

Access of Refugees in Rural Areas to Regular Medication during COVID-19 Era: International Organization for Migration, Jordan Experience

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Abstract : Background: Since the onset of the Syria crisis in 2011, Jordan has hosted many Syrian refugees, many of which are residing in urban and rural areas. Vulnerability of refugees has increased due to the COVID-19 pandemic, adding to their already existing challenge in access to medical services, rendering them vulnerable to the complications of untreated medical conditions and amplifying their risk for severe COVID-19 disease. To improve health outcomes and access to health care services in a COVID-19 context, IOM (The International Organization for Migration) provided health services including awareness raising, direct primary health care through mobile teams and referrals to secondary services were extended to the vulnerable populations of refugees. Method: 6 community health volunteers were trained and deployed to different governorates to provide COVID-19 and non-communicable disease awareness and collect data related to non-communicable disease and access to medical health services. Primary health care services were extended to 7 governorates through a mobile medical team, providing medical management. The collected Data was reviewed and analyzed. Results: 2150 refugees in rural areas were reached out by community health volunteers, out of which 78 received their medications through the Ministry of Health, 121 received their medications through different non-governmental organizations, 665 patients couldn't afford buying any medications, 1286 patients were occasionally buying their medications when they were able to afford it. 853 patients received medications and follow up through IOM mobile clinics, the most common conditions were hypertension, diabetes, hyperlipidemia, anemia, heart disease, thyroid disease, asthma, seizures, and psychiatric conditions. 709 of these patients had more than 3 of the comorbidities. Multiple cases were referred for secondary and tertiary lifesaving interventions. Conclusion: Non communicable diseases are highly prevalent among refugee population in Jordan, access to medical services have proven to be a challenge in rural areas especially during the COVID-19 era, many of the patients have multiple uncontrolled medical conditions placing them at risk for complications and risk for severe COVID-19 disease. Deployment of mobile clinics to rural areas plays an essential role in managing such medical conditions, thus improving the continuum of health care approach, physical and mental wellbeing of refugees and reducing the risk for severe COVID-19 disease among this group, taking us one step forward toward universal health access.

Keywords : COVID-19, refugees, mobile clinics, primary health care

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