

# Situation of vulnerable refugees in Jordan and Lebanon (December 2013)

Presentation on the Survey findings and recommendations relevant to the Health Working Group in Jordan

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# Purpose of the Survey

- To identify the challenges refugees with specific needs were facing in Jordan and Lebanon.
- The study described “Specific Needs” as; Syrian refugees affected by impairment, injury and chronic disease.

# Research Methodologies

- Qualitative and quantitative research methodologies were applied.
- Random cluster sampling technique.
- 30 clusters were drawn from each governorate.
- 3,202 individuals were selected and interviewed in Jordan and Lebanon.
- 1,192 individuals were interviewed from Jordan.

# Data collection

- The data collection tool were 2 questionnaires. One general and the other specific to describe the different categories of impairment.
- Research locations in Jordan where: Amman, Irbid and Za'atari.
- Samples were extracted from UNHCR register and other databases of humanitarian agencies.

# Data documentation and analysis

- The research process was undertaken by a research consultant, Thomas Calvot, review and editing was done by HI and HAI.
- Survey teams were recruited and provided with trainings.
- The findings represent findings from the survey as well as, information from key informants, secondary data view and reports from other sources.
- The margin of error for governorate level in Jordan is  $\pm 4.6\%$  whereas for country level it is  $\pm 2.7\%$ .

# Ethical Considerations

- Primary data collectors explained the aim, objective and outcome of the study prior to obtaining consent from interviewees.
- For young or intellectually impaired individuals consent was obtained from family.
- Survey aim, objective and outcome was discussed with UNHCR and national authorities as well.
- Questionnaires were translated into Arabic.

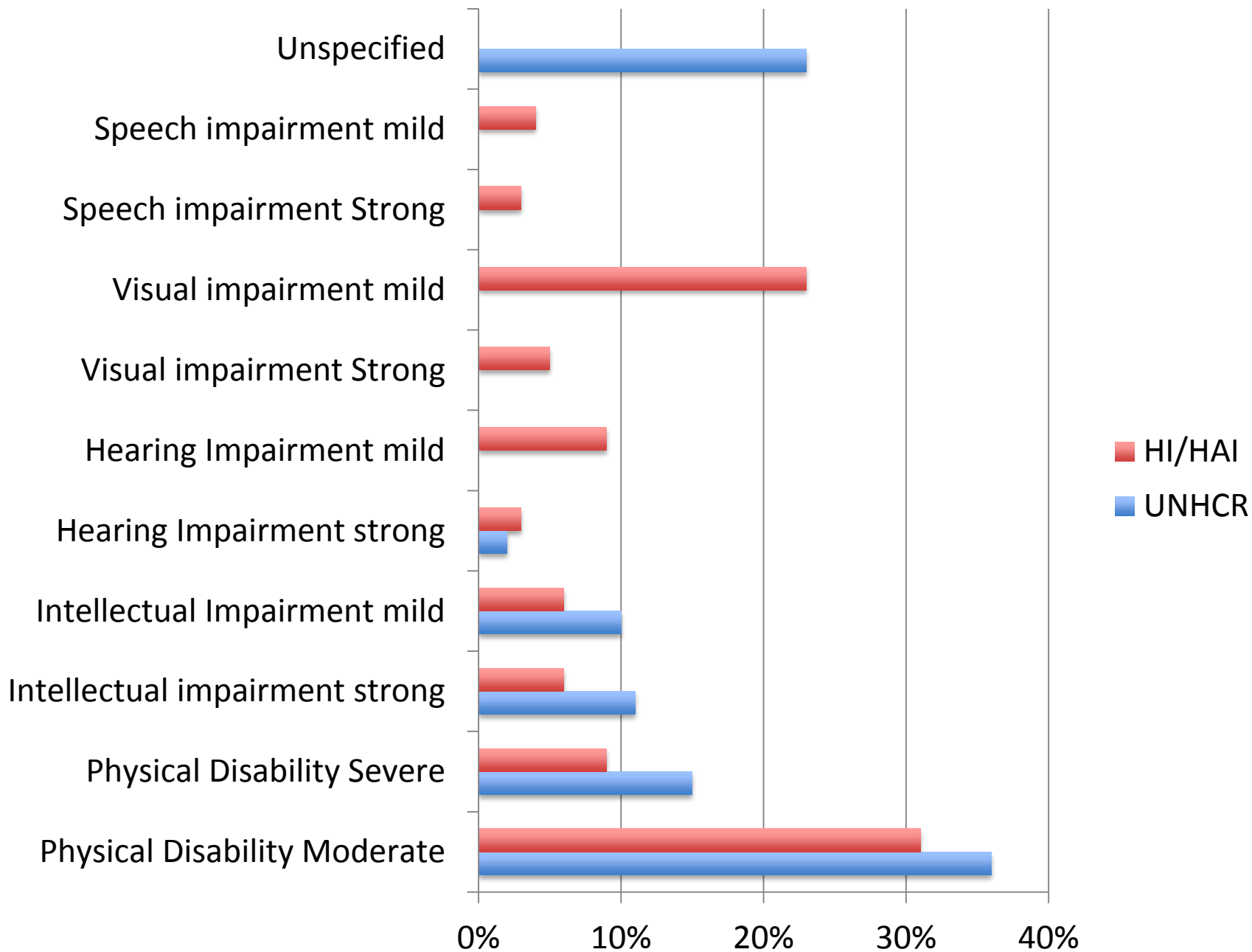
# Key findings that relate to the mandate of the Health Working Group in Jordan

# 1. UNHCR Registration of PwS

UNHCR registration database does not capture detailed information on disabilities/impairments disaggregated by Sex, Age and Gender.  
Specifically sensory impairments.

Thus; Speech, Visual and Hearing impairments as mild and severe.





## 2. Impairments

- 22% of the 3,202 surveyed Syrian refugees have an impairment; 6% have a severe impairment.
- 26% for Jordan.
- Where as, just 1.4% of UNHCR registered refugees are recorded as having a disability.
- 7% of the surveyed refugees were suffering from NCD and Impairments.

## **Implications of the findings impairment**

- There is lack of a shared understanding on the definition of impairments or disabilities as well as the categories, which affects detailed data collection by UNHCR.
- The lack of data and information affects programming as well as initiation of projects specific to addressing the needs of PWS.
- The absence of assistive device can increase the severity of disability.

### **3. NCD findings**

- 15.6% of the 3,202 refugees surveyed were affected by chronic diseases.
- 2 out of 3 older people surveyed in Jordan were affected by chronic diseases.
- WHO pre-conflict data shows that NCD accounted for 74% of all deaths (52,000 out of 71,000 deaths) in Syria in 2002.
- In Jordan comprehensive health coverage is good for refugees in camps, whereas the situation is difficult for out of camp refugees.

### **3. Gaps in the quality of NCD management specifically Chronic Illnesses**

- Lack of health education to patients affected by NCD.
- Limited capacity of staff to properly assess patients with NCD.
- Limited services to support early screening for NCDs such diabetes and hypertensions.
- No proper monitoring (laboratory tests) or follow up.
- Some gaps in the quantity of NCD drugs or in absolute availability (especially insulin).
- Cost of managing NCD of individuals on HH income (diet, NFIs)

## **4. Relationship between NCD and Disability**

- Untreated Chronic diseases often lead to severe complications. Such as:
- Stroke, diabetic complication such as gangrene, Kidney problems and blindness.
- Survey findings established that 7% of others interviewed were affected by both chronic disease and disability.

**% of Total survey pop**

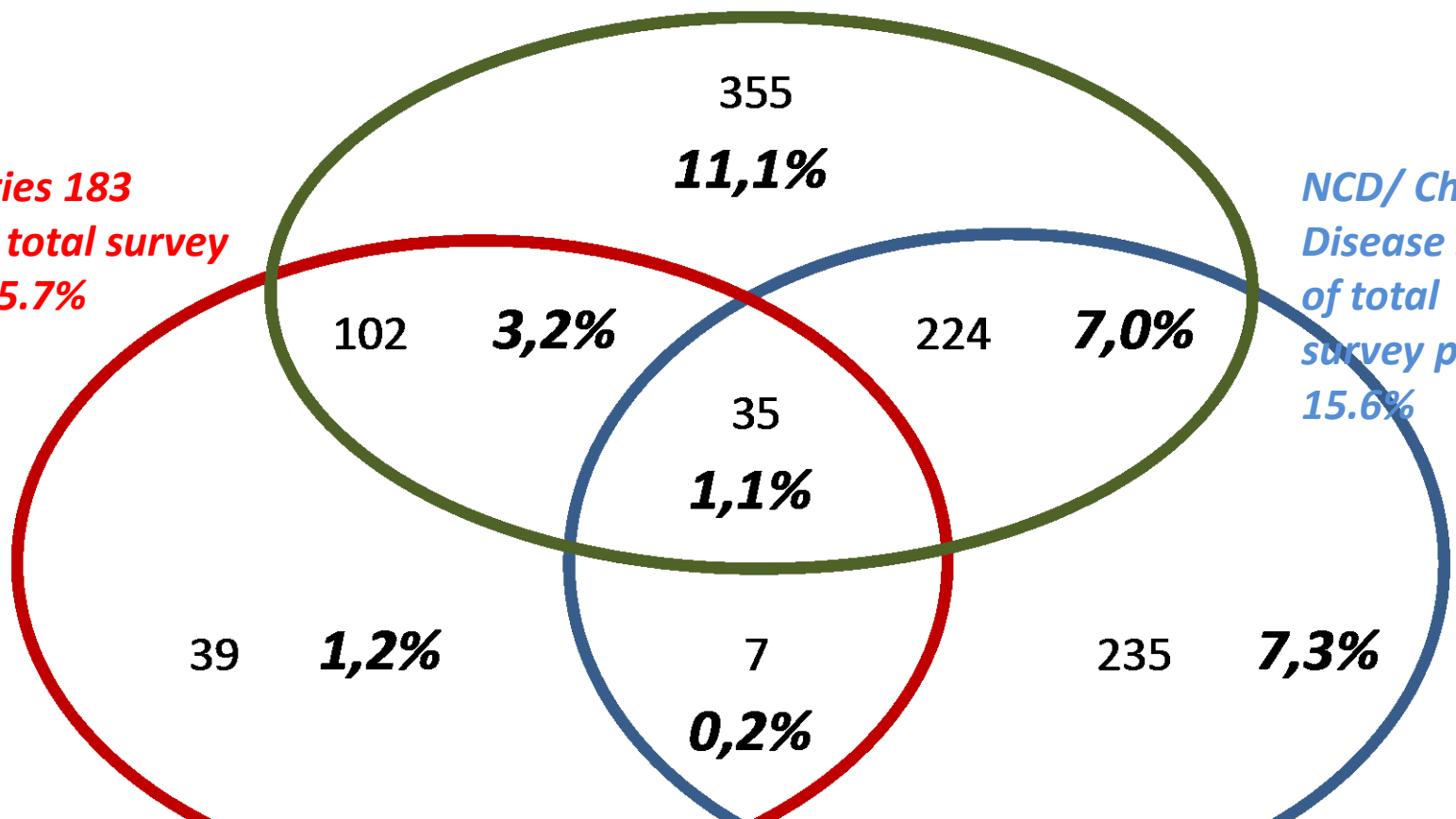
**31,1%**

**Impairment 716**

**% of Total survey pop 22,4%**

**Injuries 183**  
**% of total survey**  
**Pop 5.7%**

**NCD/ Chronic**  
**Disease 501 %**  
**of total**  
**survey pop**  
**15.6%**

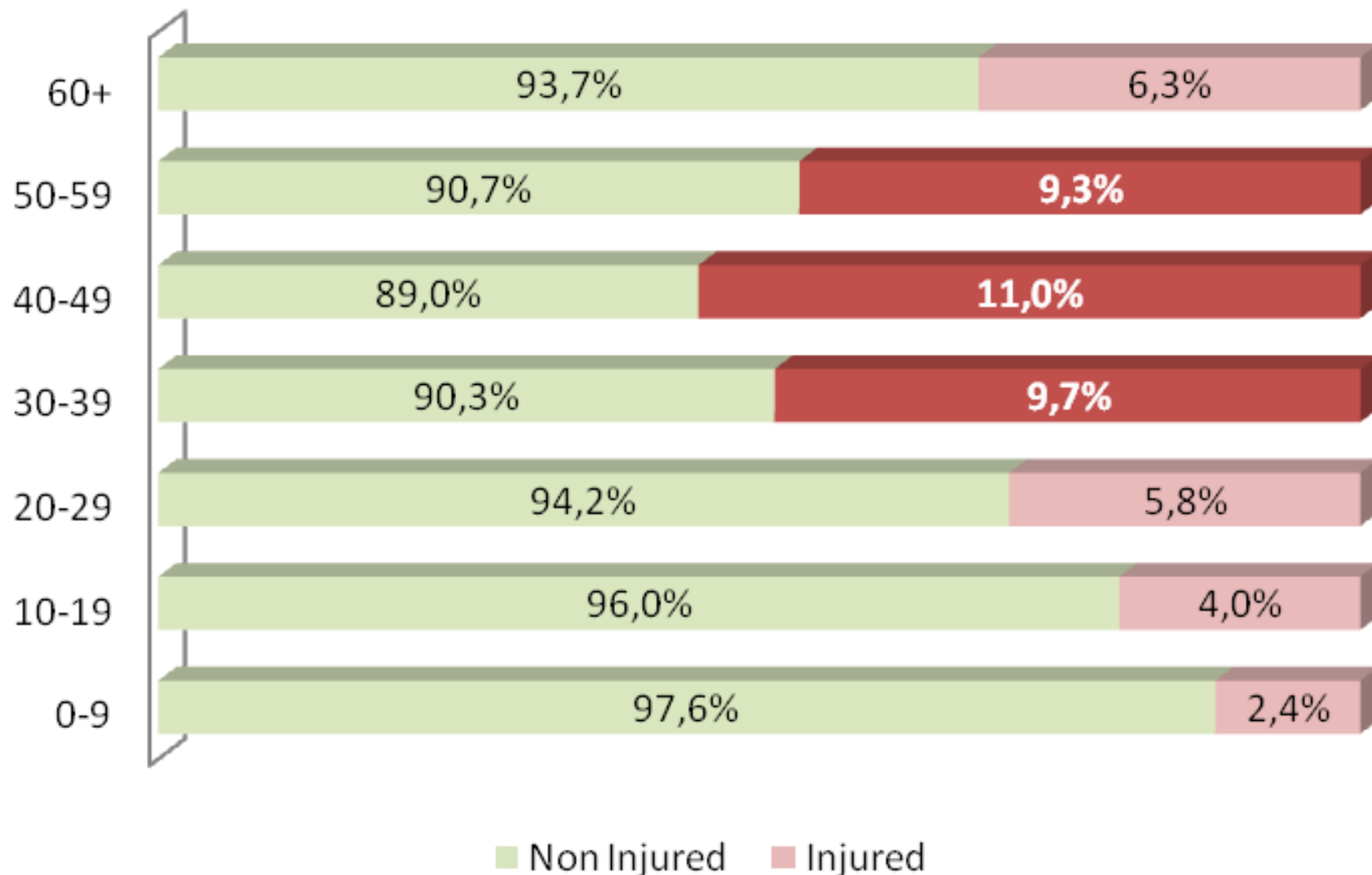


## 5. Injuries

- Survey findings established that 5.7% of 3,202 surveyed Syrian Refugees were injured.
- 90% of these injuries in Jordan were caused by direct consequences of the war in Syria.
- Henceforth, 1 in 15 Syrian Refugees in Jordan has been injured, because of the war.
- Men accounted for 72% of the injured persons where women accounted for 28%.
- Highest proportion of injuries were found amongst those age 30 to 60 years.



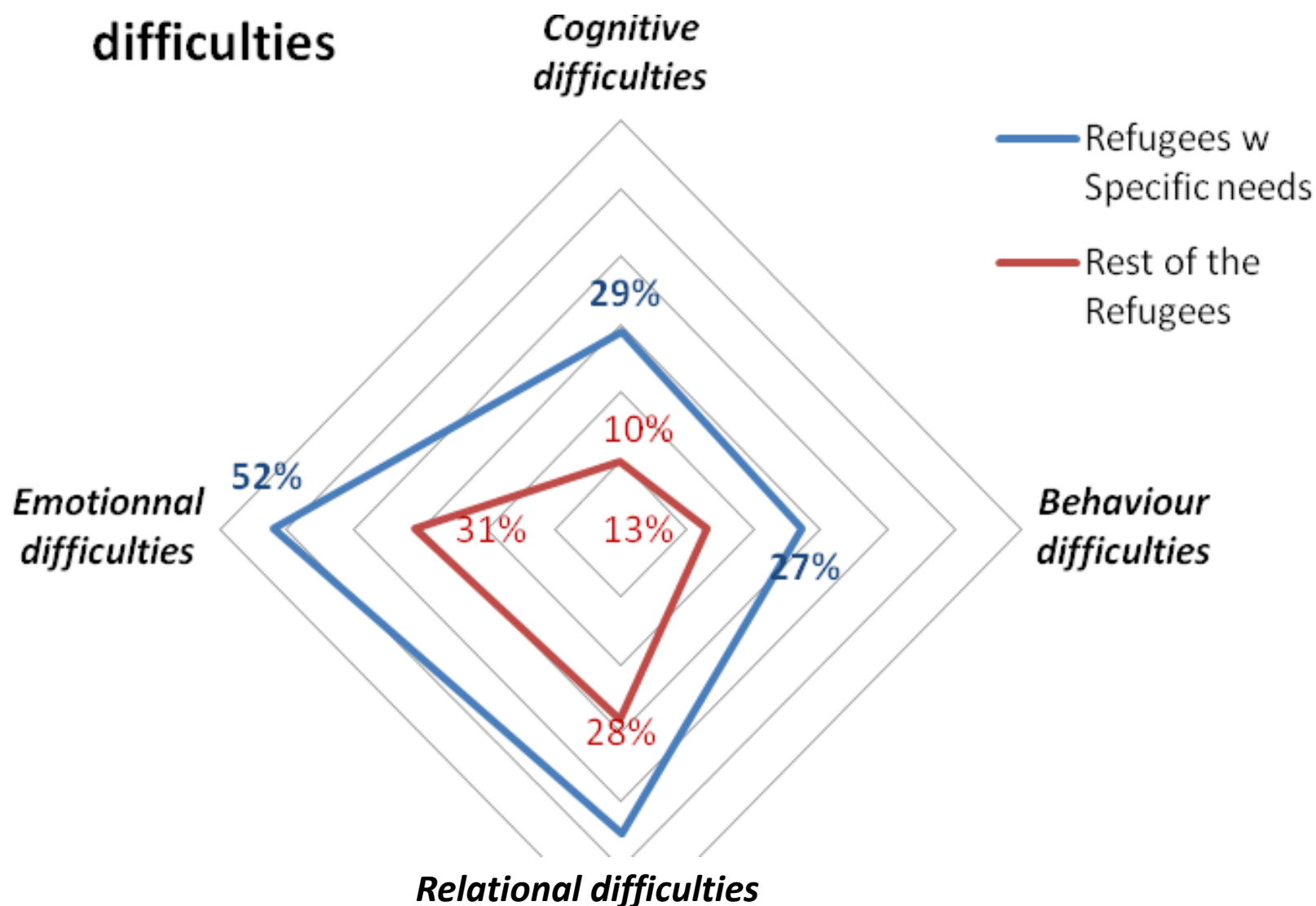
## Proportion of injured persons by age



# Implications of the findings on Injuries

- Continued need for immediate health care as well as rehabilitation services to prevent impairment.
- Rehabilitation services should not be limited to provision of assistive devices.
- The impact of injuries on the men of productive age (30 to 60 years) increases HH vulnerability.
- The numbers of Syrian refugees with injuries in Jordan are higher because of the free and full health care coverage and minimal backlog in registration when compared to Lebanon.

# 6. Psychological Distress



# **Gaps related to Psychological Distress**

- Gaps in psychosocial services for older, women and children with disabilities.
- Specifically social spaces for older persons, and children with disabilities.

# Recommendations

- Address gaps in the quality of primary health care services for those with chronic disease.
- Ensure adequate provision on NCD drugs at primary health care level.
- Improve access to laboratory tests at primary health care level.
- Improve access to primary care services.

# Recommendations

- Collect analyse and use sex, age and disability disaggregated data (SADDD).
- Build capacities of partners to identify and include persons with specific needs in humanitarian response.
- Ensure medical assistance addresses the need for post-operative care of patients (to avoid creation of disabilities).

# **Acknowledgements**

Syrian Refugees in Jordan and  
Lebanon.

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