

A Reality Check of Zaatari Camp in the Time of Coronavirus: A Contextual Demarcation

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The World Health Organization recognized the COVID-19 as a pandemic on March 11, 2020, as China, Italy, Japan, Iran and South Korea declared a rising number of infected cases. Most countries announced an emergency state to deal with the unprecedented health crisis. Jordan confirmed the first infected case on March 2 and announced decisive procedures on March 20, including a comprehensive lockdown and partial lockdown which then ben relaxed to weekend lockdown, school and university closures, distance learning program launches and airport and official border closures, to prevent the spread of the pandemic. Jordan announced a national action plan to deal with the pandemic, which covered Jordanian citizens and refugees inside and outside of camps. Jordan's emergency occurred through the implementation of defense ordinances to ensure the highest degree of responsibility and commitment in accordance with Defense Law No. (13) of the year 1993 which accords the prime minister a wide range of power to take all necessary measures in exceptional circumstances including pandemic to accomplish the common good and protect a state and citizens. . In fact, Jordan hosted refugees from Palestine, Iraq and Syria, It has around 15 refugee camps It has around 15 refugee camps; 10 of them are UNRWA Palestinian camps and 5 are for Syrian refugees. One of these Syrian camps, Zaatari camp, is considered the world's largest sanctuary for Syrian refugees and is the largest refugee camp in the Middle East. In essence, it is located in northern Jordan 100 km from the Jordanian–Syrian borders. Zaatari camp is the fourth largest city in Jordan and hosted more than 150,000 Syrian refugees at the peak of the crisis in 2013. Currently, it is a haven for 76,876 Syrian refugees. According to UNHCR statistics, 55.2 % of Zaatari camp residents are less than 18 years old, and 30% of refugees come from female-headed households.

The administration of the Zaatari camp affair is conducted through the collaboration between the Jordanian government and the UNHCR, UN-related agencies and international and national NGOs to provide health care, education, food and a shelter for Syrian refugees and to improve their well-being. Moreover, the specialized international organizations, such as UNHCR, NRC,

WHO, UNICEF and UNFPA, provide sufficient support to refugees and collaboration with Jordanian decision-makers to provide efficient assistance to refugees based on international humanitarian standards and protection principles. Jordan received financial assistance from the European Union, the United States and humanitarian organizations to support refugees and host communities. According to the European Civil Protection and Humanitarian Aid Operations, since the beginning of the Syrian crisis, the European Union directed €2.7 billion to Jordan through humanitarian, development and macro-financial assistance. Of this, more than €375 million was allocated for the provision of services, including health care, food, multi-purpose cash assistance and other basics of shelter, water, sanitation, education, psychosocial support and protection. These humanitarian assistances are distributed to refugees in the camps Zaatari, and other Syrian refugees camps including Azraq camp which settled around 32,000 Syrian refugees, and Alrukban camp which lies in a demilitarized area between Jordan and Syrian where around 10, 000 Syrians are taking shelter in it, and to Syrian refugees who settled outside camps. In addition to special assistance during winter with €15 million in 2020 and €20 million in winter 2019 to protect refugees from the harsh weather by proving them with extra blankets, clothes, food, and heating means.

The European Civil Protection and Humanitarian Aid Operations considers the coronavirus restrictions to be worsening the living conditions of refugees, and they are unable to cover their basic needs due to job losses, reductions in financial support and the shifting role of international aid. Therefore, it is significant to address the reality of refugees in camps. For this purpose, the rest of this editorial discusses the impact of COVID-19 on Syrian refugees in Zaatari camp in an effort to understand better the repercussions of this pandemic on vulnerable refugees.¹

The Jordanian government procedure to contain the pandemic started on March 16 after the manifestation of the first infected case for a Jordanian citizen. The Jordanian response included refugees inside and outside of camps. According to a medical director in the Zaatari camp, health care centers worked with the Jordanian Ministry of Health and the UNHCR to prepare a business plan to deal with the pandemic. He pointed out that the defense ordinances applied to Jordanians and Syrians in the same way, and there is no special defense ordinance for Syrian refugees. The

¹ Interviews were conducted with Syrian refugees in the Zaatari camp by phone and Zoom. The interviewees prefer not to reveal their names.

two main procedures conducted after the declaration of Defense Ordinance Number 2 for the year 2020 included the prohibition of movement to move and roam in all regions and cities of the kingdom and the closure of shops and stores. Measures included controlling entry and exit from the camp, preventing camp refugees from taking vacations outside the camp to control movement, preventing the spread of the epidemics and ensuring the infection was not transmitted from outside into the camp. The epidemiological investigation teams conducted the COVID-19 examinations, and the Jordanian Ministry of Health in Mafraq Health Directorate conducted random tests for the refugees inside the camp and made random samples for the organizations' staffs. In an advanced stage, training was conducted for the medical staff in the health sector organizations inside Zaatari camp, and (kits) examination tools were distributed. The International Medical Corps (IMC) carried out the corona tests inside the camp on a regular basis. The health care administration developed an action plan as a precautionary and preventive measure to cover the patients' protection, staff management and clinic sterilization. A place was designated to receive patients instead of the usual closed reception room; a large tent was set up outside of the clinic, which was open and ventilated to ensure physical distancing. The health care staff provides full information about the coronavirus to build patient awareness about the virus and how to protect themselves and their families through wearing masks, washing hands, rubbing hands with alcohol, and social distancing. The health care centers in Zaatari camp established a special protocol to deal with emergency cases and other protocols for normal and moderate cases. Patients were provided with instructions on how to enter the clinics to ensure physical distancing, including being provided a mask before entering the clinic for who doesn't wear it already or doesn't have one, using alcohol swabs and using physiological spacing of at least one and a half to two meters, as well as reducing the number of patients examined by the doctor. The delivery of periodic medications for patients with chronic diseases, such as diabetes, asthma and heart problems, to avoid visits to the clinics and possible infections. However, a medical director pointed out that the limitations of implementing the health protocol were the refugees' failure to comply with the instructions for preventing the virus and not taking the danger of the virus seriously. Later, people realized this danger due to the change of procedures inside and outside the camp, and after 6 months of the virus, people in the camp have now formed COVID-19 Culture and have accepted the procedures, and the infection of their relatives

abroad, they have become aware of the seriousness of the infection and this virus is not just an illusion or a rumor.

Regarding the working staff inside the camp, messages were sent to reduce the number of staff (the main cadre only) by approximately 30% in the first stage. In addition, a movement permit was issued, especially during the lockdown period, to prevent movement between governorates. Recently, the staff was divided into two shifts 3 days per week to reduce overcrowding. Even if an injury occurred to the staff, the other shift covered the work instead.

Transportation permits have been issued for the medical staff who live outside the camp and work inside the camp. A transport vehicle and a driver for the team with a permit to move have been identified as well. Temperature checkpoints were made. Any person who enters the camp is examined. Staff are subjected to a temperature test, and only staff with normal temperatures can enter the camp. The staff was provided with personal protective equipment, and a daily inspection of the protective clothing was made. The staff were also examined before entering the center in terms of measuring temperatures and wearing protective clothing for all medical, administrative and service staff.

Clinics are sterilized at the end of working hours. The maintenance department completely sterilizes the clinic, beds and doors using chlorine sprays and other sterilization tools.

Considering the cost of the additional precautionary activities, a medical director in Zaatari camp asserted that the coronavirus crisis plan was carried out without additional support. Furthermore, the response was made within the center's budget, despite the increased costs and equipment, such as respiratory masks instead of surgical masks.

This was done because there were aspects in which the costs increased and aspects in which the costs decreased. For example, the health care center was receiving 700–800 patients daily; during the pandemic, the center was receiving 200–250 patients. In addition, the medicines and medical supplies were reduced, and approximately 150–200 prescriptions were disbursed, instead of 700 prescriptions per day, not to mention medical gloves, tongue depressors and other equipment.

The first infectious case in Zaatari camp said she has lived in Zaatari camp since 2013. She works in the camp's Rehabilitation Center for People with Special Needs in the camp, and she is an assistant of a Jordanian physical therapist, who transmitted the infection to her. She said that, when she tested positive, the Jordanian Civil Defense transported her to the Dead Sea—one of

the official sanitary isolation areas in Jordan—and they provided free food and drink, sleep and health care. As for the infected woman's children and husband, they were placed in a special isolation area inside the camp because their tests were negative. She stated that the isolation period in the Dead Sea was a good opportunity to change the atmosphere. In addition, it gave her a period of convalescence because she has resided in the camp since 2013, and her life was divided between work, home affairs and her studies at the university. It was an opportunity for watching television and thinking, especially as her symptoms were not extreme. Yet, she suffered from stigma after returning from isolation because there were some relatives who avoided dealing with her, and there were people who believed that she was struck by ignorance and lack of hygiene or that she interacted with people from outside the camp. She added that the repercussions of COVID-19 are beyond the infection. Especially, therapists were suspended from work due to a comprehensive lockdown, which led to a greater burden on her to deliver equipment to patients or to communicate via the Internet with speech coaches and children.

As for her husband, he was dismissed from work because they reduced work, with 18 of the 20 employees working for an international nonprofit organization being laid off. The Syrian mother of eight children elaborated, "We currently live in scarcity, as we have not bought new clothes for me and my children since the beginning of the pandemic." She saves money to provide tutors for her son, who is in high school, so that he can obtain the European Union scholarship (EDU Syrian) to enter Jordanian universities, into which entry is not considered easy, as well as obtaining the scholarship salary.

Since the beginning of the COVID-19 crisis, Jordan declared a state of emergency, including a nationwide lockdown, which then relaxed to regional and weekend lockdowns to reduce the health impact of the pandemic. However, the domestic economic lockdown has slowed down the economic growth; increased the unemployment rate to 23% in the second quarter of the year, compared to 19.3% in the first quarter of the same year due to the economic deterioration; closed some projects; calmed government investment and reduced the number of employees in the private sector. Tragically, Syrian refugees are deeply impacted by this crisis due to their poor economic and living conditions. A number of Syrians inside Zaatari camp expressed the poor economic conditions due to the coronavirus, especially the closure of the camp, the dismissal of some workers from their work and the distribution of people inside and outside the camp. A Syrian refugee, who preferred not to mention his name, holds a bachelor of arts in English

literature and works as a decorator and hand craftsmen. He used to work in workshops outside the camp and inside the camp, but after the corona crisis lockdown, he did not have work over the course of 80 days, in line with defense orders from March to the beginning of June. In addition, the weekly ban is more negative for the popular class, and working for a week and breaking off for a week worsens conditions. He noted that he spent all his savings during the closure, and he is afraid of any unexpected financial need in the near future. Likewise, Ahmad (not his real name) works in agriculture in Mafraq and does not hold a work permit. He is responsible for his mother and three sisters, while his father stays in Syria. During the coronavirus, the closure of the camp, the deterioration of the economic conditions and the reduction of the number of workers has caused him to work two or three days a week, and sometimes he does not even get a part time opportunity. He said, "There are no job opportunities in the camp, and exit is impossible except through smuggling from the berm as one of the camp edges that refugees abscond when it impossible to exist the camp formally through office gate ." When asked about how to manage his living conditions, he answered that he borrows from friends and grocery stores while receiving only one-time financial support by the UNHCR. He concluded the conversation by saying, "I am afraid this crisis will prolong, and I do not have money, and currently I can't get a work permit during corona procedures." Other refugees confirmed that, even if they do not lose their jobs, they know too many people who have lost their jobs or their salaries were deducted, especially for those who works in projects and workshop outside the camp.

Indeed, COVID-19 has caused an education crisis in developing countries that lack technology and technological skills. Jordan announced the national transfer to online learning since the beginning of the crisis; however, Syrian refugees in Zaatari camp cast doubt on the capacity of online schooling to educate the camp's students due to a lack of technological devices and poor economic situations. A former teacher and a volunteer for educating children inside the camp indicated that, in an online learning experience, some students follow the education channels according to the schedule and send assignments to official platforms, especially students whose parents are educated and have smartphones. Nevertheless, as for the rest of the camp children, they are satisfied with attending the lessons on educational channels without submitting the assignment and examinations because they do not have internet access or smartphones and do not know how to deal with the ministry of education platforms. A former

teacher attributed the inefficiency of online learning due to the lack of readiness in Zaatari camp to this kind of learning, especially that the electricity is weak and isn't available 24 hours, the lack of household internet connections and the complexity of getting internet support from international organizations. According to a mother of nine school-age kids, the inefficacy of online learning was due to the weak capabilities of students before the crisis and the withdrawal of children from schools. Furthermore, some parents have become unemployed due to the circumstances of coronavirus and are not able to pay for necessities, and electronic education increases the burden. Thus, some students are working on projects outside the camp by escaping through the berm, for five euro per day to assist their families. Some technical problems related to entering student data and its discrepancy between the UNHCR and the Jordanian Ministry of Education prevented her daughters from entering the official platform until the error was corrected.

Against this backdrop, Syrian refugees in Zaatari camp define the coronavirus crisis not only a health adversity but also economic, social, emotional and spiritual crises. One of the residents in the camp described the repercussions of the crisis as he is far from his brothers, sisters and relatives who live outside the camp in Amman. He considered spending 70 days without meeting his mother and family negatively affected himself as a refugee and an expatriate. Moreover, coronavirus is a social dilemma because he is unable to interact socially with his friend to avoid the possibility of infection and to protect his family. Some refugees expressed their incapacity to go to mosque and other religious places as a spiritual crisis because they are in dire need of worship in these difficult times. Syrian refugees in Zaatari camp agree that coronavirus and the closure of the camp make them feel isolated from their relatives and friends because they cannot visit them outside the camp. A Syrian woman asserted that, before the coronavirus, it was easy to get security approval through routine procedures to leave the camp for short visits. Now, she is unable to visit friends, her husband's family and her mother-in-law outside the camp. She feels alone because most of her relatives are in Germany, Sweden and Lebanon, and she gave birth to a new baby that her husband's family has not seen.

With all this in mind, the Zaatari camp community was living in harsh conditions even before the coronavirus crisis. The economic and psychological repercussions profoundly hit refugees in the camp due to the poor economic conditions, lack of permanent jobs and incapability of households to deal with the new strategies to uphold the governance mechanisms needed to

contain the pandemic. This review indicates that Syrian refugees in Zaatari camp during the coronavirus have suffered from job loss, poverty, economic hardship and psychological issues. Therefore, a special eye has to be on the people inside the camps who suffer from the changes in financial and social support from national and international organizations, providing students with technological devices and internet access, enabling them to utilize the computer and technological center inside the camp and supervising students to ensure physical distancing. The collaboration with global governance schemes to implement the principles of the Global Compact on Refugees reduces the impoverished life of refugees, improves their living conditions and supports hosting states suffering from economic stagnation, unemployment and high external debt resulting from the pandemic.