# Vulnerability Assessment Framework Questionnaire Validation Workshop

VALIDATION WORKSHOP SUMMARY DECEMBER 2016

5.5. Pre			5.4. Do	5.3.		5.2. Co	5.1. Deperatio	5. Un	4.8. Op	4.7. Liv		4.5. For	4.4. W		4.2. Edi	4.1. Ba	4. Ser		بر ج	2. Ba	1. Int	Ą	
	Predicted Welfare		Documentation Status	New Disability Universal Indicator		Coping Strategies	ndency Ratio — standard izing dependency	Universal indicators:	Open discussion / Sector Q & A	Livelihoods introduction in to VAF	Health	Food Security	WASH		Education	Basic Needs	Sector Trees / VAF Form revision Updates		Household, Case and Individual revisited	Baseline and VAF Monitoring Assessment	Introduction and background:	Agenda item	
o cerolon of the career are model the cerosary.	Is revision of Predicted Welfare model necessary?	documentation initiatives - protection risks, usefulness? Objective to agree on outcome (included or excluded)	Inclusion of questions on Births, Deaths and Marriages certificates, Irina Conovali/ now with partner organizations focusing on cash for Douglas DiSalv	initial flagging / identify individuals for further needs assessment	re levance of coping mechanisms and appropriateness to ask.	Obective to present revision options and to agree on final decision, discussing timelines and sensitivity, prevalence and	Objective define and move forward with standardized dependency ratio formula			introduction in to VAF presenting the 30 questions for indusion in Laura and Bryn to 'Monitoring Assessment' and proposed Baseline questions	Endorsement of Sector tree revision & form revision	Endorsement of Sector tree revision & form revision	Endorsement of Sector tree revision & form revision	Endorsement of Sector tree revision & form revision	Endorsement of Sector tree revision & form revision	Endorsement of Sector tree revision		impact on score design & 2) reach agreement on HH, Case and Indv assessment in Baseline & Case and Indv in VAF monitoring assessment	Objective is to 1) discuss HH as a unit of analysis and HH/Case	Define baseline, frequency and process and reach consensus agreement to go forward	Purpose of the workshop is to have a VAF 2.0 Form agreed to, based on sector consultation and with agreement on the desired output of how much can be relegated to baseline methodology and rest monitoring	Desired Outcome	
ruouai a / voixei	Edouard / Volker		Irina Conovali/ Douglas DiSalvo	Cellne Abric		Erin Carey/Douglas DiSalvo	Edouard / Volker			Laura and Bryn	Ibraheem Abu Siam	Erin Carey	Eva Diaz Ugena	Elias Jourdi	Dina Al Masri	Fanny Marchand			Edouard (Volker	Edouard / Volker	Olivia	Res ponsible for Presenting & Outcome	
								BREAK									BREAK		Received	Received	Compile package pre- workshop	PPT documents submitted in advance by 1 December 2016	
	20 mins		20 mins	20 mins	-	20 mins	20 mins	60 mins	30 mins	10 mins	10 mins	10 mins	10 mins	10 mins	10 mins	10 mins	15 min break		30 mins	30 mins	30 mins	Time Needed	
						UNHCR BO Amman	UNHCR MENA			UNHCR/DRC	UNHCR	WFP	UNHCR BO Amman	NRC	MECI	PU-AMI			UNHCR MFNA	UNHCR MENA	UNHCR BO Amman	0g	

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# VAF Workshop Purpose and Scope

Change in questionnaire due to contextual and operational scope

Sector Review 2nd and 3rd Quarter 2016 changes

Parking lot for things that are requested and would be good to know and relegated to the baseline assessment. Captured and known by all VAF partners.

- 2015 VAF was launched January baseline
- Indicator design
- Sector scores available before the baseline
- Phase of implementation analysis
- Universal indicators
- Focusing on Form update to update the Baseline 1st Quarter 2017.
- Elements for update score analysis and form design and data collection

#### Objectives of the day:

VAF form in most reduced form should result in intervention response and operational response.

Clear understanding on the new shape of the VAF form

Endorsement process following the VAF form validation workshop by workshop attendees

The objective of the ongoing monitoring assessment/ VAF is to undertake:

- 1. Continuous data collection; collecting regularly over an extended period of time.
- 2. Analysis of trends; identify violations of rights and protection
- 3. Support Operational delivery; informing effective responses.

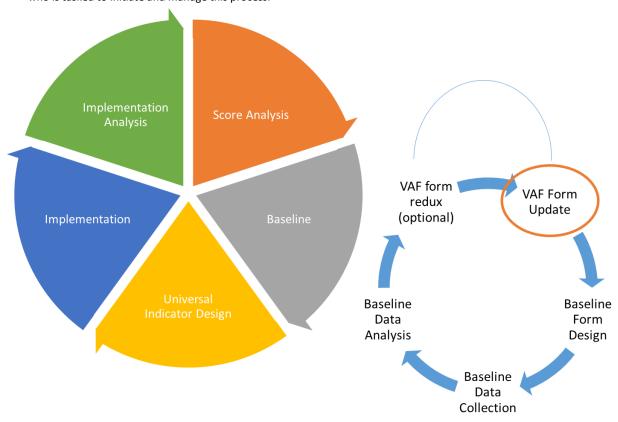
Why separate Baseline and VAF?

The ongoing monitoring assessment / VAF should explicitly speak to effective operational response; data collected within the VAF form should have a clear lineage and path to service delivery, determining eligibility, prioritization or targeting of urban Syrian refugees for assistance and/ or services through Sectors and VAF partner organizations. Since the inception of the VAF and based on lessons learned on usage and expenditure involved in undertaking ongoing assessment it has been determined to separate the questions which could guarantee clear operational output to remain in the monitoring assessment. As a result the sector tree review and form review, finalized in November 2016 took the below guiding principles in to consideration throughout the review process.

#### VAF Form Review: Guiding Principles

- 1) VAF partners were asked to provide feedback and inputs on the existing VAF form by drawing on their operations' experience with the form itself. This should focus on the **suitability of existing questions and identify gaps** (i.e. questions that are missing);
- 2) The review process must ensure that the VAF data collected since 2014 can still be utilized and the scores can be recalculated after the review. This legacy compatibility is critical in order to ensure that the revised form allows for comparability with existing VAF data. More than 90,000 VAF assessments have been conducted and it would be irresponsible and wasteful to preclude comparability and transferability of data. The key questions to bear in mind here is whether the new VAF form can be scored using the Sector Trees and whether existing data can be migrated into the new format resulting from the new form.
- 3) It will be important throughout the review process to validate expectations and commitments that collected information will truly be used for the provision of services and assistance. It relates to the reciprocity and ongoing engagement between VAF partners and to the understanding that there is value and utility in the data being requested;
- 4) Knowing that a lot of collected VAF information is currently insufficiently used, the aim should be to reduce the size of the VAF form overall. It objective must be for the VAF form to be clear, concise, lean, and more sustainable in terms of operational response. Following from the VAF Sector Tree Review, it is clear that the principle for the form review must be 'less is more' to ensure that VAF partners are able to use the available information effectively.
- 5) The VAF process and with it the VAF form cannot be an all-encompassing assessment. Instead it is a common denominator that establishes an efficient and cost-effective way of operational partners to share information that can be translated quickly into the delivery of services and assistance. Therefore, it is important to ensure that the VAF form provides sufficient information on the majority of issues and not strive for complete

- information on all the issues. The VAF process deals with the "normal" or "average" scenario among Syrian refugees. Any outlier or exceptional circumstances should be absorbed within the case management process of each organization or at the level of sector coordination.
- 6) It was important that VAF partners actively work on the **removal of redundant questions**, i.e. questions that do not relate in any way to a programmatic response in delivering assistance or services to refugees.
- 7) The process should be participatory ensuring that all issues raised by VAF partners and prospective VAF partners are being considered;
- 8) At the same time, the process had to be completed within a stipulated timeframe through the VAF Secretariat who is tasked to initiate and manage this process.



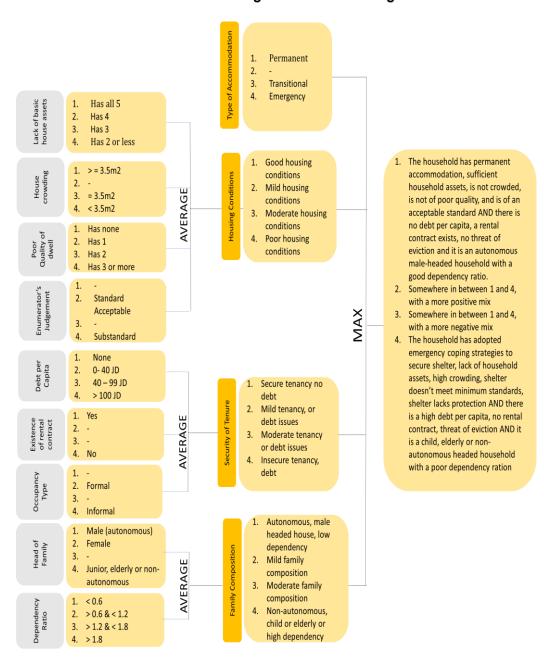
# Session 1: Sector Briefings

## Shelter

#### Challenges with the existing sector and questions:

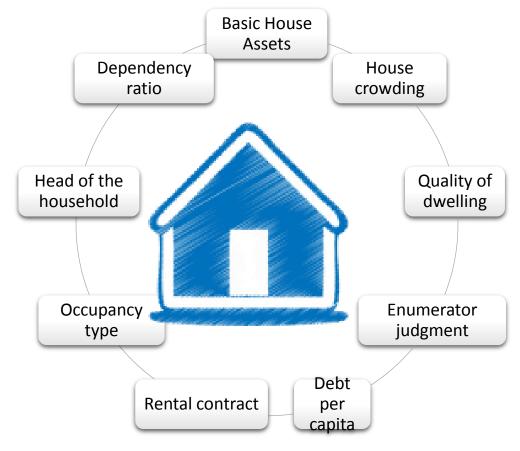
- Not adapted to the context of urban setting
- Highly dependent on enumerator judgment
- Did not capture eviction threat & Accessibility
- Included some duplication of atomic indicators
- Did not reflect reality in terms of vulnerability

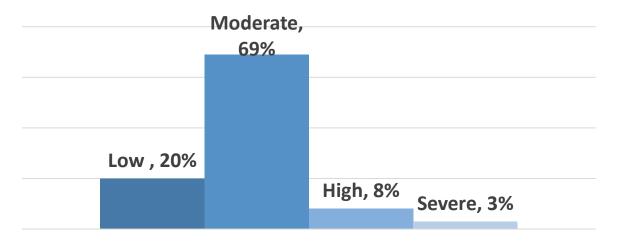
## Shelter sector original decision making tree



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Figure 1: Original sector tree indicators:





\*Shelter Sector: VAF Sept/Oct Baseline 2015 results above

- Existing weighting and scoring
- Indicators used not relevant to the context
- i.e. 3.5m2
- highly dependent on enumerators judgement
- did not capture eviction threat and accessibility
- included some duplication in atomic indicators
- did not reflect reality in terms of vulnerability
- Removal of complementary scoring with shelter score ie dependency ratio and basic needs
- Removed kitchen and toilet

- Removed relocation and movement

#### **Revised Shelter Sector Tree:**



# 1. Low Shelter vulnerability The household has a dwelling in good conditions, not necessary overcrowded with adequate security of tenure.

#### 2. Moderate Shelter Vulnerability

The accommodation can be crowded, and / or be judged unsafe, in need of repair/upgrade/maintenance. The HH may be at risk of eviction; without necessary adequate security tenure.

- 3. High Shelter vulnerability
  The HH is living in inappropriate
  shelter in need of
  rehabilitation/transformation/upg
  rading. The accommodation can
  be shared by several HH. The PoC
  have no security tenure and are
  serious risk of eviction.
- 4. Severe Shelter vulnerability
  The HH is living in inappropriate
  shelter in need of
  rehabilitation/transformation/upg
  rading. The accommodation can
  be shared by several HH. The PoC
  have no security tenure and are
  severe risk of eviction

#### Supplementary Shelter sector scoring

# Shelter mobility and accessibility (Disability)

- No or limited difficulty to move inside the shelter and/or access the shelter
- 2. •
- 4. Difficulty to move inside the shelter and/or access the shelter

# Documented threat of Eviction

- 1. No threat
- 2. Conflict with Host Community or Fear of eviction
- 3. Verbal threat of eviction
- 4. Written note for eviction

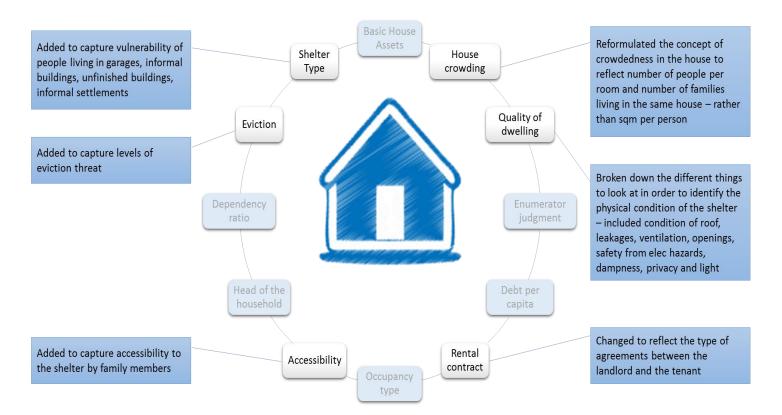


Figure 2. Revision of Sector tree above

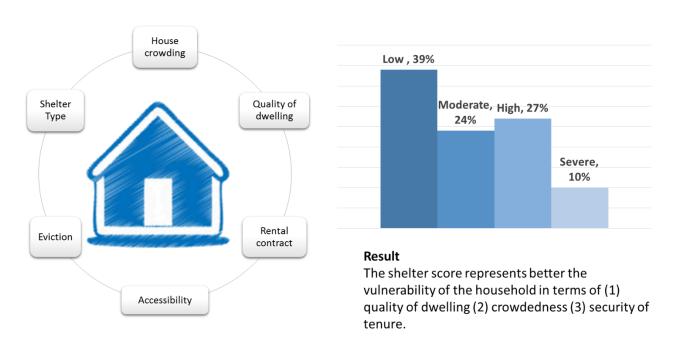
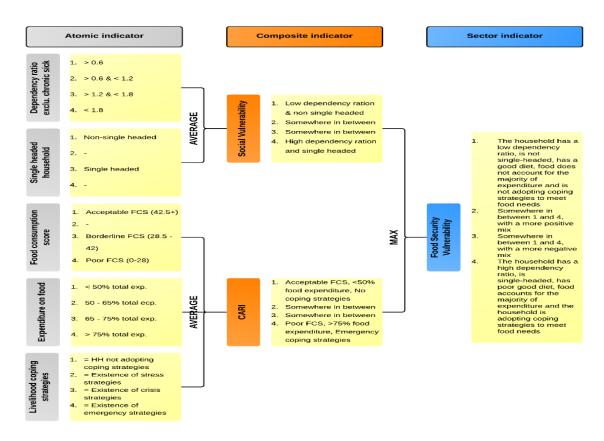


Figure 3: Recalculation of Scoring for revised sector tree and data testing

Housing									
Shelter conditions:									
Type of shelter:									
☐ Formal: Finished building {Completed & permanent building ready to be occupied }									
☐ Formal: Sub-standard building {Any type of building not designated as dwelling, requiring rehabilitation}									
☐ Informal settlement {Settlement made of makeshift tents, not recognized by authorities}									
- Number of rooms excluding the kitchen & sanitary facilities? _									
- Number of individuals living in the same house (both in the sai	me file number and in another file)?								
- How many families are living in the same house?									
Observations (including kitchen and sanitary facilities):									
Roof's condition (leakage /structural)	☐ Acceptable ☐ Sub-standard								
Openings' condition? (doors & windows)	☐ Acceptable ☐ Sub-standard								
Electrical features' condition / safety	☐ Acceptable ☐ Sub-standard								
Easy Access to the dwelling (for all members of family)	☐ Acceptable ☐ Sub-standard								
Natural ventilation condition?	☐ Acceptable ☐ Sub-standard								
Natural lighting condition?	☐ Acceptable ☐ Sub-standard								
Payment and Eviction Threat									
- Rented accommodation?									
How do you pay rent?									
, ,	Begging In kind (shelter in return for work - in a								
farm, as a guard)	cies   Assistance from family abroad								
- What type of agreement between the landlord and tenant?									
☐ Written agreement ☐ No agreement									
- Is there a threat of eviction?									
If yes, why?									
☐ Conflict with host community and/or Landlord									
☐ Fear of eviction {Scared the landlord well evict him}									
☐ Verbal threat of eviction									
☐ Written note for eviction									

# **Food Security**

#### **Original Food Security Sector Tree:**



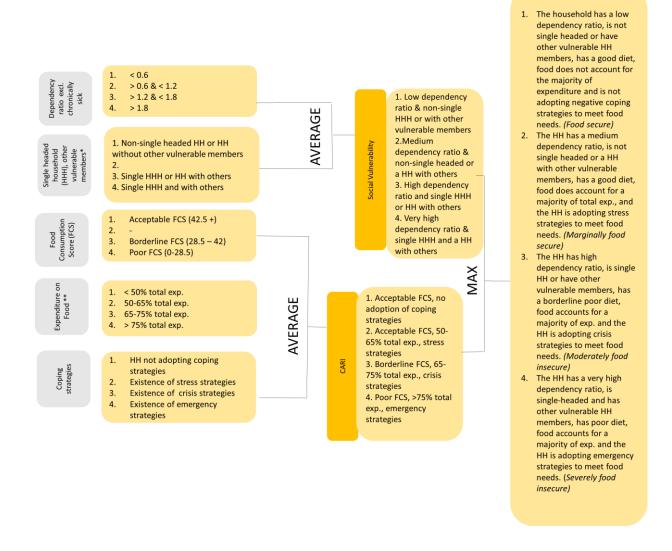
8 food groups retaining this information – retaining the standard food group table

- Expanded food group table macro and micro deficiencies incorporated within the baseline
- Enumerators struggling with sugar question culturally fundamentally
- Sugar as condiment regular consumption
- Sugar in sweets less consumption

#### Revised sector tree:

- hunted and gathered irrelevant (removed entirely)
- removal of source of food (removed entirely)
- FCS and CARI scoring breakdown food diary needs to remain
- 7 days relevance (?) data used or nice to know (removed for baseline segregation)
- 30 days relevant to HH coping strategies (needs to remain for calculation)
- Condiments phrasing in form (cue definition for enumerators i.e. sugar)
- 7 days consumption based strategies (segregated to baseline)

#### **Revised Food Security Sector Tree:**



#### **Baseline segregation:**

Maintains the 8 standard food groups but further disaggregates the protein, vegetable and fruit groups to better understand the nutrient in/adequacy.

- 1. Cereals/tubers: rice, pasta, bread / sorghum, millet, maize, potato, yam, white flesh sweet potato, taro and/or other tubers, plantain
- 2. Pulses: beans, cowpeas, peanuts, lentils, nut, soy, and/or other nuts
- 3. Milk and dairy: fresh milk / sour, yogurt, cheese, other dairy
- 4. Meat, fish, eggs:

Flesh meat: beef, pork, lamb, goat, rabbit, chicken, duck, other birds, insects

Liver, kidney, heart and/or other organ meats

Fish/shellfish fish, including canned tuna, escargot, and/or other seafood

Eggs

5. Vegetables:

Orange vegetables (vegetables rich in Vitamin A) carrot, red pepper, pumpkin, orange sweet potatoes Dark green leafy vegetables spinach, broccoli, amaranth and/or other dark green leaves, cassava leaves

6. Fruits:

Orange fruits (fruits rich in Vitamin A) mango, papaya, apricot, peach.

- 7. Fats/oils: vegetable oil, palm oil, shea butter, ghee, margarine, other fats / oil
- 8. Sugar: honey, jam, cakes, candy, cookies, pastries, cakes and other sweet (sugary drinks)

Food Security (Case)								
Are you receiving WFP food vouchers? ☐ Yes ☐ No								
Yesterday, how many meals were eaten by your family? (meals comparable to breakfast, lunch, dinner):								
	Over the last 7 days, how many days did you consume the following							
	foods (0-7)							
Cereals, grains, roots & tubers: rice, pasta,								
bread, bulgur, potato, white sweet potato								
White tubers & roots (potato, sweet potato)								
Vegetables & leaves: spinach, cucumber,								
eggplant, tomato								
Fruits: citrus, apple, banana, dates								
Meat, fish and eggs: Beef, lamb chicken, liver,								
kidney, fish including canned tuna, eggs								
Pulses, nuts & seeds : beans, chickpeas, lentils								
Milk and dairy products: yoghurt, cheese								
Oil / fat: vegetable oil, palm oil, butter, ghee								
Sugar / sweets: honey, cakes, sugary drinks,								
(this includes sugar used in tea)								
Condiments / spices: tea, garlic, tomato sauce								
including small amount of milk used in tea								
coffee								

# **Poverty & Coping Strategies: Food and Basic Needs**

Poverty & Coping Strategies (Case) Food and Basic Needs
In the past 30 days, has your family applied any of the below strategies to meet basic food needs?
Spent savings
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Bought food on credit or borrowed money to purchase food from non-relatives/friends
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Reduced essential non-food expenditure such as education/health
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Sell household assets/goods (jewellery, phone, furniture, electro domestics, etc.)
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Sell productive assets or means of transport (sewing machine, car, wheel barrow, bicycle, motorbike, etc.)
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Adult members of the household accepted socially degrading, exploitative, high risk or illegal temporary jobs
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Sent adult family members to beg
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Sent children (under 18) family members to beg
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Changed accommodation location or type in order to reduce rental expenditure
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Sent children (under the age of 18) to work in order to provide resources
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore
Withdrew children from school
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore

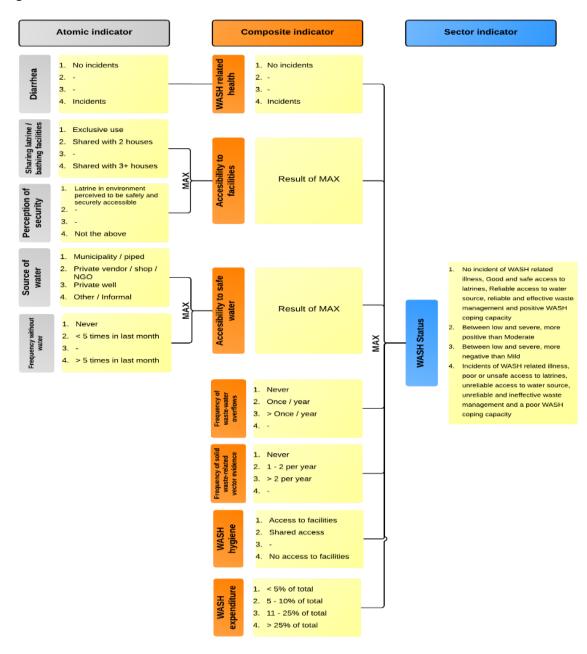
	Borrow Food.	Yes
Stress	Bought food on credit or borrowed money to purchase food	Yes
	Spent savings	Yes
	Bought food on credit or borrowed money to purchase food	No. because I have exhausted this strategy already and cannot do it anymore.
	Reduced essential non food expenditure such as education/health	Yes
	Sell productive assets or means of transport (sewing machine. car. wheel barrow. bicycle. motorbike. etc)	Yes
Crisis	Sell household goods (jewelry. phone. furniture. electro domestics. etc)	Yes
	Spent savings	No. because I have exhausted this strategy already and cannot do it anymore
	Reduced essential non food expenditure such as education/health	No. because I have exhausted this strategy already and cannot do it anymore
	Reduced essential non food expenditure such as education/health	No. because I have exhausted this strategy already and cannot do it anymore
	Sell household goods (jewelry. phone. furniture. electro domestics. etc)	No. because I have exhausted this strategy already and cannot do it anymore
	Sell productive assets or means of transport (sewing machine. car. wheel barrow.bicycle. motorbike. etc)	No. because I have exhausted this strategy already and cannot do it anymore
	Since arriving in Jordan. have you accepted high risk. illegal. socially degrading or exploitive temporary jobs	Yes
	Since arriving in Jordan. have you accepted high risk. illegal. socially degrading or exploitive temporary jobs	No. because I have exhausted this strategy already and cannot do it anymore
	Sent adult family members to beg	Yes
	Sent adult family members to beg	No. because I have exhausted this strategy already and cannot do it anymore.
	Sent children (under 18) family members to beg	Yes
Emergency	Sent children (under 18) family members to beg	No. because I have exhausted this strategy already and cannot do it anymore.
Score Calculation	Score	Vulnerability
If total of emergency strategies is greater than 0	4	Severe
Crisis > 0 and Emergency = 0	3	High
Stress > 0 and Crisis = 0 and Emergency = 0	2	Moderate
All 0	1	Least

#### WASH

#### Modified items:

- 1. Diarrhoea frequency (deleted)
- 2. WASH services
- 3. Drinking water
- 4. Sanitation
- 5. Solid waste
- 6. Hygiene promotion
- 7. Wash expenditure
- 8. Scoring / revised weighting system and new questionnaire

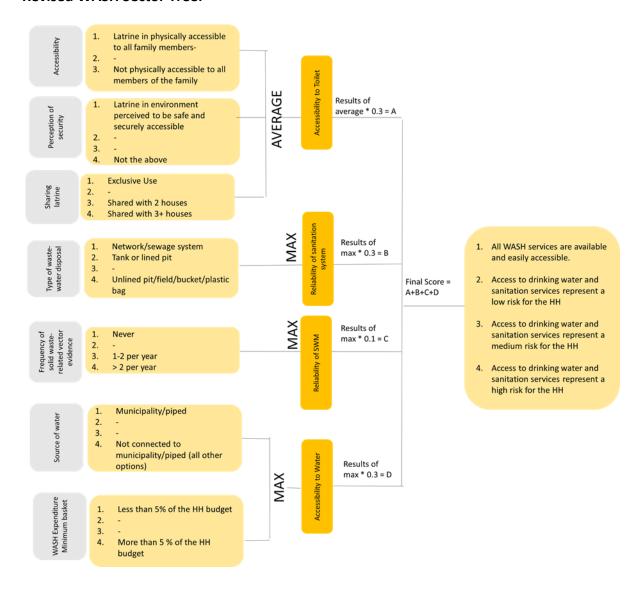
#### **Original WASH Sector Tree:**



The WASH sector needed to update their sector trees to adhere and correspond to the Jordanian context, questions were good but scoring tree not reflective of correct scoring or useful scoring for sector response:

- No open defecation or environmental prevalence
- Connected to the pipeline
- Water vendor and trucking is treated and
- Access to communal network and can pay the bills zero vulnerability however if do not have access then high vulnerability prevalence
- Sewerage network lined pit, waste water confined, unlined pit can pollute groundwater and represent contaminating water sources and increased sanitation and hygiene risk
- Ratio of per person per latrine not shared, number of people per latrine
- Solid waste structural problem throughout the country solid waste present vectors; solid waste disposal point and emptying communal level
- Global expenditure 5% of budget on WASH services.

#### **Revised WASH Sector Tree:**



WASH: Water, Sanitation & Hygiene (Household)								
Water								
-What is you source of water in your household?								
☐ Municipality/piped ☐ Not connected to municipality/ piped (other)								
Do you consider your water storage capacity (roof tanks, reservoirs, etc.) enough to cover all family needs (personal								
hygiene, cooking, house cleaning, etc.)?   Yes   No								
Sanitation								
-Is the latrine located in an environment which is perceived to be safely (infrastructure) and/or securely (no personal								
risk) to all members of the household during day & night? ☐ Yes ☐ No								
- Is the latrine physically accessible to all members of the household? $\qed$ Yes $\qed$ No								
-Is the latrine for exclusive use in your household? ☐ Exclusive ☐ Shared with 2 houses ☐ Shared with 3+ houses								
-Type of wastewater collection/disposal:								
☐ Network/sewage system ☐ Tank or lined pit ☐ Unlined pit, field, bucket, plastic bag								
Frequency of solid waste related to vector evidence (parasites, rats/rodents, insects)								
☐ Never ☐ 1-2 times per year ☐ >2 per year								

# Health

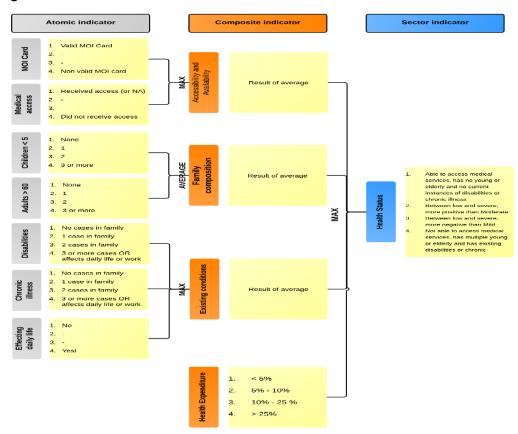
The Health sector vulnerability indicator is not aimed at assessing the extent of medical issues within families, rather it focuses on factors that are likely to impact a family's ability to mitigate health risks.

Atomic indicators selected to measure influences on health vulnerability are:

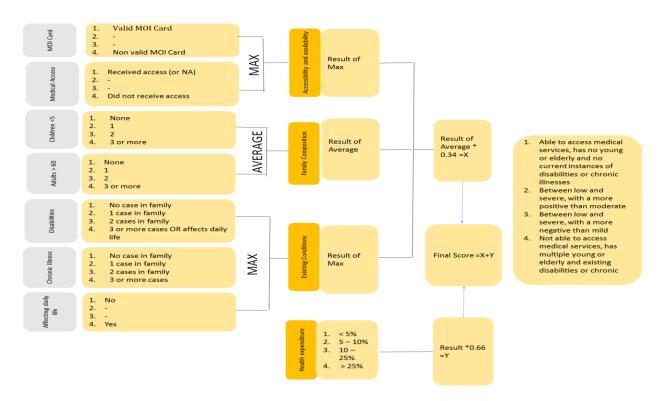
- 1. Access and availability of health care.
- 2. family composition
- 3. the existence of existing conditions
- 4. proportion of expenditure on health related items

VAF Survey 2015	Health and Access Utilization Survey 2015
12% of surveyed individuals had severe vulnerability related to lack of documentation	11% lack access to health due to documentation
41% of surveyed individuals are living in case with sever health vulnerable and 15% livening with high health vulnerable	95.2% were able to receive care in first facility and 86.6% sought care among those who need it

#### **Original Health Sector Tree**



#### **Revised Health Sector Tree:**



- The Health sector currently does not use the VAF health data to determine health sector strategic directions as HAUS can capably provide the needed information, the health sector will greatly minimize the level of information capture by VAF monitoring form by leaving only two indicators
- Sector aims to operationalize VAF assessment data at household level in 2017 through using household vulnerability levels in order to determine eligible cases for health assistance at different levels of care including cash for health.

Health (Case)									
If there was a medical need, were you or any of your family members able to access hospitals/clinics in the last six									
months? 🗆 Yes 🗆 No 🗀 No medical need									
(If more than one time during the last six months please respond for the last time health care was sought)									
Health (Individual/s)									
-How many individuals in the (same file) have a medical condition (including only chronic conditions and/or serious									
medical conditions and/or injury? No									
LOOP OPEN to capture name of each individual with medical condition:									
Effect on Daily Activities/Work									
<ul> <li>Does identified medical problem/disability affect the person's ability to perform activity of daily living (eating, bathing, toileting, dressing, transferring)? ☐ Yes ☐ No ☐ NA (this question to be repeated for every individual who has a medical problem)</li> <li>Does identified medical problem/disability affect the adult(s)' ability to work? ☐ Yes ☐ No ☐ NA (this question to be repeated for every adult who has a medical problem)</li> </ul>									

#### Education

#### 2016-2017 JRP/ 3RP Goals

- · Access to safe, equitable and quality education for children and adolescents affected by the crisis
- Strengthen the capacities of education systems and communities to deliver a timely, coordinated and evidence-based education response
- Educational interventions prioritize out-of-school, school-aged children and students receiving low quality education

#### 2017-2019 JRP Primary Focus Areas

- Access to education
- Risk of non-completion or dropping out

As the VAF is traditionally a case level assessment, we have acknowledged the need to request specific information in relation to the individuals within the case that were of school age in order to respond more appropriately to the needs, which the original sector tree developed in 2014 did not necessarily serve the best targeting of underprivileged or educationally and academically vulnerable individuals.

The second phase of the 'No Lost Generation' campaign aims to improve quality formal and non-formal learning opportunities for children in the refugee host countries. This will be achieved by strategically focusing on the two primary problems faced in Jordan and in accordance with JRP/3RP and 'No Lost Generation' Campaign mentioned previously.

A year after implementation, and having reviewed VAF data collected for the Education sector, the existing sector tree was reviewed and it was agreed that it is:

- limited in terms of scope
- restrained in terms of the questions it asks to provide an accurate vulnerability score.
- over-inflated vulnerability education scores, as a result of taking the 'maximum' value from both atomic and composite indicators and carrying it over to the final score.

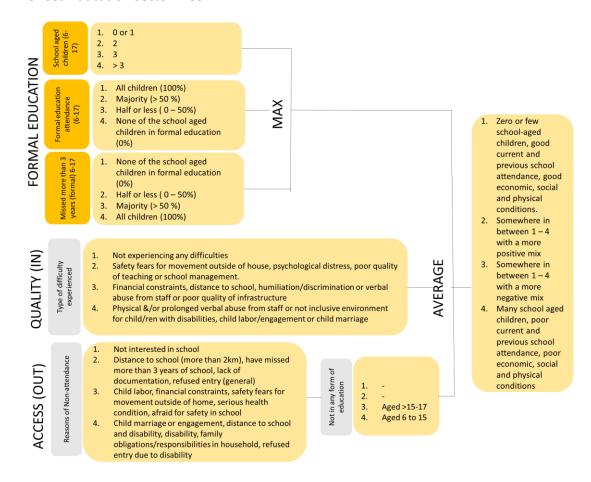
The Education vulnerability is shown only for cases that have school aged children. If the analysis included all cases without children, education vulnerability would have a higher proportion of low and moderately vulnerable cases.

We have identified various factors associated with a refugee case being at risk of educational vulnerability. These include the number of school aged children a family needs to support, the level of current and previous attendance in school and factors related to a risk of non-attendance, and accordingly divided out risks for non-enrolment into economic, social and physical.

In order to improve the identification and response to education vulnerabilities, and to enable the prioritizing individuals that are severely vulnerable, we have established variance within the scores and looked at children as individuals rather than pooling them all collectively at case level.

Discussions lead to a decision of dramatically changing the existing model in to something more tightly aligned with the Education objectives within the JRP and 3RP for 2017-19.

#### **Revised Education Sector Tree**



#### Risk of Non-Completion

- The current priority has been for Syrian children to access the formal education system. However, of equal importance will be to ensure that all children can successfully be retained, and to complete up to a minimum of the Year 10 compulsory certificate. There are many factors which may contribute to early 'drop out' such as labor, marriage, difficulty 'catching up' after years of interrupted education, concerns for safety (double-shift schools finish later in the afternoons), transport issues and other challenges related to the double-shift system.
- The VAF focus will be on two key areas: children who remain out of school despite the increase in available
  formal places; and children who are at risk of not completing education i.e. early 'drop out'. The results of the
  VAF will be used to identify trend data to inform education planning and management, as well as provide
  information about individual families/children who can be supported to access and/or complete compulsory
  education.

#### Access to Formal Education for Syrian Refugees

- The number of the Syrian refugees with access to the formal education system is expected to increase by 75,000 in the 2016/2017 school year (with an additional 50,000 places available in the formal schools and 25,000 in the Catch Up Program).
- Despite significant increases in available seats, it is anticipated that issues such as longer distances to the doubleshift schools, the need for youth to contribute to the household income and children with a wide range of disabilities, will continue to pose access challenges for some.

Education										
Are all of your children (aged 6-17) attending formal education?										
Number of children	Number of children attending school?									
Number of children not attending school?										
LOOP OPEN FOR No. of School aged children in school (to be completed for each individual child aged 6-17)										
Children Enrolled in School (RISK OF NON-COMPLETION)										
Age Group										
□Between 6-12	ween 6-12									
□Between 13-15	· · · · · · · · · · · · · · · · · · ·									
□Between 16-17										
			b. □Morn	ing shift- double shifted school						
			c. $\square$ After	noon shift						
			☐ Certified N	Ion-Formal education (Catch						
			up)							
			☐ Specialized	d (special needs)						
Children Enrolled in	Formal E	ducation (R	ISK OF NON-	COMPLETION) Open ended quest	ion not list read					
IF your child is atten	ding scho	ol, what dif	ficulties or ch	allenges if any is he/she experien	cing? Please tick up to a					
maximum of 4 that a	apply:									
☐ Physical &/or pro	olonged v	erbal abuse	from staff	☐ Financial constraints						
☐ Humiliation, disc	riminatio	n, verbal abı	use from staf	f ☐ Distance to school (>2k	m)					
☐ Safety fears for n	novemen	t outside ho	me	☐ Bullying amongst stude	ents					
☐ Poor quality of te	eaching ar	nd/or manag	gement (servi	ce)   Psychological distress /	severely distressed					
☐ Not inclusive for	children v	with disabilit	ties (environr	nent) 🛘 Poor quality of infrastru	icture					
☐ Child labor / enga	gement /	early marri	age	☐ Not applicable (no diffi	culties)					
LOOP OPEN FOR NO	of School	ol aged child	dren not in sc	hool (to be completed for each i	ndividual child)					
Children Not Enrolle	ed in Scho	ol (ACCESS)	(aged 6-17)							
Age Group	Name	Gender	Missed	What are the reasons? Open end	ded question not list read					
			years of							
			education							
☐Between 6-12		ΠМ	□Less	☐ Not interested (cultural/not u	ıseful)					
☐Between 13-15		□F	than 3	☐ Serious Health Condition	45					
			years	☐ Child marriage/engagement	•					
				☐ Missed 3 or more years of ed						
				☐ Child labour/work with other						
				☐ Family obligations/ responsib☐ Financial constraints (transpo						
				☐ Lack of documentation (MOI	•					
□Between 6-12	1	ΠМ	☐ 3 years	☐ Distance to school (more than	•					
□Between 13-15		□F	or more	☐ Refused entry (general)	·· -····,					
□Between 16-17				☐ Safety fears for movement ou	utside the home					
				☐ Refused entry due to disabilit						
				☐ Disability <i>(unable/ unwilling/</i>	• •					
				☐ Afraid for safety in school						
	1	1	1							

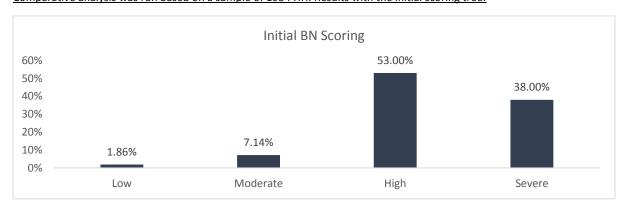
## **Basic Needs**

The decision to review based on two main reasons:

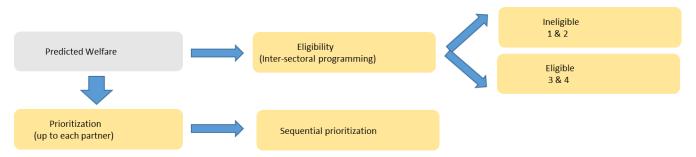
- Basic Needs partners felt the initial scoring tree included more information than needed and was more complicated than necessary. +reviewed the scoring tree would allow to lighten the VAF questionnaire.
- · Some partners were also concerned the initial scoring tree double counted some atomic indicators

#### BNWG partners agreed the scoring system should allow prioritizing rather than defining eligibility

Comparative analysis was run based on a sample of 1934 HH. Results with the initial scoring tree:



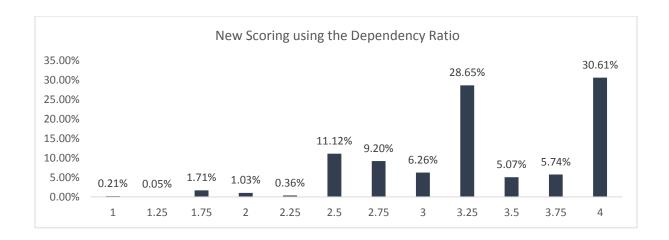
Option 1 – Using only the predicted welfare



- Gave a static view of the situation as it exist for the households
- > It did not necessarily capture the vulnerability of the households to future shocks and risks
- Not considered relevant as it does not take into account enough parameters

Decided to factor in at least one additional indicator that as a measurable impact on the vulnerability of the households.

Options for additional factor: Using dependency ratio or debt per capita?



- > did not give a clear picture of differences in vulnerability between households
- > forced almost all of them into level 3 and 4 = Levels were artificial and forced rather than being an indicator
- > dependency ratio is also used as a stand-alone indicator to measure the general vulnerability of households.
- > It was decided to drop this parameter and use the debt per capita
- > **Debt per capita =** very clear measurable indicator of how much flexibility a household has to adapt to financial constraints
- > clear tool for prioritization as well as advocacy and informed decisions on eligibility.
- > more distinctions inside the levels themselves with 0.25, 0.5 and 0.75.
- Assumption that all households reaching 3 and above find themselves below the poverty line and with a significant debts burden but prioritization to be made by each agency.

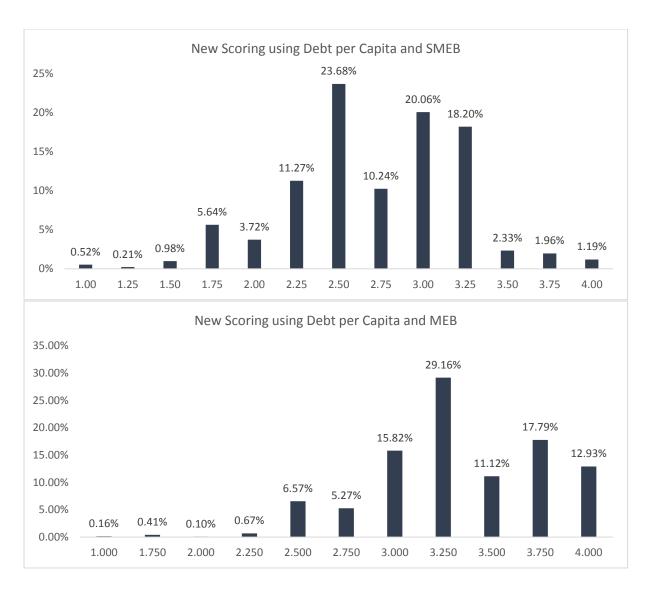
Options for PW calculation: Using MEB or SMEB?

#### SMEB =

- Only 44% of households scoring 3 and above.
- > Does not seem to capture enough households actually living below the poverty line who should be considered for support.

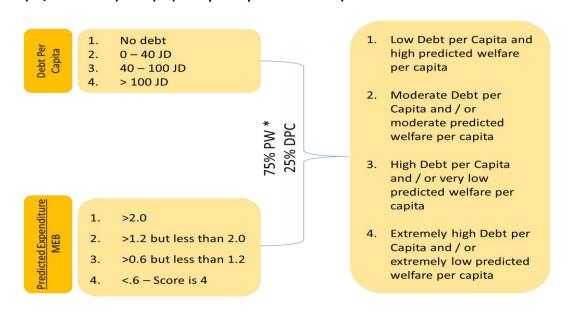
#### MEB =

- > 87% of the households ranking 3 and above with 13% reaching 4.
- > captures all persons living below the poverty line who should be considered for support while allowing agencies to prioritize their selection based on the ranking inside the levels.



#### Final recommendation:

#### (PE/MEB Score)\*75%) + (Debt per Capita Score\*25%)



Financial Situation (Case)									
Monthly Expenditure (JD)									
Rent (monthly)									
Jtilities (electricity, gas, etc.)									
Food (excluding WFP vouchers)									
Water (network, tanker, bottled, dislodging waste water, etc.)									
reatment (medical, pharmaceuticals)									
Education (books, uniform, stationary, fees)									
Transportation (to school, to health/rehab centres, to market, others)									
Infant needs (infant food)									
Basic HH items (NFIs)									
Basic Hygiene items (soap, shampoo, toothpaste, sanitary pads/towels, diapers)									
Debt repayment (monthly)									
Other, please specify:									
Total									
Proceeds from work (monthly)									
From whom:   Father  Mother  Adult									
☐ Child ☐ Other, please specify:									
Pension									
Income from assets in COO									
Remittances.									
From where (country): From whom (relationship):									
How often? ☐ Quarterly ☐ Six monthly ☐ Irregular ☐ One-time									
Income from other organizations or charitable donations - monthly and continuously (not from UNHCR). From whom:									
Local CBO:									
☐ International NGOs:									
☐ Other, specify:									
Other, specify: Other income (specify):									
Other, specify: Other income (specify): Are you receiving UNHCR cash assistance:									
☐ Other, specify: Other income (specify): Are you receiving UNHCR cash assistance: ☐ UNHCR CA* ☐ UNICEF cash grant* ☐N/A									
☐ Other, specify: Other income (specify): Are you receiving UNHCR cash assistance: ☐ UNHCR CA* ☐ UNICEF cash grant* ☐ N/A * If the family receives UNHCR CA or UNICEF cash grant, please select this option without taking into account its									
☐ Other, specify: Other income (specify): Are you receiving UNHCR cash assistance: ☐ UNHCR CA* ☐ UNICEF cash grant* ☐N/A * If the family receives UNHCR CA or UNICEF cash grant, please select this option without taking into account its amount for the final total.									
☐ Other, specify: Other income (specify): Are you receiving UNHCR cash assistance: ☐ UNHCR CA* ☐ UNICEF cash grant* ☐ N/A * If the family receives UNHCR CA or UNICEF cash grant, please select this option without taking into account its									

# Livelihoods

Vulnerability assessment and livelihoods programming: Targeting is based on assets

#### **Minimum Economic Recovery Standards (MERS)**

Focuses on economically viable activities:

Financial Services - Productive Assets - Employment Creation - Enterprise Development

- undertaken by groups or individuals that are capable of sustaining and expanding the activity into the future.

- Should vulnerable groups lack the ability to sustain an activity, they are best served by alternative forms of assistance, including cash transfers and other social safety-net interventions.



Human assets education + skills + current job
Physical assets shelter, food, tools, materials for home based business
Financial capital <u>no debt</u> (savings), remittances, income from CoO, income created in CoA
Social assets ability to seek employment, coping strategies, motivation
Personal assets gender? Decision making?

Livelihoods planning criteria used not necessarily the ones used in a vulnerability assessment

- refer back to socio economic information reflect on basic needs criteria
- Targeting has to be based on a socioeconomic portion
- Targeting using ProGres
- Wealth Groups skills and assets
- MERS sphere for economic recovery after a crisis
- Financial services
- Productive Assets
- Employment Creation
- Enterprise Development
- Working and trying to create a living targeting groups who are able to sustain employment, an investment in an individual
- Enumerator training and mode setting avoid negative assessment interview and tone
- Interest and availability gender interest came in (women not availability but doesn't discount interest)
- Enabling environment and possible support for childcare
- Graduation model
- Were you working before (baseline) i.e. people not working prior to CoA?

#### Sectors of Employment as identified by ILO

- Previous background and education and skill set
- Or anticipating open industries for targeting

# Session 2: Parked items

Analyze FS Section in VAF Form with the objective to remove non-related scoring questions with possible relegation to the baseline.

WASH will add dimensions to Baseline with the objective to analyze and revise the updated sector tree (new inclusions)

Health sector to revisit top composite indicator – should 'no MOI card' & 'access to service' result in a score of 4?

Map 3RP interventions to scores and triggers

Education sector tree - 'Risk of Non-completion' should it be broken down in to atomic indicators to document calculation

Navigate eligibility and prioritization

Livelihoods section to be designed with Programme response in mind: i.e. identify Livelihood response beneficiaries

Map Livelihoods comprehensively in baseline

VAF and impact PDM looking at change in vulnerability i.e. Predicted Welfare and Negative Coping Strategies over time

Identify needs and interest for models beyond poverty model by sector

Articulate the role of referrals, safeguards and case management as relates to the VAF

# Disability inclusion as Universal indicator — Celine Abric, Handicap International, Regional Technical Unit Coordinator, Jordan.

#### Problem:

• There is no comprehensive disability registration elements included in UNHCR mechanism and different practices across humanitarian actors

#### Illustration:

- · Current data available within UNHCR registration system: 2.5% of refugees with disabilities
- HI/Help age survey on Syrian refugees with disabilities in Jordan and Lebanon 2013: 30 per cent of refugees have specific needs

Current % of Refugee Persons with disabilities in Jordan is 2.5% by incorporating this question at registration and in the existing VAF: do you have a disability? On average in any humanitarian emergency crisis this should be around 20-30% of the population. Through testing the Washington Group Questions (WGQs) in UNHCR Registration on 100 cases the WGQs identified 30% if cases with persons with disabilities. By asking different questions (WGQs which are internationally tried and tested and removed wording bias) lead to different answers one in five refugees is affected by a physical, sensory or intellectual impairment; one in seven is affected by chronic disease; one in 20 suffers from injury, with nearly 80 per cent of these injuries resulting directly from the conflict.

#### 2015 survey World Humanitarian Summit 2016 - views from people with disabilities:

54% of respondents with disabilities state they have experienced a direct physical impact, sometimes causing new impairments.

27% report that they have been psychologically, physically or sexually abused.

Increased psychological stress and/or disorientation are other effects of the crisis for 38% of the respondents with disabilities.

75% of the respondents report that they did not have adequate access to basic assistance such as water, shelter, food or health.

50% had no access to specific services they need as a result of their impairment such as rehabilitation, assistive devices, access to social workers or interpreters, further impeding their access to mainstream assistance 85% of the respondents consider that persons with disabilities are more vulnerable in times of crisis.

92% estimate that persons with disabilities are not properly taken into account in current humanitarian responses 46% highlight their lack of understanding of the needs of persons with disabilities

Only 26% undertake a systematic identification of persons with disabilities as part of their project.

In terms of provision of services, humanitarian actors report that only 30% to 45% of their activities, depending on the sector, are accessible to persons with disabilities (Chart 8).

Survey by HI 2015, preparatory work Istanbul humanitarian summit, 769 respondents, DPOs, PWDs, humanitarian actors

484 persons with disabilities, including 400 directly impacted by a humanitarian crisis

167 humanitarian actors, including international and local non-governmental organizations and UN agencies

118 DPOs in 28 countries, including 109 that worked in a crisis setting (78 in the context of natural disasters and 60 in the context of conflicts)

#### Why better data collection is needed?

Addressing persons with disabilities' needs during crisis is the duty of humanitarian actors

- Humanity and impartiality principles
- UNCRPD, Charter on inclusion of PWDs in humanitarian action

#### Data collection will serve better:

- Understanding of the scope of needs: identification and prevalence
- Advocacy towards decision makers and donors
- Better consideration in planning from preparedness to aid delivery including both access to basic needs and specific needs

UNCRPD adopted end 2006 article 11 on PWDs in situation of crisis and equal protection and safety

• Art 31 on statistics and data collection

- Art 32 on international cooperation
- Charter on inclusion of PWDs in humanitarian action Istanbul May 2016

How to identify people with disabilities?

- 1. We are not doctors
- 2. Do not rely on observation
- 3. May disabilities are not visible
- 4. People with disabilities are sometimes kept hidden within households
- 5. Some perceived disabilities may not in fact be experienced by the individuals themselves as disabilities.



#### **The Washington Group Questions**

WG was established as a City Group under the aegis of the UN Statistical Commission to:

- · address the need for population based measures of disability
- foster international cooperation in the area of health and disability statistics
- produce internationally tested measures to monitor status of persons with disability
- incorporate disability into national statistical systems
- Short set of questions 2006
- Extended set of questions 2010
- Children 2-17 functioning questions 2016
- All validated after extensive cognitive and field testing
- Based on ICF/WHO (2001) used as a reference = social model of disability
- · Focus on basic activities that in unaccommodated environment make difficult participation
- Use neutral language = does not mention disability
- Target at general population, 5 and above, men & women, with and without disabilities
- Identify those at greater risk than the general population for limitations in participation
- Once the addition of the short set becomes integrated into core statistical systems disaggregating outcomes (education, employment etc.) by disability status becomes routine

International Classification of Functioning, Disability and Health published by WHO in 2001. ICF is used to record problems involving functions and structures of the body, activity limitations and participation restrictions. Functioning and disability associated with health conditions are classified in ICF. The objective of the questions is to know about participation and equalization of opportunities.

Language: does not mention the word disability as disability is in most countries stigmatized. If ask about disability people might chose to deny.

#### Disability inclusion in UNHCR tools:

Use of the WGQ short set in VAF and at initial UNHCR registration:

- 6 questions addressing 6 domains of functioning that capture the majority of functioning in a population
- 4 categories of answers (no difficulty, some difficulty, a lot of difficulties, cannot do at all)

#### Complemented with disability related questions at sector level

- Is the latrine physically accessible to all members in the house? (WASH)
- Easy access to the dwelling for all members of family? (Shelter)

# What's next? The WGQs use will provide evidence about disability prevalence among refugee households, and enable the sector to:

- To advocate for disability inclusion in humanitarian response at policy level as well as at operational level among RAIS/VAF organizations
- To improve access to services especially among RAIS/VAF organizations
- · Flag households living with disability and identifying some sectors where participation is limited
- Provide a complementary needs assessment that must take place at individual level
- Improve coordination and referral mechanisms in between organizations operating in the sector to develop an inclusive response and improve coordination/referrals mechanisms of persons with disabilities.

	No difficulty	Some difficulty	A lot of difficulties	Cannot do at all
Do you have difficulties to see,	1	2	3	4
even if wearing glasses?				
Do you have difficulties to	1	2	3	4
hear/listen, even if using a				
hearing aid?				
Do you have difficulties to walk	1	2	3	4
or to climb stairs?				
Do you have difficulties to	1	2	3	4
concentrate or remember				
things?				
Do you have difficulties (with	1	2	3	4
self care (such as )washing all				
over or dressing?				
Using your usual language	1	2	3	4
(native language) do you have				
difficulties to communicate for				
example understanding or				
being understood by others?				

Age & impairment (Individual/s) the title of the section is for information management only. The enumerator will						
NOT mention it as it could bias the results.						
The next questions ask about difficulties you or any member of your family may have doing certain activities						
because of a HEALTH PROBLEM						
If Answer is: Yes – a lot of difficulty or Cannot do at all for any question (OPEN LOOP)						
Name: Age: Gender: to be captured.						
1. Do you or any members of your family have difficulty seeing, even if wearing glasses?						
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all						
2. Do you or any members of your family have difficulty hearing, even if wearing a hearing aid?						
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all						
3. Do you or any members of your family have difficulty walking or climbing steps?						
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all						
4. Do you or any members of your family have difficulty remembering or concentrating?						
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all						
5. Do you or any members of your family have difficulty (with self-care such as) washing all over or dressing?						
☐ No – no difficulty ☐ Yes - some difficulty ☐ Yes – a lot of difficulty ☐ Cannot do at all						
6. Using your normal customary language, do you or any members of your family have difficulty communicating, for						
example understanding or being understood?						
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all						
Decomposite tier Chatras and a second survival and a second						
Documentation Status — Douglas Di Salvo, UNHCR Protection Sector						
Chair						
Collection of individual or case protection data is limited in consideration						
Collection of individual or case protection data is limited, in consideration -  • Complexity of protection data, confidentiality						

- Capacity level of enumerators, and

VAF questions focus on two critical documents\*:

- Valid UNHCR Asylum-Seeker Certificate
- Ministry of Interior Service Card; and Work Permit (Livelihoods)

The collection of this data in the VAF monitoring assessment will identify cases without these two primary documents for referral for intervention by UNHCR and partners.

Protection						
- Do you have your UNHCR Asylum-See	eker Certificate? ☐ Yes ☐ No					
If no, what is the reason?						
☐ Lost	(police. etc.)					
☐ Not received from UNHCR	☐ Other, please specify:					
☐ Confiscated by service provider (hos	pital, school. etc.)					
- Do all adult members of your family have a UNHCR Asylum-Seeker Certificate: ☐ Yes ☐ No						
- Is your Asylum-Seeker Certificate val	id? □ Yes □ No					
If no, what is the reason?						
☐ You approached UNHCR and you did	I not receive an appointment for renewal					
☐ Not renewed yet but have a renewa	l appointment					
☐ Not renewed and need a renewal ap	ppointment (ensure referral to UNHCR)					
MOI/Service Card						
- As a PA, do you have a MOI Service Ca	ard? □ Yes □ No					
-What type of MOI card do you have:						
☐ Old (white) issued in urban areas	☐ New (magnetic) issued in urban areas					

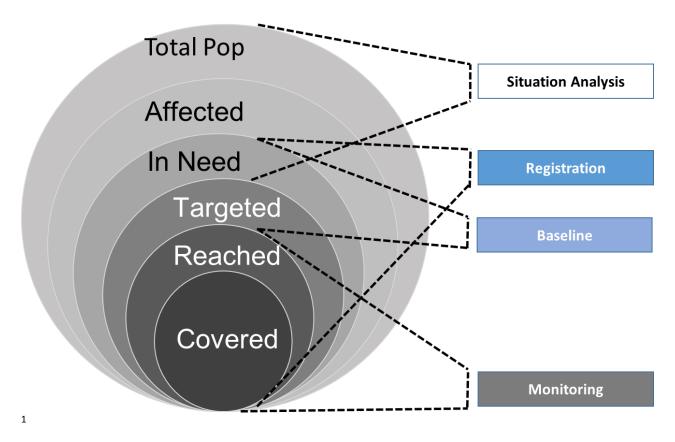
☐ MOI "Proof of Registration" from camp, or MOI document issued in Rabaa Sarhan										
- Do all members of your family have an MOI card: ☐ Yes ☐ No										
Is the place of MOI card issuance the same as your family's place of residence? (look at address & place of										
- issuance on card) · Yes · No (ensure referral to UNHCR)										
- If no, which of your family member do not have a MOI card:										
	Age	0-4	5-11	12-17	18-59	60 & above				
	category									
							_			
	F									
	M						1			
	IVI									
Work Permit										
How many individuals in your household possess a valid work permit:										
Who?										
Enumerator's Judgment:										
Based on your experience with other families, does the family classify as:										
☐ Severely vulnerable ☐ Highly vulnerable ☐ Moderately vulnerable ☐ Not vulnerable										
Important Note: This question is for research purposes ONLY. It will not have any impact on any assistance.										

The recent revisions have focused on streamlining the VAF questions to a core minimum to support the vulnerability assessment, so we have where possible reduced the number of questions, particularly those that are not implicated in the scoring. The aim with the current simple documentation questions is to use the lack of either UNHCR or MOI documents as something of a proxy or indicator for the possible presence of other document problems, the idea being that if someone is lacking an MOI card, the reason for this can be looked into, and if there is a documentation problem (with marriage, ID, health or lease documents) we can address those and resolve the MOI card problem. On the other hand, if a person doesn't have a birth certificate but does have an MOI card, then it could be considered that the absence of the birth certificate is not resulting in vulnerability as shown in the inability to get the MOI card – for example, where the person has a passport, national ID, family booklet or has been approved by the Special Committee, establishing sufficient basis for the MOI card to be issued. In essence, we'd propose to use the UNHCR or MOI card to identify at a broad level those who may be feeling the impact of a documentation problem, and then – through an assessment/referral process to be developed – we can use the resources available to investigate and resolve the source of the problem. This would allow us to improve our response to documentation problems, while keeping the VAF streamlined and efficient.

The referral is intended to direct the case to UNHCR in order to allow UNHCR to identify the reasons for the difference in MOI card location and actual residence, and to provide advice on renewing the card in the new location. This question has been included in the previous versions of the questionnaire, and is a part of the vulnerability assessment. However, given that in most cases the problem should be relatively easily solved, we'd like to propose that in the next revision of vulnerability criteria, we revisit whether this is still considered an important element of the vulnerability assessment. The referral to UNHCR (rather than, e.g., referral to the local police station or another source of information/assistance), is due to the emphasis on the core VAF as a process of obtaining information concerning the family's vulnerability, rather than as an interaction in which protection or legal or other counselling is provided.

# Registration, Baseline Assessment, Continuous Assessment and Case Management

Humanitarian Profile according to ISAC Guidance

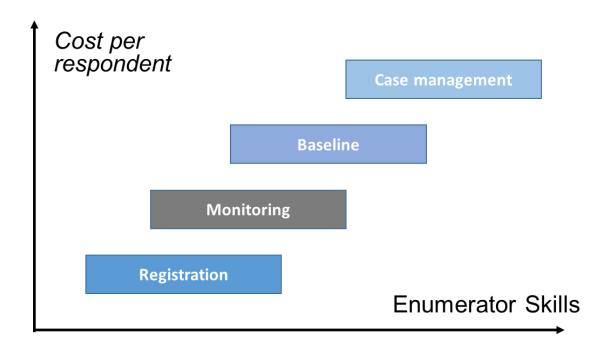


#### For example:

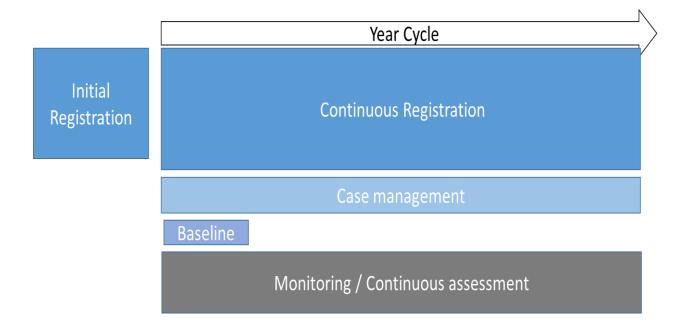
Reached – Monitoring = reached in terms of prevention Covered – Monitoring = weight measurement, i.e. WASH and shelter

Cost and enumeration skills: Cost of assessment is linked to number of questions included, and quality of information is linked to Enumerator skills both training and qualifications.

 $<sup>^1</sup>https://www.humanitarianresponse.info/en/system/files/documents/files/humanitarianprofilesupportguidance\_final\_may2016.pdf$ 



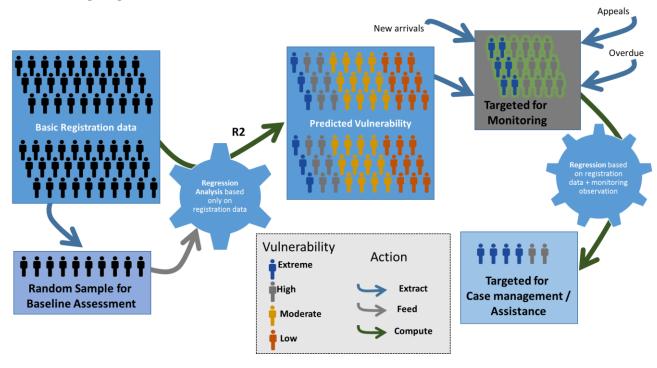
Timeline: The Baseline is only done once (maybe twice a year if there is a specific shock) – or even every two or three years if the situation is relatively stable. The Baseline is a representative sample taking a snapshot at a particular point in time, operational changes that require updating. The Baseline assessment requires action and updating again and again based on contextual changes over time and re updating to respond



#### **Current Targeting for monitoring**

- Monitoring is embedded in existing programmes
- 5000 cases per month priority based on
  - New arrivals
  - Appeals
  - Overdue assessment waiting list

## **Enhanced Targeting**



## **Baseline Assessment**

- 1. SNAPSHOT REPRESENTATIVE SURVEY: (carried out periodically and after substantial changes in the context.)
- 2. ANALYSIS OF THE SITUATION: (identify profiles, protection needs, risks, and solutions)
- 3. SUPPORT PROGRAMME DESIGN (inform programme design & interventions)

## Expected Analysis - Baseline

- 1. Baseline/Needs indicators for the entire population
- 2. Regression analysis for targeting models
- 3. Classification / clustering of individuals for vulnerability analysis
- 4. Generation of sectoral composite indicator at community level to measure Community Level Severity Index

## Continuous Assessment - Monitoring

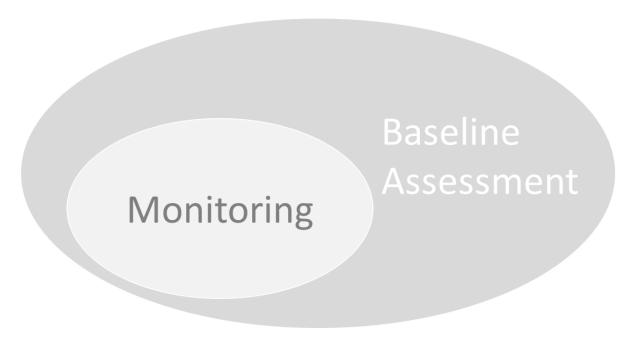
- 1. CONTINUOUS DATA COLLECTION: (Collecting regularly over an extended period of time)
- 2. ANALYSIS OF TRENDS: identify violations of rights and protection
- 3. SUPPORT OPERATION DELIVERY: informing effective responses

### **Expected Analysis - Monitoring**

- 1. Confirmation of assistance eligibility and coordination of referral pathways
- 2. Analysis of Trends time, frequency and evolution of events over time
- 3. Analysis of Pattern: Geography, occurrences between different areas
- 4. Analysis of **Correlation** relationships between indicators: correlations and connections.

## Comparison of scope

- Includes common data points
- Scope of baseline assessment is larger than monitoring assessment



PDMs – impact assessment predicted welfare over coping strategies Over period of time

Household, Dependency and Coping Strategies

## Unit to be used:

- Household is the standard unit used in both national and international Household survey programme:
  - Allow for comparability
  - Allow for more complex analysis of interaction
  - More complex to capture than case information
- Case (i.e. group of individuals as registered) corresponds to the unit used for assistance to be used for continuous assessment / monitoring

## Concepts to reflect

- 1. Household group of individuals living together
- 2. Case group of individuals as registered for assistance purpose
- 3. Household members provides details
- 4. AGDM for age and gender specific issues

Definition of household: "Persons who live together and have communal arrangements concerning subsistence and other necessities of life, such as eating together"

- The **household dwelling** -> living in a housing unit as belonging to the same household.
- The housekeeping concept -> common provision for food or other essentials for living, with or without combining with any other person to form part of a multi-person household.

This concept is explained in details in the [Principles and Recommendations for Population and Housing Censuses] (http://unstats.un.org/unsd/publication/seriesM/Series M67rev3en.pdf).

The concept of household include those persons who live together and have communal arrangements concerning subsistence and other necessities of life, such as eating together. This implies therefore 2 important arrangement;

The **household dwelling** concept regards all persons living in a housing unit as belonging to the same household. According to this concept, there is one household per occupied housing unit. Therefore, the number of occupied housing units and the number of households occupying them are equal and the locations of the housing units and households are identical.

The **housekeeping** concept, that is to say, a person or a group of two or more persons living together who make common provision for food or other essentials for living, with or without combining with any other person to form part of a multiperson household. The persons in the group may pool their resources and have a common budget; they may be related or unrelated persons or a combination of persons both related and unrelated.

#### **Household Types**

- Nuclear household
  - · Family unit
- Extended household
  - Family unit + additional related members
- Composite household
  - Family unit + additional non-related members

3 types of households can be distinguished:

**Nuclear household**: It is defined as a household consisting entirely of a single family nucleus. It may be classified into: Married-couple family: With child(ren) or Without child(ren);

Partner in consensual union (cohabiting partner): With child(ren) or Without child(ren);

Father with child(ren);

Mother with child(ren);

Extended household: It is defined as a household consisting of any one of the following:

A single family nucleus and other persons related to the nucleus, for example, a father with child(ren) and other relative(s) or a married couple with other relative(s) only;

Two or more family nuclei related to each other without any other persons, for example, two or more married couples with child(ren) only;

Two or more family nuclei related to each other plus other persons related to at least one of the nuclei, for example, two or more married couples with other relative(s) only;

Two or more persons related to each other, none of whom constitute a family nucleus;

Composite household It is like an extended household with the difference of:

A single family nucleus plus other persons, some of whom are related to the nucleus and some of whom are not, for example, mother with child(ren) and other relatives and non-relatives;

A single family nucleus plus other persons, none of whom is related to the nucleus, for example, father with child(ren) and non-relatives);

Two or more family nuclei related to each other plus other persons, some of whom are related to at least one of the nuclei and some of whom are not related to any of the nuclei, for example, two or more couples with other relatives and non-relatives only:

Two or more family nuclei related to each other plus other persons, none of whom is related to any of the nuclei, for example, two or more married couples one or more of which with child(ren) and non-relatives;

Two or more family nuclei not related to each other, with or without any other persons;

Two or more persons related to each other but none of whom constitute a family nucleus, plus other unrelated persons; Non-related persons only.

#### Cases

Need to understand allocation of expenses (housekeeping & dwelling)

- 1. One single family nucleus which then equals a UNHCR case.
- 2. An extended household with two or more than two UNHCR cases.
- A composite household with two or more than two UNHCR cases, as well as additional members, such as host communities individuals.

## Relations with UNHCR cases as per Registration

The UNHCR case is the equivalent of Nuclear household. NHCR case are used a basis for large part of the assistance delivery.

When surveying Households, it is important to make connection between the households and the cases:

<u>Case 1:</u> One single family nucleus which then equals a UNHCR case. In this case both dwelling & housekeeping are de facto shared.

<u>Case 2:</u> An extended household with two or more than two UNHCR cases. In this case, the surveyor will record if dwelling & housekeeping are effectively shared between cases.

<u>Case 3:</u> A composite household with two or more than two UNHCR cases, as well as additional members, such as host communities individuals. In this case, the surveyor will record if dwelling & housekeeping are effectively shared between cases, as well as with the members that are not part of the cases.

The main point is to allow for understanding the allocation of expenses (housekeeping & dwelling) between cases that would be grouped together in the same extended or composite household. The allocation could be based for instance on: One case covering for all other cases;

One case covering for non-UNHCR case members;

Allocation based on number of individuals in each case;

Allocation based on number of adults individuals in each case;

Allocation based on number of individuals that get an income in each case, etc.

#### Defining members of household:

- 1. Name & details of the head of household, including his refugee registration number.
- 2. Names & details of all the members of your immediate family who normally live and eat their meals together here. Names, sex, and relationship to household head are first listed.
- 3. Names & details of any other persons related to you or other household members "Extend Household"- who normally live and eat their meals together here.
- 4. Names & details of any other persons not related to you or other household members- "Composite Household"-, but who normally live and eat their meals together here

Point 2: For each member, in addition of getting Individual ID, the enumerator should ask if they are registered under the same UNHCR case ID than the head of household (if not get the other number and the reason why they are living together).

Point 3: "Are there any other persons not here now who normally live and eat their meals here? for example, household members studying elsewhere or traveling". get their details and their refugee ID.

Point 4: such as servants, lodgers, or other who are not relatives. Do not list servants who have a household elsewhere, and guests who are visiting temporarily and have a household elsewhere

#### AGDM within household

- AGDM = Age Gender Diversity Mainstreaming
- · Approach required for specific questions mostly on attitude & perceptions
- Questions to be raised separately within household
- No need to get all members

### Age Dependency Ratio

- Compiled from registration data
- Need to factor different age bracket (60 for refugees, 65 for comparison with census...)
- Comprehensive dependency ratio include additional specific needs
  - Persons with disability
  - · Chronically ill

On Dependency ratio, there's a quite well defined generic definition for that concept:

https://en.wikipedia.org/wiki/Dependency ratio. It's mostly based on age. I understood from the last discussion that could have some recommendation to include an expanded definition that would **include in the dependent the persons with specific needs**. That would provide a more consistent way to look at the ratio especially as we are promoting the concept of protection vulnerability.

## **Economic Dependency Ratio**

- · Compiled from survey data
- Need to factor different age bracket (60 for refugees, 65 for comparison with census...)
- Comprehensive dependency ratio include additional specific needs
  - · Persons with disability
  - Chronically ill

## **Negative Coping Strategies**

- Measurement of both usage & frequency
- Implicit analysis of the severity of each strategies
- Strategies can be cross analyzed in line with attitude & perception for instance child labour is worst if it is perceived as acceptable by the head of household

Deriving a Context – specific list of coping behaviours

- Keep the list down to a feasible number
- Main set of coping strategies should represent the consensus
- Used in times of scarcity not just a normal way of operating

A list of coping individual coping behaviours can be established through focus group interviews with members of the local community.

Try to keep the list down to a feasible number (perhaps 12–15 at most).

The list should not include any similar or overlap ping coping strategies (i.e. different ways of describing the same basic behaviour). The list should be the main set of coping strategies—it doesn't need to include every single strategy mentioned (some are very rare), but should represent the consensus view of all the groups interviewed. The coping strategies are used in times of scarcity, and are not just a normal way of operating.

#### Regional list: 4 categories:

27 non-overlapping strategies

- 1. Rationing Strategies
- 2. Increase Short-Term Household Income
- 3. Decrease Short-Term Household Expenditure
- 4. Decrease Numbers of People

#### Use Focus Group Discussions:

- 1. Start with standard regional list
- 2. Omit strategies that do not apply
- 3. Add relevant local strategies

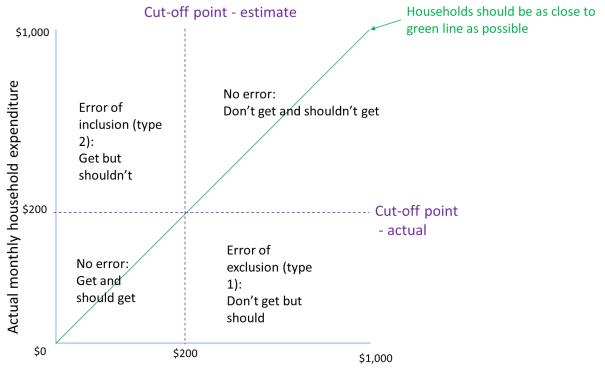
## Welfare Maintenance and regression modelling

The concept of proxy means testing is usually understood as using observable characteristics of the household or its members to estimate their incomes or consumption, when other income data (salary slips, tax returns, invoices etc. are unavailable).<sup>2</sup>

"Proxy means Testing" provide prediction models:

- Related to a target variable (expenditure per capita)
- Based on predictor variables, i.e. proxy (registration, self-declared, observed)
- Through a population subset or sample (all visited & surveyed)
- in order to apply them afterward to a larger population (all registered)

<sup>&</sup>lt;sup>2</sup> https://olc.worldbank.org/sites/default/files/1.pdf



Predicted monthly household expenditure from PMT

Target variable and looking at all predictors from VAF against expenditure per capita, (what you're trying to predict – target variable) If two predictors i.e. Actual monthly household expenditure against predicted monthly household expenditure based on proxy means testing as shown in the above graph can provide you with an average, and the inclusion and exclusion errors.

The further households fall from the line, the greater the error: Increasing cut-off = Type 1 error
Decreasing cut-off = Type 2 error
Relationship might not be linear

There are lots of reasons why an error could appear. Variation around the line – the noise - is important but so is the nature of the error. Some of the errors are random, for example, a question could be too general and people answer differently but everyone answers differently – sometimes overestimated, sometimes underestimated – but it's random and the error cancels out. This kind of error is less worrying for models. Because it's random error it obeys certain rules and it is possible to account for it. It is inherently more worrying if there is a non-random bias, if you consistently over estimate or under estimate and therefore it is much harder to deal with in a model because you really need to understand why.

Some of the reasons may be the sample isn't representative of the whole population with those who are left out having different characteristics, or alternatively that there may not be a linear relationship. Also different relationships for different categories may be apparent and in that case need to be significantly tested, to estimate the level of type 1 and type 2 errors and decide what level is acceptable versus the additional cost of collecting more data.

"Methodological choices and analyst assumptions influence results"

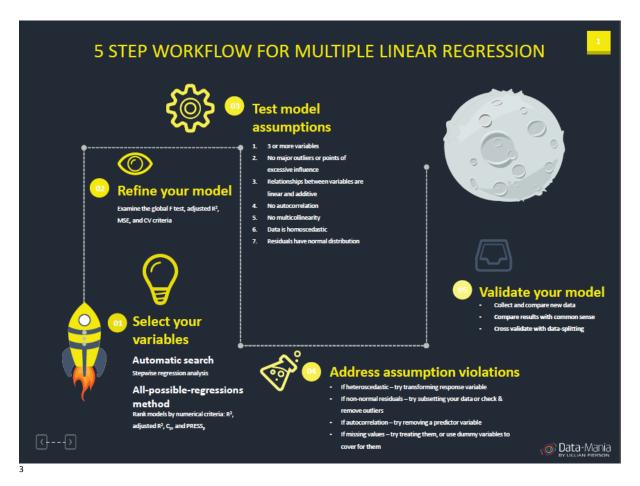
## Model performance monitoring

- 1. Maintain (recalculate it from new samples),
- 2. Validate (calculate error of model, ensure that assumptions are reasonable)
- 3. Improve (review the selection of predictors -> return to 2 and repeat but shouldn't be just data driven)

Model specification is an iterative process. Run model, check the level of error and improve. It is recommended to try limit or drop variables to reduce the overall size of the model and limit error likelihood. Some additional variables may only marginally improve model (theoretically and empirically) especially if correlated with other variables.

Explain that interaction means that the relationship of predictor variables due to relationships between them with the outcome of interest is different. For example, know that number of children in household is one significant predictor variable and know that gender of household head another one. But possible that the relationship of the number of children with expenditure differs whether the head of the household is a man or a woman. Need to test these relationships

Can we measure contextual effects and include them in the model?



Park – Exploring disability and sector key indicators captured at time of registration and come up with a reliable predicted welfare indicator

Examples of Questions:

Are there any other fields in proGres which could be used?

How to account for missing data (random or not?)?

Check interaction effects?

Generalizability?

If we do a PMT in one community, environment, population can we apply the findings to another one?

Can we measure impact of context?

<sup>&</sup>lt;sup>3</sup> http://www.data-mania.com/blog/5-step-checklist-multiple-linear-regression/

## Session 3: Action Points

Predicted welfare model – non-perfect process pulling it all together originally requiring revision 2017. Keeping in mind the more complex the information that you are collecting, the better the information will be as a result to arrive at a potential denomination.

Baseline 2017 - new model early 2017

Other models documented and resourced and sector documented interest

Registration and ProGres Model - Proxy

Poverty and Welfare models

Smarter model than current model

**HH Dependency and Coping Strategies** 

Cost sharing and breakdown – HH incorporation in to the baseline assessment

Age dependency ratio – compiled from registration data

Feedback on Working drafts - Dependency Ratio, HH, Case Indv breakdown and coping strategies

Age dependency ratio

Compiled from registration data

Need to factor different age bracket (60 for refugees - 65 comparison with census)

Comprehensive dependency ratio - include addition specific needs for example persons with disability, chronically ill

**Coping Strategies** 

No standardized list of coping strategies – how to clearly label them, thinking around categorization and reviewing

## Working drafts for feedback

## **Dependency Ratio**

There are multiple definitions for dependency ratio. In the context of the original formulation of the VAF in 2014-5, detailed discussions took place in various Sector Working Groups (WG) in order to determine the most appropriate definition for the Jordan context. Similar processes have taken place in Lebanon and Egypt in the context of defining vulnerability frameworks for Syrian refugees.

For the purpose of the VAF, the following two definitions will be used as a starting point, which are also the standard definitions used by the National Statistic Bureaus and the World Bank:

$$ADR = \frac{\textit{household members aged 0-14 or 60+}}{\textit{household members aged 15-60}}$$

1.) Age dependency ratio (ADR)

$$EDR = \frac{\text{household members not working}}{\text{working household members}}$$

2.) Economic dependency ratio (EDR)

The ADR will be adapted to fall in line with UNHCR's definition on older refugee, which in turn is based on the WHO's definition, i.e. a person over 60 years. This was set out in the Policy on Older Refugees dated April 2000 (http://www.refworld.org/docid/47036b502.html). Accordingly, the ADR will become:

$$ADR = \frac{\textit{household members aged 0-14 or 60+}}{\textit{household members aged 15-60}}$$

The ADR is accepted as the default dependency ratio that will be calculated for the VAF base on UNHCR issued registration certificates and registration data.

Additional dependency ratios can be calculated including the EDR, but also variations taking into account, for example, persons with disability. This will require (a) convention and (b) a concrete proof of application.

The advantage of using the ADR is that it can be calculated immediately from existing registration data. Any additional dependency ratio will require assessments and additional resources, which need to be match by added value that such additional dependency ratios provide.

Therefore, it should only be agreed if there is a commitment by particular partners or sectors to use customized dependency ratios in order to better programme assistance and/or services.

## **Negative Coping Strategies**

The Syrian refugee crisis in Jordan is entering its fifth year, the understanding of the context, risk and vulnerabilities of the refugee population have been well researched and documented. This includes the comprehensive mapping of negative coping strategies are known. The fall into four broad categories:

- 1. Rationing strategies
- 2. Increase household income through risky, hazardous or illegal activities
- 3. Decrease household expenditure
- 4. Decrease dependency

The below tabulation maps the coping mechanisms used in various household assessments for Syrian refugees in the region. The following lessons must be considered when updating the negative coping mechanisms in the VAF form.

## 1.) Lessons from the VAF thus far

The consensus at the outset of the VAF was to use the Coping Strategies Index (CSI) plus more protection sensitive coping mechanisms, as the CSI on its own was considered too limited. The CSI aims to only answer the question of "What do you do when you don't have enough food, and don't have enough money to buy food?". This has led to a distribution of the coping mechanisms in the present VAF form across two sections, one focusing on CSI and food security and another broader section under Poverty. The following elements have been determined to be problematic in the current VAF form:

- Splitting negative coping mechanisms across multiple sections
- Collecting vast amounts of data without using it (in the case of CSI)
- Sub-optimal phrasing of non-CSI coping mechanisms has yielded less consistent data
- Time frame and frequency of coping mechanisms is not consistent
- Negative Coping mechanisms that are not used for scoring or programmatic use should be removed from the VAF form

## 2.) What needs to be avoided in the VAF?

Recalling that VAF home visits are NOT always managed by social workers / case managers, it is important to ensure that any direct protection-sensitive questions are avoided, for example:

- "Does your 13-year old son work in the market?"
- "Is your 15-year old daughter engaged to be married?"
- "Has a family member engaged in commercial sex work?"

Instead, it is a matter of proxies and referrals, which need to be well defined and tested.

## 3.) Measurements and review of the VAF form

Measurement of both usage & frequency are key as is the analysis of severity of each employed strategy. This is where the conceptual framework of the CSI can help in refining the VAF form and process.

The basic idea of the CSI is to measure the frequency of coping behaviors (how often?) and the severity (what degree of vulnerability does each strategy/imply?). Information on the frequency and severity is then combined in a single score, the Coping Strategies Index, which is an indicator of the household's vulnerability (i.e. of food security status in the case of the CSI).

This means that the VAF form review should be followed by a review of the universal "Negative Coping Mechanisms" indicator.

It is also worth noting that the CSI rightly emphasizes the need to consider two measurements for coping mechanisms, i.e. one that is operation specific and a reduced one that allows for cross-comparison (cf. CSI Manual – 2008 – p.13 and p.17 - https://www.wfp.org/content/coping-strategies-index-field-methods-manual-2nd-edition)

## **<u>Reference</u>**: Typology of Coping Mechanisms included in Vulnerability

1. Rationing Strategies less_expensive reduce_essential reduce_essential reduce_essential reduce_essential reduce_essential reduced_meals reduced_meals reduced_meals reduced_portion reduced_portion reduced_portion restrict_consumption restrict_consumption restrict_consumption restrict_consumption reduced_meals reduced_portion restrict_consumption restrict_consumption restrict_consumption restrict_consumption reduced_portion restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat restrict_consumption by adults in order for small children to eat reduced_portion for eat reduced_portion by adults in order for small children to eat reduced_portion for eatition by adults in order for small children to eat reduced_portion for eatit and per dust for meaties eaten per day  Increase Short-Term Household Income reduced_portion for eatit and per to meaties eaten per day  Increase Short-Term Household Income reduced_portion for eatit eaten per day  Increase Short-Term Household Income reduced_portion for eatit eaten per day  Increase	
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2 Increase Short-Term Household Income support_host Support from host community & Humanitarian assistance (CBOs, personal donations, etc.)	
2 Increase Short-Term Household Income remittance Support from family members (irregular remittances)	
2 Increase Short-Term Household Income spent_saving Spent some or all of the Household savings	
2 Increase Short-Term Household Income selling_assets Sell productive assets or means of transport (sewing machine, car, wheel barrow, bicycle, mot	orbike, e
2 Increase Short-Term Household Income selling_goods Sell household goods (jewelry, phone, furniture, electrodomestics, bicycle etc)	
2 Increase Short-Term Household Income selling_voucher Selling food vouchers	
3. Decrease Short-Term Household Expenditure living_host Living together & Sharing costs with host family	
3. Decrease Short-Term Household Expenditure school_dropout Dropping children out from school	
3. Decrease Short-Term Household Expenditure loan_skip Skip a loan payment - Have not paid the rent for the past months	
4. Decrease Numbers of People child_mariage One of your daughter (under 18) will get married to ensure her financial security	
4. Decrease Numbers of People early_marriage One of your daughter (over 18) will get married to ensure her financial security	
4. Decrease Numbers of People eat_elsewhere Sent HH members to eat elsewhere (for instance Send children to eat with neighbors)	

## **Grouping Strategies**

Grouping Strategies define how individuals are combined in registration or survey exercises into groups. These groups could be nuclear family, household, tribe, village, etc.

For refugee populations, there are two prevailing grouping strategies, one is household (i.e. all individuals living under one roof and sharing resources) and the other one is case (nuclear family composition based on documentation such as family booklet or passports).

Conceptually, the advantage of using the household in the VAF is that it is a unit of measurement that allows for a better dive into the socio-economic situation of a group of individuals. The disadvantage is that the information is only sporadically available (i.e. when a home visit is conducted), never comprehensive and updating it is very costly.

The advantage of using the case or nuclear family approach is that whereas it is comparatively weaker in expressing socioeconomic relations, it is universally available through a rigorous and standardized registration process, which is based on documentary evidence and not enumeration snapshots.

Assuming that households are comprised of multiple cases, but also knowing that it is extremely costly to develop a household based assessment system, it is important to appreciate how big a discrepancy is between household and cases in the Jordanian context. The adjacent table demonstrates that for almost two-thirds of the refugees, case is identical to household.

The cost of running a household based assessment system means nothing less than rolling out a parallel registration system, but one that cannot rely on documentary evidence, but exclusively on assessor judgement. Capturing the data is

Case and Household based on VAF in 2016												
		# of cases making up a HH										
Total number of ind in HH	1 case	2 cases	3 cases	4 cases	5 cases	6 cases	7 case	8 cases	9 cases			
1	744	8	1									
2	1,464	358	1									
3	2,319	475	111	1								
4	3,425	592	115	39								
5	3,682	895	155	43	7							
6	2,848	994	225	38	4	3						
7	1,537	1,001	290	67	10	3						
8	762	784	336	86	17	9						
9	341	523	292	69	15	6						
10	140	318	265	76	17	2			9			
11	76	213	223	84	16	9						
12	30	93	144	64	23	4	1		1			
13	15	51	102	40	19	4	1					
14	2	17	52	63	15	2						
15	2	15	25	46	5	4	1					
15+	5	13	48	97	45	26	6	1				
Total	17,392	6,350	2,385	813	193	72	9	1	10			
Percentage	63.88%	23.32%	8.76%	2.99%	0.71%	0.26%	0.03%	0.00%	0.04%			

one challenge, but updating such a household registration system is even more complex and the cost from deploying and enforcing procedural rigour about changes in household composition is prohibitive.

Acknowledging that household tends to provide a better analysis of socio-economic conditions, what would constitute viable mitigating measures in order to compare and contrast household profiles with cases and hedge against extreme errors?

This can be best mitigate using the baseline and other representative sample surveys (e.g. CFSME) to compare the grouping strategies, i.e. conduct additional comparative analysis on the respective strength for the modelling process.

As a result, the case remains the most cost-effective grouping strategy for the purposes of the VAF and known imperfections have to be actively mitigated.

# Vulnerability Assessment Framework Home Visit Form

Date of Visit:							
Enumerator's information	on:						
Name:							
Phone Number:							
Organization:							
Household information							
UNHCR File Number					- (	C	
Case Status :							
☐ Available ☐ Unreacl	hable □F	Refused the visit	□РА į	passed	away □Out of	country	☐Merged with
another file number							
Name of Principal Applic	cant						
Family Size							
Address							
	Longitude					Latitude	
0		6			0		•
Governorate:				District	:		
Telephone(s):							
Alternative phone(s):							
Family from Syria				☐ Yes	□ No	)	
Please specify the Age G	roup in this	-					
□ 0-5 □ 6-11		□ 12-17	□ 18-2	27	□ 28-59		60 and above
					- (1)		
UNHCR file numbers fo		ers living in the house	e (in a	differe	ent file number)		
1. UNHCR File Num	ber	T T					
- The Relationsh	ip:						
<ul> <li>Receiving UNH</li> </ul>	ICR cash ass	istance					
- Are you sharin	g expenses	with this family/indiv	/idual i	?	☐ Yes	□ No	
<ul> <li>Is this family/ir</li> </ul>	pporting your expens	☐ Yes	□ No				
- Notes		☐ Yes	□ No				
2. UNHCR File Num	ber						
- C							
- The Relationsh	ip:	<u> </u>					
- Receiving UNH		istance					
_		with this family/indiv	/idual i	?	☐ Yes	□ No	
-		pporting your expens			☐ Yes	□ No	
- Notes					☐ Yes	□ No	

Information about family members	ers who are living in t	he same house a	nd NOT registe	ered with UNHCR
1. Name	Relationship	Family Size	Age	Notes
1. Nome	relationship	i diiiiy bize	7.80	Hotes
Are you sharing expenses with th	l is family/individual?	☐ Yes	□No	
Is this family/individual supportin		☐ Yes	□ No	
2. Name	Relationship	Family size	Age	Notes
Z. Name	Relationship	Turriny Size	7,gc	Notes
Are you sharing expenses with th	is family/individual?	☐ Yes	□No	
Is this family/individual supporting		☐ Yes	□No	
13 tins ranniy marvidaar supportin	g your expenses:	103		
Hausing				
Housing	lunta an'a abaamustian	-1		
Type of Housing (Based on the vo				
☐ Permanent shelter (structurall	•	•	-	ement)
☐ Transitional shelter (caravan, r		tructure, scrap n	naterial)	
☐ Temporary/emergency shelter		611		
Number of family members in the			or in another fi	lle):
Number of rooms excluding the k				
Total area excluding the kitchen 8	& WASH facilities (Sq. i	meter):	<del></del>	
Total area excluding the kitchen 8	ያ WASH facilities: Area			
$\square$ < 3.5 m <sup>2</sup>	3.5 m <sup>2</sup>	□ > 3.5 m <sup>2</sup>		
Ventilation: ☐ Yes ☐	No			
If yes, type of ventilation: $\square$ Win	idows 🗆 Do	oors 🗆 Tu	ibes/openings	
Please specify if any of the follow	ing is observed:			
☐ Damp walls	☐ Leaking roo	ofs		Hygienic concerns
☐ Broken windows	☐ Privacy cor	ncern		
☐ Rodents		ation (winter & su	ummer) 🗆	NA
How would you judge the assesse	ed building? 🗆 Standa	rd/acceptable	☐ Substand	dard
Payment				
Type of occupancy:				
☐ For rent				
☐ Shelter provided through hum	anitarian assistance/d	onation		
☐ Owned. By whom:				
☐ Shelter provided in return for	————— work (in a farm, as a gr	uard, etc.)		
☐ Squatter (illegal occupation of				
If rent:		•		
How much:				
Existence of rental contract:	Yes □ No			
Duration of rental agreement: □	Monthly □ Qι	ıarterly □ Bi	annual	☐ Annual
Were you forced to move or evice	ted in Jordan prior to o	current location?	☐ Yes ☐	No
If yes, how many times?				
WASH: Water, Sanitation & Hygie	ene			
Water				
Availability & Accessibility				
What are your most important so	ources of water in you	r household?		
☐ Piped/municipality	•	vate vendor	☐ Inform	al
☐ UN agency/NGO assistance (no		op/market	☐ Private	
☐ Others:		- 1-7		
	environment which is	perceived to be	safely (infrastri	ucture) & securely (no personal risk)
accessible to all members of the		□ No		2, 2, 2, 2, 2, 2, 3, 4, 5, 5, 6, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,
How many days did the househol				
What are the reasons?	a strict of the control of the			<del></del>
☐ No/broken pipes or storage ta	nks 🗆 Landlord/wate	r authority cut si	ipply 🗆 Ran oi	ut of money
☐ No more shop credit	☐ Do not know		□ Other	

Wastewater

WASH: Water, Sanitation & Hygiene	
Accessibility	
Do you have a latrine/toilet of exclusive use for your household?   Yes   No	
Is the latrine/toilet shared between more than one household?   Yes   No	
If yes, how many:	
Is a latrine physically accessible to all members of the household?	
Is the latrine located in an environment which is perceived to be safely (infrastructure) & securely (no personal risk) access	ssible
to all members of the household?   Yes   No	,51610
What kind of latrine/toilet facility does your household use?	
☐ Improved latrine with cement slab / flush latrine ☐ Traditional pit latrine/ without slab/ open pit ☐ Open air	
Containment/Disposal	
Wastewater collection/disposal:	
☐ Network/sewage system ☐ Tank or lined pit ☐ Unlined pit, field, bucket, plastic bag	
WASH: Water, Sanitation & Hygiene	
Environmental Health	
Frequency of wastewater overflows:	
□ Never □ Once/year □ > Once/year	
Evidence of vectors (rats, flies, mosquitos, etc.) on solid waste that were observed by the family:	
□ None □ Infrequently 1-2/year □ Frequently/weekly	
Financial Situation	
Monthly Expenditure (JD)	
Rent (Monthly)	
Utilities (electricity, gas, etc.)	
Food (excluding WFP vouchers)	
Water (network, tanker, bottled, dislodging waste water, etc.)	
Treatment (medical, pharmaceuticals)	
Education (books, uniform, stationary, fees)	
Transportation (to school, to health centres, to market, others)	
Infant needs (diapers/infant food)	
Basic HH items (hygiene & NFIs)	
Debt repayment (monthly)	
Additional Children Expenses :	
Other, please specify:	
Total	
Monthly Income (JD)	
Proceeds from work (monthly)	
From whom:   Father  Mother  Adult	
☐ Child ☐ Other, please specify:	
Pension	
Income from assets in COO	
Remittances.	
From where (country): From whom (relationship):	
Income from other organizations or charitable donations - monthly and continuously (not from UNHCR). From whom:	,
□ Local CBO:	
☐ International NGOs:	
☐ Other, specify:	
Other income (specify):	
□ UNHCR CA* □ UNICEF cash grant*	
* If the family receives UNHCR CA or UNICEF cash grant, please select this option without taking into account its	
amount for the final total.	
Total	

Poverty & Coping Strategies									
What are the coping strategies that you used in the	-	at apply)							
☐ Living together with host family (Jordanian & non-Jordanian)									
☐ Sharing costs with the family living in the same house (Jordanian & non-Jordanian)									
☐ Support from family members (irregular remittances)									
If support from family members, how much:									
☐ Support from host community (Jordanian)									
☐ Humanitarian assistance (NGOs - EXCLUDING UN	IHCR- , CBOs, personal donation	ons, etc.)							
☐ Selling properties (jewelry, car, etc.)									
□ Selling food vouchers									
☐ Selling household assets									
□ Borrowing money									
□ Buying against credit									
☐ Dropping children out from school									
☐ Child labor (<16 years)									
Begging									
□ Savings									
If savings, how much: How mu									
☐ Irregular work (not on monthly basis/previous w	ork)								
☐ Have not paid the rent for the past months									
What is your total amount of debt up to now (JD)?	(This should include not paying	g the rent, etc.)							
Food Security									
Are you receiving WFP food vouchers? ☐ Yes ☐ No									
Yesterday, how many meals were eaten by your family? (meals comparable to breakfast, lunch, dinner):									
	Over the last 7 days, how	What was the main source of the food in							
	many days did you	the past 7 days? (0=not consumed, 1=own							
	consume the following	production, 2=bought with cash, 3=bought							
	foods (0-7) were 0: not	on credit, 4=exchanged, borrowed,							
	consumed and 7: everyday	5=received as gift, 6=WFP food assistance,							
		7=Non WFP official food assistance,							
		8=hunting/gathering/fishing)							
Cereals (bread, pasta, wheat flour, bulghur)									
White tubers & roots (potato, sweet potato)									
Vegetables, leaves									
Fruits									
Meat (organ and flesh meat)									
Eggs									
Fish and other seafood									
Pulses, nuts & seeds (beans, chickpeas, etc.)									
Milk and dairy products									
Oil & fats									
Sweets (sugar, honey, jam, cakes, candy, etc.)									
Spices & condiment	d	l and the fellowing streets size in the size							
During the last 7 days, how many times (in days) di		one of the following strategies to cope with a							
lack of food or money to buy it? (0-7) were 0: not c									
Rely on less preferred and less expensive food (i.e.									
Borrow food or relied on help from relative(s) or fri	ena(s):								
Reduce number of meals eaten a day:									
Limit portion size at mealtime (different from abov		-							
E RESULCE CONSUMBIND BY ABOUTS IN ARRESTATION OF THE CONTRACTOR OF	ongen in eat.								

Tr.									
	, has yo	ur family a	applied any of the below	w strategies to meet basic food needs?					
Spent savings									
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore									
Bought food on credit or borrowed money to purchase food									
	☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore								
		-	ture such as education,						
☐ Yes	□No			ted this strategy already and cannot do it anymore					
_			e, furniture, electro doi						
	☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore								
Sell productive assets or means of transport (sewing machine, car, wheel barrow, bicycle, motorbike, etc)									
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore									
Since arriving in Jordan, have you accepted high risk, illegal, socially degrading or exploitive temporary jobs									
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore									
Sent adult family members to beg ☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore									
Sent children (unde				ed this strategy an eady and cannot do it anymore					
	□ No	-	_	ed this strategy already and cannot do it anymore					
□ 1c3	<u> </u>	, L	occade i nave exhausti	ed this strategy and earnor do it anymore					
Education									
Do you have schoo	l aged c	hildran?	□ Yes □	No.					
Children Attending		illiuleii:	□ 163 □	NO					
		ur childrei	n/youth do the followir	ng.					
Name	Gende		Age	Public/Private					
Harrie	□м	F	☐ 6-12 years	□ Public					
			☐ Between 13-17	□ Private					
	☐ Between 18-24 ☐ Other educational services (community centers, etc.)								
	□м	□F	☐ 6-12 years	□ Public					
			☐ Between 13-17	□ Private					
	☐ Between 18-24 ☐ Other educational services (community centers, etc.)								
	□м	□F	☐ 6-12 years	□ Public					
			☐ Between 13-17	☐ Private					
			☐ Between 18-24	☐ Other educational services (community centers, etc.)					
	□м	□F	☐ 6-12 years	☐ Public					
			☐ Between 13-17	☐ Private					
			☐ Between 18-24	☐ Other educational services (community centers, etc.)					
Children Attending	Private	School							
If children are enro	lled in p	rivate sch	ool, what are the reasc	ons?					
☐ Specific need/dis	sability								
☐ Psychological co	ndition								
☐ Better quality of	educati	ion							
☐ Violence at publ	ic schoo	ol							
☐ No access to pub	olic scho	ool							
☐ Donation									
☐ Other									
	Children Not Attending School								
Number of childrer		ending scl	hool: Female:	Male:					
What are the reaso									
☐ Not interested in		-	/not useful)						
☐ Child marriage/e									
☐ Child labor/work		-							
☐ Financial constra	-	ansport, u	nitorms, etc.)						
☐ Distance to scho			1 \						
☐ Issues at school			rned away)						
☐ Physical &/or ve			- 4l l <i>l</i>	and distance (difficulties and analysis)					
☐ Safety fears for movement outside the home/psychological distress/difficulties concentrating ☐ Do not know if school registration is possible or not									

☐ They were not going to school in COO										
☐ The family is waiting for the return to Country of Origin (COO) in order to register children in school										
☐ Expired asylum-seeker certificate										
☐ A big gap between their last grade in their	home country vs the one t	hat they are supposed to I	pe in Jordan							
☐ Disability/serious health condition										
☐ Difficult dialect/teaching methods/curricul	um									
☐ Moving from one house to another										
☐ New arrivals to Jordan/Arrival in the middle of the academic year										
How many of your children (between 6-17 ye	ars) have missed education	n? (children who are not ir	ı school)							
☐ None										
☐ Between 0-1 years: Fema	ale:	Male:								
	ale:	Male:								
	ale:	Male:								
Youth (16-24 years)										
Do you have school aged youth (16-24) in the		□ No □ NA	1							
How many youth have completed basic education Male: Female:	ation (10th grade) either in	COO or in Jordan?								
How many HH members aged 16-24 in the ho		on not employed and not	in training?							
Male: Female:	ascribia are not in cadeac	on not employed and not								
Health										
Access to Health Services										
If there was a medical need, were you or any o	of your family members ab	ale to access nublic hospita	us/clinics in the last six							
months? ☐ Yes ☐ No ☐ No medical ne		ne to decess public hospita	is cirries in the last six							
(If more than one time during the last six mon		last time health care was	sought)							
If yes, where:	this piedse respond for the	iast time nearth care was	30061117							
☐ Public clinic/hospital										
☐ Private clinic/hospital										
☐ Non-Governmental Organizations (NGOs)										
☐ Syrian community supported clinics										
☐ Pharmacy or shop										
☐ Other, please specify?										
If no, why:										
☐ Finances (cost of transport, fees, etc.)										
☐ Documentation (problems related to MOI/s	service card or LINHCR cert	rificate)								
☐ Relevant medical services were not available			hle etc)							
☐ Hospital/clinic personnel denied access wit	• •	ibic, inculcation not availa	bic, etc.,							
☐ Lack of knowledge	nout cicui reason									
☐ Other:										
If there are any lactating women, is there any	problem?									
	□ No □ NA									
Vaccination										
Do you have a child under 5 years who did not	receive measles vaccinati	on at least once?								
☐ Yes ☐ No ☐ NA	. receive illeasies vacciliati	on at least once:								
Do you have a child under 5 years who has no	t received any vaccination	s for nolio (child who neve	r had a nolio dose)?							
☐ Yes ☐ No ☐ NA	treecived any vaccination.	o tor pono (cima wito neve	r nad a pono dosey.							
If you have children under 2 years, do they ha	ve a vaccination card? [	□ Yes □ No □ NA								
Age & Disability										
Are your family members (in the same file) suf	ffering from chronic disease	es/impairments/disabilitie	25?							
☐ Yes ☐ No	inering from emonic diseas	es, impairments, alsabilitie								
If yes:										
How many of the following are part of your										
family (in the same file):	0-17 years old	18-60 years old	61 years & above							
, , ,	0-17 years old	10-00 years old	or years & above							

Healt	h										
1.	Pregnant females										
2.	Visual impairment		□ M:	D	M:	□ M:					
	☐ Partial ☐ Complete		□ F:	D f	:	□ F:					
3.											
	□ Partial         □ Complete         □ F:         □ F:										
4.											
	, .		] F:	D F	:	□ F:					
5.	Mental impairment		□ M:		M:	□ M:					
			] F:	DF	: <u></u>	□ F:					
6.	Intellectual impairment		□ M:	⊔ ۱	И:	⊔ M:					
			∃ F:	D F	·	□ F:					
7.	Injury		□ M:	🗆 ۱	И:	□ M:					
			☐ F:	🗆 f	: <u></u>	☐ F:					
8.	Chronically ill or serious medical		□ M:	□ ١	И:	⊔ M:					
	condition		∃ F:	D F	F:	□ F:					
9.	Other people in need of support to		□ M:		M:	□ M:					
	do daily activities		□ F:	D F	:	□ F:					
Total	/ (1-7)		 □ M:		M:						
Total	(1-7)		□ IVI □ F:	; ;	: :	□ F:					
Effect	Effect on Daily Activities/Work										
·											
Does identified medical problem/disability affect the person's ability to perform activity of daily living (eating, bathing,											
	toileting, dressing, transferring)?  Yes  No  NA										
	(this question to be repeated for every individual who has a medical problem)										
	Does identified medical problem/disability affect the adult(s)' ability to work? ☐ Yes ☐ No ☐ NA										
-	(this question to be repeated for every adult who has a medical problem)  Are there any other nuclear family members (not in the same file and/or not registered with UNHCR) that suffer from serious										
	cal condition?   Yes  No  In			ine una, or not	registered with O	which, that sairer from serious					
	es, please specify whom:										
	For any medical problems, please r			e nearest JHAS	clinic or to UNHCF	R information line (064008000)					
	lp desks in case they have already ag		•			,					
Prote	ection										
	/ into Jordan										
	n did the members of your family ar	rive fro	m COO?								
II	arrival (first family member):			t family memb	er):						
	CR Asylum Seeker Certificate		,	,	,						
	ou have a valid registration with UNI	HCR? (L	ook at expiry	date)? □ Yes	□ No						
-	, what is the reason?	•	. ,	,							
II	ou approached UNHCR and you did n	not rece	eive an appoin	tment for rene	wal						
□ Not renewed yet but have a renewal appointment											
☐ Not renewed and need a renewal appointment (ensure referral to UNHCR)											
How many of your nuclear family members are not registered with UNHCR?											
	Age 0-4 5-11		12-17	18-59	60 & above						
	category					]					
	F										
	M										
	you have your asylum seeker certification	cate?	□ Yes □	No							
	o, what is the reason?										
□ Lo											
	ot received from UNHCR										
□ Cc	onfiscated by service provider (hospi	ital, sch	ool. etc.)								

Protection	n									
☐ Confis	cated by aut	horities (poli	ice. etc.)							
☐ Other	☐ Other, please specify:									
MOI/Ser	MOI/Service Card									
	As a PA, do you have a MOI/service card?									
What type of MOI card do you have :										
☐ old (white) issued in urban areas ☐ new (magnetic) issued in urban areas										
☐ MOI issued in Rabaa Sarhan/Camps										
			•	our family's pla	ace of residence	? (look at address	& place of issuance on card)			
☐ Yes	•	sure referral	•							
	•	•	ve an MOI card		□No					
If no, wh	_	-	er do not have		•	T	1			
	Age	0-4	5-11	12-17	18-59	60 & above				
	category									
	F									
	M									
Documentation										
How mai	ny children u	nder 18 poss	ess birth regis	tration:	·					
	•		her families, d	•	•					
☐ Extrer	nely vulneral	ble 🗆 vulr	nerable $\square$	Moderately v	ulnerable [	☐ Not vulnerable				
Notes										
Notes on	the general	previous situ	uation of the fa	amily in COA						
A1 :				.1						
Notes on	tne general	situation of	the family from	n the momen	t of their arrival	to Jordan until no	0W			

## Vulnerability Assessment Framework Questionnaire v.2

Enumerator's information	on:							
Organization:								
Name:				Phone	Numbe	r:		
Date of Visit:				·				
☐ Available ☐ U	Inreachable		□ Refu	used visit	ПРА	passed awa	V	
	Nerged with anoth	ner file numl					,	
<u> </u>								
Household information								
UNHCR File Number (Bo	arcode, if not plea	se enter File	Number twi	ice)		-	С	
Name of Principal Appli				,			1 1	
Family Size								
Address								
	Longitu	ıde					Latitude	
0			6			0		6
Governorate:					Distric	t:		
Telephone(s):								
Alternative phone(s):								
Please specify the age g	roups in this fam	ily:						
□ 0-5 □ 6-12		16-17	□ 18-27		28-59	□ 60	and above	
Family from Syria:		Yes	□ No					
Family Members (in the			4					
Scan Barcode (enter Do	B twice if doesn't	work)						
Name:								
DoB:								
Relationship to PA:	7	□ \\\/:f-	П С	□ Davielstein				
		□ Wife □ Brother	☐ Son ☐ Father	☐ Daughter ☐ Mother		☐ Grandsor☐ Father in-		
		⊒ Aunt	□ Nephew		lative	☐ No family		
E Wother III Idw	2 Officie L		ш перпеч	Distant re	iative	L No lanning	relations	
UNHCR file numbers for a	all members living	g in the hous	se (in a diffe	rent file numb	er) (Cas	e)		
How many?								
UNHCR File Number								
	С							
Relationship to PA:	<u> </u>							
•	Husband [	] Wife	□ Son	☐ Daughter		☐ Grandson	1	
			☐ Father	☐ Mother		☐ Father in-		
_		l Aunt	☐ Nephew	☐ Distant re	lative	☐ No family		
	CR cash assistance	<u> </u>		□ Yes	□No			
	expenses with th			□Yes	□ No			
	dividual supportin			□ Yes	□No			
- Notes	arriadar sapportir	is your expe				•		
Information about famili	os who are living	in the same	house and I	NOT registere	l with II	NHCD		
illioilliation about failill	es willo are livilig	iii tiie sailie	illouse allu i	NOT registered	ı witii O	MICK		
How many?								
,								
Name	Family Size		Age		Gender		Nationality	Notes
Relationship to PA:								
□ PA □	Husband $\square$	] Wife	□ Son	□ Daughter		☐ Grandsor	1	

		<u></u> ,				
☐ Granddaughter	□Sister	☐ Brother	□ Father	□ Mother	☐ Father in-law	
☐ Mother in-law	Uncle	Aunt	☐ Nephew		☐ No family relations	
Are you sharing expense is this family/individe		• •	□ Yes □ Yes	□ No □ No		
Housing						
Shelter conditions:						
Type of shelter:			, ,,			
☐ Formal: Finished b			_			
			5		equiring rehabilitation}	
☐ Informal settleme				recognized by auth	orities}	
- Number of rooms e				<del></del>		
- Number of individu			in the same t	file number and in ar	nother file)?	
- How many families					N-	
- Is there any issue re	lated to privacy	reported by the i	10usenoiu r	⊔ Yes ⊔	No	
Observations (include	diag kitchon and	canitary facilities				
Roof's condition (str	-	-		☐ Acceptable ☐ Sub	-standard	
Roof's condition (lea		1		☐ Acceptable ☐ Sub		
Openings' condition		ws)		Acceptable  Sub		
Electrical features' co				☐ Acceptable ☐ Sub		
Easy Access to the dy				☐ Acceptable ☐ Sub		
Natural ventilation c		•		□ Acceptable □ Sub		
Natural lighting cond	lition?			☐ Acceptable ☐ Sub	-standard	
Dampness and humi	dity in house			☐ Light ☐ Moderate	☐ Severe	
Payment and Evictio	n Threat					
- Rented house?	☐ Yes	□ No				
How do you pay th			<b>-</b> -			!
☐ Salary from work				, ,	Iter in return for work - in a farm, as a guard)	□Don't
pay Assistance f			nce from fami	ly abroad		
- What type of agree			enant?			
☐ Written agreemer - Is there a threat of				_		
If yes, why?	eviction: L	es 🗀 iv	10			
☐ Conflict with host	community and	/or Landlord				
☐ Fear of eviction {S	, ,		,			
☐ Verbal threat of e		<i>a</i>				
☐ Written note for e						
		(c) 1 1 1 N				
WASH: Water, Sanit	ation & Hygiene	(Household)				
Water	<u> </u>	1 1 1 2				
-What is you source	-					
☐ Municipality/pipe				nunicipality/ piped (o		
		apacity (roof tank	ks, reservoirs	, etc.) enough to cov	er all family needs (personal hygiene, cooking	, house
<u> </u>	□ Yes □ No					
Sanitation						
			eived to be sa	afely (infrastructure)	and/or securely (no personal risk) to all mem	pers of the
household during da		☐ Yes	□ No			
- Is the latrine physic	•					
	•		Exclusive $\square$	Shared with 2 house	es  Shared with 3+ houses	
-Type of wastewater						
☐ Network/sewage	system 🛭 Tan	ık or lined pit	☐ Unlined p	oit, field, bucket, plas	tic bag	
Frequency of solid w	aste related to v	ector evidence				

□ Never

☐ 1-2 times per year ☐ >2 per year

Financial Situation (Case)					
Monthly Expenditure (JD)					
Rent (monthly)					
Utilities (electricity, gas, etc.)					
Food (excluding WFP vouchers)					
Water (network, tanker, bottled, dislodging waste water, etc.)					
Treatment (medical, pharmaceuticals)					
Education (books, uniform, stationary, fees)					
Transportation (to school, to health/rehab centres, to market, others)					
Infant needs (infant food)					
Basic HH items (NFIs)					
Basic Hygiene items (soap, shampoo, toothpaste, sanitary pads/towels, diapers)					
Debt repayment (monthly)					
Other, please specify:					
Total					
Proceeds from work (monthly)					
From whom:					
☐ Child ☐ Other, please specify:					
Pension					
Income from assets in COO					
Remittances.					
From where (country): From whom (relationship):					
How often?  Quarterly  Six monthly					
Income from other organizations or charitable donations - monthly and continuously (not from UNHCR). From whom:					
□ Local CBO:					
☐ International NGOs:					
Other, specify:					
Other income (specify):  Are your receiving LINHCR cach assistance:					
Are you receiving UNHCR cash assistance:					
□ UNHCR CA* □ UNICEF cash grant* □N/A * If the family receives UNHCR CA or UNICEF cash grant, please select this option without taking into account its amount for the final total.					
Total Monthly Income (JD)					
What is your total amount of debt up to now (JD)? (This should include not paying the rent, etc.)					
Poverty & Coping Strategies (Case) Food and Basic Needs					
In the past 30 days, has your family applied any of the below strategies to meet food and basic needs?					
Spent savings					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore  If savings, how much: How much is left from savings:					
Bought food on credit or borrowed money to purchase food from non-relatives/friends					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
If debt, What is your total amount of debt up to now (JD)? (This should include not paying the rent, etc.)					
Reduced essential non-food expenditure such as education/health					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore Sell household assets/goods (jewellery, phone, furniture, electro domestics, etc.)					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Sell productive assets or means of transport (sewing machine, car, wheel barrow, bicycle, motorbike, etc.)					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Adult members of the household accepted socially degrading, exploitative, high risk or illegal temporary jobs  ☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Sent adult family members to beg					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Sent children (under 18) family members to beg					
☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Changed accommodation location or type in order to reduce rental expenditure  ☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					

Sent children (under the age of 16) to work in order to provide resources  ☐ Yes ☐ No ☐ No, because I have exhausted this strategy already and cannot do it anymore					
Withdrew children from school					
☐ Yes ☐ No ☐ No, becaus	se I have ex	hausted this s	trategy alread	dy and cannot do it anymore	
Food Security (Case)					
Are you receiving WFP foo	d vouchers	?□Yes □1	No		
Do any of the household n	nembers ha	ve specific die	etary needs? [	☐ Yes ☐ No	
Do any of the household n	nembers ne	ed specially p	rocessed food	d (pureed, boiled, and liquidized)? $\square$ Yes $\square$ I	No
Yesterday, how many mea	ls were eat	en by your fai	mily? (meals c	comparable to breakfast, lunch, dinner):	
			(	Over the last 7 days, how many days did you co	onsume the following foods (0-7)
Cereals, grains, roots & tu	pers: rice, p	asta, bread, b	ulgur,		
potato, white sweet potat	0				
White tubers & roots (pot	ato, sweet p	ootato)			
Vegetables & leaves: spina	ch, cucumb	er, eggplant,	tomato		
Fruits: citrus, apple, banar	a, dates				
Meat, fish and eggs: Beef,	lamb chicke	en, liver, kidno	ey, fish		
including canned tuna, egg	gs				
Pulses, nuts & seeds : bea	ns, chickpea	s, lentils			
Milk and dairy products: y	oghurt, che	ese			
Oil / fat: vegetable oil, pal	n oil, butte	r, ghee			
Sugar / sweets: honey, cal	es, sugary	drinks, (this in	cludes		
sugar used in tea)					
Condiments / spices: tea,	garlic, toma	to sauce inclu	ıding		
small amount of milk used	in tea coffe	ee			
Education					
Are all of your children (a	ged 6-17) a	ttending form	nal education	?	
Number of children attend	ling school?				
Number of children not at	tending sch	ool?			
LOOP OPEN FOR No. of So	hool aged	children in scl	nool (to be co	mpleted for each individual child aged 6-17)	
Children Enrolled in School	(RISK OF	NON-COMPLI	TION)		
Age Group	Name	Gender	Public/Priv	vate	Type of school
□Between 6-12		□м		d formal education (Government or Private)	☐ Government
☐Between 13-15		□F	a. □Morning shift-regular school □ Private		
☐Between 16-17			b. □Morning shift- double shifted school		
			c. □Afternoon shift		
				d Non-Formal education (Catch up)	
	1		-	zed (special needs)	
				ON) Open ended question not list read	
IF your child is attending school, what difficulties or challenges if any is he/she experiencing? Please tick up to a maximum of 4 that apply:					
☐ Physical &/or prolonged verbal abuse from staff ☐ Financial constraints					
☐ Humiliation, discrimination, verbal abuse from staff ☐ Distance to school (>2km)					
☐ Safety fears for movement outside home ☐ Bullying amongst students ☐ Poor quality of teaching and/or management (service) ☐ Psychological distress / severely distressed					
				Psychological distress / severely distressed  Not applicable (no difficulties)	
□ Not inclusive for children with disabilities (environment) □ Not applicable (no difficulties)  LOOP OPEN FOR No. of School aged children not in school (to be completed for each individual child)					
Children Not Enrolled in School (ACCESS) (aged 6-17)					
Age Group	Name	Gender	Missed	What are the reasons? <i>Open ended question</i>	on not list read
7.60 010ap	Nume	Jenuel	years of	That are the reasons: Open chaca question	an not not redu
			education		

□Between 6-12	□м	☐Less than	☐ Not interested (cultural/not useful)		
☐Between 13-15	□F	3 years	☐ Serious Health Condition		
		'	☐ Child marriage/engagement (6-15)		
			☐ Missed 3 or more years of education		
			☐ Child labour/work with other priorities (6-15)		
			☐ Family obligations/ responsibilities in the household (6-15)		
			☐ Financial constraints (transport, uniforms)		
			☐ Lack of documentation (MOI Card/ UNHCR Card)		
			☐ Distance to school (more than 2km)		
□Between 6-12	□м	☐ 3 years	Refused entry (general)		
□ Between 0-12	□ F	-	☐ Safety fears for movement outside the home		
	🗆 -	or more	☐ Refused entry due to disability <i>(school unable to cater)</i>		
☐Between 16-17			☐ Disability (unable/ unwilling/ family will not allow)		
			☐ Other/Enumerator judgement (1 low-4 severe)		
			☐ Safety fears of attitude within the school (staff/students)		
			☐ Physical / verbal abuse		
	<u>.</u>				
Health (Cose)					
Health (Case)					
	d, were you or any of yo	ur family memb	pers able to access hospitals/clinics in the last six months?   Yes No		
☐ No medical need					
(If more than one time dur	ing the last six months p	lease respond f	or the last time health care was sought)		
Health (Individual/s)					
-How many individuals in t	he (same file) have a me	dical condition	(including only chronic conditions and/or serious medical conditions and/or		
injury? No.	ne (same me) nave a me	alcar condition	(including only chronic conditions and/or seriods medical conditions and/or		
	والمراجع المراجع	ومروم الممانية	distan.		
LOOP OPEN to capture na	ne of each individual wil	in medical cond	aition:		
Age & impairment (Individ	lual/s) the title of the se	ction is for info	rmation management only. The enumerator will NOT mention it as it could bias		
the results.					
	out difficulties vou or ar	ny member of v	your family may have doing certain activities because of a HEALTH PROBLEM		
1. Do you or any members					
· · · · · · · · · · · · · · · · · · ·					
2. Do you or any members of your family have difficulty hearing, even if wearing a hearing aid?					
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all					
3. Do you or any members of your family have difficulty walking or climbing steps?					
□ No – no difficulty □ Yes - some difficulty □ Yes – a lot of difficulty □ Cannot do at all					
4. Do you or any members of your family have difficulty remembering or concentrating?					
☐ No – no difficulty ☐ Yes - some difficulty ☐ Yes – a lot of difficulty ☐ Cannot do at all					
			f-care such as) washing all over or dressing?		
•	•		iculty 🔲 Cannot do at all		
6. Using your normal custo	mary language, do you o	or any member	s of your family have difficulty communicating, for example understanding or		
being understood?					
☐ No – no difficulty ☐ Yes	- some difficulty ☐ Ye	s – a lot of diffi	culty		
If Answer is: Yes – a lot of	difficulty or Cannot do at	all for any que	estion (OPEN LOOP):		
Name: Age:	Gender: to	be captured.			
- Does identified medical	problem/disability affect	the person's a	bility to perform activity of daily living (eating, bathing, toileting, dressing,		
transferring)? ☐ Yes	□ No □ NA		3, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10		
(this question to be repe	-	who has a med	dical problem)		
(this question to be repeated for every <b>adult</b> who has a medical problem)  Note: For any medical problems, places refer the family to the pagreet IHAS clinic or to UNHCR information line (064,008,000) or help decks in					
Note: For any medical problems, please refer the family to the nearest JHAS clinic or to UNHCR information line (064008000) or help desks in case they have already approached JHAS but the problem is not solved.					
	Toucheu JHAS but the pr	oblem is not so	niveu.		
Protection (Case)					
UNHCR Asylum Seeker Ce	rtificate				
- Do you have your UNHO	R Asylum-Seeker Certific	cate? 🗆 Yes	□No		
If no, what is the reason?	•				
□ Lost □ Confiscated by authorities (police. etc.)					
☐ Not received from UNH	CD				
/· /					
☐ Confiscated by service provider (hospital, school. etc.)					
- Do all adult members of		CR Asylum-See	ker Certificate:		
- Is your Asylum-Seeker C	ertificate valid?   Yes	□ No			

Protection (Case)							
If no, what is the reason?							
☐ You approached UNHCR and you did not receive an appointment for renewal							
□ Not renewed yet but have a renewal appointment							
☐ Not renewed and need a renewal appointment (ensure referral to UNHCR)							
MOI/Service Card							
- As a PA, do you have a MOI Service Card? ☐ Yes ☐ No							
-What type of MOI card do you have:							
☐ Old (white) issued in urban areas ☐ New (magnetic) issued in urban areas							
☐ MOI "Proof of Registration" from camp, or MOI document issued in Rabaa Sarhan							
- Do all members of your family have an MOI card: ☐ Yes ☐No							
Is the place of MOI card issuance the same as your family's place of residence? (look at address & place of							
- issuance on card) · Yes · No (ensure referral to UNHCR)							
- If no, which of your family member do not have a MOI card:							
Age 0-4 5-11 12-17 18-59 60 & above							
category							
F							
M							
Work Permit							
How many individuals in your household possess a valid work permit:							
Who?							
Enumerator's Judgment:							
Based on your experience with other families, does the family classify as:							
☐ Severely vulnerable ☐ Highly vulnerable ☐ Moderately vulnerable ☐ Not vulnerable							
Important Note: This question is for research purposes ONLY. It will not have any impact on any assistance.							
Notes							
Notes on the general previous situation of the family in COA							
•							
Notes on the general situation of the family from the moment of their arrival to Jordan until now							

# Attendance Sheet: 13 December 2016 – Jordan Operation UNHCR Khalda – EMOPS Room 9:00am – 13:30

Name	Organization	Email
Elias Jourdi	NRC	elias.jourdi@nrc.no
Erik Turner	ACF	dcdprograms@jo.missions-acf.org
Dina Al Masri	MECI	dalmasri@mecinstitute.org
Eva Diaz Ugena	UNHCR BO Amman	ugena@unhcr.org
Jawad Aslam	UNICEF	jaslam@unicef.org
Sigrid Pfaffle	CARITAS CH	spfaffle@caritas.ch
Suad Shehadeh	PU-AMI	jor.pmsocialprotection@pu-ami.org
Tamara Qaraien	ECHO	tamara.garaien@echofield.eu
Elizabeth Barnhart	UNHCR BO Amman	barnhart@unhcr.org
Andrew Merat	DRC	andrew.merat@drc-jordan.org
Edouard Legoupil	UNHCR MENA	legoupil@unhcr.org
Firas Al Sagban	UNHCR BO Amman	alsagban@unhcr.org
Celine Abric	HI	<u>cabric@hi-me.org</u>
Erin Carey	WFP	carey@wfp.org
Laura Buffoni	UNHCR BO Amman	buffoni@unhcr.org
Harry Brown	UNHCR MENA	brownh@unhcr.org
Volker Schimmel	UNHCR MENA	schimmel@unhcr.org
Aristide Kielem	UNICEF	akielem@unicef.org
Yara Halaseh	CARE Intl.	yara.halaseh@care.org
Olivia Cribb	UNHCR BO Amman	cribb@unhcr.org
Rasha Batarseh	UNHCR BO Amman	batarseh@unhcr.org
Abdullah Khamash	UNHCR BO Amman	khamash@unhcr.org
Najwan Aldorgham	UNHCR BO Amman	aldorgha@unhcr.org

## Advisory Board Members Endorsements of VAF Questionnaire v.2

Endorsed:	Organization	
Yes	ECHO	
Yes	BPRM	
Yes	NRC	
Yes	ACF	
Yes	ACTED	
Yes	DRC	
Yes	UNHCR	
Yes	UNICEF	
Yes	WFP	