# THE UNIVERSITY OF JORDAN SCHOOL OF MEDICINE NEWSLETTER





#### **OUR VISION**

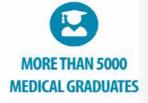
The School of Medicine is to be an international center of academic excellence - contributing to development of health sciences, and distinguishing itself on the basis of the quality of both its graduates and research, and the relevance of its training programs to national and global needs.

#### **OUR MISSION**

To provide society with qualified physicians capable of delivering quality healthcare services nationally, regionally, and internationally; of pursuing specialized higher studies; of engaging in scientific research; and of interacting with the world medical community.







#### COVID-19

Jordan's Efforts to Contain COVID-19: A Critical Appraisal of Encouraging Results

#### SPECIAL ARTICLES

School of medicine: Past and Present How far we have come?

Blended Learning Utilizing Modern Tools in a Changing World of Education.

Open Data Unlock data's potential!

Bel Arabi Enriching the Arabic Scientific and Medical Content of the internet.

#### **ACHIEVEMENTS**

The openning of a third buidling for the faculty of medcine as well as future plans

# Reduce your risk of COVID-19





Clean your hands often

Cough or sneeze in your bent elbow – not your hands!





Avoid touching your eyes, nose and mouth

Limit social gatherings and time spent in crowded places







Avoid close contact with someone who is sick

Clean and disinfect frequently touched objects and surfaces



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**Prof. Raeda Al Qutob** Graduate of 1982 MBBS, DPH

Former Member of the 26th Senate, Upper House of Parliament, Former Secretary General of the Higher Population Council, Former Secretary General of the National Council for Family Affairs, Former Dean of the Faculty of Medicine / University of Jordan. Currently Professor of Family and Community Medicine at the University of Jordan, School of Medicine.



**Dr. Ziyad M. Hijazi**Graduate of 1982, MBBS, MPH, MSCAI, FACC

A world renowned pioneer in pediatric cardiology and catheter based repair of congenital and structural heart disease. Acting Chief Medical Officer and the Clinical Service Chief of the Department of Pediatrics at Sidra Medical and Research Center, Qatar. He is also the Medical Director of the Sidra Cardiology Center of Excellence, and holds the position of Chair of Pediatrics at Weill Cornell Medical College – Qatar, Sidra's partner for medical education.



**Dr. Adel Wahadneh**Graduate of 1986, MBBS, FRCPCH

Dr. Al Wahadneh was recently appointed as the Head of the Royal Medical Services. He is Brigadier General and Former Director of the Queen Rania Al Abdullah Hospital for Children and Former Head of Pediatric Immunology, Allergy &Rheumatology and Bone Marrow Transplantation at the Royal Medical Services





**Prof. Samir Khleif** Graduate of 1986, MBBS, MD

Internationally recognized physician oncologist, cancer researcher, health transformation leader, and educator, professor Khleif currently serves as the Director of the State of Georgia Cancer Center, the GRU Cancer Center and the Cancer Service Line at Georgia Regents University. He holds a professorship in Medicine, Biochemistry and Molecular Biology, and Graduate Studies at Georgia Regents University, USA. Former Director General and CEO of the King Hussein Cancer Center from 2002-2006.



**Prof. Raed Dwaik** Graduate of 1988, MBBS, MBA

Professor Dweik was recently appointed as the Chair of the Respiratory Institute at Cleveland Clinic and oversee more than 650 employees, including 170 staff physicians, The Institute is comprised of the departments of Pulmonary Medicine, Allergy and Immunology, Critical Care Medicine and Infectious Disease at Cleveland Clinic, Ohio, USA.



**Dr. Nassar H. Al-Qaisi,** Graduate of 1995, MBBS,

Dr. Al-Qaisi serves as a member of the current 18th Lower House of Parliament, and was recently the elected as first deputy speaker of the Lower House (2019/2020). Former Member of the Parliamentary Assembly of the Council of Europe (2018), and Head of the Parliamentary delegation to the Council of Europe.

# The School of Medicine: The Past and Present

by Dr. Abdee Ryalat
Consultant neurologist in the private sector

Medical education is a marvelous and an honorable blessing, and having been a medical student, I am extremely appreciative of the opportunity I had to attend the Medical College at the University of Jordan. Having been flourishing over the past half a century now, our college has the reputation of being one of the best in the Middle East , and definitely the best, and most prestigious in Jordan. There are so many individuals who played a part in getting our college to where It is today. These words will in no way cover the multitude of the appreciation we have for each and every one of them, but hopefully, all of them will catch a glimpse of our gratitude.

Over the past 50 years, the Faculty of Medicine had a splendid history as a center of excellence in both teaching and research. And as clearly stated in its official vision, our college aims to be a leading centre of excellence in teaching, learning, research and scholarship in the field of medicine. And to be a leading centre of excellence which produces intellectual, competent, compassionate and dedicated health care professionals to meet the emerging needs of the local, national and international community.

The University of Jordan, School of Medicine will achieve international eminence as an academic institution in undergraduate, graduate, postgraduate

and continuing professional education; basic and clinical research; clinical practice and service; public health and prevention; and responsiveness to its community.

The School of Medicine, in an environment with both rapid scientific and technological advances and economic changes, will be recognized for its excellence and innovation in education, research, patient care, and community service. The School will assume a leadership role in issues of importance to the region, the nation and the world and will ensure diversity of faculty, trainees, staff and students. The School will actively communicate and collaborate wherever this will facilitate fulfillment of its mission, will encourage mutual respect among faculty, trainees, staff, students and patients, demanding the highest standards of ethical and professional conduct.



Dr. Abdee Ryalat

# Blended Learning

by Dr. Heba Kalbouneh Associate professor, department of anatomy and histology, The University of Jordan

Traditional learning, which we have been implementing since UJ's inception in 1962, has adequately fulfilled the student's needs over the past decades. However, it's becoming abundantly clear that the students of 21st century are definitely different learners; they are digital natives, having grown up in a world surrounded by digital technology. As we cannot continue to offer the type of instruction which we have been offering for more than half a century; change is inevitable.

In this context, the school of medicine has successfully implemented the blended learning in the basic medical science modules, a hybrid teaching methodology that combines classroom and online education in a planned manner using

The online components of this course effectively reinforce
What I was learning in the Face-to-face sessions of this
course

10.4%

Strongly Agree

Moderately Agree

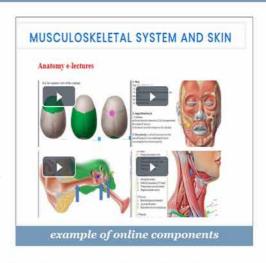
Moderately Disagree

Neither Agree nor Disagree

Strongly Disagree

Moodle platform. We advocate for 25% of instructional time to be dedicated for online learning. The online source allows teachers to focus on discussion and critical content in the class room.

The modules contain online lectures recorded by Camtasia, interactive videos, an end-of-module quiz, and an anonymous feedback survey. Students then review these materials and complete any assignments at home, on their own time. Teachers, who have already delivered their lectures digitally, review those assignments, field



questions in class the following day and engage in class-wide discussions.

For instance, more and more 3D visualization methods for teaching anatomy are being developed, at least in part due to the limited availability of cadavers and the ethical debate surrounding their use. We have integrated 3D Anatomy software in our modules as an online learning source to grasp course material and prepare for lab time.

The survey conducted at the end of musculoskeletal module showed that most of the students

were overall satisfied with this blended course and would like to take other blended courses at the school in the future. The survey also reported that most students felt more engaged with the course content in the blended format and liked the convenience of the hybrid model.

Future trends in blended learning at our school are moving towards increased incorporation of educational technology innovations such as mobile learning, virtual classrooms, webinars, virtual 3D models and 3D printing to constantly capture and return student's attention.

Yet even now, early in the game, blended learning environments show promise, making it the most exciting time to be a student.



It is said that "If ideas are the heart of science, data is its lifeblood"

In a world where research is the currency of excellence, development, and advancement, it is difficult to find new ideas in light of previous publications, it is also more difficult to find funding in light of high competition, and it is more difficult to publish in light of the reproducibility crisis. The following is my words as published in a Nature article in 2018:

"As an underfunded clinical researcher working in Jordan, I am limited to pursuing inexpensive observational studies that are based on patients' records. Happily, open-access data from repositories around the world have enabled me to make a bigger contribution to science."

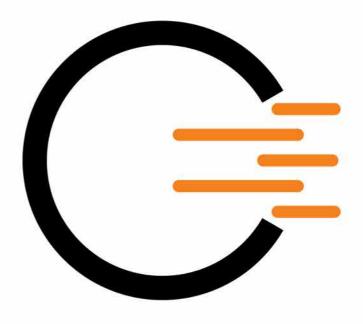
Till the beginning of 2020, I've managed along with my colleagues to publish more than 15 publications using open data. They were published in higher impact journals than other studies I did on newly collected data. We also conducted a study and confirmed the high publishing chances of studies done on open data.

The drawback of open data is that we do not have quality open data repository in our countries, so we need to use other's open data, which usually collected from their countries, leading to finding that may be sometime specific to their population.

To promote the use of open data in the University of Jordan, we created a website that contain guidance, tools, blogs, and an index for available openly accessible data for researchers to use: researchopendata.com

Moreover, I've published a book that can be used by researchers to guide them into using open data in their research: "A Beginner's Guide to Using Open Access Data" We are working on promoting open data and es-

We are working on promoting open data and establishing data banks in Jordan, so that the same data collected can be maximally used by our researchers. Eventually, data is the lifeblood of research.



Research
Open Data

## Jordan efforts to contain COVID-19

#### A careful interpretation of the encouraging numbers

By Dr. Mohammad Majed Abufaraj Department of Special Surgery

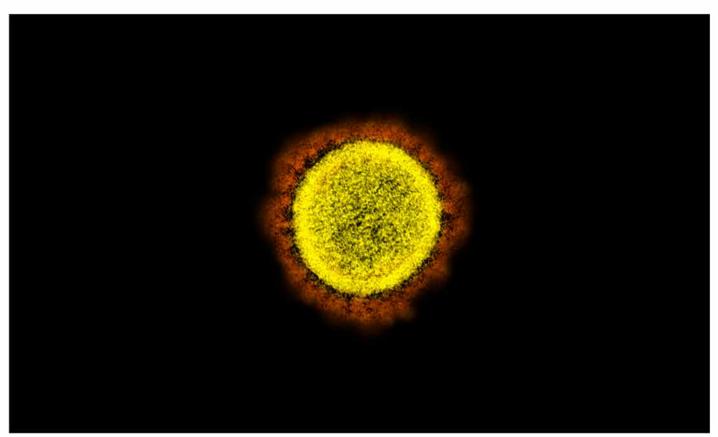
COVID-19 is definitely an unprecedented international public health challenge. It has been aggressively hitting cities, and many health care systems has collapsed or near-collapsed, wreaking havoc globally. Each country has its capacity and reacts according to its perception of threat, economy, health care policy, and the structure of the health care system. The general strategies and guidelines are social distancing, testing every suspected case, treating the patients, and contact tracing. Other countries are, however, taking stricter measures to contain the outbreak, such as lockdown and mass testing.

In Jordan, the dynamic of the outbreak is relatively reassuring, and it is going in the right direction. However, the outbreak is still at a relatively early stage, and it is untimely to conclude that Jordan has fully contained the virus transmission within the country. Indeed, It is hard to predict whether the disease might take a turning point. Given the limited resources and the high cost of mass testing, Jordan has taken extreme containment measures by isolating more than 5,000 expatriates (after voluntary repatriation of Jordanians) and visitors in Hotels in the Dead Sea and Amman and executed the National Defence Law by forcing partial curfew. As of today, Jordan announced 274 cases and registered five deaths (31st of March 2020). It is no question whether Jordan needs to further extend the social distancing and lockdown or not. If Jordan prematurely stops, it might face an acceleration, increase fatality and negatively affect the economy by expanding the limits of the lockdown. As outlined by the WHO, building trust and strong community engagement are essential for successful mitigation strategies.

Jordan is currently counting on a well-gained people's trust and public awareness but is this enough? Actually not, officials are advised to keep pressing on the hotspots, continue testing every suspected case and contact tracing of confirmed cases. Further, health care policy makers are endorsed to continue giving their consistent messages: "We are not done yet", "this is an insidious and unpredictable outbreak", "maintain social distancing "mitigation measures are ongoing", and "you people should do your part to make our job (government) easier". Yes, social distancing should be maintained until a rapid, sensitive, and affordable diagnostic test on a mass level comes into play. According to the European Centre for Disease Prevention and Control: "social distancing measures should remain stringent until incidence drops to a certain threshold, then relax measures before reintroducing them before the hospital capacity threshold is reached again". De-escalation of the social distancing measures is dangerous without adopting the aforementioned strategy or until a game-changer comes: a vaccine or such test. In the current situation in Jordan, adherence to the three T's model (Test, Treat, and Trace) will help in identifying more cases to break the chain of transmission in the community and to estimate the real prevalence of the disease.

Everyone should be ready for the unexpected!

Jordan is absorbing the first impact of the COVID-19 crisis, and it needs to determine the consequences of this impact, the aftermath, and future health strategies. The balance between politics, economy, and health is a complex interplay. In this sense, Jordan has sacrificed the economy over saving the health care sector and people's health. In the short term, Jordan should continue the mitigation measures to prevent an epidemic rebound and to keep preparing for the worst. Then, Jordan has also to be ready to respond effectively to a potential second wave of imported cases when the situation settles down locally if there is no international exit strategy.



**Novel Coronavirus SARS-CoV-2** 

Transmission electron micrograph of SARS-CoV-2 virus particles, isolated from a patient.

Image captured and color-enhanced at the NIAID Integrated Research Facility (IRF) in Fort Detrick, Maryland.

Credit: NIAID

Moreover, the government is advised to set up emergency plans to get extra life-saving ventilators and expedite installing mobile care facilities to respond to any sudden incident. These measures have already been announced and more organized preparation is advised. In addition, health care providers need local guidelines for best practices during such a crisis to standardize the health service across the country and define the priorities. Such guidelines are necessary to resolve uncertainties in providing care to patients with other serious illnesses, malignancies or emergencies. On the other hand, the government has to take serious steps to protect health care providers by including these measures in the guidelines and providing sufficient supply of personal protective equipments. A liaison with the industry should be prioritized to ensure sufficient supply of personal equipments and ventilators with high quality standards. For the long term, Jordan needs to consider more investment in the health care system in terms of infrastructure, research, and training. Several scientists believe that coronavirus might re-emerge in the fall, and it might not be the last novel virus to cross our path.

#### **Future perspectives**

This crisis is teaching humanity many lessons, and all of us have to rise to the challenge: countries need to share data, resources, experiences, and expertise. Also, scientists of all disciplines must work together to inform political leaders who have to make difficult decisions based on models and incomplete data. But as time passes, the networks of scientists and the accumulation of real-world data make predictions more accurate allowing more precise informed counseling. Countries can use this pandemic as a wakeup call and usher a new, better, and healthier world, and here; I would like to use one of my favorite and famous Latin mottos: "Per aspera ad astra" which means "through hardships to the stars."

### Bel Arabi

From the heart of the School of Medicine - University of Jordan and inspired by the words of our professor Said Ismail, Bel-Arabi was established in 2015 as an initiative to enrich the Arabic scientific and medical content on the internet.

Since its establishment, Bel-Arabi has grown and flourished between youth in different areas in science, humanities, and art, expanding beyond the walls of our university and even borders. This huge impact can be summarized in more than 34,000 Arabic medical and scientific (and other-

wise) pages by more than 9000 volunteers from 5 Arab countries, a Visual Library with +170 medical educational minutes on YouTube revised and edited in cooperation with consultants from the School of medicine, University of Jordan, mini-documentaries with researchers from our region in highly specialized fields, hundreds of trained students in the principles of research, spreading the art that reflects the Arab culture in different areas including the library of the University of Jordan, and more.



Bel-Arabi is now a nonprofit organization aimed toward combining science, language, and art to emphasize the true Arab identity, with the pinecone logo referring to the pine trees in our beloved university, the place where it all started, and to the patience needed for a pine tree to start bearing its fruits.



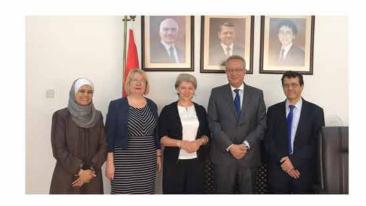
# School of Medicine Activities



The school of medicine conducted several free open medical visits to in-need providences, where specialists and students from different specialities with medical supplies provided high quality care to these areas.

School of Medicine at the University of Jordan begins the path of obtaining the American accreditation in higher specialization programs (ACGME). A delegation from ACGME expressed its preliminary remarks and it came positive about the reality of the college and its academic programs, praising the advanced level it has reached among its counterparts and the quality and efficiency of educational programs in it



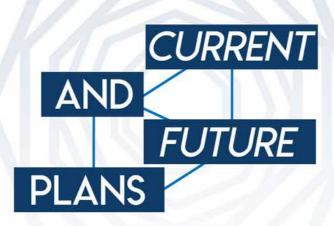


The royal collage of surgeons conducted several board examinations for different specialties at the school of medicine, including the royal collage of surgeons and the royal collage for obstetric and gynecology specialties.

Delegations from different international medical schools visited the school of medicine to discuss aspects of cooperation with it.

As part of the school of medicine efforts to integrate E-learning, several courses have been given to adopt an advanced platform with high quality content for our students





#### A third building

The school of medicine has established its 3rd building in February 2020, a building devoted for lecture halls and large auditoriums. The new building for the school of medicine will be inaugurated soon, with 4 auditoriums, 4 lecture halls, and a meeting hall accommodating more than 1,600 students at a time.





#### **OSCE hall**

The school is now planning to establish an examination hall, with advanced technologies and surveillance systems dedicated for Objective Structured Clinical Examination (OSCEs)

# STUDENT CORNER

#### Basma Odeh

#### 5th year medical student

I shut my eyes tight, and allowed myself one second to wake up, if this was a dream. I opened them and it was real; I was still there sideways in my car staring at my hand that looked like a scene from a zombie movie with blood gushing all around. I'm no doctor yet, but I knew enough to predict the likelinesss of amputation; after all, everyone was discussing it in the emergency room. But in less than an hour from the accident I was in the operating room with 3 JUH specialists over my head, working against the clock to save my hand. I am thankful everyday to God, and to JUH's doctors and their great, timely medical practice that even my medical team in Germany praised with respect and admiration.



tion gets, our faculty is there to support us and always has our best interests at heart.

Sanad Qawasmeh

6th year medical student

mount.

As part of non-academic activities, Sanad provided several motivational talks. So far, he provided three talks inside and outside The University of Jordan.

After over a month of surgeries and therapy I was finally in the clear and didn't need to worry; by

some miracle, my hand survived! As a medical stu-

dent, my long stay in the hospital taught me a per-

spective that six years of medicine couldn't have:

what it's like to be the patient. I learned the impor-

tance of giving good analgesia, as pain can truly

only be assessed by the patient. I also realized just

how important it was to me to be talked to hon-

estly. The significance of communicating with

your patients, listening to their concerns, and

being honest and empathetic with them regard-

ing realistic outcomes and the plan, is para-

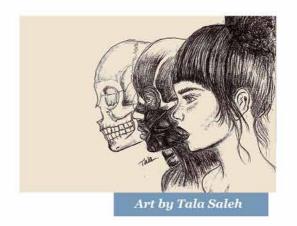
I dedicate this article to my faculty, colleagues

and saviors from whom I've learnt so much, and

whom proved that no matter how bad the situa-

#### Tala Saleh 2nd year medical student

If I were to define medicine, I would say it is an extremely debilitating passion. Luckily, I found art as my getaway since I was 17. It is my sanctuary, where I could combine my hobby and passion for medicine, into a very self-rewarding activity



#### **Perspectives on Elective Training**

#### **Wael Qadri**

I have done my elective course at the University Of Sheffield in the Ophthalmology department. Sheffield is located North to London and is home to two major teaching hospitals in the United kingdom.

I got the chance to explore different sub-specialties in ophthalmology for an entire month, Attended clinics, Surgeries and most importantly got a clear idea about the residency application process. In addition to visiting different cities and many touristic places in the country.

One major thing I made sure of, is that we as medical students in UJ are well-prepared academically for the course and even residency programs in the future!



# Heart & Vascula Center

#### Malak Al-Kasasbeh

First of all, I would like to thank my beloved school for giving me this elective opportunity at Case Western Reserve MetroHealth Medical Center - Heart and Vascular Center.

This elective rotation was not only a clinical experience with great and first-rate doctors in cardiology, but it was also a journey full of good memories and lessons. Starting with attending many conferences, procedures; cardiac ablation and cardiac device insertion, and participating in a heart dissection session where each participant dissected a heart from A to Z.

This rotation has also added to our communication skills by attending patient education and counseling sessions about the disease and its pathophysiology and plan of management. Our contributions, as students, during the rounds were not less important, we presented a good number of cases and consultations to the team with our impression and management plan which added much to our confidence and clinical experience.



#### A year since the foundation of medical research office

It has been more than a year since the foundation of medical research office, an office dedicated to help promote the research skills for our medical students. Beside its original aim, the office extended its activities to include research activities, connecting our students with other institutions, inaugurating the present newsletter among others.

#### **Research orientation activities**

The office conducted several workshops aiming to enhance research skills for the students. At the beginning of the university year, a workshop to familiarize the students with ethical issues related to research, including Good Clinical Practice courses and certification. During the year, workshops on study designs, data analysis, and manuscript writing conducted by Dr. Fidaa Thekrallah, Dr. Laila Tutunji, and Dr. Saif Aldeen AlRyalat along with school's teaching staff.





#### Research Journal club

In February 2020, the research office of the school of medicine organized a research journal club presented by an enthusiastic group of students, aiming to enhance the knowledge about research methodology and about one of the landmarks studies The SPRINT study. The students demonstrated great presentation skills, and were able to answer all questions from the audience. The journal club conducted at the workshop room recently established and with the presence of the dean professor Islam Massad, vice dean, and teaching staff.

#### **Key Publications**

#### Retraction of paper

On 18th of February 2020, the research office along with three enthusiastic students conducted a study to assess the number and causes of article retraction after publication in the Arab region. They found that Jordan has generally low retraction percentage, and plagiarism was the most common cause of retraction.



Link for full paper: https://ese.arphahub.com/article/51002/

#### دراسة علمية عن أثر الحجر الصحى المنزلى على الصحة النفسية

بحث فريق من كلية الطب في الجامعة الأردنية برئاسة الدكتور إسلام مساد عميد الكلية، نتائج دراسة علمية عن أثر الحجر الصحي المنزلي على الصحة النفسية.

وأظهرت الدراسة التي شملت عينتها 5274 شخصا مثلوا شريحة واسعة من مختلف أطياف الشعب الأردني من شتى المحافظات والفئات العمرية، أن الغالبية العظمى من الأردنيين يرون أنهم قد التزموا بالحجر المنزلي بشكل جيد.

واتبع الفريق الذي ضم عضوي هيئة التدريس الدكتور رائد الطاهر والدكتور محمد أبو فرج، ومجموعة من طلبة كلية الطب في الجامعة، أسس البحث العلمي المتعارف عليها في الاستقصاءات النفسية والسلوكية.

وعند تحليل إجابات المشاركين في الدراسة، تبين أن 75% منهم يشعرون حاليا بعدم الارتياح أو القلق بسبب الحجر الصحي، إلا أن الجانب المبشر، أن ما نسبته 10% فقط منهم يشعرون بعدم الارتياح التام والقلق الشديد من المستقبل، حيث تعتبر هذه النسبة مطمئنة؛ بسبب تقبل المواطنين لأسباب هذا الحجر واعتقادهم بأنه إجراء مهم للحفاظ على صحتهم وحياتهم.

ورأى غالبية المشاركين أن الأمور ستكون إيجابية في نهاية الأزمة، على الرغم من الظروف التي يمرون بها حاليا، كما أن عددا كبيرا منهم لم يلحظوا تأثيرا للضغوطات النفسية على إنتاجيتهم وفعاليتهم وأشار 50% من المشاركين بأنهم أكثر عصبية وتوترا خلال فترة الحجر، إلا أنهم يرون أن هذه التغييرات لم تؤثر في قدرتهم على اتخاذ القرارات أو تقييمهم لمتغيرات الحياة.

وعند دراسة الفئات الأكثر معاناة من الضغوطات النفسية، تبين أن الإناث عموما كانوا أكثر عرضة للتوتر والإرهاق خلال فترة الحجر مقارنة بالذكور. وتوصلت الدراسة إلى أن أصحاب الدخل الأعلى يعانون من القلق أو التوتر أو الإرهاق بشكل أكبر من ذوي الدخل الأقل؛ حيث وجدت الدراسة أن ما نسبته 61.5% من المشاركين كان دخل أسرهم الشهري أقل من 1000 دينار، وهم لا يعانون من القلق أو التوتر أو الإرهاق بشكل أكبر من أصحاب الدخل المرتفع (1000 دينار شهريا فأكثر)، إذ تتمحور جل مخاوفهم حول مستقلبهم، خصوصا المتزوجين منهم أو من تتكون عائلاتهم من أربعة أفراد فأكثر.

وخلصت الدراسة كذلك إلى أن كلا من العاطلين عن العمل والطلاب وربات

المنازل والمدخنين ومرضى الربو معرضون أكثر للقلق أو الإجهاد وعدم الارتياح بسبب الحجر الصحى.

وأوضح الباحثون أن هنالك دورا كبيرا للترابط الاجتماعي متمثلا بالدعم من الأشخاص المحيطين كالأصدقاء والأسرة في التغلب على القلق والتوتر والإجهاد خلال هذه الازمة. ومن المبشر أن مجتمعنا الأردني معروف بأواصره الاجتماعية المتينة، فقد أظهرت الدراسة أن معروف بأواصره الاجتماعية المتينة، فقد أظهرت الدراسة أن 97.5% من الأردنيين يعيشون مع فرد أو أكثر في المنزل، وأن الغالبية العظمى يجدون شخصين على الأقل عند حاجتهم للحديث عن مخاوفهم وقلقهم.

وعلى صعيد اخر، أشارت النتائج إلى ازدياد استخدام الأردنيين للأجهزة الإلكترونية بشكل ملحوظ، فقد بات أكثر من ثلثي المشاركين يستخدمون أجهزتهم الإلكترونية لأكثر من 4 ساعات يوميا خلال فترة الحجر، في حين أن 60% منهم فقط كان يستخدم الأجهزة الإكترونية لأكثر من 4 ساعات قبل قرار الحجر، كما أن 16% من المشاركين أصبحت ممارستهم للأنشطة الرياضية اليومية أقل مما سبق.

وذكر الدكتور مساد أن هذه الدراسة تأتي للتشديد على أهمية الترابط الاجتماعي بين أفراد المجتمع، ودوره العظيم في التغلب على الاثار النفسية للحجر المنزلي إزاء جائحة فيروس كورونا المستجد، وأنه رغم الأثر الواضح لهذه الأزمة على شريحة واسعة من الأردنيين، إلا أن أغلب الشارع الأردني ما زال متفائل وينظر إلى المستقبل بصورة مشرقة.

وقد أكد الباحثون أن الدراسة تحتوي على نتائج قيمة أخرى، تهم الباحثين في مجال الصحة النفسية والمجتمعية، لاعتمادها معايير ومقاييس عالمية متعارف عليها تستخدم لقياس التوتر والإحباط والضغوطات النفسية، كما سيعاد توزيع الاستبيان نفسه مرة أخرى على الشعب الأردني خلال الأسبوع القادم، ليتسنى لهم تقييم اثار الحجر الصحي مع مرور الوقت، ومقارئتها بالنتائج

كما تم التأكيد على أن العمل جار لنشر نتائج هذه الدراسة في إحدى المجلات العلمية المحكمة في أقرب وقت ممكن، مؤكدين حرصهم على تقديم النتائج الأولية لهذه الدراسة إلى أصحاب القرار لاطلاعهم على الاثار النفسية المترتبة على قرار الحجر الصحي في الأردن.

## **Engage with the school**

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#### Write for the newsletter

This newsletter is prepared by the research office of the school of medicine at The University of Jordan. Please contact us if you want to participate in future editions:

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