growing mental health needs, as mental health issues are on the rise. According to the latest update from the Health Sector Working Group Meeting, scheduled on September 30th, the IMC reported that refugees living in urban communities can access MoH facilities at a non-insured Jordanian rate. Syrian refugees can access such services if they have an asylum seeker certificate and a Ministry of Interior card. In camp settings refugees can access the MoH free of charge.

The highest cumulative number of mental health cases are for epilepsy, followed by depression and anxiety disorders. The psychosocial impact of COVID-19 stressors have impacted many refugees with uncertainty, losing livelihoods, increased reported cases of domestic violence, child protections issues, and attention-seeking behaviors.

Many of the reported barriers to access MoH facilities include physical or transportation access, affordability of services, and provision of mental health and psychosocial support services, including both pharmacological and nonpharmacological services and long waiting lists and capacity to absorb cases.

**Anera’s Response**
In 2021, Anera completed a shipment of essential medications for chronic illnesses jointly with IMC. The shipment was valued at $168,000 and donated by International Health Partners. Despite facing significant delays due to COVID-19 restrictions, the

10 Water, sanitation and hygiene | UNICEF Jordan
Jordanian Food and Drug Administration approved Anera’s shipment, and recipient partners collected and distributed the medications. Through this shipment, Anera is working with leading health partners such as the Jordanian National Red Crescent Society to provide critically needed medications, targeting vulnerable Jordanians as well as in-camp and out-of-camp refugees.

One of Anera’s recipient partners, Jordan Medical Aid for Palestinians (JMAP), shared a case study from their medical center in Gaza camp. According to Dr. Bassam Safarini, JMAP’s lead General Practitioner, JMAP was receiving as many as four cases per day of upper respiratory tract infections (UPIs). UPI infections affect the nose, sinuses, pharynx, larynx, and large airways. The most common symptoms are sudden onset of fever, headache, and cough. A variety of viruses and bacteria can cause UPIs. Left untreated, they can cause a wide array of more severe illnesses such as acute bronchitis, the common cold, influenza, and respiratory distress syndromes. Safarini, in a statement to Anera, explained how, “The provision of paracetamol and amoxicillin helped treat hundreds of children and adults who are residents of Gaza camp.” In addition to this, UNRWA’s clinics faced shortages of medications that Anera’s donation provided. The squalid living conditions and worsening economic situation in Gaza deepened due to the COVID-19 pandemic, when almost all families who depended on daily paid jobs lost their income. Anera’s medicine shipments are helping families receive the health treatment they need with dignity.
Anera is also working on building an assessment of key implementing health partners in Jordan to gather more support for its programs, with the end goal of reaching more vulnerable Jordanians and refugees. Anera is now focusing on expanding its health programs to include long-term treatment for diabetes and mental health.

In 2021, Anera launched a pilot project with Thaki providing students and teachers with the technology and content needed to build skills and close learning gaps. The project focuses on providing gently used laptops to young, vulnerable students with high-quality learning materials, in addition to teacher training to fill in learning gaps. The program crosses the digital divide by providing user-friendly and offline learning content, thereby ensuring students have access to education regardless of internet connectivity. This pilot program reaches a total of five cohorts with an average of 25 to 30 students and three teachers per cohort. In partnership with JHCO, Anera cleared and distributed 130 laptops from the UAE for the first time ever. Anera’s education consultant, hired to support the project’s implementation, completed the laptop imaging process.