



Background

Due to the Syrian Civil War that has caused many displaced people, infectious diseases have spread throughout the refugee population living in Jordan's formally-established camps. Diseases such as Tuberculosis, STIs, and parasitic infections have expanded due to the war, destroyed medical infrastructure, and deteriorated immunization programs (Sharara 2014). Located just south of Syria and Jordan's border, Za'atari Camp houses 78,597 refugees, one of the largest refugee camps globally that greatly contributes to Jordan's population. Based on a comparison analysis of successful programs in other countries, combining disease prevention education with literacy materials will improve maternal and child health in refugee camps in Jordan due to increased literacy and health understanding.

Za'atari Refugee Camp in Jordan



Za'atari Refugee Camp in Jordan, New York Times

Key Terms

- **Antenatal Education:** "Education on skills for labor, pain relief, infant and postnatal care, breastfeeding and parenting skills" (Gagnon et al 2007).
- **Child Friendly Spaces (CFSs):** Safe spaces in which children impacted by armed conflict or natural disasters are provided education and psychosocial support.
- **Fusha:** A standardized, literary form of Arabic, also known as Modern Standard Arabic (MSA).
- **Indicators:** "Measurable information used to determine if a program is implementing their program as expected and achieving their outcomes" (CDC).
- **Refugee:** "Someone who has been forced to flee from their country and are unable to return because of a well-founded fear of persecution based on race, religion, nationality, membership of a particular social group, or political opinion" (UNHCR).

Aims

My research aims to explore the various literacy materials that promote maternal health. Conducting a comparative analysis of disease prevention programs in Ghana and Australia reveals successful results. Similarities will be assessed that allow creation of a similar program in refugee settings in Jordan. Most research on maternal and child health promotion has focused on community training and education, rather than using literacy materials to educate mothers and their children on infectious diseases.

Results

Disease prevention programs have been successfully developed and implemented in non-refugee settings in low-to-middle income countries:

- Australia antenatal and HIV education programs for refugee women determined continued care, linguistic interpreters, and educational programs for not only the mothers, but healthcare professionals, ensured success (Renkert 2001).
- Ghana HIV/AIDS prevention education program used literacy materials. The education materials provided key information on how HIV is transmitted, in addition to ways to protect oneself.
- JAMSBooks and Paul Mason's Tuberculosis (TB) books teach children in developing countries about infectious diseases, like the ones that commonly afflict refugees in Jordan.

Jordan Country Health Profile

Child health	
Infants exclusively breastfed for the first six months of life (%) (2012)	23
Diphtheria tetanus toxoid and pertussis (DTP3) immunization coverage among 1-year-olds (%) (2016)	98
Demographic and socioeconomic statistics	
Life expectancy at birth (years) (2016)	73.2 (Both sexes) 72.5 (Male) 74.0 (Female)
Population (in thousands) total (2016)	9,531
% Population under 15 (2016)	35.5%
% Population over 60 (2016)	5.4%
Poverty headcount ratio at \$1.25 a day (PPP) (% of population) (2010)	0.1%
Literacy rate among adults aged >= 15 years (%) (2007-2012)	97.9%

Jordan Country Profile., World Health Organization

Conclusion

Health promotion education using coloring books is proven to be effective in programs that focus on refugee populations. An infectious disease prevention program in Za'atari Camp in Jordan would be successful by using proper literacy components. A community-based program ensures program sustainability, and Monitoring and Evaluation (M&E) helps measure a program's success (Svelmoe 2009). Lack of access to educational materials about prevalent diseases within refugee settings needs to be addressed.

Future Program Development

The infectious disease prevention program implemented in Za'atari Refugee Camp would be in Modern Standard Arabic (Fusha) and carried out in CFSs. 10.2% of refugees living in Jordan are illiterate (Magin 2010). In order to combat illiteracy in refugees, a literacy and health education program will use a combination of Arabic and coloring options. Pre-literacy indicator surveys reveal common Arabic letters helpful to children. Refugee mothers and children can become knowledgeable about diseases together by using the coloring books.

Pre-literacy Indicator Survey

Okay, last one, what's this one?

End of question. Find scoring sheet and instructions below.

Criteria	Yes	No	Other
Correctly names ل	1	0	99
Correctly names د	1	0	99
Correctly names ر	1	0	99
Correctly names س	1	0	99
Correctly names د	1	0	99

Objective: To assess the child's emergent language and preliteracy skills, in terms of ability to identify letters.

Scoring Instructions:

- Child has to say name of the letter for the answer to be scored as correct, merely making the sound counts as incorrect.

Question 3: Phonological Awareness

Make sure you have all the materials needed for this question in front of you: 5 pictures (a frog,

Pre-literacy Indicator Survey. Developed by Mia Casciani to demonstrate an illiteracy program indicator survey used before program implementation

References

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