

Needs Assessment in Zarqa' City

June 2013



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1. Overview

Due to the conflict which is affecting Syria, the local population started to find refuge in neighboring Countries. In Jordan, International Organizations and International and local NGOs, organized a first humanitarian response in the Zaatari Refugee Camp (Mafraq Governorate) and later -as people moved outside the Camp- also in the Host Communities.

At present, June 2013, UNHCR sources identified 406,532 Syrian refugees in Jordan in addition to 73,722 refugees waiting for registration. 263,657, thus the 64.5% of the refugees is living in host communities, while 142,875 (35.1%) is settled in Mafraq Governorate (Zaatari Camp).

The highest percentage of Syrian refugees who moved from the Zaatari Camp concentrated in the Northen areas such as Mafraq and Irbid Governorates including Ramtha. Thus, the first interventions of international actors focused on these areas where there are nowadays multiple services and mechanism for coordination. Unfortunately, as the conflict continued to intensify, refugees settled later even in other areas such as Kerak, Amman and Zarqa' Governorates while nowadays they are directing even in the Southern Areas of Jordan (Jordan Valley, Maan and Aqaba especially).

In Zarqa' different actors are already active to provide support services and a new refugee camp has been recently opened close to Zarqa' City- the Emirates Jordanian Camp (EJC).

2. Objective of the Needs assessment

This needs assessment has been conducted as an internal study of Terres des hommes Italia (Tdh Italia) with the objective of understanding the main needs present among the Syrian community of Zarqa' City. In specific the population involved in the needs assessment is living in the neighborhoods close to the SFWS which is Tdh Italia's partner in Zarqa'. This was the chance to start establishing a first contact with Syrian refugees living in the area close to the Center in order to establish a first communication and relation with them.

Taking into consideration the availability of different studies and needs assessments conducted by different agencies, Tdh Italia –through this internal assessment- aimed to understand in specific the composition of the population living close to the Center and to explore its main needs in order to be able to shape possible interventions on the basis of its expertise.

The present study has been also the chance to start creating a database of contacts and specific information of families interviewed during the assessment and to be used when implementing the possible future interventions.

3. Methodology

Method, approach and target group

The needs assessment has been conducted involving 152 Syrian families living in the host community of Zarqa' and 110 Syrian individuals among whom 70 women and 40 men.

The study has been conducted in cooperation with the SFWS which is Tdh Italia's partner in Zarqa' since 2006. The partner is a local CBO well rooted in Zarqa' and with a deep knowledge of the local community. Through one social worker a group of initial contacts of families have been collected while the overall number of people involved has been reached randomly. During field visits, families guided the social workers and the needs assessment's responsible to meet other families living in the same neighborhood.

On the basis of the specific issues Tdh Italia wanted to investigate, a questionnaire has been developed (annex A) in order to conduct field visits to Syrian families and discuss with them about the main topics.

Field visits have been conducted by 3 social workers (Jordanian nationality) who know well the local community and by 1 need assessment's responsible (non Jordanian nationality but Arabic speaking). They conducted visits in couples or individually approaching the families and explaining the aim of the visit and guaranteeing the confidentiality of the information taken. It has been avoided as much as possible to create expectations among families, stressing that the visit was aimed just to make a study not leading to a support. The data have been collected by family considering as family a group of relatives which had 1 head of household and whenever more than one family was living together in the same apartment, it has been stressed and recorded in the database.

A second part of the study involved 110 individuals (70 women and 40 men) in focus groups discussions which have been conducted following the Focus groups discussion guide (Annex B). The discussions have been lead by SFWS Director which had previous experience in facilitating focus groups with different target groups. An introduction explaining the aim of the meetings has been done in order not to create expectations if possible and to guarantee the confidentiality of the information and contacts collected. Focus groups have been conducted in groups of 15-20 persons due to the high number of people that wanted to participate and that were not expected to come. Nevertheless the SFWS Director had the capacity to facilitate and deliver the discussion in the most efficient way and mediating among the participants guaranteeing to everybody the possibility to express themselves.

As it is clear from the previous explanation the overall needs assessment has been done with a mixed methodology and a participatory approach involving the partner organization in all steps of the study and approaching the Syrian community as an active actor of the assessment itself: families have been asked to help in individuating other families living in the area. This was also an important chance for the target group to feel involved in the overall study and useful to support other Syrians families.

Data Collection and Data analysis

The data have been collected during the field visits filling the questionnaires and entering the data in an excel file, for each family. The excel file has been created using dropdown menu to have a complete choice of answers and reflecting exactly the questionnaire filled. Data have been analyzed by topic and by target group, selecting the different answers by single question.

Regarding the focus groups discussions, notes have been taken by the needs assessment's responsible during the meetings and qualitative data by topic faced have been reported.

Cross cutting issues

Gender issues have been taken into consideration during the whole development of tools and during the conduction of the field visits and focus groups. Specific questions for women to understand their needs as mothers or pregnant women have been proposed while focus group discussion have been done separately for women and men in order to investigate better gender issues especially in relation to the marital relation and specific needs of women. On the other side, strong attention has been given to the specific situation men are facing after leaving Syria and losing their role of breadwinner for the family. Thus space has been given also to men to express their needs and challenges faced.

Specific space and attention has been given to investigate issues related to children protection, collecting data on education and labor status of children. In the meanwhile, data related to presence of people with disabilities in the families (adult and minors) as well as to presence of elder people and their specific needs have been recorded in the data collection.

4. Timeline

4 th –6 th of June	Individuation of core topics and tools development: questionnaires and Focus groups discussions' guide
7 th -9 th of June	Translation of tools and sharing with partner organization. Meeting with the 3 social workers to analyze the tools
10 th -13 th of June	Field visits
16 th -18 th of June	Focus Groups
14 th -20 th of June	Data entering
21 st -24 th of June	Data analysis and report writing

5. Overall results by topic (questionnaire)

Areas targeted in Zarqa'

Al Gueriyye (36.6%), Zarqa' Al Jadeeda (24.6%), Hay Ramzi (14%), Hay Al Amir Muhammad (2%), Hay Masum (0.6%), Wadi Hajar (0.6%).

Area:	Al Gueriyye:	Hay Ramzi:	Al Zarqa Al Jadide:	Hay Masum:	Hay Al Amir	Wadi Hajar:
	88	21	37	1	Muhammad: 3	1

UNHCR registration:

The 74% of the target group has the UNHCR registration even if the 18.4 % is waiting for the appointment to have the registration or to obtain its renewal as it expired. The 8.5 % does not have the registration and they did not ask for it. All people who have a UNHCR registration receive coupons for food and they have generally access to the health system even if some of them declared they do not know where the services are provided. It must be stressed that all those people that are waiting for the appointment, to be registered or for the renewal are not covered by UNHCR support mechanism.

The 81.5% did not receive any kind of support from other organizations different from UNHCR and who did, received mainly health support from Caritas and food and NFIs from local associations or individuals (neighbors, Zakat).

UNHCR registration:	Yes: 111	NO: 13	Waiting for appointment (to obtain registration or to renew it): 28		
Support from any UN, CBOs, INGOs, charity:	No:124	Yes: 28			
If yes which kind of support:	Food:12	Food and NFIs: 7	NFIs: 4	Rent: 1	Other: 4

Family composition:

The head of household is in the majority of the cases a man (76%) and he is generally the husband. The 34.6 % of the head of household has between 18 and 35 years old, 29.3% between the 35 and 45, the 24.6% between the 45 and 60 years old while the remaining have more than 60 years old. Families are quite young in age and the high majority has children: just the 10 % has not children, 47.3% has up to 3 children and 36% has between 3 to 6 children.

Elders are a small component among Syrians families interviewed a 22.3% of the families has up to 2 elders in the family, among grandparents or the same parents and household which have more than 60 years old.

Age of household:	More than 60 years old: 7	45-60: 37	35-45: 44	18-35: 52
Sex of head of household:	Women: 38	Men: 114		
Number of elders in the family:	Up to 2: 34			

Living conditions and income in Jordan:

Families are generally numerous with a high majority of families with 5 to 8 members. The 31.5% has 1 to 4 members and 12.5% has 9 to 15 members. As the rent fees and expenses are generally very high, families tend to share apartments with other families. 85.5% of households live by themselves in 1 house but among them 77.6% is composed by more than one family even if there is just one head of household. In the 6.5% of cases 2 household share the same house (with 2 head of households), in the 5.2% of cases 3 households share the same house and in the 2.6% of cases 4 households are living together.

Number of family members:	1-4 members: 48	5-8 members: 82	9-15 members: 19	more than 16 members: 3
Number of families (with different head of household) in the same house:	1 family with 1 Head of Household: 130 118/130 composed by 1 family and the others composed by up to 4 families BUT they have all 1 Head of Household	2 families with different Head of Household sharing: 10	3 families with different Head of Household sharing: 8	4 families with different Head of Household sharing: 4

The 66.4% of head of household don't have an income mainly because Syrians cannot obtain a working permit and they do not want to work illegally. Nevertheless some do and 10.5% has just a very low income (up to 50 JOD a month). The majority of men and boys work as daily workers in shops, in manual works or selling coffee in the streets. Just the 12.5% has an income between 51 and 150 JOD a month and just 1.9% over 250 JOD.

In details, 72.3% of men declare they are not working and that no one in the family is working even if comparing the values to the previous answers, it is clear they do not consider a real job the daily work of around the 10% of them. Generally Syrian men are not working in the same field they were working in Syria but they adapted themselves in conducting the jobs that were available.

Clearly, the living conditions changed strongly. In Syria the high majority of people had a good income, with the 26.6% having an income between 150 and 250 JOD a month, the 25% between 50 and 150 and the 20.3% with more than 250 JOD a month.

Average income of the family in Syria in JOD	0 JOD: 9	0-50 JOD: 9	51-150 JOD: 38	151-250 JOD: 40	more than 251 JOD: 31	N.A: 25
Average income of the family in Jordan in JOD:	0 JOD:101	0-50 JOD: 16	50-150 JOD: 19	151-250 JOD: 13	more than 251 JOD: 3	
Members over 18 working at present:	No: 110	Yes: 42				
If yes which kind of work:	Construction: 2	Daily worker: 14	Shop: 9	Restaurant/hotel: 5	Other: 10	

Health situation of adults and access to health services:

47.3% of the interviewed families do not have members with health concerns, while the 52.6% does. The most common illnesses are chronicle diseases such as diabetes, blood pressure and different kind of allergies. Nevertheless a common disease among men is the problem at the disk. The 3.9% has injuries from the war and a two of them should have a surgery.

Generally who has the UNHCR registration referred to local clinics or hospitals close to their neighborhood but the 57.9% of the interviewees stated they do not have access to an health center. The 50 % of this group never went cause they did not have a need, but among the other half who tried to access structures the 43.2% could not because they did not have money to pay -as they lacked the support of UNHCR-. The 29.6% was not aware of the services provided, the 13.6% has not been accepted due to the lack of official documents and the 13.6% could not manage to reach the hospital or center as it was too far away. The core problem is that a good amount of person is waiting since months or will have to wait months before getting the appointment for renewal of UNHCR registration or to get registered. These who do not have a registration cannot pay to get the medicines they need. At the same time just the 1.9% of families stated they received a medical support by a service provided by a local organization, and in all the cases it was Caritas.

Elders have in the majority of cases health concerns and the majority of them need support for chronicle diseases. The 3.2% cannot move and should have a continuous support.

Family member over 18 of health concern:	No: 72	Yes: 80			
If yes, which kind of diseases:	Cancer: 2	Mental disabilities: 2	Physical disabilities: 6	Injuries: 6	Chronicle diseases: 47
Need for specific medicines for chronic diseases:	No:89	Yes: 63			

Access to health care providers (Hospitals, clinics etc):	No: 88	Yes: 64			
lf no why:	Not accepted: 6	Don't know where is the service: 13	No money to pay: 19	Too far away:6	Other (not approached): 44
If yes where you go:	Clinic of my area: 27	Clinic of other area 5	Hospital of my area: 20	Hospital of other area: 1	Service provided by a local organization:3
Which kind of needs do elders have:	Cannot move: 5	Chronicle disease: 26	Other: 1		

Children:



As previously stressed, families have a good percentage of children: just the 9.8 % has not children, 46.7% has up to 3 children and 35.5% between 4 to 6.

The majority of the children is between 0 and 6 years old then comes the group between 13 to 18 and after the group between 7 to 12.

The following table clarifies the disaggregation of age/group among families.

Number of members under 18:	0 members: 15	0 to 3 members: 71	4 to 6 members: 54	more than 6 members: 12			
Under 18 age average:	0 to 6 years old: 36	7 to 12 years old: 6	13 to 18 years old: 10	0 to 6 and 13 to 18 years old: 10	0 to 6 and 7 to 12 years old: 28	7 to 12 and 13 to 18 years old: 10	All groups: 37

Children's education:

The high majority of children do not go to school (78.1%) and the reason is mainly the fact that they lack the needed documents (16.7%) or that the school did not accept them (10.9%). Many don't go because they still

don't have the school age (less than 6 years old). The 4.3% refuse to go to school due to problems with the other children or with teachers and again the 4.3% don't go because the school is too far away. Just one person motivated stating that it is too risky to send her daughter to school and a second one because the child works to support his family.

49.3% of the children missed school and the majority of them missed it for 6 months (58.6%). The 16 % missed it for 1 to 2 years and the 14.6% for 1 year. The 9.4% missed school for 2 to 3 years and the 1.4 % for more than 3 years.

Under 18 go to school:	No: 107	Yes: 26	Some go some no: 5				
If yes in which shifts:	Afternoon: 1	Morning: 15	Both: 14				
If no why they do not go to school:	It is risky: 1	Not interested: 2	School did not accept them: 15	The school is far away:6	They lack needed documents: 23	They refuse to go: 6	They work: 1
Did the children miss school:	Yes: 75	No: 28					
If yes, for how long:	6 months: 44	1 year: 11	1 to 2 years: 12	2 to 3 years: 7	more than 3: 1		

Children's work:

Generally children do not work, but the 11.6% does and mainly as daily worker, selling some coffee and manual works.

Children under 18 work:	Yes: 16	No: 112		
Kind of work of working children:	Shop: 4	Daily worker: 4	Restaurant/hotel: 1	Other 5

Children's health:

The high majority of children is in good physical health except for the 24% which has diseases, and mainly chronicle diseases such as allergies or asthma. There are some individuals with physical disabilities (5.8%) and mental disabilities (2.1%).

All children show effects from the war but specifically the 23.3% of the children clearly shows to be very emotional, they are afraid of planes and fireworks as this reminds them of the war in Syria. They generally do not have normal day-night rhythm, they don't sleep during the night or they have frequent nightmares while in other cases they sleep always during the day, in a depression status.

Health diseases of children:	No: 98	Yes: 33		
Which kind of health diseases:	Chronicle disease: 10	Mental disabilities: 3	Physical disabilities: 8	Other: 11
Specific psychological status of children determined by the war declared:	Yes: 32			

House situation:



Generally houses are not furnished and the families just have mattresses, blankets and some pillows. Some of them got these tools from Za'atari camp, some have been helped by neighbors or other families.

Houses are generally quite humid and the hygienic situation is below an acceptable level. 48% of the houses should need maintenance for water and sanitation tools, the 15.1% should need new windows and doors as there is not isolation. 5.9% should have maintenance for both.

In the majority of the cases houses have space for the families living in if compared to the number of members, but some cases have been individuated as overcrowded: 7.2% lives in houses of just 1 room. 50.6% lives in apartments with up to 2 rooms while 40.7% in flats of up to 3 rooms.

Parts of the house in need of rehabilitation:	Isolation: 23	Water and sanitation: 73	Painting: 1	Both: 9
Number of rooms excluded kitchen and toilet:	Up to 2 rooms included saloon: 77	Up to 3 rooms included saloon: 62	One room: 11	

Almost the totality of the apartments is rented, except 5 families that are hosted by other families. The rents are extremely high for the area of Zarqa where a medium size flat is generally rented for 60-70 JOD a month. 34.8% is renting the flat for 80 up to 120 JOD/month, 26.9% for 121 to 150 JOD, 19.7% for more than 150 JOD. In addition to this expense, the majority of the families spend an average between 21 to 50 JOD for bills like electricity and water.

House:	Rented: 146	Host family: 5	N.A: 1			
Rent fee:	0 JOD: 6	0 to 50 JOD: 3	121 to 150 JOD: 41	51 to 80 JOD: 19	81 to 120 JOD: 53	more than 150 JOD: 30
Paying utilities' bills:	Yes: 122	No: 30				
If yes, how much:	0 to 20 JOD: 50	21 to 50 JOD: 70	more than 50 JOD: 10			
If no, why:	No money to pay and debts: 6	It is included in the rent: 5	Other (did not received yet): 11			

In terms of tools needed for the house, the highest majority ask for cleaning tools as they are the most difficult thing to buy and that UNHCR coupons do not cover. After these tools the most requested items are blankets, pillows and mattresses.

Needs in the houses:	Blankets:6	Matrasses: 4	Pillows: 2	Cleaning materials: 45	Kitchen materials: 8	Blankets, pillows, matrasses: 9	All: 56
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Core needs of family:

Among the main support people ask there is the rent fee. This is something natural as paying it is a huge burden for families that once relieved of paying the rent could use the money they have for food or medicines when needed. Health support is asked in just few cases and just when there are serious health concerns. Food and NFIs are also requested (3.2% for Food, 1.9% for NFIs) but in a minor percentage and more often are requested as a second choice after rent (in the 57.8% of cases).

Needs highlighted by family:	Food: 5	Rent: 49	NFIs:3	Health support: 5	Rent and NFIs: 18	Rent and food: 21	Rent, food and NFIs: 49
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Special needs for babies:

9.8% of women is pregnant at present, but the majority of women interviewed states they do not want to have children in this situation.

In the 96.5% of the cases when there are new born babies or very young babies in the family, women state they do not have adequate tools for the babies. They clearly ask for diapers and cleaning tools. They often ask for milk too as they say they do not have milk anymore to feed their children.

Pregnant women:	No: 137	Yes: 15
If yes, are basic material for the new born (e.g diapers, clothes) available:	No: 85	Yes: 3

6. Focus Groups discussions results by topic

Women

A.General feelings (psychological situation) after escaping from Syria:

The majority of women participating to the focus group are not integrated in the local community which is an additional obstacle to the overall situation they are facing after escaping from Syria. The feeling of being a stranger in a Country is worsened by the lack of integration and the social difficulties related to the clash between the two communities. Women do not have a social life and they rely just on the communication with women of their same community. Neighbors are in the majority of the cases blaming Syrians of the increase of prices and they do not welcome them. They say that they feel very sad and that they also have problems in facing the relation with their husbands as men are often depressed. They miss their Country.

Women would like to participate to recreational activities such as sewing, beauty saloon and food preparation in order to learn something new and feel productive. They also stress that the core needs are related to hygienic issues and family planning. They need diapers for period and hygiene items such as soap, shampoos as they do not have the possibility to buy them.

Women were very nervous and they strongly blamed the Jordanian community of exploiting their situation increasing prices and being aggressive. They stress the fact that for Syrians everything is more expensive than for Jordanians, such as taxis, food and rent.

B. Children:

The 80% of children are under 18 and in general they have post/conflict distress. They are afraid of planes and of fireworks as they recall them about the war in Syria. They start to cry, shake and they become pale. They do not sleep regularly during the night or they sleep a lot during the day. Women do not know how to manage the situation as they feel there is not solution.

Children are in the majority of cases not integrated in the local community. They do not play with Jordanian children and neighbors while they generally stay at home. They often experienced clashes with Jordanian children as they told them bad words and they teased them. Thus children prefer not to go out and play.

Just 3 women's children are attending public schools in Zarqa and the fact that children do not go to school affect even more on their social life. There are many reasons why children are not attending school and three are the main ones:

- The schools refused to accept them because there is not enough space in the school.
- They lack official documents and the registration to UNHCR.
- Problems of integration with the Jordanian children who told them bad words and have been violent in some cases. Syrian children are afraid and they refuse to go to school.

In some cases the school is too far away and the family cannot pay for transportation. In addition to this women are afraid to send them to a school which is far away.

1/3 of the women have children between 0 and 6 years old. The children are not attending kindergarten because they have not been accepted due to their age or because the family cannot pay for fees in private kindergartens.

All women think that it is very important for their children to go to school and if they did not try to enroll them till now because they just arrived in Zarqa, they assure they will try for the next academic year. In general they feel sorry and powerless in front of what their children are experiencing and they would like to help them more.

Women face difficulties in dealing with their children and they are very worried because they are not attending school and because they do not have a social life. They generally do not know how to face these problems as they feel there is not solution as services are not offered.

They think that their children should participate to recreational activities to play with other children and be happy. They also think it would be useful for them to be involved in educational activities such as English language, Arabic and computer courses, especially because they do not go to school.

Children mainly need diapers and hygienic products because women do not have money to buy any of this kind of products.

1/4 of the women have children under 18 years old working illegally in Jordan as daily workers. In two cases children have less than 15 years old. They generally work in restaurants, street shops for coffee and tea, mechanic and plastic production. The average salary they receive is 1 JOD a day.

C. Husband:

The relation between women and their husbands strongly changed after escaping from Syria. Men are suffering a lot because they cannot support their family and because their children are often obliged to work. More than 1/2 men do not work in Jordan because they don't want to work illegally in the Country. They were working in different kind of fields in Syria and some of them are also engineers. The few men that work are doing it illegally as daily workers, mainly in the construction sector or in plastic production.

Husbands are often very nervous as they are depressed due to the overall situation and this affect on their relation with their wives.

The average trend shows that couples are trying to avoid having new children.

D. Health

Just 3/70 women use condom or any other kind of contraceptives. They generally manage to buy it and just in 1 case it has been distributed by UNHCR. More than 30% of the women states they need support for family planning and reproductive health issues.

The coupons received by UNHCR permit to buy just food items while families do not have the possibility to buy cleaning tools and personal hygiene tools. Core needs are diapers for children and diapers for women together with soap and shampoos. Among NFIs also blankets and pillows are enlisted as needed.

The majority of the women stated also that at least one or more members of their family suffer from chronicle illnesses such as blood pressure, diabetes, stomach diseases, and skin allergies. In general the diet they have is not complete thus they say they lack of vitamin B12 and calcium. The majority cannot afford to buy medicines as they do not have UNHCR registration thus they cannot have this kind of support.

Women ask mainly a general medical support for seasonal illnesses but also for chronicle diseases. Especially they ask regular medical checks for their children. Just few women have disable children and the disabilities they have are: paralysis, deafness and muteness.

Men

A. General feelings (psychological situation) after escaping from Syria:

Men interviewed expressed a general feeling of frustration about the situation they are facing. The major concern is that they cannot work as they cannot get a work permission and this strongly stress them out. They feel they are no more able to take care of their family and they struggle in paying all expenses they have in Jordan.

The high majority lament that the support from UNHHCR is not continuous especially for paying the rent, as the rent is their major concern. They are perfectly aware that they pay much more than the average Jordanian citizens and the majority of them blame Jordanian landlords of exploiting the situation letting Syrians paying higher fees.

The relation with the local community is for around 80% of the cases very difficult, with lack of integration and strong challenges in dealing with Jordanians. Syrian men states that Jordanian are exploiting them, raising rents and paying them for small black market jobs with very low salaries. Some men told that their children experienced bad situations with Jordanian children, who teased them and hit them. They blame Jordanians and they regret the day they decided to leave Syria, they say that it would be better to be there instead than in Jordan in this situation.

Nevertheless, there are also some cases, even if the minority, when neighbors supported Syrians families with tools, food and sometimes even rent payment. Just 2 men stressed that they have a good relation with their neighbors and that everybody should stop blaming other people as in the end "we are all arab", "kullna arab".

The majority of men interviewed do not work while in Syria they were all working with different specialized professions.

B. Relation in the family

The core concern after the material possibility to work to support their family is the health and education of their children. 50% of the men have children in school age but the high majority of them do not go to school. Challenges faced in enrolling children are various such as the lack of UNHCR registration or the lack of other needed documents, the refusal of the school due to lack of space. Sometimes the educational level of the children has not been respected and children have been put in classes with children two years younger than them.

Men say that their children stay at home and this is not good for them. They need to be active and not to lose time in their education process. Men have been very proactive on this point and they proposed to be teachers for their children: they would like to ask schools to be open in the late afternoons and evenings in order to teach to their children as they want their children to be educated. They think that the core subjects needed should be-in order of importance-: English, Arabic, math, computer and sport activities. In their opinion this is important to fight their depression, fears and sadness.

Children have been very affected by the war and they are always scared and depressed, what's more they are not integrated at all in the local community, they do not play with other children. In one case, one child stopped speaking due to the shock of some events he experienced during the war.

Men are thus ready to be actors for the education of their children as they themselves ask just to be active, with a job or with any other activity that can be useful to support their families.

C. Health:

In general, the majority of the men states that chronicle diseases as diabetes, pressure are the most common and they ask for support as they were used to have free medicines in Syria. The majority of them

have been supported by UNHCR but men stress also that the procedures are often very long and this hinder the effectiveness of the support provided. For example 5 of them are waiting for renewal of the UNHCR registration since months and during this period they cannot have the support expected. This is the core problem for all those people who do not have UNHCR registration or that are waiting for it or for its renewal.

Some men received in Zarqa' health support by Caritas, Al Kitab wa Al Sunna and by the Jama'iyya Al 'Oun (local CBO), but this happened just one time or with a very limited amount of medicines provided even for chronicle diseases that need a continuous support. One man stressed also that he needs a dentist and that this service – for free in Irbid- is not available in Zarqa'.

Core needs stressed by fathers for their children are general medicines for seasonal illnesses to cover also those cases that have not access to existing structures offered by UNHCR and seasonal medical check for children.

7. Conclusion: core needs and interventions leading from results by target group





