2013

Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp

Child Protection and Gender-Based Violence Sub-Working Group Jordan

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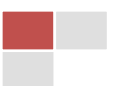# Executive Summary

This report details an assessment carried out in December 2012 to gain a deeper understanding of the main Child Protection (CP) and Gender-Based Violence (GBV) concerns of Syrian refugees in Za'atari Camp. As a number of protection services are currently available in the camp, the assessment had the primary objective of providing a practical direction to prevention and response activities in 2013. The assessment focused on reported and perceived patterns of threats, as well as knowledge and analysis of existing prevention and response to CP and GBV issues. Additionally, the report highlights recommendations on how these issues can be addressed in the humanitarian context to inform inter-agency programming.

The assessment was conducted by a task force assembled by the CP and GBV Sub-Working Group in Jordan. The Task Force members adapted three main tools for data collection to ensure triangulation of information: Key Informant (KI) interviews; focus group discussion (FGD) interviews, and a Safety Audit.

Below is a summary of the <u>key findings</u> of the assessment:

Access to information: The majority of respondents reported that for the community in the camp, the main sources of information, including information on available services, are friends, neighbours and family in Jordan as well as those remaining in Syria; service providers were also mentioned to a lesser extent.

Access to services: Health, food, NFIs distribution and education were mentioned as services people were most aware of. Lack of disaggregated services for males and females (e.g. in distribution lines) as well as distance to services were reported as factors hindering girls and women from accessing services. Girls, women and to a lesser degree, boys, may face difficulties in accessing services where they are not permitted to do so by their families. Respondents perceive that women and men fear being stigmatized and this negatively affects their access to certain types of services. People with physical or mental disabilities and female-headed households were mentioned as the main groups that are excluded from services.

Exploitation of children and adults: Economic hardship is evident, and exacerbates the already existing practice of child labour as a means to financially support families. Respondents reported that boys are being used to sell goods and to beg in the camp. Girls are also involved in selling goods, but to a lesser extent. It was also reported that girls and boys are working as cleaners inside the camp. In such cases, an adult is hired, but children carry out the work**.** Men are known to be offered work by people outside the camp and are being "bailed out" largely for this purpose.

Children without parental care (unaccompanied[1] and separated[2] children - UASC[3]): In the camp, 342 unaccompanied children and 307 separated children are registered with UNHCR. Respondents noted that children in the community living without any adult care (child headed households) are generally either referred by the community to an NGO specialized in working with children or entrusted to someone in the community who can care for them.

Children associated with armed forces and armed groups: A few respondents mentioned they had heard of children living in the camp, mainly boys aged 15-18, that had been working for or had been used by armed forces or armed groups in Syria. Some had heard of children that had returned back to Syria to join an armed group. The child's own decision was mostly cited as the reason for returning to Syria.

Gender-based violence (GBV) and other forms of violence in the community: According to respondents, domestic violence is the most prevalent type of violence, and it most affects girls aged 12-18. This is followed by civil violence (e.g. demonstrations in the camp) affecting mainly boys, aged 12-18. Children were identified as contributing to committing acts of violence, criminal acts and vandalism of communal infrastructure (schools etc). In terms of locations identified as most likely for violence to occur, home (tent) and the latrine/shower facilities were identified for girls as the highest risk locations, while for boys, home (tent) and the main gate of the camp were identified. For women, home and distribution points were mentioned as areas where violence is highest, while for men distribution points and the main gate of the camp were identified.

Domestic Violence (i.e. spouse-spouse and parent-child): According to the respondents, women and girls are more likely targeted for domestic violence than men and boys, although in focus group discussions prevalence of domestic violence against boys was also highlighted. Male spouses and male parents were mentioned as the main perpetrators of domestic violence, although other family members, such as mothers-in-law, were also identified among perpetrators of violence. When asked to whom survivors of violence would reach out for support, girls and boys were reported to seek support from other family members (e.g. mothers, grandmothers). Women might seek help from other family members as well as friends. Men would most likely not seek support, but in the event that they did, it would also be from family members (e.g. brothers).

Sexual Violence: The majority of respondents said they had not heard of any incidences of sexual violence. However, respondents believed that women and girls are more likely to be targeted for sexual violence than men and boys. Home (tent) and common areas, such as the latrines/shower facilities were mentioned by respondents as areas where sexual violence may happen. Other community members were mentioned as the likely perpetrators, followed by family members. Girls who experience sexual violence were reported to seek support from other family members (e.g. mothers, grandmothers) or from

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[1] Unaccompanied children are those separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so. *This means that a child may be completely without adult care, or may be cared for by someone not related or known to the child, or not their usual carer e.g. a neighbour, another child under 18, or a stranger.*

[2] Separated children are those separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.

[3] UASC stands for unaccompanied and separated children. The term 'minor' is discouraged due to its lack of legal definition.

an NGO, while boys were said to prefer seeking support from family members. Women might seek help from other family members or the clinic. Men would most likely not seek support, but if they did it would also be from family members (e.g. brothers).

Early marriage and Marriage Practices: 15-18 years of age is considered the normal age range for females to get married in the Syrian community, while 18-25 is the normal age for males. While the majority of the respondents did not know of any children from the camp that have married or were planning to get married since the opening of the camp, some respondents reported being aware of a few cases. There is a general agreement amongst respondents that families seem inclined to delay marriage of their girls due to the unstable environment and generally tend to reject marriage offers from outsiders because they believe these proposals are presented in a dishonourable way.

Community Support Mechanisms: For children and adults alike, parents and relatives form the main support system. Religious leaders and community leaders are also considered as an important part of the support system for both groups.

Safety concerns: There is a consistent discrepancy in the perception of safety in the camp in the daytime versus the night. Evenings and nights are considered the most insecure times of the day, particularly for girls and young women who leave their shelter to use public latrines. This is mainly due to the lack of lighting.

Disabilities: Children and adults with disabilities face a range of additional challenges in the camp, particularly related to difficulties in accessing basic services. While there is limited or no indication that people with disabilities are being harassed or discriminated against, there are inadequate resources and services in the camps to support the basic needs of children and adults with disabilities, ensure their access and reduce their isolation.

Key recommendations
(See detailed immediate and long-term recommendations from page 28)

Recommendations for camp management:
- Ensure sufficient camp lighting in strategic/insecure areas in camps, in particular around common areas such as WASH facilities and kitchens;
- Strengthen and formalize refugee community-based security committees to promote self-protection by engaging communities to develop effective and representative protective structures, particularly to address domestic and sexual violence;
- Ensure that distributions (e.g. food, NFIs) happen in a transparent manner and do not put individuals at risk of violence;
- Ensure vulnerable households (e.g. female headed households and people with disabilities) and children at risk are placed closer to services in the camp;
- Expand information sharing and increase access to services by the refugee population through the implementation of a camp-wide information and dissemination system;
- Enhance security measures for non-residents accessing the camp in order to reduce risks of exploitation and abuse.

Recommendations for WASH sector:
- Mobilize the community to ensure WASH facilities in the camp, and in particular their safety features, are well maintained through the establishment of WASH committees;
- Increase camp lighting in and around WASH facilities;
- Ensure access to WASH facilities for children and adults with disabilities (e.g. ramps, appropriate toilet facilities).

Recommendations for Health sector:
- Strengthen coordination between the protection and health sectors, and ensure that all health providers are trained on case management, psycho social first aid, and protection referral pathway;
- Continue to provide reproductive health services and counselling to child brides and girl mothers.

Recommendations for Child Protection and Gender-Based Violence sector:
- Enhance identification, monitoring and follow-up of children at imminent risk of abuse, neglect, violence and exploitation by their parents or caretakers and ensure inclusion in the Best Interests Assessment/Best Interest Determination process;
- Continue to improve identification and case management for survivors of GBV;
- Continue systematic identification of UASC through UNHCR Registration and reception processes, as well as active case finding in the community through awareness-raising;
- Ensure that children engaged in child labour and their families/caregivers receive targeted assistance and support;

- Ensure that issues related to early marriage are addressed though a community-based approach, in particular though the involvement of community and religious leaders;
- Provide sustainable solutions (including counselling, vocational training, life skills, formal and non-formal education) for boys and girls at risk of recruitment or use by armed forces or armed groups in Syria;
- Sensitize the community on the detrimental impact of domestic violence and raise awareness on alternative disciplining mechanisms and mediation mechanisms;
- Involve boys and men in preventing violence and addressing and challenging community acceptance of violence and harmful practices, particularly through the promotion of positive male role models;
- Strengthen coordination between agencies providing services for children and adults with disabilities to ensure provision of assistance and access to rehabilitative services, and to promote the conditions for physical rehabilitation;
- Strengthen coordination between agencies in preventing and responding to CP&GBV issues;
- Continue to provide Code of Conduct trainings and ensure that all volunteers and staff of agencies working in the camp are trained in and have signed the Code of Conduct;
- Continue to provide PSEA (Prevention of Sexual Exploitation and Abuse) training for all involved volunteers, staff and agencies in collaboration with GBV actors.

Background & Methodology

Background

Since the start of the conflict in Syria in 2011, Syrians have been fleeing to Jordan on a daily basis. By 29 January, 2013, more than 222,000 people, including a significant number of women and children, have fled their homes in Syria to reach Jordan. The majority of the refugees are from Dara'a (87%), Homs, Damascus and Hama. Of the 171,033 currently registered refugees, 48 % are male; 52 % are females and; 55 % are children with 17 % of these below the age of four. Eighty percent of registered Syrians in Jordan reside in urban settings (the majority concentrated in Irbid, Ramtha and Mafraq), with the remainder living in Za'atari camp and other sites (Cyber City, King Abdullah Park).

Given the steady influx of Syrian refugees, the Government of Jordan (GoJ) accelerated the opening of multiple sites, primarily a tented camp in the northern governorate of Mafraq, referred to as Za'atari Camp with additional settlement centers in Cyber City and King Abdullah Park. The refugees living in tented camps, sites and host communities are provided with protection and humanitarian assistance by the Government of Jordan, UN agencies and NGOs. During flight or in Syria, individuals have often been separated from their families, increasing their vulnerability. In addition, the breakdown of traditional protection networks leads to an increased exposure to threats and reduced coping mechanisms. Many continue to face psychosocial distress as a result of experiencing violence and displacement.

Although women and girls face greater risks of sexual and gender-based violence, men and boys are also exposed to abuse. Women and girls have identified rape and kidnapping as one of the primary reasons that families fled from Syria, but sexual violence is rarely reported by survivors due to security concerns and associated shame and stigma. Community members and service providers in the camp and at other sites have reported that domestic violence is emerging as a prominent issue within the refugee community, a trend often seen in emergencies as a result of increased stress levels from violence and displacement. The bail-out system, partially suspended in July 2012, still allows Jordanian citizens to guarantee for refugees so that they can leave camp and sites. As the process is not systematised and clear, it increases risks of exploitation, trafficking and sexual abuse.

More than 55 % of those living in the camp and sites are children, the majority of whom fled Syria with immediate or extended family members. Most children have experienced or witnessed conflict-related violence and pre-existing protection issues, such as corporal punishment at home and in school in Syria. Many unaccompanied children, the majority of whom are adolescent boys between 14-17 years, voluntarily separated from their family due to protection/survival or economic reasons. Children who travelled alone and joined families while crossing the border face an increased risk of abuse and exploitation and may not receive appropriate care if they are not registered as being on their own. It is challenging to identify unaccompanied and separated children (UASC) and provide interim care for them, and maintaining contact with them can also be difficult. Many are leaving the camp and sites through the bail-out process or are otherwise going missing, however UAMs are only being bailed-out in coordination with UNHCR. Addressing concerns regarding child protection and gender-based violence is increasingly critical in this context.

The Community Based Protection Working Group, led by UNHCR, was formed as the myriad of protection issues faced by the refugee population became rapidly evident. The Child Protection and Gender-Based Violence in Emergencies sub-Working Group (CP&GBV sub-WG) was established in February, 2012 co-chaired by UNICEF, UNFPA and supported by Nour Al Hussein Foundation/Institute for Family Health. Its objective is to coordinate prevention and response to child protection and gender-based violence against children and adults affected by the crisis living in camps, sites and host communities.

Methodology

A Task Force was established under the umbrella of the CP and GBV sub-Working Group to develop and revise tools for the child protection and gender-based violence assessment in the camp and host communities. Participating members in the Task Force included UNICEF, UNFPA, UNHCR, IRC, UNWOMEN, UPP, JWU, Save the Children and Zenid. The assessment in Za'atari camp consisted of the first phase of the assessment plan, as the assessment in the host community will be finalised in late March.

The assessment tool for the camp was designed with guidance from several leading CP and GBV resources including the Child Protection Rapid Assessment Toolkit (2011); the Inter-Agency Emergency Child Protection Toolkit (2009); GBV Sample Situation Analysis Questions (2004); Inter Agency Standing Committee (IASC) Sub-working Group on Gender and Humanitarian Action (2008).

A desk review was initially conducted to synthesize existing needs assessments, situational analysis of CP and GBV risks and trends in Syria, policies and legal frameworks addressing CP and GBV in Syria and Jordan and monthly reports submitted by service providers working in Za'atari Camp.

The task force opted for a qualitative approach, following the guidance of global tools. The Task Force members adapted three main tools for data collection to ensure triangulation of information: key informant (KI) interviews; focus group discussion (FGD) interviews and a safety audit. A draft KI questionnaire was adapted and field tested during the regional Child Protection Rapid Assessment ToT in October and later revised by the Task Force.

Purposive sampling was used for the assessment, which consisted of a group of people or communities purposefully selected based on a set of criteria in order to achieve a relatively complete picture of the situation. For data compiling purposes, the key informants (KI) were divided into three groups with equal representation of community members and service providers.

KI interviews were conducted with 27 participants (15 males and 12 females), representatives of both the community and of service providers. The main selection criteria for community participants was based on their having lived in the camp/site for at least one month and playing an active role in their community. KI community members were selected amongst religious leaders; teachers; community-based protection network members; those

engaged in cash for work (for example, sanitation workers) and; community volunteers who work in Child Friendly Spaces (CFS). Service providers were selected amongst members of government and non-governmental organizations (NGOs) within the following sectors of intervention: camp management; security; and representatives from the health, WASH, education, food and non-food items (NFIs), CP and GBV sectors. For the purpose of this assessment, Syrian assistant teachers and cash for work personnel were considered to be community members, rather than service providers.

Following the KI interviews, a total of six focus groups discussions (FGDs) were held, two with adolescent girls and boys between the ages of 15-17 years; two with women and men between the ages of 18-24 years and two with women and men over 25 years of age . A safety audit was simultaneously conducted through a series of observations and interviews. Interviews with community members included adolescent girls and boys between the ages of 15-17 years; men and women between the ages of 18-24 years and; women and men over the age of 25 years.

KI interviews and FGD were conducted by a team of trained staff, which included two men and five women from a number of organizations currently working in Za'atari.

The key findings are mostly presented per the ordered sections of the questionnaire, but were revised slightly where necessary. Many questions in the KI questionnaire were answered with a variety of responses. Therefore, the percentages presented in this report were not calculated based on the full 27 respondents answers, but rather using the valid responses to each question, excluding 'missing cases' and 'not applicable' responses.

Limitations of the camp-based assessment

- The information provided in this report is based primarily on KI (Key Informant), FGD (Focus Group Discussions) with adolescent and adults from the community and KI interviews with service providers. It does not represent the views of the entire population or include representatives from all service providers in the camp, but rather provides an overview of priority child protection and gender-based violence concerns ;
- Not all possible protection issues were selected as topics on the basis of the desk review and consultations;
- Due to their sensitive nature, some issues related to GBV, in particular, were not posed directly, nor were they described using internationally recognised definitions, but were instead explored indirectly;
- Limited information was collected on children and adults' own coping mechanisms/resilience as this was not covered in the questionnaire. However, the report infers some information about coping mechanisms
- The impact on the children and adults' psychosocial well-being and issues children and adults may face as a result of the crisis were also not covered as other assessments have focused comprehensively[4] on these issues.

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[4] *Displaced Syrians in Za'atari Camp*; *Rapid Mental Health and PSS Assessment*, IMC and UNICEF, August 2012.

Report of findings

The findings presented in this report were drafted by a small reporting group (UNICEF, UNFPA and Save the Children) and reviewed and finalized by the Task Force as an inter-agency effort. The tentative findings were compiled along with draft recommendations, which were then reviewed and edited by the Task Force and the Child Protection and Gender-based Violence field group in Za'atari.

Key Findings

1. Access to Information and Services

1.1. Access to information

Organisations in the camp are providing information on available services to the refugee population through awareness raising activities such as leaflets, sessions, trainings or directly through service provision.

Fig.1 Most Important Sources of Information
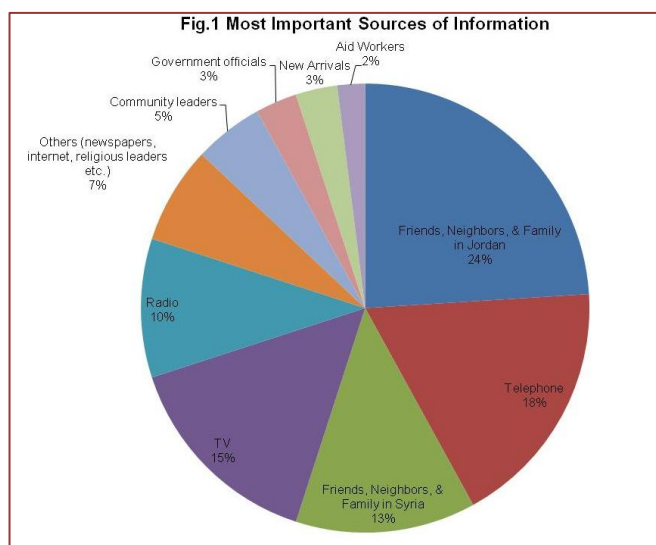
In order to gauge access to information for camp residents, interviewees were asked what they considered their most important sources of information within the camp. Figure 1 represents the 62 responses received from KI regarding the most important sources of information within the camp. Fifteen (24%) KI reported that the community relied primarily on friends, neighbours and family in Jordan; followed by 11 (18%) mentioning telephone/mobiles, while 9 (15%) television and 8 (13%) friends, neighbours and family in Syria.

Longer-term camp residents have managed to bring in household commodities such as television sets and it is common for friends and neighbours to converge at a tent to watch the latest news in Syria. However, for purposes of information and services available within the camp, word-of-mouth appears to be the most common source of transmission. This may be due in part to the lack of other available mechanisms to access information. Only 5% of respondents mentioned service providers as a source of information.

There is a need to implement a camp-wide information and dissemination system, including through key community members, in order to improve access to information, as well as access to services.

1.2. Access to Services

Since the opening of Za'atari camp, a number of organizations have been providing a range of services to the camp residents. Camp management and general coordination is under the responsibility of JHCO (Jordan Hashemite Charity Organisation) and UNHCR. WFP (World Food program) and SCI (Save the Children International) are responsible for food distribution, while JHAS (Jordan Health Aid Society), JHCO, and NRC (Norwegian Refugee Council) are responsible for distribution of non-food items. UNICEF, THW (German Federal Agency for Technical Relief) and ACTED (Agency for Technical Cooperation and Development) manage water and sanitation facilities, and hygiene in the camp. JHAS offers primary and reproductive health services, while the French, Moroccan, Italian and Saudi

hospitals offer a range of health services. UNHCR and IRD (International Relief and Development) are responsible for community services in the camp. UNICEF, NRC, Right to Play, IFH/UNFPA, IMC (International Medical Corps), Finn Church Aid, Questscope, and Mercy Corps are involved in the provision of formal and non-formal education, including youth activities while UNHCR, UNICEF, UNFPA/IFH, IMC, SCI, UNWomen/INTERSOS and IRC (International Rescue Committee) provide protection services, including specialized CP and GBV services.

Fig.2 Awareness about Services in the Camp
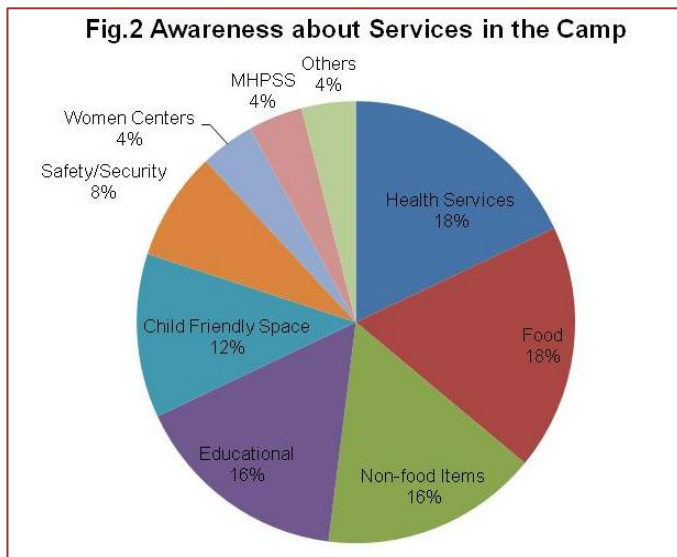
KIs reported that communities are mostly aware of services regarding health, food, Non-Food Items (NFIs), followed by Child Friendly Spaces (CFS). The first three are expected responses since they represent the most basic needs prioritized by displaced communities. The fact that they are aware of CFSs is a good indication of the outreach capacity such centres have in the camp.

While not prioritized by KIs to a particularly high degree in terms of protection services, the FGDs highlighted that girls, boys and young women are likely to spend part of their time in CFSs, and Women and Youth centres.

Interviewees were further probed on issues that might restrict people's access to services in the camp and how they might affect different groups.

Ten (34%) KIs conveyed that services where males and females were mixed hindered women's access while nine (31%) mentioned it hindering girls' access. Similarly, lack of female staff was also perceived as adversely affecting women's and girls' access by respectively 11 (39%) and six (21%) respondents. However, 10 (36%) of KIs did not consider mixed services an obstacle.

Thirteen (42%) KIs conveyed that girls might face difficulties in accessing services because they are not permitted by their families to access services, while the same was reported for women by six (19%) and to a lesser degree for boys by three (10%) respondents. This may be attributed to social and cultural norms surrounding female roles, layered with concern of personal safety that ultimately limits their access to services.

Distance of services was considered an issue primarily affecting women and girls by 15 (41%) and 12 (32%) respondents respectively. Issues of harassment by other community members while accessing services, particularly while walking to services, was highlighted during FGD, in particular when it comes to girls.
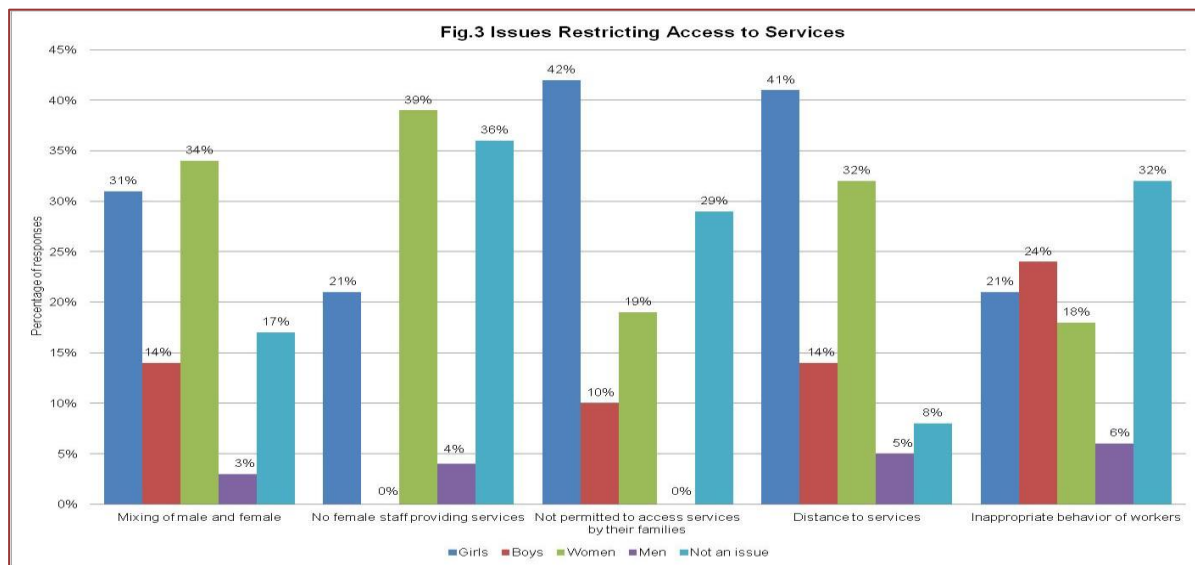
Both KI and FGDs with men and boys further revealed that while men and boys mostly access distributions, they routinely experience overcrowding and fighting there. The Safety Audit also highlighted similar concerns with NFI distributions being referred to as "unsafe for our men and boys."

11 KIs (32%) said that inappropriate behaviour of workers towards beneficiaries was not considered an issue affecting access to services. However, this issue was identified as potentially hindering access to services for boys by eight (24%), for girls by seven (21%) and to a lesser extent for women by six (18%) KIs. The question was posed with the intent of exploring the issue of sexual harassment by workers (both humanitarian and refugee workers); however it seems to have been interpreted in a wider sense, and related more to workers being "rude" and "not respectful".

> *"We hear a lot of harassment on our way to school from the young men"*
>
> *"I stopped going to school because of what I hear from the boys on my way to and from school"*
>
> FGD participants highlight issues of harassment in the camp

Fig.3 Issues Restricting Access to Services

When questioned about whether beneficiaries were "asked to do something inappropriate to access services", 17 (57%) KIs did not consider this an issue. However, it was identified as potentially hindering access to services for women by five (17%), boys by four (13%) and men by three (10%) KIs. This question was posed with the intent of exploring possible incidents of sexual exploitation and abuse by service providers.

Feedback was provided regarding existing services not meeting the needs of girls, boys, women and men in the camp. Ten (28%) KIs did not consider this an issue while the gaps in existing services were mostly reported for girls and women, by eight (22%) each, and six (17%) for men and four (11%) for boys.

Eight (26%) KIs reported that women might face particular fear of being stigmatized when accessing certain kind of services, while the same was reported for men by seven KIs (23%). In general, people not having influence on the type of available services was reported as an issue for women, girls and men respectively by eight (22%) and seven (19%) KIs. Eleven (30%) of KIs did not consider this as an issue. Generally, a lack of understanding on service availability was reported throughout age and gender categories.

Fig.4 Issues Restricting Access to Services
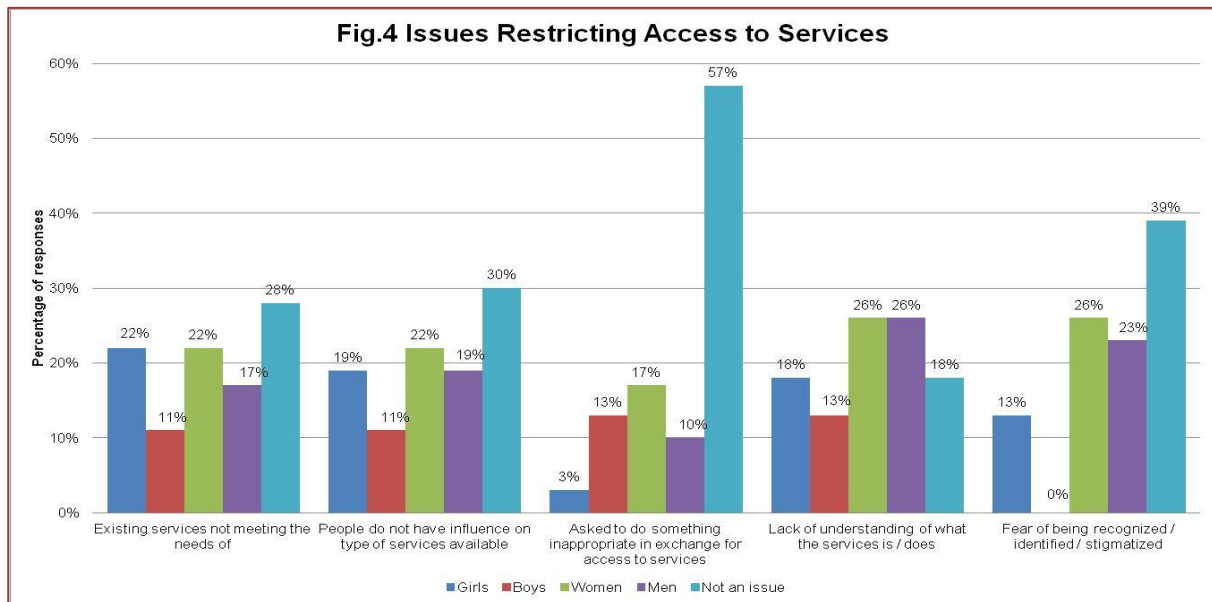
It is clear from responses to this section that girls and women were perceived as disproportionately affected in accessing services due to certain factors, such as distance, absence of female personnel, and permission from families. However other issues, such as disrespectful behaviour of workers, lack of influence over service provision and delivery, and fear of being stigmatized also affect men, and in certain cases boys. It can be argued that many of the issues affecting access to services for both females and males are related, at least to a certain degree, to gender roles.

Fig.5 Groups of People Most Excluded from Services
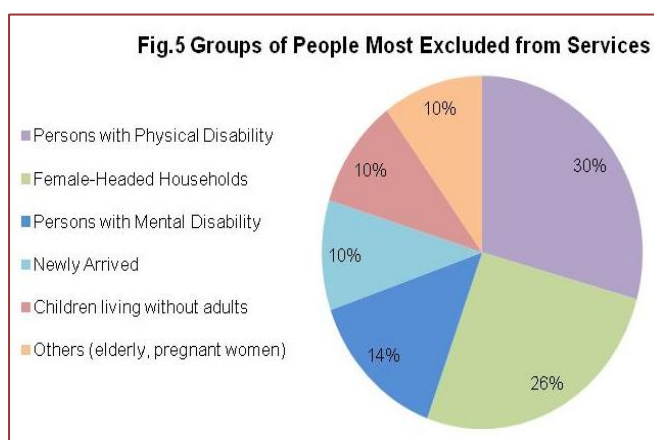
Among those most marginalized from accessing services, KIs identified persons with physical disabilities, female-headed households and persons with mental disabilities.

The lack of access for those with disabilities was reiterated in the Safety Audit where community members shared that people with disabilities and the elderly relied heavily on families for assistance in accessing services,

including for using toilet facilities. In some instances, there is positive community involvement in helping vulnerable persons and the Safety Audit cites an example of the community building a special latrine for a man on a wheelchair.

2. Exploitation of Community Members and Income Generation Activities

2.1. Child Labour

The desk review solidified the understanding that child labour in Syria is common and that it is socially acceptable for children to work in order to support their families. The Syrian Commission for Family Affairs (SCFA) and UNICEF 2009 report on the Situation Analysis of Children (SITAN) in Syria states that although Syria has ratified the International Labour Organization (ILO) Convention on child labour, the practice is still prevalent in poorer regions. In addition, findings from the Interagency Rapid Needs Assessment (May 2012) found that children are encouraged by parents and caregivers to join the labour market since it might be easier for children to find jobs since adults need to secure a work permit. Currently, identified cases of child labour in Za'atri Camp are referred to UNHCR for further follow up (assessment, counselling and referrals to basic services if needed).

Fig.6 Purposes Boys Are Being Used for in the Camp
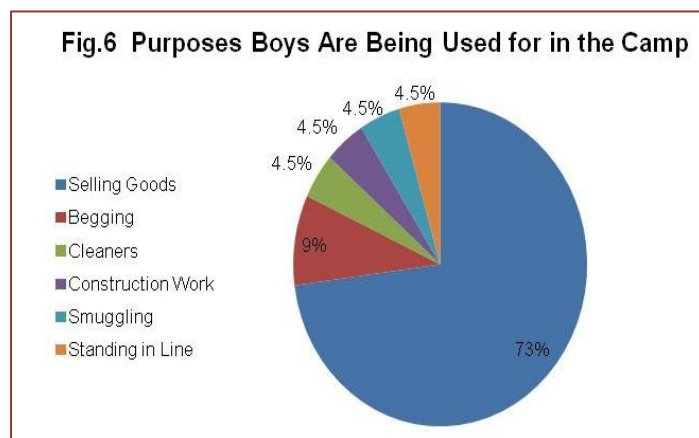
The KI interviews uncovered a strong belief that children in the camp were used for financial or material benefits of others. Eighteen (67%) respondents asserted this while the remaining either disagreed or mentioned that they did not know if children were working or not. Eighteen (86%) KIs perceived the children being used for financial or material benefit to be boys while remaining three (11%) thought them to be girls.

Fig.7 Purposes Girls Are Being Used for in the Camp
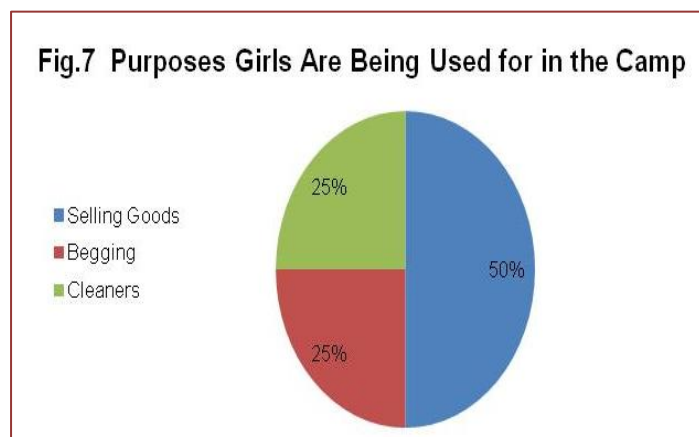
When asked to identify the various tasks that children were engaging in for material gain, out of 22 responses for boys, 16 (73%) respondents perceived selling goods as the most common form of work for boys followed by two (9%) responses for begging and one response each (4.5%) for working as cleaners, construction work and standing in line for adults waiting to receive food or NFIs. Out of four responses for girls engaging in material work, two identified them as selling goods while one response each was given for begging and working as cleaners. Furthermore, in FGD sessions with both

adolescent boys (15-17 years) and with young males (18-24 years), it was pointed out that some adults have asked boys to steal items from other tents.
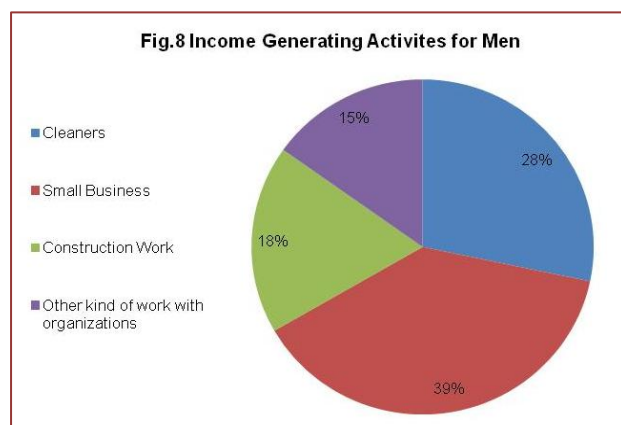
Some KI respondents had a sense that children were being offered opportunities (work) outside of the camp. Nine (33%) respondents confirmed this happening in the camp, equally for boys and girls. FGDs highlighted that adolescent boys and young men are sometimes offered jobs and are bailed out from the camp to work with Jordanians. While FGD highlighted that offers to take girls out of the camp are usually connected to marriage proposals, there is a general sense that in the majority of cases these offers are not accepted. However, lack of adequate monitoring mechanisms at this time do not allow service providers to quantify or estimate adequately this situation.

"We know a father in our street that is injured and cannot work, (he) used to send his 12 year old girl to gather bread and sell it afterwards. When people told him that she is being harassed he stated keeping in the tent. But now he is sending his 6 years old girl instead thinking that people will not harass her. However, once this little girl was lost and could not get back to her tent."

A FGD sessions with adolescent girls

2.2. Income generation activities and Exploitation of Adults

With regards to adults, 16 (59%) of the KI respondents asserted that outsiders were offering to take adults away from the camp, offering them jobs and other income-generating alternatives. All respondents stated this only for adult men, while adult women were never mentioned. FGDs participants shared specific examples of Jordanians offering camp residents jobs in collecting olives, sewing, and working as hair-dressers and as guards in a farm.

Fig.8 Income Generating Activites for Men

- Cleaners — 28%
- Small Business — 39%
- Construction Work — 18%
- Other kind of work with organizations — 15%

Fig.9 Income Generating Activities for Women

- Cleaners — 64%
- Small Business — 14%
- Working with Organizations in the Camp — 14%
- Begging — 4%
- Transactional Sex — 4%
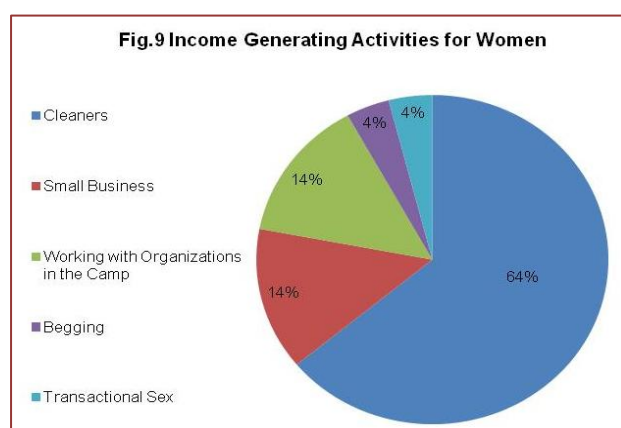
There are limited work opportunities in the camp for male adults. Cash-for-work opportunities are set at a standardized rate of JD1.000/hour. The majority of KIs reported that men in the camp are mostly employed by organizations, either as cleaners, construction workers or engaged in other kinds of work such as teaching. KIs also shared that men run small businesses. Male adult FGD participants shared that while men do leave the camp for work, a number of them returned because they did not like the work and/or because the cost of living outside the

camp was too high. The FGDs also revealed that many men believe that "the majority have nothing to do," in the camp and the same is believed to be true for adolescent boys.

Women are also engaged in work opportunities. Majority of responses revealed women working as cleaners, engaging in small business opportunities and working with organizations in the camp. There was one response about a woman believed to have had sex for exchange of money (transactional sex). On the other hand, women participating in FGDs asserted that they never heard of such an issue in the camp.

3. Children without parental care (unaccompanied and separated children - UASC)

The majority of the children who have fled from Syria to Jordan have come with family members. Unaccompanied and separated children identified through UNHCR registration comprise 0.5% of the population. However, it is anticipated that the actual number is around 2% based on other on-going population assessments[5].

Almost half of the unaccompanied and separated children have come with their extended families (separated) and the remaining half have come with unrelated adults or alone (unaccompanied). In Za'atari, 342 unaccompanied children and 307 separated children are registered with UNHCR. Sixty-eight (68) % of children arriving without any adult care are aged between 15-17 years and 89% are male.

For many children who have been identified as separated from their parents or previous primary caregiver, the separation was voluntary, being for protection, survival or economic reasons, or for the purpose of family reunification with relatives in Jordan. This heightens the need for rigorous verification systems of family links prior to family reunification to guard against potential abuse and exploitation of this vulnerable group. Additionally, this is important in order to provide targeted support services and prevent secondary separations (that can be caused if interventions only target unaccompanied and separated children).

According to the desk review, there are reportedly some children who are travelling alone but join unrelated families when crossing the border in order to enter more easily. This may prevent these children from being registered as unaccompanied and therefore may prevent essential child protection services from being provided, which can determine whether this spontaneous foster care is safe and conducive to their well-being and development, and prevent risk of exposure to abuse and exploitation. However, these relationships could also be a sustainable and positive care arrangement and should therefore not be undermined before an assessment has been made.

While UASC are being documented in the camps, over 60% are then leaving the camps, either through the bail-out process or simply by absconding. Once children have left the camp it is challenging to identify them in the host communities unless contact details are documented at the point of UNHCR registration or when identified by partners.

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[5] REACH- Household Survey UNHCR/UNICEF

Since the provision of targeted support to unaccompanied children started, UNICEF and UNHCR partners have found that a number of children are not unaccompanied but rather children sent by their caregivers in the hope of receiving additional rations and NFIs (secondary separation). To prevent secondary separations, support services provided to unaccompanied and separated children should be equitable to those provided to the wider population where possible.

In Za'atari IRC runs a transit centre for segregated overnight care for UASC upon arrival. There is, so far, no alternative care system in place in the camp and it is challenging to identify foster families for unaccompanied children, particularly as the majority of the unaccompanied children are adolescent boys who would traditionally not be welcomed into the family home if there are females present. Therefore, the establishment of systems and services for supported independent living in the community are a priority. Alternative care options are under discussion with Jordanian authorities and relevant organizations.

Fig.10 Means of Community Support of Unaccompanied Minors

- Take Child to Agency/NGO
- Try to Find Their Families in the Camp
- Take Child to a Community Leader
- Support Child in Accessing Basic Services
- Find Someone in Community to Care for the Child

42.1%
31.6%
10.5%
10.5%
5.3%
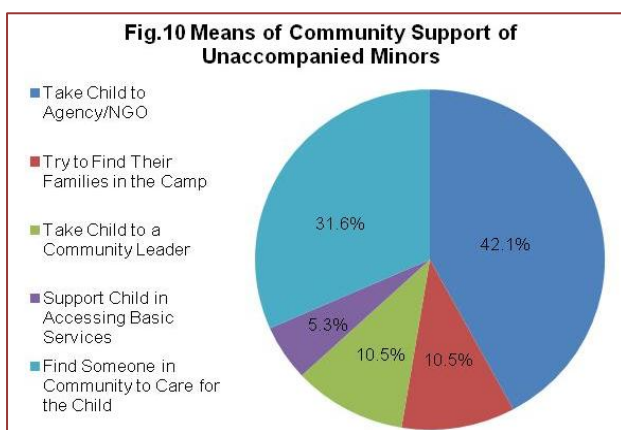
The majority of KI respondents (88%) believed there were children in the camp living with families that were not directly related to them (unaccompanied). For those believed to be unaccompanied, KI respondents reported that the community primarily supports these children by taking them to a camp agency/NGO that works with children. Other responses to community support are recorded in Figure 10.

Generally, these behaviours indicate protective mechanisms for unaccompanied children, an awareness of services within the camp to assist them and, in the absence of services, community structures that are still conducive to providing basic care for the child.

4. Children Associated with Armed Forces and Armed Groups (CAFAAG)

4.1. Children associated with armed forces and groups in Syria

A report from the UN Secretary-General to the Security Council on June 11, 2012[6], on children and armed conflict highlights violations against children by Syrian Armed Forces, intelligence forces, and pro-government militias. The violations include targeted killings, torture of children in detention (including sexual violence)[7] the use of children as human shields, and attacks on schools and their use for military operations. The report also cites credible allegations that armed opposition groups, including the Free Syrian Army (FSA), are recruiting children as soldiers.

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[6] http://www.hrw.org/news/2012/06/11/syria-stop-grave-abuses-children
[7] http://www.hrw.org/news/2012/06/15/syria-sexual-assault-detention

Ten (37%) KIs had not heard of children residing in the camp who worked for or were being used by armed forces or groups in Syria. Eight (30%) KIs shared that they did not know, while seven (26%) reported hearing about children living in the camp who had been working for an armed group in Syria. For those who had heard of these children, two respondents claimed to know between 11 and 20 such children, while one respondent shared knowing 1-5, one 21-50, and one 50 or more children currently living in the camp who used to be part of armed groups.

In male FGDs, boys and men shared that many children had joined armed groups in Syria. They also shared that "most" of the armed groups are comprised of adolescent boys between the ages of 15-18. Given that such a high proportion were actively engaged in the conflict, FGD interviewees said it is inevitable that many of under 18 males that currently are living in the camp have been part of armed groups in Syria in the past. Female FGDs also revealed similar information. Women and girls shared that many of them had brothers and cousins who had been involved with armed groups and were now living in the camp. They also pointed out that there were many unaccompanied male youth in the camp, some as young as 12 years old, who ran away from the armed groups in Syria. There was no mention of children working for or used by the Syrian forces.

Examining the Syrian social viewpoint, male adolescents between the ages of 16-18 are considered "men" and take on adult roles of income-generation and familial responsibilities. Hence, this adult role is extended at a time of conflict to include fighting for their country. While most of these are believed to be male children, girls and women in FGD sessions said they too had participated by cooking for the armed groups, particularly when soldiers had come to their houses.

4.2. Children Returning to Syria to Join Armed Forces or Armed Groups

Seven respondents (26%) answered affirmatively when asked if they had heard of children returning to Syria to join armed groups. Two respondents each said they knew 6 – 10 and 21 – 50 children who had returned back to Syria to fight, another two respondents claiming to know over 50 children who have done the same. One other respondent had heard of 11 – 20 children who had returned to Syria to join an armed group. Most respondents said they knew this through word-of-mouth, followed by their personal observation of children in the camp. FGDs also confirmed cases of male adolescents coming to the camp for medical treatment and returning to Syria after their physical recovery to continue fighting. Female FGDs also shared cases of boys and men who have returned to Syria, as well as mothers and fathers who would like to move back to Syria to support sons or fathers who are involved with armed groups.

The KI respondents and FGD interviewees believed that most of the boys who returned to Syria to join armed groups did so of their own choice. A smaller minority believed that peer pressure and pressure from family and relatives could be contributing factors. It can be supposed that some of these male returnees are unaccompanied male children and making decisions for themselves. This decision-making authority also stands for adolescent boys who are considered "adults." In such cases, they are given the autonomy to decide if they wish to stay in the camp or return to Syria.
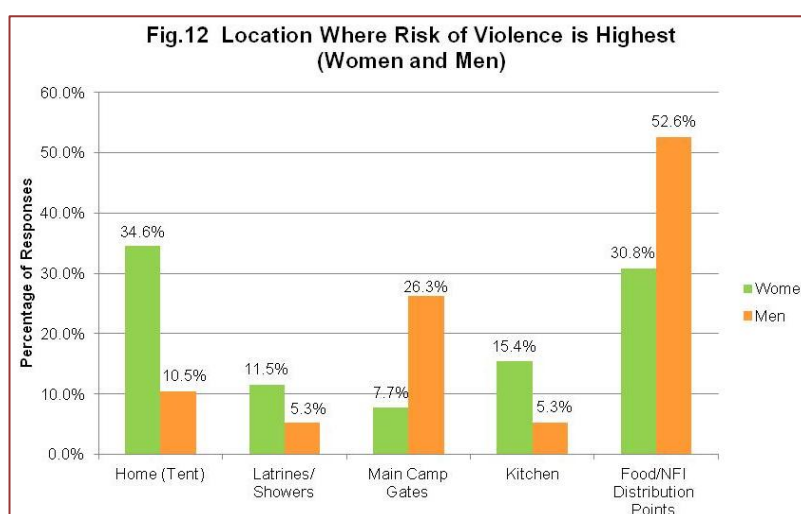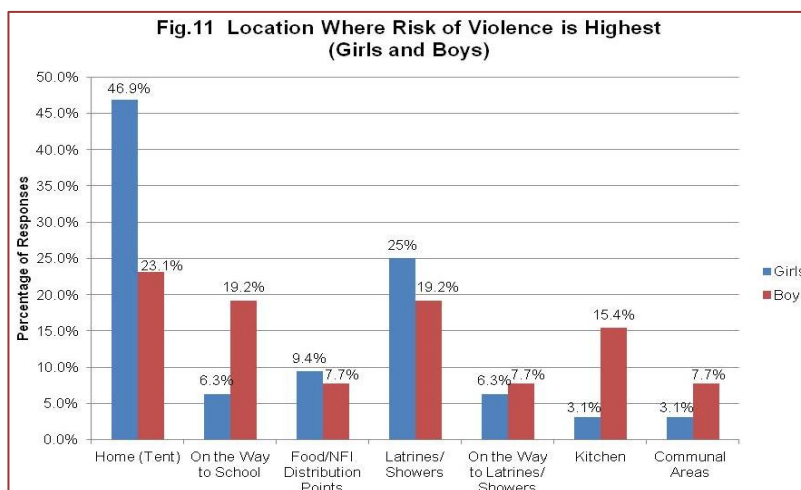
5. GBV and other forms of violence in the camp

Considering the sensitive nature of GBV topics, the KI questionnaire was prepared to ensure cultural appropriateness. Practically, this means that questions related to GBV were imbedded into other topics and asked using culturally accepted terminologies and approaches and starting with less sensitive questions and topics. The following paragraphs explore issues of violence in Za'atari camp, including GBV. First an overview of the most prevalent forms of violence in the camp is provided, followed by an in-depth analysis of domestic violence, a focused section on sexual violence, to conclude with a segment on early marriage. Issues related to other forms of exploitation and access to services, which at times are defined as GBV, are dealt in the initial paragraphs.

A number of organizations in the camp are actively working with the community to prevent and respond to all forms of violence in the camp. For example, SCJ (Save the Children Jordan) is responsible for handling cases of violence occurring in schools. Specialized activities for youth with behavioural issues are also available, while a range of informal and non-formal education activities for male and female youth are also conducted. More specifically on GBV, IMC provides case management for child survivors while IFH/UNFPA provides case management for adult survivors. UNHCR provides case management and referral services to the FPD (Family Protection Department) for serious cases which cannot be handled within the camp. Currently, there are no community-based safe houses within the camp, but for serious protection concerns survivors can be transferred to Dar al Wafaq shelter in Amman through UNHCR and FPD. There are two women's spaces, while another one will open in February. The centres offer recreational, awareness raising and counselling activities mainly for women and young women, and at different times of the day for men with a view to prevent and respond to GBV.

KI were asked to identify the three most prevalent forms of violence in the camp. Overall, 45 responses were provided in this regard. Twenty-one (39%) identified domestic violence as the most prevailing form of violence in the camp; followed by 16 (30%) stating civil violence; nine (17%) criminal violence and lastly eight (15%) gang violence. A majority of KIs identified females to be most affected by domestic violence, particularly between the ages of 12 to 18. Civil violence was reported far more prevalent among both adolescent boys and young men. Similarly, criminal acts were also mentioned as affecting young men between the ages of 18 to 25. Male and female FGDs reinforced some of these opinions, such as male adults and adolescents being affected and participating in civil violence. FGDs also noted peer violence is common amongst adolescents, particularly in adolescent boys.

While KIs reported home (tent) as the location where most violence occurs (as it correlates to the highest form of violence being domestic violence), other locations where the risk of violence is perceived to be the highest are discussed below according to gender and age.

Fig.11 Location Where Risk of Violence is Highest (Girls and Boys)

Percentage of Responses

- Home (Tent): Girls 46.9%, Boys 23.1%
- On the Way to School: Girls 6.3%, Boys 19.2%
- Food/NFI Distribution Points: Girls 9.4%, Boys 7.7%
- Latrines/Showers: Girls 25%, Boys 19.2%
- On the Way to Latrines/Showers: Girls 6.3%, Boys 7.7%
- Kitchen: Boys 15.4%, Girls 3.1%
- Communal Areas: Girls 3.1%, Boys 7.7%

Legend: Girls, Boys

Fig.12 Location Where Risk of Violence is Highest (Women and Men)

Percentage of Responses

- Home (Tent): Women 34.6%, Men 10.5%
- Latrines/Showers: Women 11.5%, Men 5.3%
- Main Camp Gates: Men 26.3%, Women 7.7%
- Kitchen: Women 15.4%, Men 5.3%
- Food/NFI Distribution Points: Women 30.8%, Men 52.6%

Legend: Women, Men

Women and girls repeatedly claimed during FGDs and the Safety Audit that the home (tent) is considered unsafe. They feel this because they are unable to lock themselves inside when alone. They also lack privacy, especially when changing clothes since they must first turn off the lights in the evening before changing. Overcrowding due to several family members living in the same small space, including males, also hinders their privacy. For girls, latrine/shower facilities were considered significantly unsafe spaces.

This was also highlighted in the Safety Audit with the sense of insecurity primarily related to lack of lighting in some areas of the camp and broken locks in latrines and showers. While this is problematic during the day, it is of serious concern during the night. Girls and women stated that they generally refrain from using toilets after 7 pm.

Girls and women tend to go in pairs or in groups to latrines, relying on safety in numbers. Also connected to latrines and showers is the general lack of lighting after dusk in the camp, restricting access to latrine facilities at night. This was also true of lack of lighting on the way to the latrine facilities and at water collection points.

Communal spaces were also recognized as vulnerable areas, and kitchens were seen to be particularly unsafe. A Safety Audit interviewee shared that she felt unsafe because of men who stood outside the kitchen and the lack of lighting within the kitchens. An FGD interviewee also expressed that single men entered the family communal kitchen specifically to harass women. The perceived feeling of insecurity in communal kitchens has led to some women preferring to cook on portable gas stoves outside their tents. This exacerbates existing concerns about fires caused by cooking near tents leading to loss of life or serious bodily harm and destroyed tents. The Safety Audit highlighted that in certain areas of the camp the community has agreed on forbidding boys older than nine years old to access the kitchen, allowing women and girls to carry out chores in a protected environment.

Boys were thought to be at most risk of violence by KIs when on the way to school, at the main camp gates and while they were around the camp's periphery. Playing areas were also identified as a potential location for violence among boys and the Safety Audit also extended this risk to girls in playing areas because of the lack of adult supervision and the presence of older boys.

Men were also believed to experience violence at the camp gates and KI respondents thought both men and women were at risk of violence at food and NFI distribution points. The FGDs and safety audit strongly supported this claim as one of the main points where there are on-going violent outbreaks, mainly due to overcrowding. For this reason, men usually take on the task of waiting in line during food and NFI distributions but women, particularly from female headed households, do access these services and face similar risks.

Related to issues of violence, the Safety Audit examined security measures in place for the prevention of violence. The interviewees provided mixed opinions on this issue. Some community members said there were no formal community patrol systems but that everyone took collective responsibility to stay alert and address security issues as they came up. There was also a sense that security forces are stationed only outside the camp, while there is no security available inside the camp. From the Safety Audit, it is clear that a greater involvement of the community in patrols and related activities is necessary.
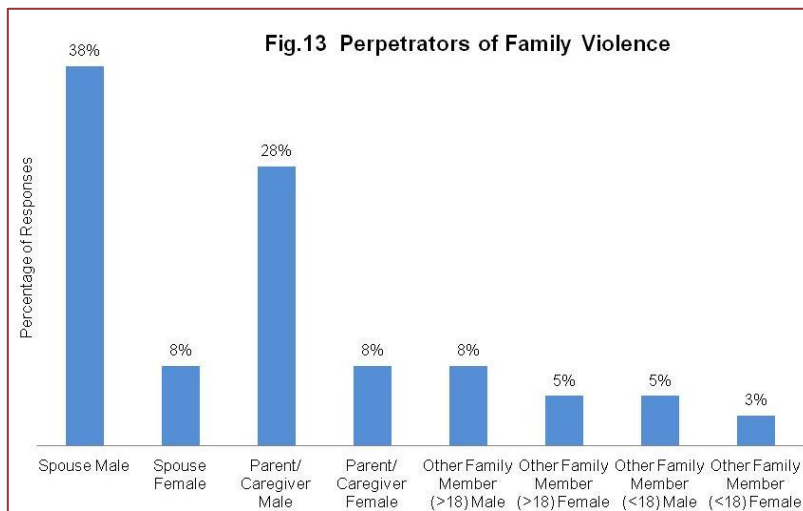
5.2. Domestic Violence

The desk review contributed to this issue with reference to a report released by The Syrian Commission for Family Affairs (SCFA) and UNICEF 2009 on the Situation Analysis of Children (SITAN) that noted despite corporal punishment being prohibited, children were subject to violence at home and in school. The report stated that males both experience and practice violence more frequently than females and that the level of violence was worse in rural Syria. Furthermore the Multi Indicators Cluster Survey (MICS) in 2005-2006 reported 87% of Syrian children between 2- 14 years having experienced violent discipline (physical punishment and/or psychological aggression), with no significant difference between girls and boys. These reports lend an understanding that domestic violence existed before the crisis and that countering such actions within the camp will require a gradual process of community education and guidance, addressed within a larger framework of violence prevention.

Twenty KI (74%) believed that domestic violence occurs in the camp; while four (15%) shared that it does not and the remaining three (11%) did not know. Seven (35%) responses identified that the majority of families experience domestic violence but another nine (45%) responses stated a minority of families do.

Domestic violence predominantly takes place within the tents. The immediate concern about in-home violence is the danger of these acts going unnoticed, unheard and the secrecy that reinforces perpetrator's sense of power and control over the victim. Domestic violence also goes largely unreported as community attitudes, particularly in strong, patriarchal societies, maintain that the realm of the home is private and actions in the home

are not to be held for public judgment. Hence, this knowledge is important in designing interventions that rely on community-based mechanisms and dialogue to address domestic violence.

Eighteen (67%) KIs stated that women are more affected by domestic violence then men, while 12 (44%) stated that girls are more affected than boys by domestic violence. However, FGDs highlighted that boys and young men were also strongly affected by domestic violence.

Fig.13 Perpetrators of Family Violence

Fifteen (38%) KIs mentioned male spouses and 11 (28%) stated male parents/caregivers as the main perpetrators of domestic violence. Furthermore, three (8%) KIs each mentioned female parent/caregiver, other adult male family members and other adult female family members as perpetrators of domestic violence. The FGD sessions verified that perpetrators were usually males such as fathers, husbands and older brothers. In a FGD conducted with young women between the ages of 18-24 years, mothers-in-law were also identified as perpetrators of domestic violence.

Given the high frequency of adult women believed to be affected by domestic violence, and the corresponding belief that male spouses are the main perpetrators, there is a strong likelihood of intimate partner violence taking place in the camp. This type of violence is complex as it is fuelled by cultural beliefs and deeply-rooted gender norms that are exacerbated in crisis settings. For example, the desk review shared that Syrian women who participated in an inter-agency rapid assessment in 2012[8] disclosed that their husbands were under immense stress, and they anticipate this to lead to heightened levels of domestic violence. It was observed in this report that women generally accepted this eventuality, and in certain instances, believed the abusive behaviour was justified given their dire circumstances. FGDs confirmed that one of the main justifications given for this violence was stress caused by lack of money and employment. FGDs with adult women reported that there will be a reduction in violence as men find jobs.

KI respondents thought that girls and women survivors often turn to family, friends and teachers for help, with a small percentage seeking help from religious leaders and NGOs. They felt the same pattern is true for boys, with some also seeking medical assistance in clinics. Meanwhile men were also primarily believed to reach out to family members, followed by friends, NGOs, religious leaders and even clinics. A point of deliberation here is

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[8] Inter-agency assessment, July 201

perceptions versus reality of family and friends as support persons. As mentioned above, family privacy is a valued cultural norm and is especially so when related to matters of family honour. It is less likely that domestic violence incidents are shared outside the family and if shared, it is unknown whether the confidante would seek services for the survivor from outside the family. However, FDGs with women and girls also referred to protection organizations as a way of dealing with violence.
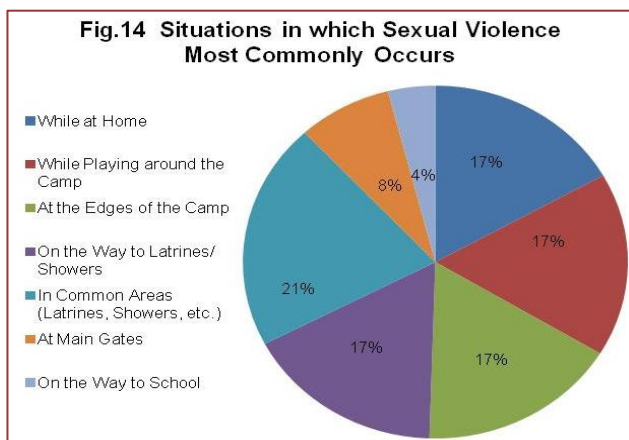
> *"The young women can come here (protection agency) ... and the psychologist here can help her."*
>
> A FGD sessions with adolescent girls highlighted how they can access support

Furthermore, though the interagency case management report, protection organizations in the camp confirm that a number of survivors of domestic violence are willing to access protection services and psychosocial support.

5.2. Sexual Violence

Out of the 27 respondents, 15 (56%) reported to have not heard of sexual violence incidents in the camps while the remaining 12 (44%) had heard of cases. Eight respondents claimed they had heard of 1-2 incidences of sexual violence while three stated 2-5 cases. It is worth mentioning that FGD with adolescent girls and women clearly highlight that community members are very often aware of the same high profile cases that occurred in the camp.

Fig.14 Situations in which Sexual Violence Most Commonly Occurs

- While at Home
- While Playing around the Camp
- At the Edges of the Camp
- On the Way to Latrines/Showers
- In Common Areas (Latrines, Showers, etc.)
- At Main Gates
- On the Way to School

The figure to the left illustrates KI responses on the most common areas where sexual violence is perceived to occur.

With regards to sexual violence, communal areas are deemed slightly riskier than homes. Associated with communal areas are paths leading to latrines/showers that are similarly believed to be high-risk areas. In addition to poor lighting and lack of security, the potential perpetrators at these locations may be contributing factors to insecurity in these communal areas. Another observation is the small but significant presumption that playing around the camp is considered unsafe and increases the risk of sexual violence. In using the word "playing," the connection is to children and the belief that such a normal activity is perceived as unsafe by parents. This demonstrates that parents are not confident about adequate security and supervision at these sites which leads to children, especially girls, being restricted access to playgrounds and friends.

Women are thought to be the main survivors of sexual violence. With regard to children, KI respondents felt that girls were three times more likely to be targeted for sexual violence than boys. The threat to boys, though smaller, nevertheless exists.

When asked about perpetrators of sexual violence, 11 KI asserted that community members were more likely to be perpetrators in comparison to five respondents who identified family members. The rest of KI either did not know or did not provide an answer. None of the KI respondents, Safety Audit and FGD interviewees mentioned the police, security guards, teachers and aid workers as perpetrators of sexual exploitation and abuse.

It is worth considering that sexual violence committed by an outsider is more likely to get the community's attention as compared to sexual violence within the home. As there is very limited pre-conflict information from Syria on patterns of sexual violence within the home, it is challenging to know the trends and beliefs on this topic.

Women, girls and boys are largely believed to turn to a family member to seek support for sexual violence. Out of 15 responses for girls survivors, eight (53%) mentioned family members followed by three (20%) responses stated NGOs. Similarly, from the 17 responses regarding women survivors, five (29%) mentioned family members while three (18%) responses stated NGOs.

The desk review briefly examined the phenomenon of honor killings that are believed to be a widespread practice in Syria though this phenomenon remains largely undocumented. A final report shared by the Interagency GBV Advisor in June 2012 recommended that male attitudes towards women living in compromised conditions be explored as they may increase the risk of exposure to circumstances that may be "morally damaging to the family."

> *"There was an old man who wanted to rape a married girl, 17 or 20 years old. She screamed before anything happen(ed), everyone came and her husband injured the man. The police arrested both (the old man and the husband). People said she exposed herself into a scandal because she reported."*
>
> A FGD participant highlights community attitudes toward reporting violence

With regard to male survivors, from the total 15 responses, four (27%) mentioned that men would not seek support and two (13%) believed they were likely to turn to a friend, NGO or religious leader. The refusal to seek support reiterates the global culture of silence that permeates and exacerbates male violence and is particularly evident among boys and men living in conflict and displacement. The desk review highlighted that since the conflict, reports have been published on sexual violence being used as a form of torture against men and boys[9]. While sexual violence against boys and men may be perceived to a lesser degree within the camp setting, it is important to recognize the specific needs and challenges of male survivors.

A promising finding in the KI interviews was that for cases of sexual violence within the camp, women, men and girls would seek out the police and NGO services. Knowledge of health facilities for sexual violence survivors were also shared in the Safety Audit.

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[9] http://www.hrw.org/news/2012/06/15/syria-sexual-assault-detention

5.3. Early Marriage and other Marriage Practices

Service providers in the camp have been aware of the issue of early marriage since the onset of the emergency, as marriage under the age of 18 is a culturally accepted practice among the Syrian community. The 2009 UNICEF Situation Analysis of Children in Syria (SITAN) noted that 13% of women between the age of 20 and 24 had married before the age of 18 in Syria. Marriage under the age of 18 in Jordan is illegal, however under certain conditions it can be approved by a court. When marriage takes place under 18 years of age, often through a Sheikh and not verified in court, UNHCR counsels the child and the family on the marriage law in Jordan as well as its legal and social consequences. When cases of children at risk of early marriage are referred, UNHCR closely coordinates with relevant authorities and actors to prevent the marriage. Furthermore to prevent early marriage, IFH/UNFPA provides girls and their families' information and guidance about the social and health issues related to early marriage and pregnancies. Reproductive health and family planning services are also available in the camp though JHAS/UNFPA and GSF (Gynécologie Sans Frontières).

Traditional marriage customs including early marriage were highlighted by the KI and reiterated in FGD sessions. The majority of the KI believed that the socially acceptable age for marriage for girls within the Syrian community is 15-18 years. This is generally regarded as the accepted age range for marriage in Syria and therefore it is not necessarily considered as early marriage. In FGDs, males including adolescent boys confirmed that the age considered normal for marriage for a girl ranged from 13 years and above. Both KI and FGD interviewees affirmed boys were married mainly between the ages of 18-25 years. It was raised in a FGD session that boys were generally engaged after their military service, which is usually when they are 18 years old.

An interesting point noted was that both males and females believed the age of marriage, particularly for girls, is now being delayed due to the conflict and resulting displacement. In FGD discussions, when the age of marriage question was posed to females and males, their answers were separated by two distinct categories, "age of marriage in Syria" and "age of marriage in the camp".

The prevailing uncertainty, lack of negotiation and prestige lost due to lack of jobs and wealth were mentioned as some reasons for delaying girls' marriages as well as the unstable environment not being conducive for the start of long-term relationships.

Sixteen (59%) KI respondents did not know of any girl under the age of 18 who was married or was

> *"When we were in Syria, 15 was accepted for a girl to get married and if she is 18 and not married yet, people will start talking badly about her, but now in the camp after 20 is a good age."*
>
> A FGD participant highlights changing community attitudes toward age of marriage

> *"We know a lot of engaged people who broke up after they came to the camp. They say it is not the right environment to get married in…"*
>
> A FGD participant highlights changing community attitudes toward age of marriage

planning to marry since after arrived in Za'atari Camp. Five (19%) respondents said they personally knew of 1-2 girls while another five (19%) said they knew of 2-5 girls all under the ages of eighteen who were either married or planning to get married in the camp. In contrast, 22 (81%) respondents said they did not know of any boy under the age of 18 who was married or was planning to get married while two (7%) respondents each felt they knew 1-2 boys and 2-5 boys who were in some stage of the engagement and marriage process.

However, FGD sessions, particularly with girls and women uncovered that girls receive marriage proposals from Jordanian men and Jordanian mothers who want to marry their sons to Syrian girls, most of which are reportedly refused. In fact, only two (7%) KI reported knowing of girls who were married outside the Syrian community. According to FGD, people in the camp also receive proposals from men in other countries. However, none of the KI personally knew of any boy or girl from the camp who got married and then moved to another country.

In discussions with girls and women, the sentiment expressed in refusing proposals did not necessarily seem to be related to the age of marriage or the unwillingness to consider those proposals. The reasons reflected more on matters of pride and being disrespected for being refugees.

FGDs with women and girls also highlighted specifically the impact of raising awareness conducted on the topic of early marriage. In the FGDs, some girls also pointed out the difficulties of early marriage and why this practice is disadvantageous to a girl's physical and psychological development.

As the emergency situation continues and the burden of economic hardship worsens, these threats to early marriage have the potential to increase and compromise girls' rights and quality of life.

The KI interviews did not provide any information on temporary marriages where at least one partner is from the camp. This was due to interviewees asserting very limited or no knowledge on this potential practice. Very limited information was also uncovered about forced marriages.

"They think that Syrian girls get married for free or for cheap"

"The men refused to get their daughters married to outsiders, because the groom's family will always look down at her and treat her with disrespect."

FGD participants highlight attitudes of the community towards certain marriage proposals

There are awareness sessions on early marriage that helps us to educate our husbands and kids"

"We learned now that early marriage is negative, because a child can never raise a child"

FGD participants highlight the positive

"From 16 – 20 years is the age for a young girl to live and it is her right to think as a girl."

"I was married when I was 15 years and had two abortions...I was not able to think clear and did not know if it was my fault. I am 19 now with a 9 months baby, (I) had a very hard delivery....I still feel I am too young to be a mother."

FGD participants highlight the positive affect of raising awareness

Recommendations immediate and longer term

Improve Security *Advocate for improvement of security inside the camp to reduce violence and gender-based violence (GBV) particularly by:*	Responsible sector
1. Immediate actions	
Increase camp lighting in strategic/insecure areas in the camp, in particular around common areas as WASH facilities and kitchens	Camp Management /WASH
Mobilize the community to ensure common spaces in the camp are well maintained, in particular when it comes to their safety features, e.g. establish WASH committees	Camp Management /WASH
Continue to liaise with actors involved in registration and camp management to ensure that vulnerable households and children at risks are placed closer to services in the camp	Camp Management
Continue to advocate for controlled access to camp	Camp Management
2. Medium and long term actions	
Continue to liaise with actors involved in camp management and provide inputs for site planning and camp management and ensure children, youths and women are consulted, in particular vulnerable groups as female headed households, unaccompanied children, children and adults with disabilities and elderly people	Camp Management
Increase Jordanian police capacity and enhance patrolling, also inside the camp, and work to build trust between police and refugee/host community	Camp Management
Advocate with law enforcement agency to increase their presence and ensure that individuals in the camp are held responsible when breaking the law	Camp Management
Conduct regular Safety Audits	CP&GBV

Promote self-protection through community based networks *Engage communities to develop effective and representative protective structures, particularly to address domestic and sexual violence, by:*	Responsible sector
1. Immediate actions	
Strengthen and formalize refugee community-based security committees to promote self-protection	Camp Management
Ensure linkages between community-based security committees and relevant community based protection structures, as well as the links to camp management and the police	Camp Management
Ensure gender balance within community-based security committees and, particularly, in the security leadership structures	Camp Management
Engaging inter-agency collaboration on developing and strengthening community security activities	Camp Management
2. Medium and long term actions	
Continue to empower existing child/youth and women's forums to identify and raise security concerns with camp management and security agencies	CP&GBV
Support parents and other care givers ability to re-establish their capacity for good parenting as to better understand and support their children	CP&GBV
Strengthen peer to peer support (among both children and adults) as a way of involving individuals in supporting each other and build up their skills	CP&GBV
Empower key community members to support survivors of violence though provisions of information and referral	Health/Protection/ CP&GBV
Promote and strengthen safe behaviours among camp residents, particularly women and girls	Protection/CP&GBV

Address violence, abuse, neglect and exploitation *Prevent and respond to violence, abuse, neglect and exploitation by:*	Responsible sector
1. Immediate actions	
Ensure that distributions(e.g. food, NFIs) happen in a transparent manner and do not put individuals at risk of experiencing violence	Camp Management/NFI/Food/Shelter
Enhance identification, monitoring and follow-up of children at imminent risk of abuse, neglect, violence and exploitation by their parents or caretakers and ensure inclusion in the Best Interests Assessment/Best Interest Determination process	CP&GBV
Continue to improve case management and a multispectral approach for survivors of GBV and other protection concerns	CP&GBV
Ensure children engaged in child labour and their families/caregivers receive targeted assistance and support	CP&GBV
Continue to strengthen coordination between the protection and health sectors, and ensure that all health providers are trained on Case Management Referral, Psycho social First Aid, and protection referral pathway	Health/ CP&GBV
Continue to provide Code of Conduct trainings and ensure all volunteers and staff of agencies working in the camp have been trained and signed Code of Conduct	All sectors
Continue to provide PSEA (Prevention of Sexual Exploitation and Abuse) training for all involved volunteers, staff and agencies in collaboration with GBV actors	All sectors
Monitoring and advocacy for the establishment of clear and transparent procedures of bail-out system from the camp	Camp Management
Inform camp population on risks of exploitation and abuse connected to the bail-out system	Camp Management/ Protection
2. Medium and long term actions	
Ensure that separate distribution lines are always available for males and females	Camp Management/NFI/Food
Decrease crowding at distribution points, by increasing the number of distribution points	Camp Management/NFI/Food
Continue to improve case management for survivors of GBV and other protection concerns, including *Best Interests Assessments* for children at heightened risk and ensure appropriate response	Health/Protection/ CP&GBV
Support training of teachers on child rights and child protection as well as on appropriate methods of teaching and the need to treat all children equally and with respect	CP&GBV/Education
Engage education actors in strengthening of the PTAs (Parent-Teacher Associations) to address cultural obstacles to schooling (e.g. lack of parent support, discrimination, child labor, early marriage)	CP&GBV/Education
Promote and develop accelerated learning programs for children who have not attended or have fallen behind in school	Education
Advocate to ensure humanitarian actors are allowed to monitor the bail-out system	Camp Management

Address habitual acceptance of violence and harmful practices, including early marriage *Address the habits of day to day violence, and particularly domestic violence by:*	Responsible sector
1. Immediate actions	
Sensitize the community on the detrimental impact of domestic violence and raise awareness on alternative disciplining and mediation mechanisms	CP&GBV/Protection
Continue to provide awareness raising on issues relating to early marriage in particular on current laws, health, and social consequences, including though peer-to-peer education and the	Health/Protection/ CP&GBV

involvement of community/religious leaders	
Continue to provide reproductive health services and counselling to child brides and girl mothers	Health/Protection/ CP&GBV
2. Medium and long term actions	
Involve boys and men to prevent and address habitual acceptance of violence and harmful practices within their communities, particularly through the promotion of positive male role models	Health/Protection/ CP&GBV
Engage men and boys in different social and stress management activities to prevent violence	Health/Protection/ CP&GBV
Increase focussed support for child brides and girl mothers though specialised support mechanisms and by integrating them in existing programs	Health/CP&GBV

Improve care and protection for unaccompanied and separated children (UASC) *Address the needs for special care and protection of unaccompanied and separated children by:*	**Responsible sector**
1. Immediate actions	
Continue systematic identification of UASC through UNHCR Registration and reception processes, as well as active case finding in the community through awareness-raising	CP&GBV
Ensure all actors responsible for case management for UASC are using standardised tools for documentation, assessment, family tracing, verification of family links and reunification and sharing information to ensure 'children on the move' are appropriately supported	CP&GBV
Conduct and document verification of family links for all unaccompanied and separated children and coordinate this closely and rigorously with the government bail-out system	CP&GBV
2. Medium and long term actions	
Work closely with community-based organisations and structures to ensure the high numbers of UASC are provided with a level of monitoring and follow-up	CP&GBV
Provide interim care to unaccompanied children in accordance with inter-agency emergency guidelines and localised SOPs; work with the government to formalise longer-term care arrangements as appropriate	CP&GBV
Ensure any children in need of tracing are referred to the ICRC and the initial tracing request interview is jointly conducted with ICRC and the case management agency staff to prevent errors in documentation and to enable greater follow-up	CP&GBV
Establish a Regional UASC Taskforce to exchange information on patterns of family separation, tracing mechanisms and alternative care and to share tools and best practices in the region	CP&GBV
Strengthen and expand the BID (Best Interests Determination) panel and build capacity of case workers from each agency to ensure all UASC and children at heightened risk requiring a BID benefit from one	CP&GBV

Prevent recruitment and use of children by armed forces and armed groups (CAFAAG) *Mitigate the risk of children being recruited and used by armed groups or armed forces by:*	**Responsible sector**
1. Immediate actions	
Provide sustainable solutions (including counselling, vocational training, ensuring formal and non-formal education) for boys and girls at risk of recruitment or use of boys and girls by armed forces or armed groups back in Syria	CP&GBV
Conduct sensitation/awareness raising activities to youths, parents and other community members on children rights, including CAFAAG	CP&GBV
2. Medium and long term actions	
Monitor and report on possible recruitment or use of girls and boys by armed forces or armed groups	CP&GBV

Facilitate inclusion of children and adults with disabilities *Facilitate inclusion of children and adults with disabilities in educational and recreational activities and other services by:*	Responsible sector
1. Immediate actions	
Strengthen coordination agencies providing services for children and adults with disabilities ensuring provision of assistance tools, rehabilitative services and physical rehabilitation	Health/MHPSS
Engage with members of the Education Working Group to advocate for improved access to schools for all children (e.g. ramps, special desks, appropriate toilet facilities)	CP&GBV/Education
2. Medium and long term actions	
Strengthen inclusion of children with disabilities and other children at risk within the child friendly spaces, e.g. by designating particular times of the day with increased support, supervision and guidance	CP&GBV/Education
Sensitize community leaders, teachers, students, parents and caregivers on diversity and the importance of treating children with disabilities with dignity and respect and the impacts of abuse, neglect, violence and exploitation on girls and boys	CP&GBV

Expand information and increase access to services *Expand information and increase access to services to the refugee population by:*	Responsible sector
1. Immediate actions	
Develop and widely distribute key Child Protection (CP) and Gender-based Violence (GBV) messages, including through formats appropriate for children	CP&GBV
Disseminate Information Education Communication (IEC) materials in schools, health centres and other key places in the camps	CP&GBV
Promote community-based systems to ensure women and girls particularly are able to access services safely and comfortably	CP&GBV/Camp Management
Increase participation of community members, particularly women and girls, in shaping available services	CP&GBV
Ensure that female personnel are available throughout service provision in the camp, including though promotion of quota systems	All sectors
Continue to improve inter-agency referral across sectors	CP&GBV
2. Medium and long term actions	
Advocate for the creation and implementation of a camp-wide information and dissemination system	Camp Management
Ensuring information to in particular newly arrived women, girls, boys and men on available support mechanisms	Camp Management/ CP&GBV
Strengthen information on available services in the camp particularly protection and Mental Health Psychosocial Support (MHPSS) services	Camp Management/ CP&GBV/MHPSS

Conclusion

These findings and recommendations should guide the way forward for all partners working in the field of child protection and gender-based violence as well as other relevant sectors in Za'atri camp. This report will inform the work of the Child Protection and Gender-Based Violence sub-Working Group and development of the group's 2013 strategy to address short and long term issues and strengthen existing services for girls, boys, women and men in the camp, ensuring linkages to national systems. The key findings in this report should inform child protection and gender-based violence programming when establishing new camps for refugees in Jordan.

In addition, the Child Protection and Gender-Based Violence National SOP for the emergency will be a helpful tool to ensure referral pathways are effective, and to prevent and respond to protection concerns for the people of concern.

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The Child Protection and Gender-based Violence in Emergencies Sub-Working Group`s objective is to coordinate prevention and response to Child Protection and Gender-based Violence against children and adults affected by the crisis living in camps, sites and host communities. The Child Protection and Gender-based Violence in Emergencies Sub-Working Group was established in February 2012, it is co-chaired by UNICEF, UNFPA and supported by NHF/IFH and is a sub-working group of the Community based Protection Working Group chaired by UNHCR. Members of the Sub-Working Group involve UN agencies, international and national NGOs working in these sectors.