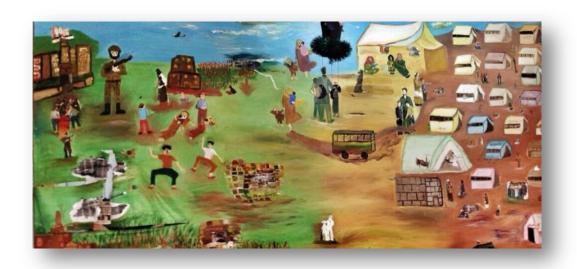


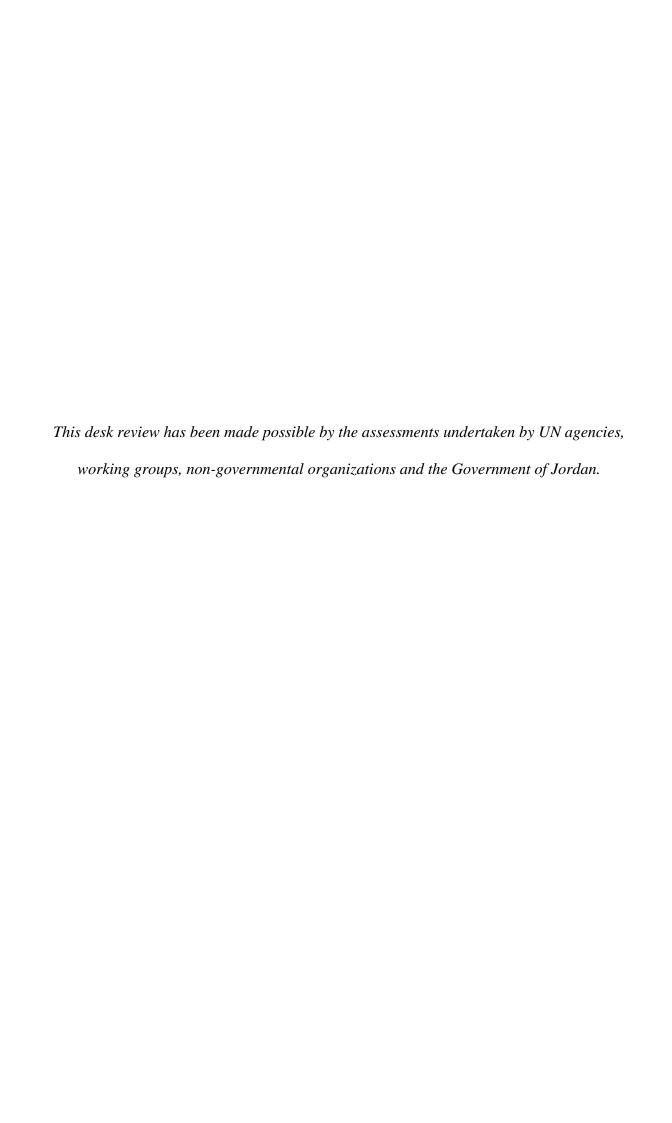
Syrian refugee children in Jordan

Assessments desk review on the situation of Syrian refugee children living in Jordan



UNICEF Jordan Country Office – Humanitarian Section Aoife Dineen – Consultant (October 2013)

Photo: Drawing by Syrian children in International Medical Corps youth center in Za'atari camp. **Credit:** UNICEF/Jordan 2013/Lucio Melandri



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Executive summary

With the Syrian conflict in its third year, Jordan has hosted nearly 300,000 children and their families. ¹ This constitutes a third of the total child refugees regionally affected by this conflict in the Syrian Arab Republic. Children are not to blame for the conflict, yet their lives are irrevocable changed by it.

Family life is difficult for refugee children, with families often fragmented and many share a crowded home with another family. A number of children have experienced profound distress in Syria which is seen in the significant psychosocial needs displayed by these children. Some children have missed years of schooling and have difficulties integrating into the new educational environment in Jordan. Other children don't have the opportunity to go to school and are working on farms or helping at home.

It is also difficult for children to find a space to play in this new environment where there can be tensions with the local community. Violence in the home, at schools and with peers is a high risk factor for children in these circumstances. Some households aren't able to afford sufficient water or soap, putting them at a greater risk of disease. Most families are in debt and continue to get into more debt, with minimal opportunities to earn.

Jordan has showed continued generosity and hospitality in facilitating the Syrian refugees. 75 per cent of refugees - or 401,239 refugees - are living in Jordanian communities and they are able to access many public services for free or at a minimal cost. Jordanians' capacity to cope is also at a stretching point and specific attention to their needs is essential in order to support Jordanian families who are also under financial and emotional stress.

As displacement becomes protracted and no short term solution for the Syria crisis is in sight, families are using coping mechanisms such as reducing food consumption, selling items, taking children out of education, and moving to a smaller home in order to survive. These trends are threatening children's basic rights and continued monitoring of the situation is necessary.

Several assessments have been carried out by UN agencies, non-governmental and local organizations to guide humanitarian operations in host communities and in camp settings. In the host community, it is challenging to have a comprehensive understanding of the needs of refugees who are settled in disparate areas and have varying levels of vulnerabilities. Adding to this knowledge base will improve the ability of humanitarian actors to assist refugees and vulnerable Jordanians in host communities.

This desk review brings together the hard work undertaken by humanitarian actors in various assessments from 2012-2013 and aims to present a synthesis and analysis of the needs of Syrian refugee children in Jordan, in an evidence-based manner. It puts children's needs at the centre of this evidence and also attempts to illuminate where more research is required. This will make a contribution to ensuring the needs of Syrian children are voiced and puts actors in a better position to meet them.

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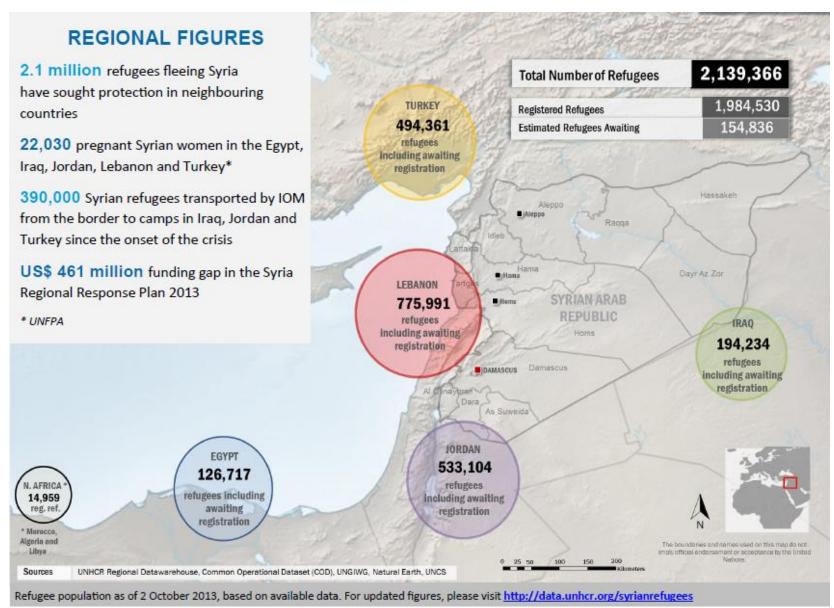
¹ There are 292, 028 children registered according to UNHCR, September 2013, Inter-agency information sharing portal-Jordan http://data.unhcr.org/syrianrefugees/country.php?id=107

Objectives and methodology

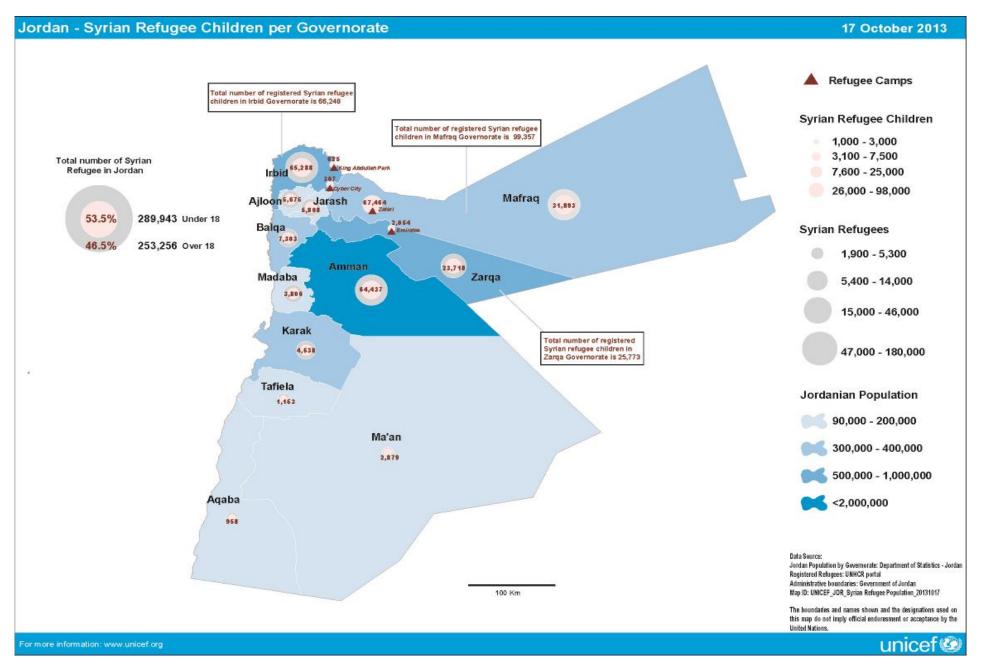
The purpose of this desk review was to focus on existing literature from humanitarian actors in Jordan in order to provide a more comprehensive understanding of the situation of Syrian refugee children in Jordan, particularly children living in host communities. This stemmed from an observed gap in analysis and comparison of assessments on the needs of Syrian refugees. The analysis will be used to support a more evidence-based approach to putting children at the core of immediate and longer term programming. Camp level information has been included occasionally where relevant, or where there is a lack of information on non-camp needs.

The analysis took into consideration potential child rights deprivations in line with the UNICEF's Core Commitments to Children (CCCs) in humanitarian contexts in relevant areas of Child Protection (CP) and Gender Based Violence (GBV), Education, Water Sanitation and Hygiene (WASH), and also in Maternal and Child Health and Nutrition. It also took into account humanitarian standards, such as the Sphere Project, Inter-Agency Network for Emergency Education (INEE), minimum standards for child protection, and other Inter-Agency Standing Committee (IASC) guidelines on mental health and appropriate guidelines where relevant has been referred to. Analysis is presented where possible using disaggregated figures across ages, gender and location. Access to services and disability are discussed as cross-cutting issues as they are pertinent to various areas of intervention.

Many Syrian refugees residing in Jordan are vulnerable in different ways. In order to improve targeting and ensure that UNICEF's interventions reach those who need it most, a section on vulnerable groups has been included. This also provides indications of Syrian refugees' coping mechanisms over time, which is relevant in a protracted refugee crisis. A brief section describes the situation of the Jordanian host community and their increasing vulnerability during this influx of refugees. Finally, the pre-existing capacities of Syrian refugees are briefly discussed, which can be taken into consideration when planning interventions. More in-depth research is required to have a comprehensive understanding of the situation of Jordanian families living in communities hosting refugees, as well as the capacities and needs of the local services in these areas. Existing research by the Government of Jordan could also be further mobilized in order to have a fuller picture.



Map 1: Regional refugee distribution, Oct 2013



Map 2: Syrian refugee children per governorate

No Syrians/Not Specified

Health Assisstance

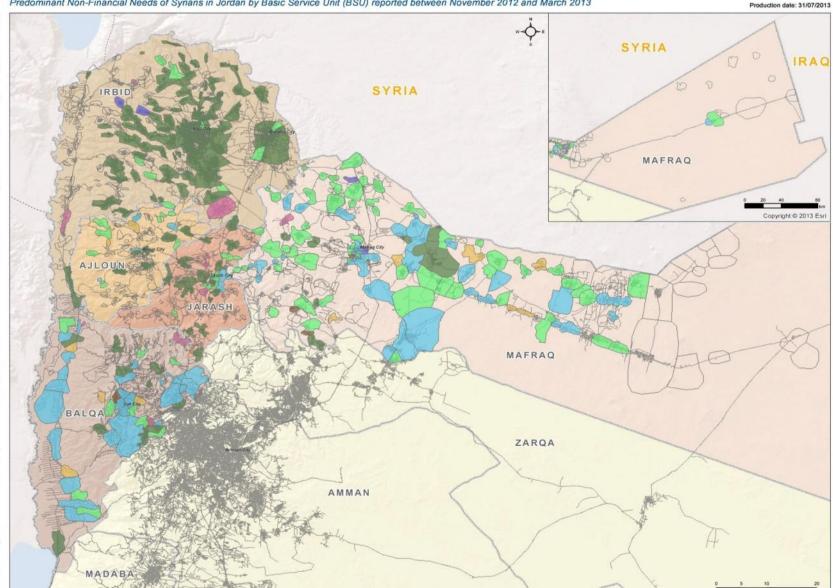
Rest of Jordan

Data Sources:
Basic Bervice Units data:
REACH Key Informani/Household Assessment
Administrative divisions, roads and oity names data:

Contact: reach.mapping@impact-initiatives.org "Please note the response rate may be depend on the time of year in which the household interview was conducted.

An Initiative of ACTED, IMPACT Initiatives and UNOSAT

rojection: WGS 1984 UTM Zone 37N File: JOR_NorthJordan_NFNeed_A3_10APR2013 Predominant Non-Financial Needs of Syrians in Jordan by Basic Service Unit (BSU) reported between November 2012 and March 2013



Map 3: Predominant financial needs of Syrians in Jordan

Highlights

Child Protection:

- Syrian refugee children in Jordan are at a higher risk of experiencing physical violence compared to refugee adults. Tensions in the home have increased and in a camp context, the home is perceived as one of the locations of highest risk of physical violence especially for girls, but also for boys.²
- Sexual violence and harassment against children, both boys and girls, is reported to be occurring inside and outside camp settings. Some evidence suggests that boys are perceived to be of slightly higher risk of sexual violence than girls. ³ However, this perception may be linked to past sexual violence in detention in Syria, rather than violence in Jordan. ⁴ In focus groups, refugees are more concerned about teenage girls being of the greatest risk of sexual violence, and incidences of parents being discouraged to send their girls to school have occurred.⁵
- There is evidence that children are coming into verbal and sometimes physical violence with Jordanians in the local community and at school. Adolescent boys are particularly likely to engage in violence with peers boys of their own age both Syrian and Jordanian.
- Since January 2013, there have been 1,687 unaccompanied and separated children identified and supported by UNICEF, UNHCR and partners. Identification outside of the camp is a significant challenge as well as arranging and funding appropriate alternative care mechanisms.
- There are strong allegations that recruitment of children by Syrian armed groups is taking place under the condition of the guardian's consent. Specific monitoring and research is taking place.
- An estimated 30,000 children, mainly boys, are engaged in child labour in Jordan which is approximately one in six children (16 per cent of children) and this figure could be even higher. ⁶ This is four times higher than the pre-crisis rate in Syria of 4 per cent. In some areas, such as the Jordan valley, 42 per cent of children are engaged in child labour working on farms. ⁷ Female headed households are more likely to engage in child labour than other households due to their reduced economic capacity and movements outside the home.
- Many children are suffering profound distress after experiencing and witnessing violence and affliction in Syria. Adolescents report feeling 'grief' and 'fear' a lot of the time. Adolescents in camp settings reported experiencing safety fears (65%), or a specific fear (35%), such as being arrested, being shot, kidnapped and so on. 8. Male

6 Ministry of Labour reported 30,000 Syrian children are in child labour, no age breakdown with this figure. Using the figure of 180,000 Syrian children aged 5-17, (measureable age category and ages most likely to be working), this comes to approx. 16% of children engaged in child labour. However this could be an underestimate as children usually start working a little later-9/10 years old. http://jordantimes.com/rising-number-of-working-syrian-children-hinders-efforts-to-combat-child-labour

² Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

³ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.

⁴ ibid

⁵ibic

⁷ UNICEF Education Section & Save the Children Jordan, (2013) Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid (Feb. 18-March 20th)

⁸ International Medical Corps and UNICEF, (2012), Displaced Syrians in Za'atari Camp: Rapid Mental Health and Psychosocial Support Assessment.

- youths are particularly at risk of mental health issues, due to the likelihood of having undergone profound stress in Syria and their reported boredom and lack of opportunities in Jordan.
- In host communities, many children and women are isolated at home with one-third 'rarely' or 'never' leaving their home. Parents are afraid to let children play outside because of tensions within host communities and a risk of violence in the camp.

Gender Based Violence (GBV):

- Preliminary findings from a UNICEF assessment on early marriage reveal that the prevalence of early marriage (registered) for Syrians in Jordan in 2012 was 18 per cent as opposed to 15 per cent of Syrian marriages in Syria. Early marriage is taking place; with UNICEF's child protection partner International Medical Corps (IMC) coming to the assistance of 655 confirmed cases of early marriage since January 2013. However, it is unclear whether this is a continuation of the practice in Syria, or an increase due to the challenging humanitarian situation. There is some evidence that economically strained families are more at risk of marrying their daughters as a coping mechanism.
- There is evidence of intimate partner violence or 'domestic violence' in the homes of Syrian refugees. There were nearly 1,500 cases of gender-based violence (GBV) registered from January-April 2013 and in the majority of cases, the husband was the abuser, with 80 percent of GBV cases in Irbid perpetrated by a husband, who was non-Syrian, thus Jordanian or another nationality. ¹⁰ This suggests that some women marrying into host community are either more susceptible to GBV, or are more inclined to report it. ¹¹ Most of these crimes are under-reported, with most women, if they report; only reporting to family and friends, rather than a health clinic. ¹²
- Households are under strain for money, and members lack privacy due to overcrowding and are socially isolated. This results in high tensions that can sometimes result in violence, often perpetrated by a male head of household, but also females, though to a lesser degree.
- Women are at a high risk of harassment in host communities, in communal camp areas and during non-food item (NFI) distributions. Sexual violence and transactional sex, 'prostitution', for survival have been indicated as occurring, but the challenges in reporting these occurrences make it difficult to know the extent. The majority of women don't know of services addressing GBV.

Education:

• There are 190,000 Syrian school age children in Jordan. In part due to a recent 'Back to School' campaign, approximately 83,232 children (64% of eligible children) are enrolled in public schools (primary and secondary education) in Jordan in both camp settings and host communities as of Sept 15th 2013.

• There are still an estimated 19,500 children on waiting lists and additional schools in host communities require support and increased capacity to hold class in schools at

⁹Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.

Jordanian Women's Union, Women's GBV Hotline Statistics (for Syrian Refugees), January – April 2013-referred to in Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.
It lbid

¹²Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

- another time, or 'shift' during the day in order to accommodate Syrian students. The schools require resources in terms of staffing, textbooks, space, administration and also experience challenges such as tracking the exact number of Syrian students. ¹³
- Other barriers for those not on waiting lists but eligible for formal education (47,000) are the auxiliary costs of school, engagement in child labour, lack of integration or psychosocial issues, challenges with a new curriculum or difficulties finding the correct grade. There is also tension in some communities with anecdotal evidence of harassment on the way to school and bullying in schools.
- Approximately 57,000 may not be eligible for formal school because they have dropped out of school over three years ago, or older children may want to work or train for a profession. These children could have options in informal, non-formal education and vocational training, but the majority are unable to access these alternative forms of education yet.
- This gap in the provision of informal education and non-formal education is a
 concern. For children who have missed over three years of school or more, this is the
 only educational option left open to them. Also, there are children who expressed
 more interest in informal education on the subject of life skills or otherwise rather
 than formal education.
- Vocational and skills training are voiced as a need by the Syrian youth. There is a
 need for specific attention and discussion with the relevant stakeholders to address
 this issue in both camps and host communities where the expansion of such services
 would be highly beneficial also for Jordanian youth.
- Preschool (Kinder-Garden-KG) education is not easily accessible for Syrians, with enrolment limited to Za'atari camp only. The pre-crisis rate in Syria is around 9 per cent, and parents did express a need for this option in Jordan in camp settings. In Jordan itself, approximately 35 per cent children attend KG, but the vast majority (90 per cent) attend private KG and are subject to a tuition fee.¹⁴
- Physical and attitudinal obstacles have been identified for Syrian refugee children with disabilities to enrol in school in Jordan. Inclusive education is vital for this group, but identification remains a challenge and further research is on-going on identification and vulnerabilities in Jordan.

Maternal and Child Health and Nutrition:

- Immunization is a key priority as many children have not had access to basic immunization in Syria. Early in 2013, a measles outbreak of 74 identified cases was very concerning, as years had passed without measles in Jordan. This outbreak in the northern governorates precipitated mass vaccination campaigns. Two campaigns for measles, vitamin A and polio targeted children in Za'atari (as well as all arrivals receiving appropriate vaccines) and children in the host communities of Mafraq and Irbid, including Jordanians.
- A number of stakeholders are supporting the Government of Jordan to expand coverage in the coming months. This will cover all Jordanians and Syrians for measles, rubella, polio and vitamin A for children under 5.
- There are key gaps in ante-natal screenings for women, as well as inadequate neonatal care for newborn children. In Za'atari camp, the under 5 mortality rate is

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¹³ USAID, (2013) Final report and Solutions package: Human and Institutional capacity development (HICP) performance assessment of the Jordanian Education Sector and Ministry of Education

¹⁴ USAID, (2011), Kindergartens' Policies Review Report in the Ministry of Education in Jordan.

41/1000 live births, ¹⁵ which is double the rate for Jordan (21/1000¹⁶) and Syria (15/1000¹⁷). Anecdotal evidence suggests this could be higher for the camp because women from host communities who often had not had appropriate screenings often come to the camp in their last trimester in order to give birth. There is also a lack of thermal care for newborns in the camp.

- Most women are not receiving the tetanus toxid vaccination which is key to avoiding a new-born contracting tetanus and is a reproductive health standard.
- The vast majority of infants are not receiving the WHO standard in complimentary feeding practices. The majority of women are not breastfeeding for the recommended two years, and most stop after the child is one year old (42.7% in host communities).
- The most recent nutrition assessment in 2012 found that the global acute malnutrition (GAM) rate was 5.1 per cent among camp refugees and 5.8 per cent among non-camp refugees. On-going monitoring is required as refugees use increasingly negative coping mechanisms. 18
- There is a general gap in information of the health status of refugees in the host communities.

Water, Sanitation and Hygiene (WASH):

- Jordan is the fourth most water scarce country globally with pre-existing rehabilitation needs, especially in the north of Jordan. This is where the majority of the refugees are and this has put public water services under severe pressure.
- Approximately three quarters of Syrian households in host communities are accessing piped water. However over half of households are receiving water through this network less than once a week.¹⁹
- These families usually have to supplement their supply by buying water either by tanker or vendor. Refugees who live in areas that receive low levels of piped water, have minimal community contacts, and have small storage facilities, usually spend more of their income on water. 20
- Approximately 75 per cent of families in solid constructions have toilets, though approximately 10 per cent are in an inadequate state. Temporary shelters have a much worse sanitation situation, for example, 75 per cent of refugees living in tents mainly located in Mafraq do not have a toilet. 21
- In contrast to water services which cover 95 per cent of the population, sewage services only cover about a third of the population and mainly in urban centers.²² Septic tanks are often in an inadequate state.
- Families living in temporary shelters in rural areas, such in as the governorates of Balqa and Mafraq, are particularly vulnerable. They are least likely to have piped water or septic tanks, are at increased risk of bad water quality, are likely to have a latrine outside their home or non-existing, and have the lowest levels of hand-washing practice. Rashes on children due to possible poor hygiene have been documented. ²⁴

¹⁵ Health Working Group, (2013), Child Health Service Za'atari Camp August 2013.

¹⁶ Jordan University of Science and Technology, (2011), Jordan Perinatal and Neonatal Mortality Study.

¹⁷ UNICEF, (2011), At a glance: Syrian Arab Republic http://www.unicef.org/infobycountry/syria_statistics.html

¹⁸ Interagency (2012), Nutrition assessment in host communities and Za'atari camp

¹⁹ REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates

²⁰ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

²¹ ACTED, (Sept 2013) Shelter and winterization assessment, Mafraq.

²² Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water,

Sanitation and Hygiene; Protection t-refers to Yarmouk Water Company data.

23 WASH working group in Jordan, (Oct 2013), Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results 24 Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection

- Hygiene items have been identified as a major concern, with a third of households in host communities lacking soap. ²⁵ Nearly half of families, (45%), had difficulties to wash their hands, mainly because of the cost of soap (34%) and lack of water (24%). ²⁶ Soap, washing powder and shampoo are considered as top priority hygiene items. ²⁷ Women are very much lacking feminine hygiene products and families were also lacking baby items; both were due to the cost.
- 38 per cent of mixed gender schools where both Syrians and Jordanians are enrolled do not have gender segregated toilets.²⁸

Cross cutting issues

Access to information and services

- Various public services in health, education and social-type services are available for free or at minimal cost. However, a lack of awareness, distance from service, and reduced movements particularly for women and children means accessing services is challenging.
- Feelings of estrangement, distress and fear, as well as protection fears are hindering the movement of children and women outside the home, so much so that around a third of women and children rarely or never leave the home. ²⁹ This compromises their ability to access information and services.
- Certain services, such as reproductive health and Gender Based Violence (GBV) are limited and women's awareness of where to access these services is low. ³⁰
- Refugees reported complexities and a lack of clarity in some processes concerned with where and how to access services.
- Anecdotal evidence suggests unequal and exploitative treatment in service provision. Women and people with disabilities were found to be particularly vulnerable.
- Health services for chronic diseases and surgical operations are very expensive for refugees and can lead to inappropriate treatment.

Disability

Minimal research has been conducted on refugee children with disabilities. Global estimates indicate that potentially 10 per cent of the Syrian children in Jordan may have a sensory, intellectual or mental health disability, 31 which is similar to the figure estimated for the Jordanian child population.³²

²⁷ Ibid

²⁵ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

²⁸ Japan Emergency NGO (JEN), Feb 2013, Assessment findings of schools hosting Syrian refugee students in Jordan Governorates

²⁹ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.

According to the World Health Organization (WHO), around 10 per cent of the world's children and young people, some 200 million, have a sensory, intellectual or mental health impairment. Specialists, however, agree on a working approximation giving a minimum benchmark of 2.5 per cent of children aged 0-14 with self-evident moderate to severe levels of sensory, physical and intellectual impairments. An additional 8 per cent can be expected to have learning or behavioural difficulties, or both.' P. 12, UNICEF, (2007), Promoting the Rights of Children with Disabilities, Innocenti Digest no. 13

³² The National Council for Family Affairs, with the support of the World Bank, (2004), Jordan Country Study on disadvantaged children.

- Certain barriers for children with disability have been identified in a few assessments, such as the physical infrastructure of schools and bathrooms, as well as more generally accessing services in the community. ³³
- People and children with disabilities arose as a key vulnerable group in most assessments, due to their difficulty to access services, reliance on other people, inability to earn and potentially increased health needs.

Vulnerable Groups and Vulnerability

Vulnerable Syrians

- Most Syrian children are in a precarious situation, with various vulnerabilities and when these overlap, it can reduce children's and families coping mechanisms over time and make these children much more vulnerable compared to other groups.
- Assessments have indicated certain household indicators which result in children being more vulnerable compared to others, such as being in a female headed household, living in a temporary shelter, living in a rural area, having a large amount of debt, having a low level of income, low family level of education and certain areas had a higher likelihood of child labour, such as Balqa.
- Individual indicators such as being disabled, having poor health, low level of education, being an adolescent and being female are associated generally with higher vulnerability, especially when there is an external shock.

Pre-existing needs in Jordanian host communities

- Some areas where refugees have settled were already vulnerable in terms of food security, poverty, and certain public services were already inadequate, such as water supply. One study provided indications that an average Jordanian living in a host community in Mafraq or Irbid may be living below the absolute poverty line. ³⁴
- Jordanians living in areas that have an influx of refugees are more vulnerable than
 before due to increased pressure on their shared public services with refugees,
 increased competition for housing and jobs and increased tension due to this sharing
 of resources.

Capacities within the Syrian community

- With the view to recognizing the capacities of the Syrians, their own skills and abilities can be integrated into interventions to enable families and children to have a better standard of life in Jordan.
- Many Syrian refugees have various skills and trades such as technicians, crafts persons, and unskilled labourers. Assessments have shown that Syrians have interest in using their skills in order to earn an income, and/or developing new skills.

³³ Handicap International, April 17, 2013, Accessibility Assessment: UNICEF Schools (School 2 & 3) Za'atari Refugee Camp, Emma Pettey, Accessibility and Inclusion Manager; Japan Emergency NGO (JEN), Feb 2013, Assessment findings of schools hosting Syrian refugee students in Jordan Governorates

³⁴ ACTED and AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and

⁵⁴ ACTED and AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

Background

Over the past three years, Jordan has seen a continued influx of Syrian refugees escaping conflict from Syria. As of 25th Sept 2013, there were a total of 525,264 Syrian refugees registered by UNHCR in Jordan, with 401,239 registered outside of camps. Over half of the refugee population are children (53.5%), see Map 2. Approximately 53 per cent of those registered are female (29% of reproductive age) and 33.5 per cent of registered refugees in host communities live in single female headed households. Most of the refugees arrived in the months of January-April 2013 (see figure below). The majority of refugees are coming from Dara (56%), Homs (16%) and Damascus (9%) with others from smaller villages. The vast majority (84%) are living in four governorates: Amman: 31%, Irbid: 28%, Mafraq: 14%, Zarqa: 11%, meaning the vast majority of refugees are in the northern governorates. The majority of the camp refugees are in Za'atari, (120,785) with smaller numbers in Emirati Jordanian camp (3, 479), King Abdullah Park (1,200) and Cyber city (565)-see map attached.

It appears that the refugee crisis will protract. Some refugees have settled in areas in Jordan that were the poorest before the Syrian Crisis. Food, fuel and electricity are heavily subsidized in Jordan, and the government has been under more pressure to remove subsidies, should this happen in the future, refugees will particularly be under as they already access a lot of their basic needs through the market. The Government of Jordan appeal as of August 2013 estimates that the need of various line Ministries is a total of \$752.5 million USD. (Electricity \$53.3 million, Water \$213.6 million, Education \$387.5 million, Health \$287.6 million, Subsidies \$206.8 million). 36



Figure 1 International Organisation for Migration (IOM) number of refugee arrivals per month July 2012-Sept 2013³⁷

Registered Refugees by age/gender Male 0 - 4 50,422 9.6% 5-11 52,523 10.0% 12 - 17 40,968 7.8% 18 - 59 94,016 17.9% 60 + 2,675 1.1% Total Male under 18 143,913 46.4% Female 0 - 4 56,725 10.8% 5-11 51,998 9.9% 12 - 17 39,392 7.5% 18 - 59 123,955 23.6% 60 + 9,979 1.9% 148,115 53.7% Total Female under 18

Figure 2: Refugees registered as of Sept 2013 disaggregated by age and gender 38

³⁵ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

³⁶ Government of Jordan, (Sept 2013), Response Plan for hosting Syrians by the Government of Jordan.

International Organization for Migration, (Sept 2013), Regional Response Plan 6 presentation in workshop, 'Population Planning'

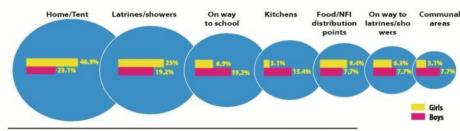
³⁸ As of the 29th Sept 2013 per UNHCR portal website.

http://data.unhcr.org/syrianrefugees/country.php?id=107http://data.unhcr.org/syrianrefugees/country.php?id=107

Violence against children

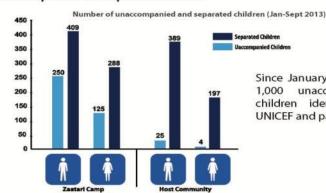
Children are at risk of physical, sexual and verbal violence in the home, in public areas and in school both in camp settings and in host communities. Mothers fear for their female adolescents and their high risk of sexual violence and harassment.

Location where risk of violence is highest for girls and boys in the camp



Source: Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

Unaccompanied and separated children



Since January 2013, there have been over 1,000 unaccompanied and separated children identified and supported by UNICEF and partners

Source: Activity Info, (Sept 2013), inputs from UNICEF, UNHCR, International Medical Corps, International Rescue Committee, and Jordan River Foundation

Child labour

An estimated
30,000 Syrian children,
mainly boys, are engaged
in child labour in Jordan,
and it is more likely in
female-headed

* Early Marriage

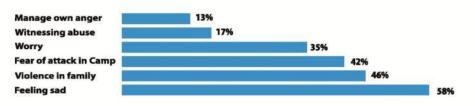
The prevalence of early marriage (registered) for Syrians in Jordan in 2012 was 18% as opposed to 15% of Syrian marriages

It is unclear whether this is a continuation of the practice in Syria, or an increase due to the challenging humanitarian situation

Mental health and psychosocial support

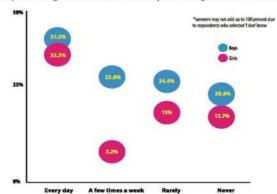
Many children are suffering profound stress after experiencing and witnessing violence and affliction in Syria. Children report feeling sad and have a fear of attack and/or violence in Jordan. Many families in host communities are isolated, with a third of boys and girls rarely or never leaving the home.

Mental health/psychosocial and child-protection focused problems of adolescent



Source: International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari (July 2013)

Survey Respone to 'in general' how often do family members go outside the house



Source: Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.

Sexual harassment

Syrian women are at a high risk of haassment in host communities public areas, communal camp areas and during non-food item distribution Intimate partner
violence
There is evidence of
intimate partner violence
or

domestic violenc

in the homes of Syrian refugees, but under-reporting makes it difficult to verify the extent

For more information www.unicef.org



1 Child Protection

1.1 Violence against children

Syrian children in Jordan are at a higher risk of experiencing physical violence as compared to adults. This is documented both in the home, school and with peers. Concerning physical violence in general, respondents in an assessment by the Child Protection and Gender Based Violence sub-working group in Jordan perceived boys under 12 to be at the highest risk of physical violence in general compared to girls and adults (see fig). ³⁹ Girls aged 12-17 years were identified as being at the highest risk of physical violence, but girls under 12 years old were only at slightly less risk. Boys were four times more likely to be exposed to physical violence than men of 25 years and above.

Violence against children is occurring in the home. Male and female refugees in focus groups outside of camps advise that tensions have increased between family members, and particularly between parents and children. 40 In focus groups in host communities, mothers reported hitting or yelling at their children and pointed to general stress, confined movements and psychological distress to explain this treatment. 41 Girls between the ages of 12 to 18 years are the most targeted by family violence according to key informants at Za'atari camp. 42 Respondents identified the home as the location of highest risk of violence for girls (46.9%), double the risk as compared to boys (see fig). 43 For boys, the home was also the location of greatest physical risk (23.1%) but other locations such as on the way to school (19.2%) and the latrines and showers (19.2%) were found to have similar levels. Boys were at three times more physical risk of violence on the way to school as compared to girls.

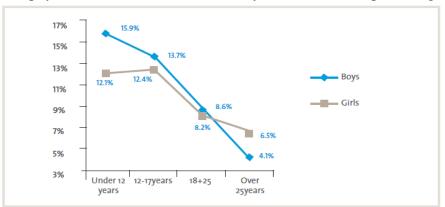


Figure 3 Survey Responses ranking physical violence as occurring "a lot" or "some" against males and females of different age

In schools, parents and children complain of bullying and threats of physical violence especially against boys in some areas such as Zarqa. 45 Violence in schools in Jordan has already been identified as a threat to children. Over half of Jordanian children (46% girls,

41 Ibid

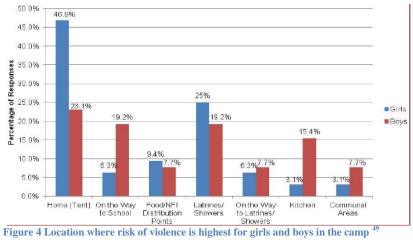
³⁹Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage ⁴⁰ Ibid

⁴² Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

⁴⁴Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

⁴⁵ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa

67% boys) have been exposed to physical violence at school. In Irbid, fathers spoke of their worry for children in school being targeting with violence.⁴⁷ Youth from Ramtha reported that one reason they left school was because of abuse and violence by teachers and students.⁴⁸



Outside the home, risk of violence can occur with local communities and especially with boys amongst their peers. Risks of bullying or verbal abuse from Jordanian neighbours are common; therefore care-givers limit their children's play outside. ⁵⁰ Peer violence was noted by respondents to be particularly common amongst adolescent boys.⁵¹ Children playing at the edge of camp are thought to be of high risk of sexual violence, therefore parents take measure to reduce children's play.⁵²

Children who engage in child labour are at a high risk of being exposed to violence. Child labour is occurring amongst the Syria refugees in Jordan with estimates of 16 per cent of children being engaged (see child labour section 1.5).

Sexual harassment and violence is also affecting children. Sexual harassment of boys was reported as relatively common in schools and in the street in Jordan by men and male youth in focus groups.⁵³ In host communities, boys were considered to be at a slightly higher risk of sexual violence than girls. However, the authors speculated that this could be because of the perception of a lot of boys having been detained previously in Syria, where sexual violence is known to have occurred.⁵⁴ It is more common in the conflict for boys to be detained than girls.⁵⁵ Child detainees in Syria have received the same torture treatment as adults, including sexual assault.⁵⁶ The taboo around reporting sexual violence is extremely strong, particularly for males. Girls are perceived to be of high risk of sexual harassment or violence in Jordan, particularly on the way to school, resulting in parents not allowing the girls to go to school. 57

⁴⁹ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

⁴⁶ UNICEF, (2007), Violence against children study in Jordan,.

⁴⁷ UNHCR, (Dec 2012), Report of the Participatory Assessment

⁵¹ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp ⁵² Ibid

⁵³ UNHCR, (Dec 2012), Report of the Participatory Assessment

⁵⁴Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

⁵⁵General Assembly Security Council, (15th May 2013), Report of the Secretary-General to the Security Council (A/67/845–S/2013/245) ⁵⁶ Ibid

⁵⁷Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

However, in camps, the perception was that girls were three times more likely to be targeted for sexual violence than boys, though it was still a risk for boys (see fig).⁵⁸ The majority of the informants said community members were the main perpetrators, followed by family members. Just under half of the participants in the same study reported hearing of an incident of sexual violence, with communal areas riskier than homes and women being the main survivors. Lack of lighting and poor security increase the risk of violence. It is believed that isolated and poorly lit areas may attract potential perpetrators.

The lack of clear guidelines for dealing with adolescents who are involved in public disorder and crime in Za'atari camp is a concern. The Jordanian Gendarmerie have arrested boys during demonstrations in Za'atari camp and put them in detention. Demonstrations have occasionally been violent and this is another source of risk for children. The actions of the boys are tried by the State Security Court rather than being referred to the juvenile police (which is the appropriate action under the Convention on the Rights of the Child).⁵⁹ Other reports from Za'atari camp have described adolescents being detained indefinitely, with no clear guidelines on how to manage adolescents who commit infractions and fears of unnecessary incarceration for youth.⁶⁰

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⁵⁸Ibid

⁵⁹ Ibid

⁶⁰ International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

1.3 Children without parental care - Unaccompanied and Separated Children (UASC)

Unaccompanied and separated children are a key group to identify and for whom to promote family-based care for (see ref for definition). UASC comprise 0.5 per cent of the population according to UNHCR registration. In most emergencies, unaccompanied and separated children generally represent at least 2 per cent of the population. It is possible that there are less unaccompanied and/or separated children in this crisis because compared to other emergencies, as families have sometimes had time to prepare before leaving Syria. It is also likely that the actual number of Syrian unaccompanied or separated children in host communities is higher than those identified, and UNICEF and UNHCR are working to expand programs to reach these vulnerable children.

Seventy per cent of UASC have come with their extended families and the rest have either come with unrelated adults or alone. UNICEF, UNHCR, International Medical Corps (IMC), International Rescue Committee (IRC), and Jordan River Foundation have identified and registered 1,687 children from January-Sept 2013 - see chart for gender and location breakdown below.

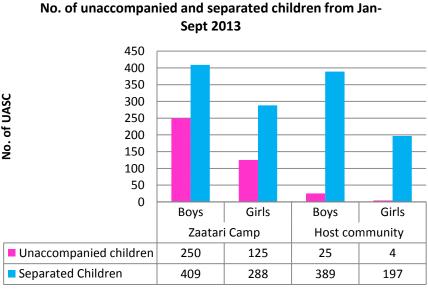


Figure 5 No. of unaccompanied and separated children from Jan-Sept 2013⁶².

Among these children, 217 have been reunited with their families and 135 have been placed with spontaneous foster or kinship care. ⁶³ Most are males and are of adolescent age. As some separation is voluntary with the aim to reunify with family in Jordan, comprehensive verification must be conducted to ensure the safety of the child. Just over half of UASC leave the camp either through bail-out or through leaving of their accord. It is then challenging to identify them if there are no contact details. Organizations have also found secondary separation occurring after providing targeted assistance in camps with families sending

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⁶¹ Definitions according to the interagency guiding principles on UASC; *Separated children* are those separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members. *Unaccompanied children* (also called unaccompanied minors) are children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so. ⁶² Activity Info, (Sept 2013), inputs from UNICEF, UNHCR, International Medical Corps, International Rescue Committee, and Jordan River Foundation.

⁶³ Only includes activity from UNICEF, IMC, and IRC

children in hope of getting assistance or leaving children behind in camps while the family returns to Syria.

Regarding an alternative care system for these children, it is challenging to identify foster family especially for adolescent males when females already exist in the family. Community appear to have appropriate knowledge on the care of UASC as when asked what they would usually do when they come across an unaccompanied minor, the majority of respondents answered that they would take the child to an NGO or camp agency. For families that have a UASC, guardianship is sometimes causing problems with UNHCR registration as files are not correctly linked and guardians are then not able to access assistance on the child's behalf 65

1.4 Children associated with armed forces and armed groups

There are strong allegations of recruitment by Syrian armed groups of children less than 18 years is taking place under the condition of the guardian's consent. There are buses returning to Syria from Jordan with only men, including boys under 18. However, it cannot yet be verified whether these male adolescents were recruited or used in hostilities. Frequently adolescents feel bad to remain in Jordan while their relatives or friends suffer or are involved in violence in Syria. Many families have lost friends or family in the conflict in Syria. In the meantime, finding work or education opportunities can be challenging for Syrian adolescents in Jordan.

It is highly likely that in the past children in Jordan have been involved in armed forces in Syria. Though the scale and scope is difficult to ascertain, their current care needs as a result of this involvement are important. Reports indicate that children, mainly male adolescents over the age of 15 years, decide to join the fighting, often with the assistance of an adult male relative, while proactive recruitment by armed groups may also have occurred. Children and communities describe a sense of honour in joining armed groups and the Security Council has documented a growing trend of use of children by armed opposition groups in Syria. For these children now in Jordan, appropriate child protection and psychosocial services must be made available.

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⁶⁴ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

⁶⁵ International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

Jordan.

66 OHCHR, 16th August 2013, Report of the independent international commission of inquiry on the Syrian Arab Republic Par 103, par 109 and par 108

⁶⁷General Assembly Security Council, 15th May 2013, Report of the Secretary-General to the Security Council (A/67/845–S/2013/245)

1.5 Child labour

Child labour rate in Syria is 4 per cent of children (3% girls, 5% boys), and it is now occurring in the refugee population in Jordan, though at more alarming rates.⁶⁸ The Government of Jordan estimates there are 30,000 Syrian children working, (no breakdown is available).⁶⁹ This results in a child labour rate of approximately 10 per cent of children if not higher, which is over double the pre-crisis level rate in Syria. This is five times as high compared to Jordanians, which is approximately 2 per cent of children. ⁷⁰ In an assessment covering 613 households, a third reported that they were earning income and almost half (47%) of these households reported that some or all of this income was earned by a child engaging in child labour (see fig 6 for age and gender breakdown). ⁷¹15 per cent of these households reported that child labour was the main source of income.

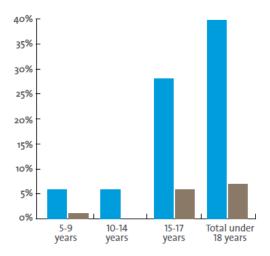


Figure 6 Out of households reporting paid income, percentage of households reporting income from a child. (Boys in blue and girls in grey). 72

Child labour is more frequent in agricultural areas, such as Balqa and Ghor, but children work in a variety of industries. A study by Save the Children Jordan, found 41.75% of school-age children living in Ghor (Jordan Valley) were employed, usually on farms. Another assessment which was conducted in governorates north, central and south, found children to be mainly employed (in order of prevalence), the maintenance/construction and food service sectors, followed by sales/retails and manufacturing sectors. Surveyed refugee girls identified five sources of employment for girls: domestic work (46.7% of employed girls), agriculture (33.3%), and (6.7%) each in hairdressing, manufacturing, and construction. The majority of cases reported were working 6/7 days a week and almost half of the cases were working more than 8 hours a day. There is evidence from the southern and central

⁶⁸ UNICEF (2002-2011), Syria statisitcs- at a glance http://www.nrcsa.ch/infobycountry/syria_statistics.html

 $^{^{69} \ \}underline{\text{http://jordantimes.com/rising-number-of-working-syrian-children-hinders-efforts-to-combat-child-labour}$

⁷⁰ GoJ announced 33,000 Jordanian children-for a total child population of approx 1.5-2 million and using source-2% provided.

http://www.unicef.org/infobycountry/jordan_statistics.htmlhttp://www.unicef.org/infobycountry/jordan_statistics.html

71Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

72 Ibid

^{73 &#}x27;the maintenance/construction (10 cases) and food service sectors (7 cases), followed by sales/retails (3) and manufacturing (2) sectors': Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

⁷⁵ Ibid

governorates also that children are often between 12-15yrs old working in shops, coffee and tea stalls, hotels and bakeries and are paid very little.⁷⁶

Children are at a higher risk of labour exploitation than adults. There is the perception that it is easier for children to find work as the necessity for a work permit is reduced.⁷⁷ As well as that, employers can pay children less, such as JOD2 per working day, compared with the minimum salary of JOD5.⁷⁸ Some refugees were worried about the safety of their children working in Jordan fearing exploitation, physical or verbal assault and even sexual harassment.⁷⁹

Female headed households and boys are at higher risk than others of the practice of child labour. In an assessment by CARE, a quarter (25%) of female-led households had a household member working, all of whom were boys. 80 However, it has been documented that girls did sometimes work with their mothers or other female family picking or selling fruits and vegetables.⁸¹ These girls are at a particularly high risk for exploitation and abuse as they often work long hours in open areas in proximity to older men and with limited supervision.

In Za'atari camp, child labour is also occurring. Two thirds of respondents knew of child labour practices on-going in the camp, the vast majority reportedly being boys. 82 According to these key informants, boys are most likely to be selling goods, and otherwise begging, cleaning, undertake construction work, or standing in line for adults waiting to receive food or NFIs. Some boys steal goods from other tents on behalf of others. Boys are sometimes offered work outside of the camp often through the 'bail-out' process to work with Jordanians outside. If girls are working, they are most likely to be selling goods, and possibly begging or cleaning. Some Syrian adults report that children are being taken away from the camp for work purposes.83

⁷⁶ International Rescue Committee, March 2013, Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central

⁷⁷ Oxfam GB Jordan, March 2012, Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

78 Un Pont Per (2012), Comprehensive assessment on Syrian Refugees residing in the community in Northern Jordan 2012,

⁷⁹ UNHCR, (Dec 2012), Report of the Participatory Assessment

⁸⁰ CARE International (2013) Syrian Refugees in Urban Jordan

⁸¹ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

⁸² Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

83 UNICEF (2013) Shattered Lives: Challenges and Priorities for Syrian Children and Women in Jordan

1.6 Mental Health and Psycho Social Support

Numerous children are experiencing profound distress, both from past events in Syria and current circumstances in Jordan. This is manifesting itself in children exhibiting serious mental health and psychosocial concerns. Many have experienced or witnessed extreme violence in Syria, especially men and male youth, and are now adapting to a new environment in Jordan.⁸⁴ The most thorough assessment conducted on mental health and psychosocial was conducted on camp, though some evidence in host communities is detailed below. It can be generalized to some extent that the situation in host communities is similar to that on camp.

Adolescents are feeling grief and fear regularly. 85 The most common serious mental health disorders for adolescents reported by mental health key informants reported were enuresis, intellectual disability and autism/developmental disorders. There is also evidence of children are exhibiting signs of Post-Traumatic Stress Disorder (PTSD).⁸⁶

In terms of the environment and psychosocial support, adolescents on camp find camp life the biggest issues.⁸⁷ They fear violence in communal areas. Male adolescents are a particular concern. Boredom and aggressiveness are both concerns for adult and youth males.88 Worryingly, residents didn't know what services were available and where, and adolescents felt minimal sense of ownership and little sense of community. ⁸⁹ Few adolescents (25%) are attending school and as a result, many loiter during the day. There is a clear lack of activities for youth in the camp, and it is likely to be similar for those in host communities. Residents report they do not know what medical and psychosocial resources are available, and 11 per cent of adolescents surveyed reported feeling ill or disease as a primary concern. In key informant interviews, workers report that psycho-education is lacking, around the effects of armed conflict on mental health and child development.

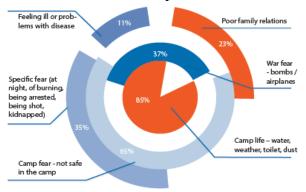


Figure 7: 'Response to question 'What kinds of problems do youth have because of the war or living in the camp?'90

⁸⁴ An IRC report detailed how men and male youth have experienced and witnessed violence in Syria, including beheadings, pulling out the injured and forced to witness sexual violence. International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian

Refugees in Urban Areas of South and Central Jordan.

85 International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan.

⁸⁷ ibid

⁸⁸ International Medical Corps and UNICEF, (2012), Displaced Syrians in Za'atari Camp: Rapid Mental Health and Psychosocial Support Assessment

International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

The parents of children also experience worry, boredom, aggressiveness, depression and discomfort. Mothers worry about their family in Syria and inadequate services for children in Jordan. Mothers also found taking care of a family in difficult conditions, especially in the camp where privacy is limited, a discomfort. Accessing basic needs can be challenging and hygiene items are expensive. They also find themselves being aggressive to the family because of the challenging living conditions. Female headed households have high levels of fear due to their vulnerability.

Adolescents find support to deal with these issues from various activities and people. Many find support from (in order of preference) parents, siblings, friends and sometimes the community. Boys and girls had similar results across mental health indicators, except for girls feeling that they had better relations with their parents. Adolescents demonstrated a range of coping mechanisms, but 'to withdraw' was by far the most common (see figure below). The most risky behaviours were identified as beating someone 8 per cent, 'smoking' 4 per cent, and stealing 4 per cent, which are relatively small compared to other mechanisms. When youth were asked what they desire, almost all reported that they wanted to return to Syria.

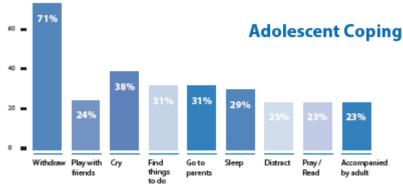


Figure 8: Adolescents responses to 'What kind of things do youth do to deal with these problems?'93

Many families are experiencing isolation and tensions with host community. ⁹⁴ It was reported that around a third of women and children only leave the house rarely or never (see graphs below). ⁹⁵ This assessment found that parents often don't allow children to play outside some female single headed households report feeling stigmatized. Reasons for reduced movement for children are mainly feelings of distress and fear, and for adults, feelings of estrangement (see below). Low movement was also because of a lack of money for recreational activities, as well as for some, a fear of interaction with the Jordanian community. Syrians have had mixed experiences with the host community, with high levels of distrust reported in some areas, especially in the north of Jordan where there are the most refugees. ⁹⁶ Some areas such as Ramtha, there are tribal relations that make integration with the host community easier. ⁹⁷ However in certain areas such as Mafraq and Irbid, tensions over resources have been identified and protests have occurred.

98 ibid

⁹¹ ibid

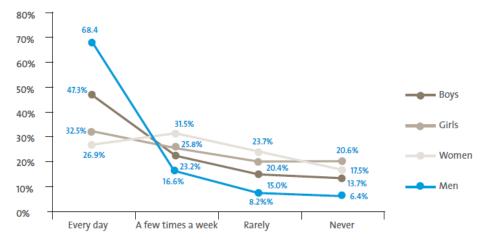
⁹² Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan.

⁹³ International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

⁹⁴ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa

⁹⁵ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage
⁹⁶Ibid

⁹⁷ Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan.



*Answers in each category may not add up to 100% due to respondents who selected "I don't know."

Figure 9: Survey Response to 'in general, how often do family members go outside the house'99

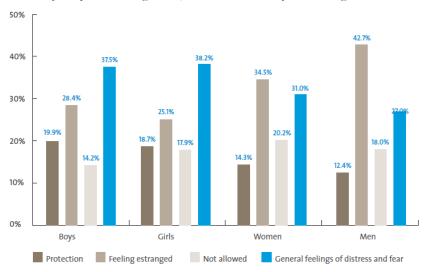


Figure 10: Survey Response to 'if family members go out rarely or never, why?' 100

Most vulnerable groups in terms of Mental Health and Psychosocial Support¹⁰¹

- 1. **People with chronic mental disorders-**who are at risk for relapse due to not being able to access care and being exposed to new environmental stressors.
- 2. **People with physical disabilities** who may not be able to access services and have compromised mobility in the camp or host community environment.
- 3. **People with physical health problems** who may not be able to access services and who may be affected by the camp environment.
- 4. **Pregnant women-** who may not know where to go for delivery and who may be affected by the difficult living conditions.
- 5. **Women**-who may not feel safe in the camp and may face challenges providing for their children's needs.
- 6. **Single headed families**-who may not feel safe in the camp or in host communities.

⁹⁹ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹⁰¹ International Medical Corps and UNICEF, (2012), Displaced Syrians in Za'atari Camp: Rapid Mental Health and Psychosocial Support Assessment

- 7. **UASC** (unaccompanied or separated child-see section 1.3 for more info)-who have no caregiver and do not receive needed care and attention.
- 8. **Children**-who may be negatively affected by the weather and camp conditions and tense conditions in the host community, may have difficulty understanding of what is happening around them, may still be affected by past traumatic events (e.g. shouting when they see a plane), have no areas to play, may have been exposed to violent events, and are experiencing instability and disruption of home and schooling.
- 9. **Youth**-who may experience instability in their families' situations and income, disruption of their schooling, as well as having witnessed and/or experienced life threatening events.
- 10. **Older people**-who may have experienced extreme stressors such as the killing and detention of loved ones, who may be adversely affected by the camp's harsh conditions, and who may be more vulnerable to becoming ill.

1.7 Gender Based Violence

The breakdown of traditional protection networks leaves women and children exposed to increased risks and threats. Individual and community coping mechanisms are also reduced. Many experienced or witnessed violence in Syria. An assessment reported that 28% of households, (which is approximately 40,000 Syrian households in Jordan) left Syria due to fears of violence, including sexual violence and other forms of gender-based violence (GBV)¹⁰². Rapes were perpetrated during house searches, at checkpoints, and in detention facilities, often in conjunction with other forms of torture as various sources confirm. Survivors in Jordan are not only dealing with severe stress as a result of GBV, but have endured difficult journeys from Syria, are often in grieving, have lost their homes and livelihoods, and are now struggling in a difficult environment in Jordan¹⁰⁴.

Intimate partner violence in the home 105

Intimate partner violence (domestic violence) in the home, is present both in and out of camps, and the perception of survey respondents is that it is on the increase-though this is difficult to say without a baseline. Women have their movement restricted in Jordan due to fears about safety and community tensions (see fig 9&10 before). The increased dependency on male family members by women makes women feel more vulnerable to men's pressures and demands. Women reported how husbands have become more emotionally and physically abusive because of the difficult living conditions they experience.

The vast majority of respondents (74%) believe that family violence, which includes intimate partner violence, goes largely unreported. ¹⁰⁸ The homes, narrowly followed by Food/NFI distribution site are ranked as the two most high risk locations for violence against women.

A contributory factor to this violence is tension in the households. Some of this is caused by the lack of privacy-nearly half of households are sharing their household with another family in the host community. ¹⁰⁹ In the camp, overcrowding in the home hinders women's and girls' privacy and inside to their tents, they are unable to lock themselves inside when alone ¹¹⁰. This overcrowding puts extra stress and strain on households and may lead to harmful coping mechanisms such as verbal and physical abuse. The overall situation of the household and livelihood must be taken into account when addressing GBV.

Perpetrators of violence in the home are usually male, often spouses but can also be male caregivers, such as older brothers. However 8 per cent of key informants also name women as the perpetrators, including mothers-in-laws as a risk for younger women. The majority of key informants considered females to be the most affected by this, particularly between ages

25

¹⁰² Care Jordan, (Oct 2012), Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.
103 UN Human Rights Council, (5 February 2013), Report of the Independent International Commission of Inquiry on the Syrian Arab Republic

¹⁰⁴ Ibid.

105 The term 'intimate partner violence' describes physical, sexual, or psychological harm by a current or former partner or spouse.

http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html

ence/definitions.html

106 Care Jordan (Oct 2012) Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.

107 ibid

¹⁰⁸ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

¹⁰⁹ REACH (2013), Findings of Household and Key informant Assessments on 5 northern Governorates of Jordan.

of 12-18.¹¹¹ This is violence against children, but can also potentially be gender based violence (see section 1.1).

Sexual violence and exploitation of women in public areas

Communal areas can be of a high risk for sexual and physical violence against women, after the home, both in the camp and host communities. Female headed households are particularly at risk, as in two partner households, the male will often access the service because of the perceived high risk of violence. In camps, food/NFI distribution sites are considered the second highest area of risk for adult women (fig 11). This assessment found that women also perceive the cooking area as insecure because of men hanging around outside. This has encouraged women to cook at home which often creates a higher risk of fire hazard. Latrines were also identified as an area of risk for women and most go there in groups and avoid going in the evening as there is no lighting and many broken locks.

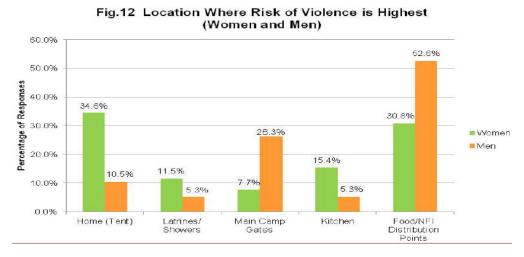


Figure 7: Location where risk of violence (GBV and non GBV related violence) is highest for women and men according to refugees on camp 113

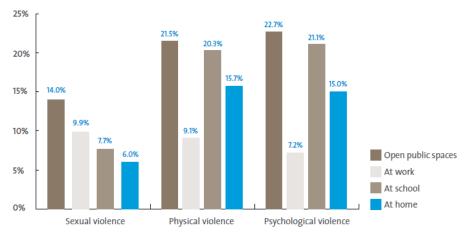


Figure 8 Survey of various places with the highest rankings for different types of violence in host communities. 114

¹¹¹ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp
¹¹² Ibid

¹¹³ Ibid

¹¹⁴Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

Sexual and verbal harassment appears to be common and in host communities results women try to keep a low profile in host communities. Open public places are rated as the highest area for all types of violence (see fig 12). The majority of the women reported that they did not feel safe going to the marketplace alone as they were often singled out and harassed either verbally or by touching. There is anecdotal evidence of Jordanian men publicly accusing Syrian women of being prostitutes in Mafraq. Women and girls interviewed by Amnesty International reported frequent harassment and unwanted marriage proposals. Harassment has made husbands jealous and in some cases led to tension within the home and affected ability to leave the house 118. Tensions between the host community and refugees are breaking down norms of respect, politeness and hospitality. In terms of geographic indicators, public harassment seems to be most documented in Mafraq and Irbid, where the Syrian population is large and community tensions are highest.

In host communities, it was also reported that harassment from service providers occurred, particularly if the woman was single, if she came alone, or if she had a daughter perceived as being of a marriageable age. Women with no husband are at most risk of violence according to respondents.¹¹⁹

Due to economic hardship, anecdotal evidence suggests that women and girls are at increased risk to sexual exploitation and may resort to transactional sex for survival. Limited economic resources and information about available services (e.g. information on food and non-food distributions, knowing that humanitarian aid is free, etc.) place many women and girls in vulnerable situations, and people in positions of power may also take advantage of their vulnerability through the perpetration of sexual exploitation and abuse against them. In some small-sample assessments, transactional sex was mentioned anecdotally as occurring, sometimes in exchange for NFIs. ¹²⁰ There have also been anecdotal cases of families approaching local or non-national men either to marry or for sexual favours in order to provide for the family.

There is little information available on the practice of and risk of killings in the name of honour for Syrians in Jordan. Women and girls could, however, be at an increased risk of killings in the name of honour due to the compromised living conditions and greater social exposure. This risk of killings in the name of honour could also be a reason to not report incidents of sexual violence.

Notably, approximately 60 per cent of interviewees would not report on sexual violence and approximately half that number refused to speak about other types of violence. This social stigma in speaking about sexual violence and other forms of violence is an established norm in Syria and organizations state it is quite difficult to monitor the extent as survivors rarely or never report. There is also the risk that it could lead to abuse (or even death) from her

¹¹⁵ Jordanian Health Aid Society, Outreach Team, July 2013, Syrian Refugees at East of Mafraq.

¹¹⁶Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹¹⁷ Care Jordan (Oct 2012) Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.

Amnesty International (September 2013) Early Marriage and Harassment of Syrian Refugee Women and Girls in Jordan

¹¹⁹ Un Pont Per (2012), Comprehensive assessment on Syrian Refugees residing in the community in Northern Jordan 2012,

¹²⁰ Questscope, January 2013, Participatory Reflection and Action Report, 'Factors affecting the Educational Situation of Syrian Refugees in Jordan'; UNHCR, (Dec 2012), Report of the Participatory Assessment; CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafrag and Zarga.

assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa.

121 Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹²² International Federation for Human Rights (FIDH), (Dec 2012), Violence against Women in Syria: Breaking the Silence, based on FIDH assessment in Jordan.

brothers or other males in the family. 123 In another study, one interviewee said that Syrians were not willing to report abuse that was on-going, such as the extent of rape and sexual abuse in Syria, the mental distress of survivors and those forced to watch, the extent of young girls selling themselves in order to provide for their family, and the amount of non-Syrian men coming here to buy sex from Syrian females-both girls and women. 124

¹²³ International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan. 124 Ibid

1.8 Early Marriage

Many Syrian families accept and agree to early marriage for girls. 125 In a survey of 11 governorates in Jordan on Syrian refugees, almost half (44.7%) indicated their mothers married before age 18, with some married as young as 12. 126 In Jordan, the minimum age of marriage is 18. However, courts can authorize marriages for children as young as 15 years of age. Preliminary findings from a UNICEF assessment on early marriage reveal that the prevalence of early marriage for Syrians in Jordan in 2012 was 18% as opposed to 15% of Syrian marriages in Syria. This is however based on registered marriages and does not capture unregistered marriages. Marriage procedures in Syria are different from those in Jordan. When children at risk of experiencing early marriage or are already married are identified protection experts, including UNHCR, and other case management providers offer information on the law governing marriage in Jordan along with the potential harmful health consequences of early pregnancy.

While there is no conclusive evidence that Syrian refugees are marrying early at a higher rate in Jordan than in Syria, the evidence in assessments and conversations with partners suggests that the sense of economic and physical insecurity that, among other factors, drive early marriage is amplified in displacement. 127 The lack of quantitative information on unregistered marriages is difficult to overcome due to the potential risks to women and girls and the ethical concerns of collecting such information. Some Syrian refugees do not register marriages which can affect the already limited rights of women and affects the ability to register children at birth in Jordan. 128

Reasons for non-registration may be lack of documentation but also may not be a priority given the multiple needs of a refugee family. The struggle to meet basic living needs (shelter, food, employment, and health care) is more immediate than the need to register a marriage. 129 Moreover, many Syrians continue to struggle with understanding Jordanian policies and procedures on registration of marriages. Thus, many Syrians in Jordan continue to register and conduct marriages the same way they did in Syria, often waiting until the birth of a child before the register a marriage. Hope of returning to Syria in the near future is also a factor in either delaying or not registering marriages in Jordan. 130

Evidence of the occurrence of early marriage has arisen in all governorates and camps in qualitative surveys. There have been around 655 cases of early marriage referred to child protection organizations during the year. However, it is not clear if the early marriages that are occurring are is in line with Syrian normal marriage practices, or whether the rate has increased with the crisis.

Anecdotal reports during focus group discussions reveal that, due to concerns over the protection of girls and financial constraints, some Syrian families in Jordan may agree for their daughters to marry older men and/or men that they do not know from their communities back in Syria. These factors may place girls at increased risk to violence due to the power imbalance in these marriages. In a recent review of Sharia Court data on registered marriages in Jordan it was found that 47% of marriages involving Syrian girls in 2012 were to men over

¹²⁵ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage 126 Ibid.

¹²⁸ Amnesty International, 5th Sept 2013, Early marriage and harassment of Syrian refugee women and girls in Jordan, http://livewire.amnesty.org/2013/09/05/early-marriage-and-harassment-of-syrian-refugee-women-and-girls-in-jordan/

¹³⁰ UNICEF (September 2013) *Early Marriage in Jordan*. Assessment report not yet released or published.

the age of 26 and 21% married men over the age of 30, suggesting that many Syrian girls marry men significantly older. 16% of Syrian girls married men that were 15 years older than them, or more. Many families however understand the risks associated with such marriages and refuse any proposals that may place their daughters at risk. 132

The motives for early marriage were usually described as the need to ensure the security of daughters and the economic benefits of a smaller household. Few (6.3%) refugees ranked a dowry as one of their top 3 sources of family income. Some refugees proposed that early marriage was advantageous for a girl as it would ease the adjustment to a new family, as well as with a mother-in-law because of the young age and perceived better ability to adapt. Also, young adult women mentioned social benefits such as increased respect from the community. Though in practice, many found heading households and rearing children at such a young age to be stressful and challenging. ¹³³

Some refugees debated that the age of marriage for participants correlated with their city of origin in Syria. Some women from Damascus and other urban areas stressed that early marriage is a rural tradition, or that it is specific to certain cities e.g. Homs. 134

Anecdotal information indicates that there is a practice of fixed term or temporary marriages (also referred to as *pleasure marriages*) amongst some men and Syrian girls, though it is unclear how many of these marriages have taken place and with what frequency. Findings from monitoring visits highlight concerns related to these fixed term marriages called zawwaj al-mut' a. A girl or woman enters into marriage but is then later abandoned sometimes after only two weeks of marriage. For the men involved, it is thought, that they believe these marriages offer a sort of seal of approval under the guise of religion for temporary arrangements with girls or women. These marriages are not registered and thus not recognized by the Jordanian Government. Women and girls that have been divorced or abandoned are left feeling humiliated and fearful of their safety. Their safety may be at risk in their new surroundings away from family and friends but could also be at risk if they return home to a community or family who may judge and blame them for the abandonment. According to an inter-agency assessment in host communities, around one in ten survey participants knew of at least one woman or girl who had been in a temporary marriage. ¹³⁵ In Mafraq, some Jordanians reported seeing Syrian women being sold into marriage for money, then being abandoned by their husbands, and no longer having a way to support themselves, may use sex as a way to survive. 136

Though some Syrian boys marry below the age of 18, Syrian women and men have reported that it is important for a boy to complete his military service before marrying ¹³⁷ yet findings from an inter-agency assessment reveal that Syrian women and men believe that the age of marriage for Syrian boys has decreased since arriving in Jordan. ¹³⁸ Study participants were more likely to see early marriage as positive for girls than for boys. ¹³⁹

¹³¹ Ibid

¹³² Human Right's Watch (August 2013) Syrian Refugees Struggle to Protect Daughters from Exploitation

¹³³Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹³⁵ Ibid

¹³⁶ Mercy corps, May 2013, Mapping of Host community tensions in Mafraq and Ramtha.

¹³⁷ UNICEF (September 2013.) *Early Marriage in Jordan*. Report not yet released or published.

¹³⁸Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage
¹³⁹ Ibid

Outside of Camps

Qualitative assessments with Syrian focus groups in host communities reported indications of increasing instances of early marriage. A study by International Rescue Committee in Ramtha and Mafraq conducted one year ago reported early marriage as a coping mechanism to address the protection needs of the girl, as well as reducing the economic burden ¹⁴⁰. It was reported that JOD200 was the average dowry. In another assessment conducted in the middle and southern governorates, Jordanian and Syrian community leaders stated that they knew of local and foreign men who had been offering to marry young Syrian women for minimal dowry. Mothers often feel immense pressure to accept such offers due to their vulnerable position. Some have been forced to accept dowries as low as JOD50 given their current economic situation and status. 143

In another study in 2012 by Un Pont Per (UPP), participants described being approached by non-Syrian men for marriage. 144 Interviewees in Karak reported at least 7 girls who married Jordanian men and these marriages were known to be violently abusive. 145 Adolescent girls in this study reported that they themselves would agree to marriage with an unknown man in order to reduce the burden for their parents.

Another interagency assessment covering 11 governorates and 885 participants recorded more split opinions. On the one hand, many key informants in the northern and middle regions said that there were in fact fewer early marriages and the media had created this myth of Syrian refugees and early marriage. ¹⁴⁶ It also reported that Jordanian men who propose marriage to Syrian girls are generally refused. Conversely, in this assessment, others believed early marriage was increasing, and a particular key informant believed early marriage was prevalent, especially among those without proper documentation.

What appears certain is that women are being approached for marriage by Jordanians and other men. In two studies by Cooperative for Assistance and Relief Everywhere (CARE), women described one of their main concerns as being approached for marriage or early marriage of daughters. In some cases, this had been while they had been in one of the camps and the offer of marriage was accompanied by an offer to bail the family out of the camp. Women said that early marriage was not a phenomenon here, but the study suggested that also cultural constraints may prevent women from freely speaking about this.

In Camp

Key informants and refugees advised that 13 is a normal age for a girl to marry and boys usually married from 18-25 years old. Others reported that they thought the age of marriage was being delayed due to the insecurity, and lack of negotiation and status due to a

146 Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹⁴⁰ International Relief Committee, (October 2012) Assessment Report Cash Transfer Program to Syrian Refugees in Jordan..

¹⁴¹ International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central

Jordan.

142 CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa;

and UNHCR Participatory Assessment 2012.

143 Care Jordan, (Oct 2012), Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.

¹⁴⁴ Un Pont Per (2012), Comprehensive assessment on Syrian Refugees residing in the community in Northern Jordan 2012,

CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian

refugees living in Irbid, Madaba, Mafraq and Zarqa

148 Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

lack of livelihood and wealth. ¹⁴⁹ 40 per cent of respondents in the interagency study knew of one or more girls under 18 who were either married or were planning to get married, in comparison to 10 per cent of respondents knowing of boys planning or already married. ¹⁵⁰

Mothers were also worried about their daughter's safety and considered getting married as one way of being safer, and have greater financial stability. 151

Refugees and key informants reported that they see increasing numbers of non-Syrian men and matchmakers making their way to the camps, even pretending to be aid workers. A male refugee in Za'atri village described seeing older non-Syrian men visit Za'atri camp to marry Syrian girls, and would often marry them and return the girls later¹⁵² Some of the other refugees agreed with this account. There was one report of a marriage offer for a token dowry price because the girl had been sexually abused in Syria. Most reported that offers were usually refused but it was not possible to determine the extent of this. The practice of refusing an early marriage is often more-so due to pride and respect, rather than the age or health concerns. Very limited info was available on temporary or forced marriages in camps. The concerns is a same of the concerns of th

¹⁴⁹ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

¹⁵¹ International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

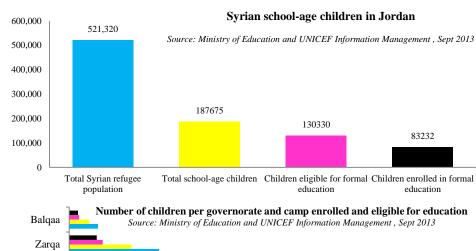
¹⁵²Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage.

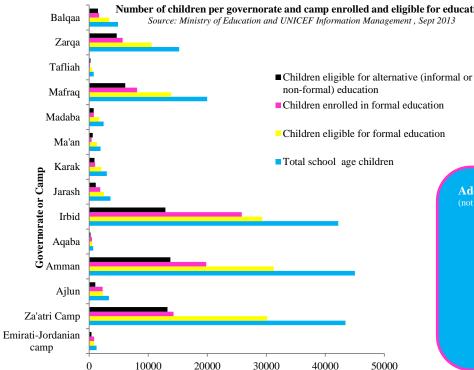
¹⁵³ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), *Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp* referred to example 'One participant from Zarqa described how a man in the Za'atri refugee camp offered his daughter in marriage for a bride price of 1 JOD because she had been sexually abused in Syria, and therefore her honor had been tarnished.'

¹⁵⁴Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

¹⁵⁵ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

Jordan-Syrian Refugees in Jordan - Education

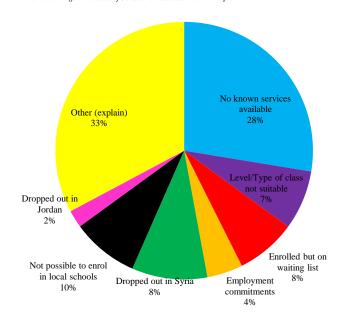




Number of children

Reasons for not enrolling children in school

Source: REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates of Jordan *conducted Dec 2012-April 2013



Additional barriers to enrolment for children in education:

(not covered in above assessment, but covered in other assessments)*see Education inside for references

- Lack of capacity at school level to cope with the extra Syrian students need for resources such as staff, textbooks, administration and class-room resources.
- > Protection concerns on way to school involving threats of attack from tensions with local community.
- Violence in school- corporal punishment has been reported and Syrian children are suffering bullying and isolation.
- Distance from school is reported as obstacle, as some parents are scared to leave their girls travel the distance.
- Lack of sufficient income to pay for auxiliary costs of education. Education spending per household is average 27 JD (\$38 USD) a month.
- > Difficulty with curriculum-subjects such as English and Arabic are taught differently in Jordan compared to Syria.
- Lack of remedial/catch-up classes to enable students who have missed months or years in school to be able to keep up with their class level.
- Children with disabilities suffer physical and attitudinal barriers to school enrolment, and services in general.
- Lack of sustained informal education-life skills, literacy and numeracy classes for children who are not eligible for formal education (have missed over 3 years of school).



2 Education

The following refers to information mainly on education for Syrian children living in host communities as the situation is under-reported and more difficult to monitor.

2.1 Formal education

Enrolment numbers

Primary enrolment rates in pre-crisis Syria were almost 100 per cent (100% male and 98% girls), with much lower secondary net enrolment rate of approximately 67 per cent-male and female. ¹⁵⁶ There are 190,000 school age Syrian refugee children in Jordan. As of September 15th 2013, there were 83,232 children enrolled basic education (primary and secondary) in Jordan, including camp and host communities, which is 64 per cent Syrian children who are eligible for formal education (see map 4 below). This is a doubling of the number of enrolled children in April 2013, which was 42, 098 students, which is telling of the efforts made by actors to tackle the challenges of enrolling Syrian children into the Jordanian public schools (see figure below and map). As of start of October 2013 there are still approximately 19,500 children on a waiting list, which indicates the large resources and capacities required which the actors are working hard to provide. Yet there are 47,000 children who are eligible for formal education but are not enrolled and 57,000 children who are eligible for alternative education.

Comparing the enrolment rates across governorates shows the extent of children who are likely to be eligible for formal school, versus those who were enrolled in September. Overall, most governorates have increased their percentage of students enrolled dramatically. Except for Zarqa and Tafiela which have a slightly reduced percentage of students enrolled. Potential reasons for this include - students could be on waiting lists, or the number of children in these areas has reduced in the time between April and September. Also some families move around because of work changing through the seasons. Irbid, Amman, Zarqa and Mafraq have the largest numbers of Syrians and thus a priority in terms of school provision (see map 5 on school absorption below).

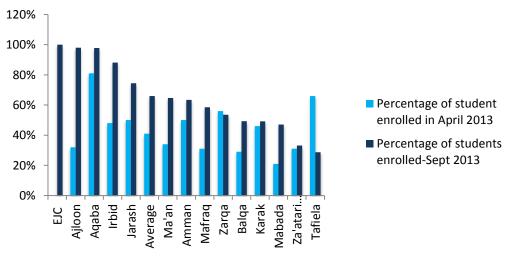
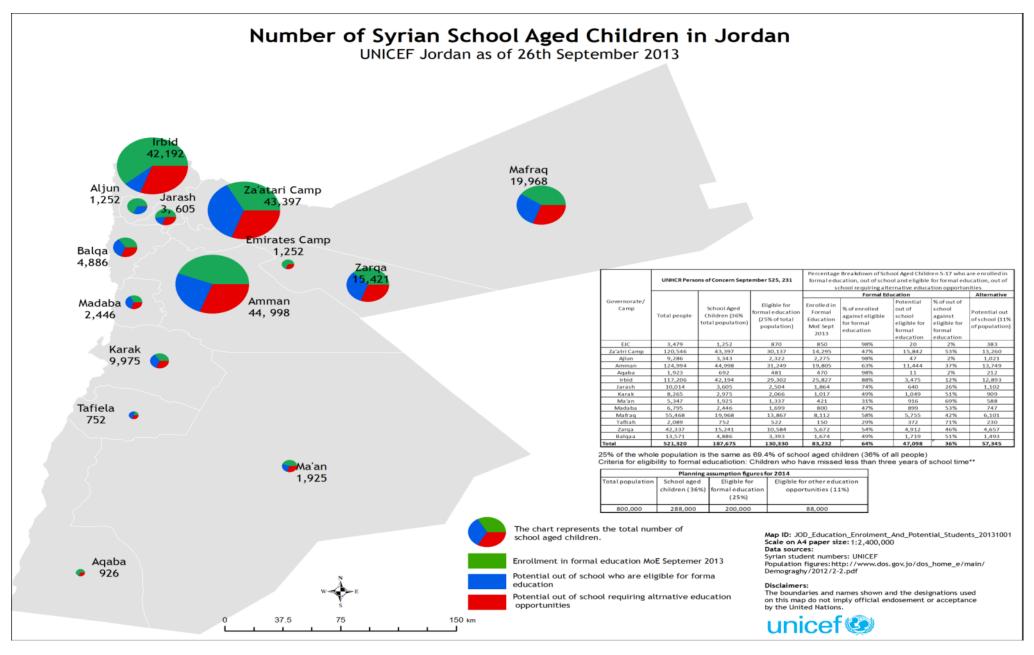


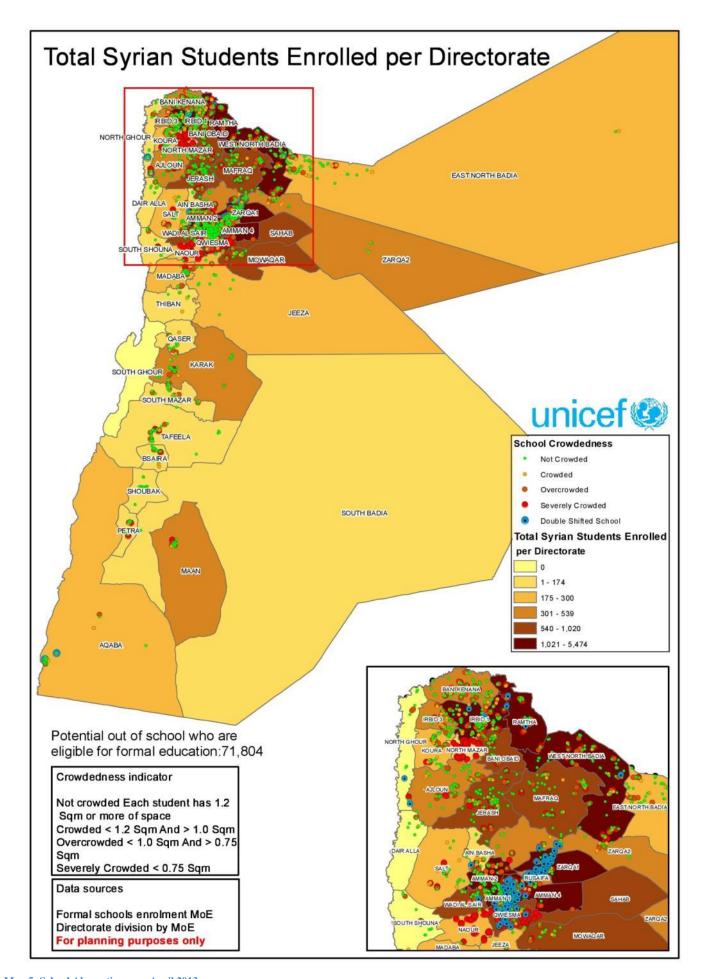
Figure 9: Comparing April and Sept 2013 enrolment of eligible population for formal education by governorate. 157

 $^{^{156} \} UNICEF, 2008-2011, Syria-Statistics \ at \ a \ glance, \underline{http://www.unicef.org/infobycountry/syria_statistics.html \#103}$

¹⁵⁷ UNICEF and MoE, (Sept 2013), Figures from Information Management Education, UNICEF



Map 4: Number of Syrian School Aged children enrolled in Jordan



Map 5: School Absorption map April 2013

^{*}Please note that these figures are from May 2013 when approx. 40,000 students were enrolled. Sept 2013 this has increased to approx. 80,000, hence the over-crowding will have doubled since this map was produced.

Non-enrolment

Despite progress, there is still an estimated 57, 000 children who are eligible for formal education but are not enrolled. 19,500 of these students are on a waiting list for a public school. The main barrier for these children is the lack of capacity and resources at the Ministry of Education schools. Schools require resources, such as extra teachers, administration, textbooks and stationary, in order for students to be able to put on an extra 'shift' for Syrian students. ¹⁵⁸ Schools have tried to acquire extra space, but with limited funding, and competition from private sector for space, this has been challenging (see absorption map). ¹⁵⁹ In Ramtha, three new schools were built just to serve the refugee population. ¹⁶⁰Students also require bags, uniform and other costs.

However, other challenges exist in enrolment in school for the 33,734 who are neither on the waiting list nor enrolled. Besides a large REACH assessment at the start of 2013, there has been no large scale education focused assessment undertaken amongst the refugees in the host community. This large-scale quantitative survey of 25,000 households taken in Jan-March 2013 in northern governorates asked questions about the reasons for not attending school with a selection of set answers considered after key informants and household interviews. Though there has been an increase in accessibility of education in the mean-time, these responses still provide a start-point which to analyse the possible reasons for a lack of enrolment. The weakness of set answers in a quantitative survey is that it doesn't allow for a broad range of answers, and over a third of responses were either 'other' or 'not possible'. Table 1 below represents an analysis of respondents answers provided in REACH as compared with evidence from other assessments. Table 2 provides other barriers to enrolment that were not in the scope of the REACH survey.

Geographic analysis

In the below graph, the reasons provided for children not participating in education were similar across governorates. However, it can be seen that in Balqa, employment commitments are drawing children from school at a higher rate than other governorates. This area is prone to child labour, with an assessment finding 42 per cent of children engaged in child labour. However this may change depending on the season and the work available for families.

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¹⁵⁸ USAID, (2013) Final report and Solutions package: Human and Institutional capacity development (HICD) performance assessment of the Jordanian Education Sector and Ministry of Education.

¹⁶⁰ ibio

¹⁶¹ UNICEF Education Section & Save the Children Jordan, Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid (Feb. 18-March 20)

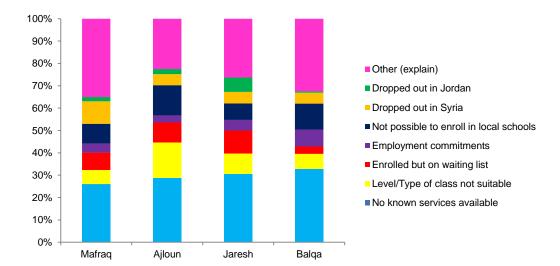


Figure 14: Responses households gave as reasons for children not to be enrolled in school (*Irbid-there was no data collected)

In Mafraq, approx. 10 per cent dropped out in Syria. It is unclear how long these children have been out of school but at minimum they probably require catch-up and remedial classes to go back to formal education, or if a child has missed more than 3 years, students must consider alternative forms of education. In Ajloun, almost 14 per cent of the classes were not suitable and this merits further investigation. In a USAID report, Ministry of Education reported that for Syrian students, while age appropriate placement may occur, this is not always skill appropriate. Finally in Jerash, approximately 7 per cent have dropped out of school in Jordan. Possible reasons include those not included in the survey, such as conflict in school, being placed in the wrong grade, the cost, or difficulties travelling to school (see table 2). Some of these issues may have been resolved as the provision of education and support has increased since the time of this assessment. An education assessment in host communities is planned.

There is a lack of disaggregated statistics on formal school concerning the age break-down, as it is likely younger students have a high attendance than older. This information gap would assist analysis of the needs of various ages of children. There is also a lack of gender disaggregated information which would further enhance this analysis. This could be addressed in the planned education assessment

Table 1: Reasons for children not attending school matching with evidence in other assessments

| | Table 1: Reasons for children not attending school Comparing REACH survey answers with evidence in other assessments | | | | |
|----|---|---|--|--|--|
| 1. | No known service- lack of awareness | Approx 27% -Common reason found amongst various assessments, been tackled by a back to school campaign. | | | |
| 2. | Employment commitments | Made up approx 4% of responses and may be higher because parents might not necessarily want to voice this as a reason. Other surveys in focus groups found the rates to be even higher. Income is a number one priority for the household and child labour is an acceptable practice already in Syria. Potential child labour rate in Jordan of 5-16 per cent Affects more boys than girls, an adolescent age group, and it more common in female headed homes. Certain geographic areas are more affected than others, such as the Jordan Valley-Ghor, (over half children working), Balqa and certain urban areas.¹⁶⁴ Further age-disaggregated data would be useful to view the age groups this affects | | | |

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 ¹⁶² REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates of Jordan
 163 USAID, (2013) Final report and Solutions package: Human and Institutional capacity development (HICP) performance assessment of the Jordanian Education Sector and Ministry of Education

the Jordanian Education Sector and Ministry of Education

164 UNICEF Education Section & Save the Children Jordan, Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid (Feb. 18-March 20)

| 3. | Dropped out in Jordan | Approximately 5%-the reasons for this must be further investigated. It can be speculated that certain issues-see table 2 such as conflict or violence in schools (a serious problem), a challenging curriculum, and the possibility of work can all be reasons for dropping out. |
|----|--|--|
| 4. | 4. Dropped out in Syria Approx 6%, if this was over three years ago, it is not possible for them to enrol in formal education in not have this exact number of students. Only indication is that 23% of children in Za'atari had missed school, but not necessarily 3 years. 165 The reasons should be researched and alternative options such as informal education should be considered. | |
| 5. | Not possible to enrol in local school | Approx 11%. The reasons are not clear, but are likely to be associated with the capacity of the school and MoE to contain these students. The capacity of the MoE can vary by school and education district and this needs to be further investigated, see HICP report. ¹⁶⁶ |
| 6. | Approx 5%. Again this is associated with MoE capacity above. This also came up in September, as studer again on waiting list. Follow-up required to follow reasons to be on waiting list, provide support required, and follow up on students to ensure they get in. | |
| 7. | Level/type of class not suitable | Student don't attend if they are not offered the correct grade ¹⁶⁷ . This was due to difficulties with testing and now is possibly resolved. |
| 8. | Other | Approx. 33% of respondent, this requires further investigation given the large size. Some reasons found in other surveys not covered below are described |

Table 2: Further Reasons for children not attending school

| Tau | Table 2: Further Reasons for children not attending school | | | | | |
|------|--|--|--|--|--|--|
| | Table 2: Further Reasons for children not attending school | | | | | |
| | Reasons not provided in REACH survey -but arose in other assessments- are less quantitative, but could explain the large 'other' | | | | | |
| rest | response in survey. | | | | | |
| 9. | Lack of capacity of public schools | As of 15 th Sept 2013, there were 19,500 children on waiting lists to enter public schools in the host community. In order for Syrian children to attend school, the schools in these areas will have to have another 'shift' i.e. have Syrian students in separate classes in the evening. This requires a lot of extra resources, such as extra teachers, administration, textbooks, stationary, in order for students to be able to attend this 'shift'. | | | | |
| 10. | Protection concerns en route to school | In Irbid, women described putting girls on busses to school as a safety worry ¹⁶⁸ . In Zarqa, a number of parents raised concerns about gangs with knives controlling schools and they did not want to send their teenage boys to school ¹⁶⁹ . In Mafraq, classes had been offered specifically for Syrian students in the evening but some parents felt uncomfortable letting their children out after dark ¹⁷⁰ . There are substantially less girls enrolled than boys in Ghor, mainly because of the fear of daughters walking to school, even if girls are in large groups ¹⁷¹ . | | | | |
| 11. | Community tensions | Tensions are at their worst in Irbid and Mafraq. In Mafraq, children have been victims of bullying and verbal abuse, even on the way to school from Jordanian families ¹⁷² . | | | | |
| 12. | Violence in schools | Children that are in school sometimes suffer bullying and intimidation from other students and teachers. ¹⁷³ As detailed in the violence against children section above, violence in school is common in Jordan. This is both physical and verbal, and children report that they often don't even inform their parents as they feel their parents have enough to deal with already. ¹⁷⁴ However it must be said that others reported kindness and a positive experience in the same report. | | | | |

¹⁶⁵ Education Sector Working Group Jordan, (April 2013) Joint Education Needs Assessment: Za'atri Refugee Camp, Jordan

¹⁶⁶ USAID, (2013) Final report and Solutions package: Human and Institutional capacity development (HICP) performance assessment of the Jordanian Education Sector and Ministry of Education

167 UNICEF Education Section & Save the Children Jordan, Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor

and Irbid (Feb. 18-March 20)

¹⁶⁸ Inter-agency Working Group (IAWG) on Reproductive Health in Crises, 18-21 March 2013 'Reproductive Health Findings from Zaatri

Camp and Irbid City, Jordan Participants' Report'

169 CARE, 2013, April, Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa. 170 Ibid

¹⁷¹ UNICEF Education Section & Save the Children Jordan, Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid (Feb. 18-March 20)

¹⁷² Mercy corps, May 2013, Mapping of Host community tensions in Mafraq and Ramtha.

¹⁷³ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage ¹⁷⁴ IRC, March 2013, Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

| 13. | Cost in terms of uniforms, transport, resources etc. | The average spending of those families who have children in education is 27 JD per month in the Northern governorates ¹⁷⁵ . (similar cost to water for one month for a family as described in the WASH section). Though parents express a desire for their children to be in education, families prioritized saving money to pay for housing, food and medical expenses ¹⁷⁶ and not education ¹⁷⁷ ¹⁷⁸ . The cost of transport to be one of the main reasons parents give for not enrolling children in areas of Amman and Northern governorates ¹⁷⁹ . Given that almost all Syrian families are in debt and have exhausted their savings, these extra costs (as well as possible income loss from working child-more common in Amman, Irbid and Ghor-see protection) have to be considered when trying to tackle increasing enrolment. |
|-----|---|---|
| 14. | Difficulty with curriculum | Children and their parents find the curriculum much more difficult than in Syria. As well as the difficult content, they find the teaching style very strict, involving corporal punishment and a highly pressurized environment ¹⁸⁰ Particular subjects that are difficult are English and Arabic as English is not taught as early as it is in Jordan and Arabic is tied to religion, rather than national identify as in Syria ¹⁸¹ . |
| 15. | Distance from school | In Irbid, interviewees cited distance as one of the main reasons not to send their children to school. Rural areas are more isolated from services in general, including schools. Another survey found the cost of transport to be one of the main reasons for not enrolling children 183. This requires detailed mapping of populations and school and as of yet this information is not available in quantitative form. Children that have been interviewed living in South and central Jordan reported that they knew of other children who didn't attend because of the distance involved 184. |
| 16. | Lack of remedial/ca tch up classes. | Focus groups report that there is little opportunity for children in need of remedial education, despite some children having missed nearly two academic years of instruction ¹⁸⁵ . While there reports from Al Mafraq that the local schools would be providing summer tutoring to refugee children intending to enrol in the fall semester, it was noted that out of all three governorates only one survey participant had reported receiving remedial education for a child that had fallen behind in her studies. |
| 17. | Lack of psychosoci al support | A recent survey found that children in the south and central Jordan areas feel isolated as students are mixed with Jordanians, often 1 or 2 in a class of 30/40 Jordanians ¹⁸⁶ . There is also a complete lack of activities or play for children especially when they are often not allowed play outside and this is having a negative impact on their psychosocial state, with feelings of boredom, loneliness and anger quite common ¹⁸⁷ . Psychological issues have been named as a reason for why children are not attending school ¹⁸⁸ ¹⁸⁹ . |
| 18. | Lack of school feeding | Reported on camp as a reason, therefore it is probably applicable to host community situation where sometimes families are less food secure. |
| 19. | Lack of WASH facilities | Rising number of Syrian students in schools is putting pressure on the infrastructure. It is also a concern that inadequate facilities could be impeding access for certain groups, such as girls because of a lack of segregated facilities, and disabled children due to inaccessible facilities. In mixed schools an assessment in northern governorates and Amman found that 63% of latrines are not separated. ¹⁹⁰ This is a cause for concern as the lack of WASH facilities and/or bad conditions is often one factor for a low attendance for girls ¹⁹¹ . |

2.2 Non-formal education and Informal education

Besides formal education, all children should also be able to access appropriate life skills programs and information about the emergency, and those who have missed out on schooling, especially adolescents, are able to receive information on educational options. For

¹⁷⁵ ACTED and AMEU, August 2013, Food Security situation and Livelihood intervention opportunities for Syrian refugees and host communities in North Jordan.

¹⁷⁶ Questscope, (January 2013), Participatory Reflection and Action Report, 'Factors affecting the Educational Situation of Syrian Refugees ¹⁷⁷ IFRC and JRC, Sept 2012, Assessment on Syrian urban refugees in Jordan.

¹⁷⁸ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraa and Zaraa;

¹⁷⁹ Questscope, January 2013, Participatory Reflection and Action Report, 'Factors affecting the Educational Situation of Syrian Refugees in 180 IRC, March 2013, Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

Questscope, (January 2013), Participatory Reflection and Action Report, 'Factors affecting the Educational Situation of Syrian Refugees ¹⁸² CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees

living in Irbid, Madaba, Mafraq and Zarqa

183 Questscope, (January 2013), Participatory Reflection and Action Report, 'Factors affecting the Educational Situation of Syrian Refugees

184 International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central

 $[\]it Jordan.$ $^{\rm 185}$ CHF International, July 2012, Amman Rapid Assessment.

¹⁸⁷ ibid

¹⁸⁸ CARE, 2013, April, Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa.

¹⁸⁹ UN agencies, the Government of Jordan and JHCO (Jordan Hashemite Charity Organization), June 2012, Needs Assessment of displaced Syrians in Jordan

Japan Emergency NGO (JEN), Feb 2013, Assessment findings of schools hosting Syrian refugee students in Jordan Governorates

¹⁹¹ UNHCR. (Jan-June 2013). Syria Regional Response Plan.

now, the interventions on informal education are limited, or it has only been provided for a short period. This type of education is usually is for children who have dropped out of school, or have a preference for informal education, rather than formal and more-often it is for adolescents-over 12s. ¹⁹² A guide figure of around 11 per cent of the total population fitting into this category is in practice. ¹⁹³ Using this figure would mean that as of September 2013, approximately 57,000 children would be eligible or could be interested in non-formal education (NFE) or informal education (INE). In Za'atari camp, 76 per cent of adolescents were not in school. ¹⁹⁴ These children are particularly vulnerable as they lack structure, are likely to be loitering, and may have increased levels of aggression. ¹⁹⁵ One of the main wishes reported by adolescents in the same assessment was to go to school. Non-formal and informal education can provide the opportunity to do this.

Informal education

Informal education (INE) provides activities such as literacy, numeracy and life skills, and are not certified by Ministry of Education, nor restricted in age or target. INE is usually for children who have dropped out of formal education, but could also be a complement to children who are in formal school. ¹⁹⁶ Children who have missed over 3 years cannot attend formal school. Therefore, this group is a key target for informal education. However, more research is required to find out how many children fit into this category. The only comprehensive education assessment undertaken was in Za'atari camp which found that 23 per cent of school children had been out of school for more than a year, but no information on how many had been out for 3 years or more. ¹⁹⁷

Children and parents in Za'atari camp were asked what type of informal education they would be interested in choosing (see figure below). Boys are interested in Arabic literacy lessons religious education, metal work, and carpentry, training as a barber or a mason. Girls are mainly interested in Arabic language, especially grammar, and also English and art, with girls who had dropped out in Za'atari camp particularly interested in tailoring, cooking, computers and make-up classes. Some of the children's choices overlapped with vocational education, with more detail below. It can be considered to some extent that the wishes of refugees in host communities would be similar.

| Target group | | NFE/IFE interested in | |
|--------------------------------|-------------------------------|--|--|
| Secondary school | Dropped out in Za'atari | Arabic literacy, barber, masonry / construction | |
| aged boys | Never enrolled in Za'atari | Arabic literacy, religious education, metal work, carpentry | |
| Canandam, sabaal | Dropped out in Za'atari | Tailoring, sewing, cooking, computer, cosmetics/make-up | |
| Secondary school aged girls | Never enrolled in | Arabic (especially grammar), English, art, health related, about | |
| ageu giris | Za'atari | life in Jordan, first aid, computer | |

Figure 15: Trainings secondary school aged children in Za'atari camp who are out of school express interest 198

¹⁹² Education Sector Working Group Jordan, (April 2013) Joint Education Needs Assessment: Za'atri Refugee Camp, Jordan

¹⁹³ Please see map 4 above for more details.

¹⁹⁴ International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report

¹⁹⁶ Education Sector Working Group Jordan, (April 2013) Joint Education Needs Assessment: Za'atri Refugee Camp, Jordan

¹⁹⁷ Ibid

¹⁹⁸ Ibid

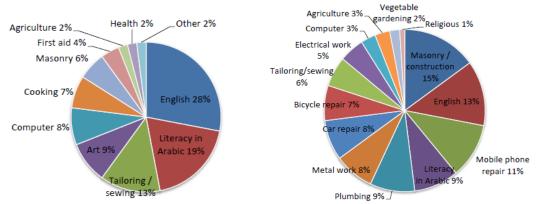


Figure 106: Interest in Non-formal education and information education among boys (left) and girls (right) aged 12-17 currently not going to school, according to their parents 11

Other types of education, such as home-schooling, have been suggested, which could be a viable option with parents having many safety concerns on the way to school and inside school. 200 This could involve academic and psycho-education, grouping children in their tents, possibly using play methods and/or technology with volunteers. 201 Some informal education is being provided, but it is short-term and/or limited, especially in host communities, given the higher demand there.

Vocational and skills training

Youth and adolescents are interested in alternative educational and vocational opportunities both in the camp and off-camp. In a recent small scale rapid youth assessment conducted by Norwegian Refugee Council (NRC) in the Emirati-Jordanian camp (EJC), 93 per cent of youths and 96 per cent of adults said they were interested in the provision of vocational training programmes. ²⁰² In Ramtha and Mafraq, youth interview voiced interest in vocational education, but as this wasn't available, there they remained unemployed and out of education.²⁰³ Parents in this assessment also voiced the same needs for a preference for vocational education for those 16-18. A youth market survey in Za'atari camp by the Norwegian Refugee Council found that youth have limited work opportunities, some are semi-skilled especially the males, many have a low level of education already and are from an agricultural background. 204 Youths reported that recreational and educational services are very limited and only a small percentage reported knowing and using the services-with the overall perception of inaccessibility. This NRC report recommends foundational skills, transferable life skills and vocational training. Although UNICEF doesn't cover vocational training, this wish expressed, the resources required and the lack of capacity at MoE level is important to understand and convey to other actors in a better position to address this.

Non-formal education

Access to non-formal training with the Ministry of Education (MoE) is only for refugees who retain documentation of primary education (which many refugees do not have), and who can

¹⁹⁹ Ibid

²⁰⁰ International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July

Norwegian Refugee Council, (Aug 2013), Rapid youth assessment in Emirati-Jordanian Camp.

²⁰³ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa; International Federation of the Red cross and Red Crescent Societies, (2012), Assessment report: Syrian Refugees living in the Community in Jordan

Norwegian Refugee Council (NRC), (2013), Youth market assessment in Za'atari camp.

pay fee.²⁰⁵ Non-formal education (NFE) follows MOE's curriculum for a 2 year course, leading to certification of 10th grade. Only students who have missed more than 3 years of school or have never been enrolled in formal education are eligible. It remains to be seen whether this could be a viable option for Syrian children in Jordan for now or in the future.

2.3 Pre-school, and children with disabilities

Pre-school education

There is very limited public pre-school (Kinder Garden KG) education in Jordan. The vast majority of KG (90 per cent) are private and are subject to a tuition fee. Kindergarten (KG) coverage of children aged 4-6 years is estimated at 46 per cent in urban areas and 24 per cent in rural areas. The pre-crisis attendance rate for KG in Syria was 9.5 per cent according to UNICEF. Even public KG education which is already struggling with limited capacity in Jordan has certain fees which have not been waived for Syrians.

In Za'atari camp, KG education is provided and attendance is at 13 per cent. In the Joint Education Assessment, two thirds of parents expressed the opinion that they would be interested in their children enrolling in KG, and the same opinion may exist in host communities. The rate of enrolment in host communities appears to be low or negligible and requires further investigation. One assessment undertaken in Ghor and Irbid showed that out of 1,241 families, not one had children attending KG.

Children with disabilities

Limited research has been conducted concerning Syrian children with disability in Jordan. The global indicator is that approximately 10 per cent of children have a disability (sensory, intellectual, mental health). As a comparison, the UNICEF Situational Analysis report on Children for Jordan in 2006 reported that 18 per cent of school children have learning difficulties, and about 10 per cent have mild disabilities. Thus out of the estimated education age Syrian refugee children (5-17), there could be approximately 10,000-15,000 children with disabilities.

It appears few children with disabilities are attending school, though this merits more investigation. The only indication in host communities was from a Japanese Emergency NGO water and sanitation assessment in schools with Jordanians and Syrian found that 0.5 per cent of students enrolled had a disability. This figure suggests that a sizable, if not the majority of students with disabled needs are out of education, and it could also suggest an under identification of children who do have disabilities. This assessment also found that the majority of schools were not adapted for children with disabilities.

²⁰⁶ UNESCO, 2007, Jordan's Strategies for Early Childhood Education in a Lifelong Learning Framework , UNESCO Policy Brief on Early Childhood, https://unesdoc.unesco.org/images/0015/001515/151548e.pdf

²⁰⁵ Ibid

²⁰⁷ UNICEF, 2006-2007, Situational Analysis of Children, Jordan.

²⁰⁸ UNICEF, 2008-2011, Statistics at a glance: Syrian Arab Republic

http://www.nrcsa.ch/infobycountry/syria_statistics.html

²⁰⁹ Jesuit Refugee Committee 2012, Amman Needs Assessment,..

²¹⁰ UNICEF Education Section & Save the Children Jordan, Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid (Feb. 18-March 20)

²¹¹ According to the World Health Organization (WHO), around 10 per cent of the world's children and young people, some 200 million, have a sensory, intellectual or mental health impairment. Specialists, however, agree on a working approximation giving a minimum benchmark of 2.5 per cent of children aged 0-14 with self-evident moderate to severe levels of sensory, physical and intellectual impairments. An additional 8 per cent can be expected to have learning or behavioural difficulties, or both.' P. 12, UNICEF, (2007), Promoting the Rights of Children with Disabilities, Innocenti Digest no. 13.

²¹² UNICEF, 2006-2007, Sitan Jordan.

²¹³ Japan Emergency NGO (JEN), Feb 2013, Assessment findings of schools hosting Syrian refugee students in Jordan Governorates

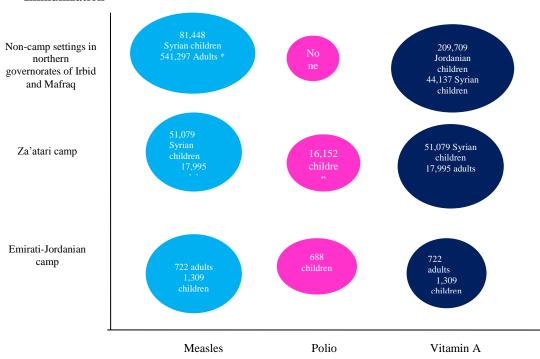
In Za'atari camp, a school facility assessment undertaken by Handicap International highlighted the difficulties for children with disabilities to use the school facilities. School facilities were not suitable for wheelchairs or crutches to access, and likewise the classroom entrance and tables and chair which were fixed to each other. The new school built in Za'atari camp has taken account of these recommendations. This group are already more vulnerable to violence and exploitation and missing out on basic services, thus more information must be sought to find out more about this group.

²¹⁴ Handicap International, April 17, 2013, Accessibility Assessment: UNICEF Schools (School 2 & 3) Za'atari Refugee Camp, Emma Pettey, Accessibility and Inclusion Manager

Jordan-Syrian Refugees in Jordan - Maternal and Child Health and Nutrition

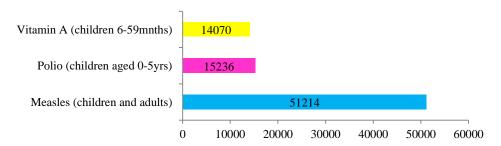
Visual 3: Maternal and Child Health and Nutrition



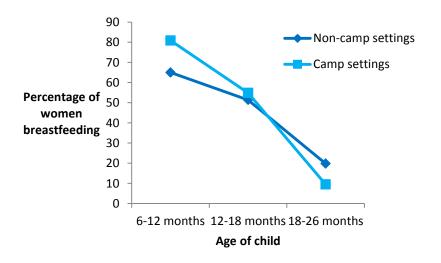


Source: UNICEF Health Section figures, Sept 2013

Regular vaccinations for arrivals into Za'atari camp (April-Sept 2013)



Breastfeeding-WHO recommends breastfeeding until a child is 2 years old. However the majority of mothers stop breastfeeding after 1 year-see graph below Source: UNICEF, and WFP, (2012), *Interagency Nutrition assessment on Syrian refugees in Jordan host communities and Za'atari camp*



Nutrition status

Source: UNICEF, and WFP, (2012), Interagency Nutrition assessment on Syrian refugees in Jordan host communities and Za'atari camp





3 Maternal and Child Health and Nutrition

3.1 Immunization

Measles reappeared in Jordan with some evidence pointing to the influx of refugees, and as of Sept 2013, there have been 74 confirmed cases of measles, including 16 cases in Za'atari camp. Therefore, campaigns were undertaken in April in Za'atari camp and during June in the host communities, along with the arrivals vaccination, succeeded in targeting almost all of children in Za'atari camp and 80-85% of children in the host communities of Mafraq and Irbid, covering both Jordanians and Syrians (see table 3 for figures).

All arrivals into Za'atari camp are also vaccinated with polio, measles and are given Vitamin A (see table 2 below). There is a planned immunization campaign for 2013 by the Ministry of Health and other partners to reach 3.4 million people including Jordanians and Syrians in November 2013 which should increase coverage of basic immunizations (measles, rubella, polio and vitamin A). A concern is the group of child-bearing age women. They require tetanus toxoid vaccine and this is important if they wish to have children as it protects the child against tetanus when a child is a new-born. This is only included in the routine vaccine which will be put into place in the near future.

Table 2 Immunization campaigns and results to date.

| Location | Treatment | Adults (16-30) | Syrian children (0-15) | Total |
|---------------------------------------|-----------|----------------|--|---------|
| Mafraq and Irbid governorate in | Measles | 541,297 | 81,448 Syrian only | 622,745 |
| North Jordan.(Jordanians and Syrians) | Vitamin A | | (209,709 Jordanian) 44137 Syrian children | 253,846 |
| Emirati Jordanian Camp | Measles | 722 | 1, 309 | 3,340 |
| | Polio | 0 | 688 | 688 |
| | Vitamin A | 0 | 470 | 470 |
| Za'atari camp (April 2013) | Measles | 17,995 | 51,079 | 60,051 |
| | Vitamin A | | 15,423 | 15,423 |
| | Polio | | 16,152 | 16,152 |
| Totals | | 771,032 | 201,683 | 972,715 |

Table 3 Regular vaccinations for arrivals into Za'atari camp April-Sept 2013

| | Treatment | Total (adults and children) |
|--------------------------|-----------|-----------------------------|
| Regular vaccinations for | Measles | 51214 |
| refugee arrivals (April- | Polio | 15236 |
| Sept) 2013 | Vitamin A | 14070 |

²¹⁵ UNICEF, (2013), Health sector update on immunization (internal).

3.2 Reproductive and Maternal Health

Ensuring the Minimum Initial Services Package (a Sphere standard) to address reproductive health is essential to prevent morbidity and mortality and averts increased new-born and maternal deaths. Address Maternal, neo-natal and child survival are a key part of UNICEF's Core Commitments to Children in terms of health interventions. A quarter of Syrian households were reported to have a pregnant and or lactating woman.

In Za'atari camp and the host community there some inadequacies in neo-natal and ante-natal care. A recent report focusing on Za'atari camp and Irbid found that skilled birth attendants are generally available, basic and comprehensive emergency obstetrics and new-born care is available. However, in Za'atari camp, figures suggest that the under 5 mortality rate is 41/1000 live births. This is double the rate for Jordan (21/1000²²⁰) and Syria (15/1000²²¹). However, this requires further investigation as reporting methodology may be presenting a higher figure than normal. The lack of a neonatal intensive care unit at Za'atari camp means cases have to go to Mafraq which takes time. In this neonatal unit, the closest hospital to Za'atari camp, 12 out of the 16 neonatal incubators at one point in time in August were being used by Syrians. Concerning ante-natal care, it appears not all women are being screened for syphilis, rubella, anaemia or HIV during pregnancy.

A concern for pregnancy and childbirth is if a pregnant refugee's card has expired. Due to difficulty of travelling distances while pregnant, an International Rescue Committee assessment found this was a stress for pregnant women.²²⁴ The belief was that if their card is out of date, they cannot avail of free reproductive care and the cost of a normal delivery in private healthcare is relatively expensive-from JOD 500-1000. In some cases their passports have been taken by the hospital until the full amount is paid. However this is also a lack of information as recently it was confirmed that UNHCR will pay for the treatment if they are contacted within 48 hours.²²⁵

There has also been anecdotal reports in host communities, that gynaecological exams are sometimes not being conducted, even refused, when a women has a reproductive tract infection. This is worrying in terms of access to health services for women as this infection is reported as one of the most common health complaints. However, this needs to be further verified.

²¹⁶ Inter-agency Working Group on Reproductive Health in Crises, 2010, Inter-agency Field Manual on Reproductive Health in Humanitarian Settings.

http://www.searo.who.int/entity/emergencies/documents/field_manual_rh_humanitarian_settings.pdfhttp://www.searo.who.int/entity/emergencies/documents/field_manual_rh_humanitarian_settings.pdf

²¹⁷ AMEU/ACTED, September 2013, Food Security Situation and Livelihood Intervention Opportunities for Syrian refugees and Host communities in North Jordan'.

218 Women's Refugee Commission (undated) Evaluation of the Implementation of the Minimum Initial Service Package (MISP) for

Women's Refugee Commission (undated) Evaluation of the Implementation of the Minimum Initial Service Package (MISP) for Reproductive Health among Syrian Refugees in Irbid City and Za'atari Camps-Jordan by Sandra Krause, Director, Reproductive Health Program;

²¹⁹ Health working group, (2013), Child Health Service Za'atari Camp August 2013.

²²⁰ Jordan University of Science and Technology, (2011), *Jordan Perinatal and Neonatal Mortality Study*.

²²¹ UNICEF, (2011), At a glance: Syrian Arab Republic http://www.unicef.org/infobycountry/syria_statistics.html

The Lancet, July 2013, Syrian refugees and Jordan's health sector (written by MoH and MoEnviro)

Health sector working group meeting, 2013.

²²⁴ International Rescue Committee, March 2013, Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

²²⁵ UNHCR, 2013, Health service notes- http://data.unhcr.org/syrianrefugees/country.php?id=107

²²⁶UN agencies, the Government of Jordan and JHCO (Jordan Hashemite Charity Organization), July 2012, Needs Assessment of displaced Syrians in Jordan.

3.3 Infant and Young Child Feeding

The World Health Organisation recommends that breastfeeding should continue until 2 years of age. However just under half (42.7%) of the refugees in host communities were still breastfeeding after the child was 1 year. Especially concerning was a finding which found that only 65 per cent of 6-12 months old children in host communities are being breastfed and 80 per cent in camp settings. Most children were being breastfed the first year, but this dropped to under half and lower towards the end of the second year (see graph below). Slightly more mothers (49.6%) at Za'atari camp were breastfeeding their children at the time of the survey. Though again towards 18-24 months, similar to host communities, the number of mothers/caregivers breastfeeding dropped to 9.5%, lower than in host communities. The preliminary findings of the Joint Assessment Mission also found that infant formula milk was a significant financial burden reported by respondents, providing another incentive to encourage breastfeeding. The Oxfam integrated assessment reported that Syrian and Jordanian doctor advice to bottle feed the baby when women are ill which supports the individual perception of not being able to breastfeed. This report also stated that the infant formula supplied in baby kits distributed by various agencies in the past isn't in accordance with international standards.

Only 13.3 per cent of mothers in host communities were engaging in the full five complimentary feedings and 7.9 per cent of mothers in camps. Over a third of mothers and caregivers outside of camps did not provide any solid food to their children aged 6-12 months. The practices of Infant and Young Child Feeding (IYCF) appear less developed, or mothers have fewer resources in host communities. There is currently an on-going UNICEF study of 300 families taking place which should shed further light on the current situation of IYCF.

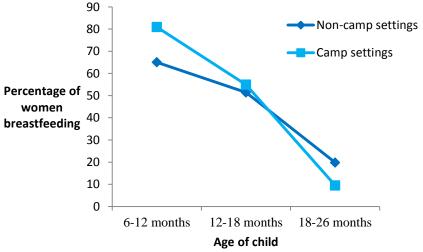


Figure 11 Duration of breastfeeding comparing with host community and Za'atari camp

²²⁷ UNICEF, and WFP, (2012), Interagency Nutrition assessment on Syrian refugees in Jordan host communities and Za'atari camp ²²⁸ Interagency (UNHCR, WFP, NGOs and GoJ, (2013), Joint Assessment Mission-Preliminary findings (not yet released)

²³⁰ Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection

3.4 Nutrition

The most comprehensive assessment undertaken found that the Global Acute Malnutrition (GAM) rate as measure in 2012 nutritional assessment was 5.1 per cent among camp refugees and 5.8 per cent among non-camp refugees. This is just below 'poor' levels according to World Health Organisation. A more recent assessment of a small sample size undertaken measuring the Middle Under-Arm Circumference (MUAC) of under 5s only was conducted from March-June 2013 by UNICEF in Za'atari camp. This indicated that the GAM rate for children under 5 has decreased since last year's measurement. One reason suggested for the decrease in GAM was the establishment of referral pathways. However, it must be noted that this assessment was only indicative and had a relatively small sample size. There is a still the presence of acute malnutrition in children in the camp.

A recent report by Action against Hunger (ACF) states that there is no need for a nutrition program, as according to them, the gaps have been covered and the rate is sufficiently low. However, they warn that it should be monitored and that over time host communities may resort to increasingly negative coping mechanisms which could affect the level of malnutrition. The table below from the shows the contrast between the rates of malnutrition for children in Syria taken in 2012 and 2006 as compared with levels measured in Oct-Nov 2012. It was found that the difference between boys and girls in the prevalence of acute malnutrition was not statistically significant.

The majority of children screened for malnutrition were reported to be suffering from an illness, such as diarrhoea, vomiting, fever and influenza, which are risk factors for increasing malnutrition. Strategies should be developed to prevent the rate of malnutrition increasing among children, especially in the presence of these risk factors. It is interesting to note that overall the nutritional situation of Syrian children under 5 was worse before the crisis. ²³⁴

| SURVEY | Wasting (GAM rate) | At Risk of Wasting | Total Underweight rate | Total Stunting rate |
|--|--------------------|-----------------------|---------------------------|------------------------|
| Syrian refugees in host communities – October 2012 | 5.1 % (3.2 - 8.0) | 4.6% (3.0 - 6.3) | 2.0 % (1.0 - 4.2) | 8.2 % (6.1 - 10.9) |
| Syrian refugees in Za'atri camp – November 2012 | 5.8 % (3.8 - 8.6) | 5.6% (3.4 - 7.8) | 6.3 % (4.5 - 8.7) | 15.9 % (12.6 - 20.0 |
| SOWC (2012) and MICS 2006 | 12% | | 10% | 28% |

Figure 17: Prevalence of malnutrition ²³⁵

This report also notes that Jordan in the last decade has had relatively low rates of malnutrition, compared to Syria. This has the consequence that expertise and experience is often not present in the health ministry to deal with the needs of the Syrian refugees.

In Za'atari camp, 6.1 per cent of women and girls aged 15-49 years (reproductive age) are acutely malnourished and 1.1 per cent severely malnourished. In host communities, 6.3 per cent are malnourished and 0.9 per cent of women and girls are severely malnourished. Malnutrition is highest amongst teenaged-girls and young women (15-19) in Za'atari camp while it is highest among women aged 25-29 in the host communities. This will be further

²³¹ UNICEF, and WFP, (2012), Interagency Nutrition assessment on Syrian refugees in Jordan host communities and Za'atari camp

²³² MUAC Screening for Children aged 6-59 Months Report. Za'atari Camp, Jordan (25th March-24th June 2013).

²³³ ACF International, May 2013, Exploratory Mission to report on Syrian Crisis in Jordan and Iraq.

²³⁴ UNWFP, January-February 2013, Syrian refugees and food insecurity in Iraq, Jordan and Turkey: Secondary Literature and Data Desk Review,

²³⁵ Compares UNICEF State of the World's Children 2012 and Family Health Survey 2009 among children 6-59 months, taken from UNICEF, and WFP, (2012), *Interagency Nutrition assessment on Syrian refugees in Jordan host communities and Za'atari camp*

updated in the next nutrition assessment. There is an assessment planned from October to December by UNHCR, UNICEF and WFP covering both Syrian refugees out of camps and in camps which will provide a comprehensive update on the situation.

The protocol for nutrition has just been signed by the government which now enables clinics to buy therapeutic treatments, which before they could not except for fortified porridge. This will further enhance the ability of actors to address any nutrition needs.

Visual 4: Water, Sanitation and Hygiene

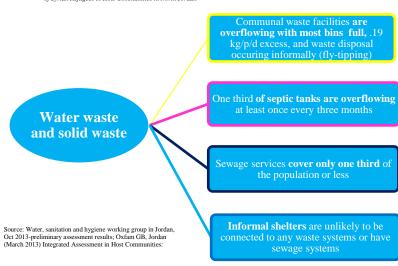
Hygiene

Hygiene items: More than 75% of households face barriers accessing hygiene items. No soap in one third of households. Women severely lacking female hygiene items, with only 1.8% receiving sanitary napkins

Hand-washing: 45% difficulty washing hands because of cost of soap-34%, lack of water-24%.

Bathing: More than the half (59.23%) of the survey population faces issues to bath on a regular basis. Main barriers for bathing are the cost of soap (19.34%), followed by the lack of water (18.09%).

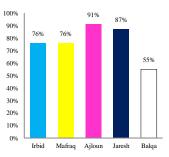
> Source: Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan



Access to Water The water network bad/very bad Jordan is **Perception of water quality** in Jordan was 24% good/very good the 4th Source: Interagency, (2013) Interagency Knowledge, already inadequate: Attitudes and Practices Study of Syrian Refugees in Host 29% most Communities in North Jordan 75% of water is water lost through scarce leakages and

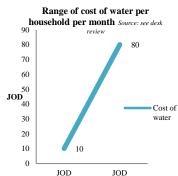
*Source: French Red Cross, (June 2013), Syrian refugees needs rapid assessment in Iraq, Jordan and Lebanon Syrian refugees he

connected to piped water Source: Interagency ((2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in



Frequency of water supply throu the piped network Source: REACH, (2013), Findings of Household assessment of Syrian Households



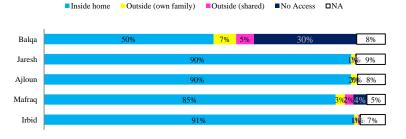


Access to Sanitation

Do you have access to a toliet/latrine?

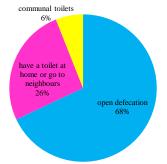
Balga

Source: Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan



Type of Toilet Practice in temporary shelters

(mainly found in Balqa and Mafraq) Source: Water, sanitation and hygiene working group in Jordan, Oct 2013-preliminary



4 Water, Sanitation and Hygiene (WASH)

4.1 Water

Context

Jordan is the world's fourth most water scarce country in the world. 236 There is sufficient information on water management in the camp, however, in host communities; there is a wide variety of levels of access for refugees, and of factors as documented in different assessments. The focus here will be on a consolidated analysis of the evidence assessments have presented concerning refugees in the host communities of Jordan.

In certain areas such as Mafraq, before refugees arrived there was already tension over water and the public water services were under strain. ²³⁷ There already was a particular strain on resources in northern governorates, where 84% of the refugees are. All water resources (in northern governorates ran by Yarmouk Water Company) are at full capacity pumping 24/7 with no modulating according to season. ²³⁸ The system also has massive inefficiencies, for every 60/l/p/d that is supplied to customers; 45/l/p/d is lost through leakages and illegal connections (75%).²³⁹

This strain is increased by the inadequate state of many parts of the water network which require repair. A recent assessment in the northern governorates focused particularly on areas with poor access to piped water, sewer systems, and informal settlements. ²⁴⁰ Out of 21 boreholes assessed through risk indicators, 12 had a medium risk with faulty drainage, surrounding pollutants or animal faeces, unsealed heads, and damaged fencing. Out of 18 pumping stations assessed, 2 were not operational, and 2 were in a bad condition, with leakages and stagnant water. The networks are aging, with the average water supply network being 35 years old, and the average sewage system is 30 years old. One gap is in rehabilitation of municipal water infrastructure to increase water availability. Already some actors are contributing to rehabilitating the most critical infrastructure-medium-big size projects.

Access to water

Approximately a quarter²⁴¹ to a half²⁴² of refugees report that they do not have enough water to meet their needs. There are sizeable geographic disparities (see fig 22 below). The majority of refugees in permanent settlements (apartment or houses), have access to piped water. This system is rotational and water is delivered to these pipes from a few times a week to perhaps once every ten days in summer for 24 hours at a time. ²⁴³ Factors influencing water access are; access to piped water, frequency of water delivery, geographic location, season, storage capacity, and local network with vendor and with neighbor.

UNESCO, 2013, 'Promoting water education fourth most water world' http://www.unesco.org/new/en/amman/about-this-office/single-

view/news/promoting_water_education_in_the_fourth_most_water_scarce_country_in_the_world/#.UIT5CdJmiSo

Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan. ACF International, May 2013, Exploratory Mission to report on Syrian Crisis in Jordan and Iraq.

²³⁹ French Red Cross, (June 2013), Syrian refugees needs rapid assessment in Iraq, Jordan and Lebanon

²⁴⁰ Interagency, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results.

²⁴¹UNHCR and International Relief and Development, (Sept 2013), Presentation at the Regional Response plan workshop 2013-provsional

results
242 Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian

Refugees in Host Communities in North Jordan
²⁴³ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

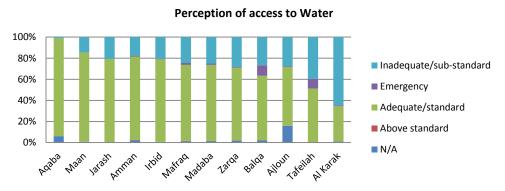


Figure 18: Perception of access to water in all governorates²⁴⁴

Connection to piped water

On average, 76 per cent of refugees are able to access piped water across the 5 northern governorates (Irbid, Mafraq, Ajloun, Jerash, and Balqa) according to two assessments compared in graph below. ²⁴⁵ This could be even higher given preliminary results of a recent survey indicated an average of 90 per cent of households are connected to piped water. ²⁴⁶ Both find that connections to piped water were the most limited in Balga, and the best connected governorates were in Ajloun and Jerash. Note that these results reflect the profile of the water supply of the refugees living in these governorates and are not necessarily representative of the public water systems in the governorates. For example, some refugees in Balga live in temporary shelters, the majority of which are not connected to piped water and this would influence the high numbers of refugees without piped water access due to the type of housing refugees reside in there.

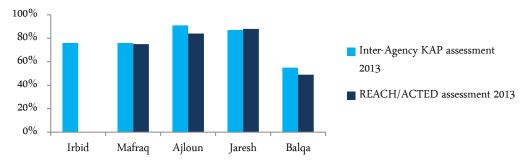


Figure 19: Percentage of refugee households with access to piped water by governorate in two assessments.²⁴⁷ *no data for Irbid

Rural areas tend to have less access to piped water than urban. ²⁴⁸ The majority of temporary shelters are not connected to piped water (see map 6 for different types of shelters), with a recent assessment finding 98 per cent of these households having no access to piped water. ²⁴⁹An Oxfam assessment found that 97 per cent of refugee households in *urban* Balqa to have

²⁴⁴UNHCR and International Relief and Development, (Sept 2013), Presentation at the Regional Response plan workshop 2013-provisional

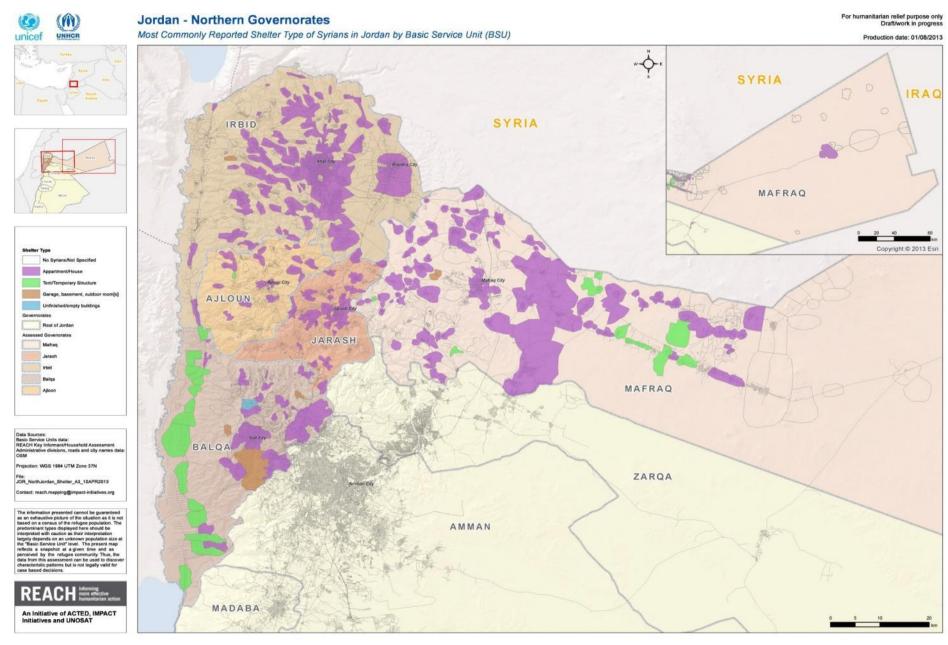
results.

245 REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates of Jordan and Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan ²⁴⁶ Interagency, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results.

²⁴⁸ Various surveys including- Interagency, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results.



²⁵⁰ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan



Map 5: Most commonly reported shelter type of Syrians in Northern governorates.

Frequency of water access through piped network

Another variable in water access is the frequency of water delivery to the piped network. This also depends on local capacity, geographic location and season. Each household with piped water received water for a limited number of days per week or month provided rotationally for 24 hours. On average, over 50 per cent of refugee families can access water at least once a week (see chart below). Households sometimes run out of piped water, with almost half (44%) of households running out of water over a month at least once or twice. ²⁵¹ There is a large variation between governorates (see fig 24 below). Water is delivered less than one day a week for 70% of refugees in Jerash, but in Balqa, this 70% of the population receive water at least 1-2 days a week, sometimes more often. This varies greatly depending on the season, from a few times a week in winter, to once every ten days in summer. ²⁵² This assessment was conducted in winter, when water is more plentiful, thus households may have reported higher than average figures.

The storing capacity of households is another factor on how the frequency affects the households. Households that have larger storage capacity, are able to keep more water for their use and avoid buying water at a much more expensive rate. ²⁵³ For example, in urban areas of Balqa and Zarqa, refugees had $0.5 \, \mathrm{m}^3$ of water storage facilities, but it was estimated that families require minimum $3 \, \mathrm{m}^3$ of storage to serve the needs of a household for one week. ²⁵⁴ It was suggested to provide the most vulnerable households with this size of storage in order to increase their storage capacity and reduce their spending on buying water. ²⁵⁵

Frequency of water supply through the piped network

1-2 days per week 3-7 days per week 76% 56% 51% 49% 44% 31%

Figure 20: Frequency of piped water delivery ²⁵⁶

Irbid

Ajloun

Jaresh

0%

Mafraq

Balqa

²⁵¹ Interagency, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results

²⁵² Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

²⁵³ ibid

²⁵⁴ ibid

²⁵⁵ ibid

²⁵⁶ REACH and ACTED, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates

Buying water

If households do not get enough water from piped, the most common coping mechanism for people without adequate water was in order of prevalence - to purchase water (72%), followed by receiving from neighbors (18%), and followed by waiting (10%). Households pay for water trucks to deliver water, some buy filter or bottled water or from a shop and some buy it from a private well, and (see fig 25 below). This also depends on the use for water, with drinking water more likely to be bought from a shop. In Irbid, over 80 per cent of families are likely to order water tankers to supplement their water needs (see graph below). In Jerash, Balqa, and Ajloun, it is more common to buy water from a store. It's unclear whether this is filter water or drinking water, the latter of which is much more expensive. Drinking water from a shop is 20/46 times more expensive than piped water ²⁵⁸, which could indicate vulnerability in terms of the spending of these households on water.

The KAP assessment indicated a lower level of use of water tankers, with a third of households using them as a way to supplement their water in the same 5 governorates. ²⁵⁹ The use of water tanks was more common in rural areas (33%) than urban areas – (21%). Balqa and Ajloun had the highest rate of water tank use (39% and 34%) compared to the other governorates (Mafraq – 28%, Irbid – 27% and Jerash 24%), which contrasts with the REACH figure findings below. The difference in figures between the KAP and REACH could be because of the different methodologies, season, question style, locations and sample sizes used.

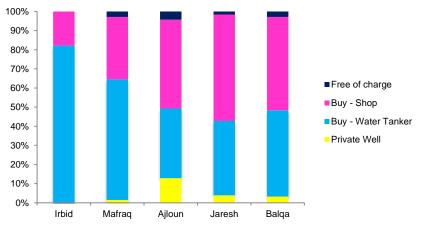


Figure 21: Responses to 'do you get water another way than piped? ²⁶⁰

Rural and urban contexts

It appears in general that refugees in urban areas have better access to water as compared to rural. The KAP assessment found 60% of households in urban areas had access to piped water (all purposes) compared to 40% in rural. ²⁶¹ Urban respondents in this assessment across all governorates also reported higher levels of adequacy of water access compared to rural areas (41%-rural compared to 59% urban).

²⁵⁷ Interagency, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results.

²⁵⁸ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

²⁵⁹ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

⁶⁰ REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates

²⁶¹ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

Consumption in informal settlements, usually in rural locations, is lower, estimated at 25-50 litres per day. ²⁶² In the Jordan Valley, water is supplied from the farms and/or factories they work on for a minimal cost and top up with buying water trucks or shop. ²⁶³ However, the quality of the water supplied to those who work on farms is often substandard. ²⁶⁴ Occasionally, additional bulk water needs are met through water purchased from water trucks, and drinking water is purchased from local shops and supermarkets.

There is limited information on the water and sanitation needs in Amman, with 124,994 Syrian refugees residing there. One assessment by CARE indicated that 8 per cent of 400 household's size had no access to drinking water. -i.e. the water tank was not functioning and they didn't have the means to buy water. ²⁶⁵ The majority of respondents reported buying drinking water and those who couldn't afford this, boiled water. The respondents considered piped water to be undrinkable.

Water quality

Overall, water quality is rated as average, with a minority reported bad quality (see fig 24 below). ²⁶⁶A lot of Syrian refugees do not use tap water for drinking water, and prefer to buy bottled water, which greatly increases the amount spent on water. Approximately 10 per cent of households have no free residual chlorine at the tap, particularly in temporary shelters. ²⁶⁷ Many Syrians continue to use filter water for cooking, even though often tap water is adequate for cooking. The KAP survey found that 61 per cent of respondents in the northern governorates reported purchasing bottled water for drinking. ²⁶⁸

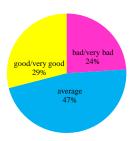


Figure 22: Perception of water quality

Provision of water filters could assist the low water quality of these households, including sensitization on their use, as well as other households who experience low water quality. ²⁶⁹ Bottled drinking water can be 20/46 times more expensive than piped water, therefore with provisions of water filters and residual chlorine, access to good quality piped water should be encouraged. ²⁷⁰

²⁶² Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection

²⁶³ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan ²⁶⁴ ibid

²⁶⁵ CARE Jordan, (Oct 2012), Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.
²⁶⁶ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

²⁶⁷ Water, sanitation and hygiene working group in Jordan, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results

²⁶⁸ ibid

²⁶⁹ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

²⁷⁰ Ibid

Cost of water

The amount a household spends on water depends on location, size of storage capacity, access to piped water, purchasing power, and local networks. Cost ranges on average from JOD10 (mainly temporary shelters)-80 JOD a month per household as documented by various surveys. Refugees tend to access 6 – 16 m3 (40 – 100 L/P/D) of water per month, at a cost of JOD 24 – 55 per month in winter, increasing to JOD 33 – 80 per month in the summer due to higher consumption and increased unit prices for water (price fluctuates with demand). In the urban areas of Balqa and Zarqa, refugees pay more for water by virtue of their lack of storage facilities, level of low water pressure and their lack of social/water vendor networks. When water trucking is in demand in summer, the operators prioritize regular customers and refugees can wait for days for water. These situations are where poorer refugees who are isolated from the community are particular vulnerable.

Also, the size of the water storage device determines how much water a households can buy from a water truck. As trucks usually prefer to provide a truckload at one time, households that have a small storage device have to find other families to share with, or have to buy just a portion of the truckload, which is usually more expensive. The same study found that informal settlements in Jordan valley for those who worked in factories around Amman pay $JOD\ 15-56$ per month on additional water trucking and drinking water needs. Households working in the farms typically spend much less-approximately $JOD\ 10-15$ per month.

Drinking water is (20/46 times more expensive than piped) is bought by truck or shop. Purchasing this bottled water for cooking/cleaning/bathing could imply high vulnerability of water access – the KAP study reported that 60 per cent of those reporting purchasing water for purposes other than drinking reported total monthly incomes of JOD200 or less.²⁷⁵

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²⁷¹ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan

²⁷² Ibid

²⁷³ ibid

²⁷⁴ ibid

²⁷⁵ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

4.2 Sanitation

The majority of refugees consider their access to sanitation to be adequate (see fig 26). However, certain households in areas especially such as Karak, Balqa, Tafeilah, Ajloun and Mafraq have more families that have no or limited access to a toilet, have minimal waste facilities and inadequate and emergency situations of sanitation.

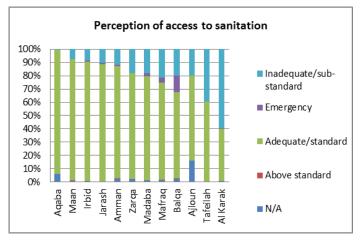


Figure 23: Perception of access to sanitation

Ref: REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates

Toilets/latrines

The vast majority of refugees (81 %) have access to toilets, but areas such as Balqa, and tented settlements are more likely to have no or limited access to toilets (see fig 27). 78 per cent of urban respondents rated their toilets as 'functional and in good structural state', compared to 69 per cent in rural areas in the KAP assessment. The remaining number of respondents of 25-30 per cent whose toilets are not working is a concern. Similar data from the REACH survey indicated that there is a large variety across governorates (see fig below). About 10 per cent of latrines in Mafraq were not functioning and 40 per cent in Balqa.

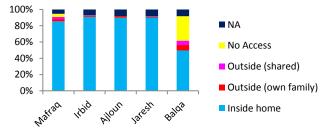


Figure 24: Responses to do you have your own latrine?

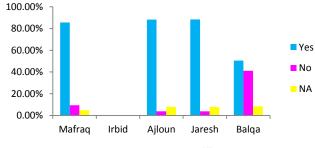


Figure 125: Responses to, 'if you have a latrine, is it functioning?' 277* Irbid was not covered in this part of the survey

²⁷⁶ Ibid

²⁷⁷ REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates

Temporary shelters have one of the most critical sanitation needs. In (fig 26 above) approximately 12% of respondents in Balqa rate their access to sanitation as 'emergency'. Informal settlements as documented by Oxfam have very basic and usually unhygienic sanitation conditions, giving an example of one area where 12 families were sharing a latrine.

A recent survey, concentrating partly on temporary shelters found that 28 per cent of toilets were located outside the home, and 75 per cent of tents in Mafraq do not have a latrine.

In Balqa, (fig 28 and map) approximately 30 per cent of households have no access to a toilet. 68 per cent of temporary shelters are practising open defecation, with 26 per cent using a toilet or going to the neighbours, and 6 per cent using communal toilets.

Of communal toilets, 86 per cent are not gender segregated which bring up protection risks for children and women, and potentially limits these groups' usage. This shows the variety in challenges in different localities and the importance of the type of housing in assessing the risk.

²⁷⁸ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

²⁷⁹ ACTED, (Sept/2013) Shelter and winterization assessment in the Northern governorates.

²⁸⁰ Water, sanitation and hygiene working group in Jordan, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordan-preliminary results

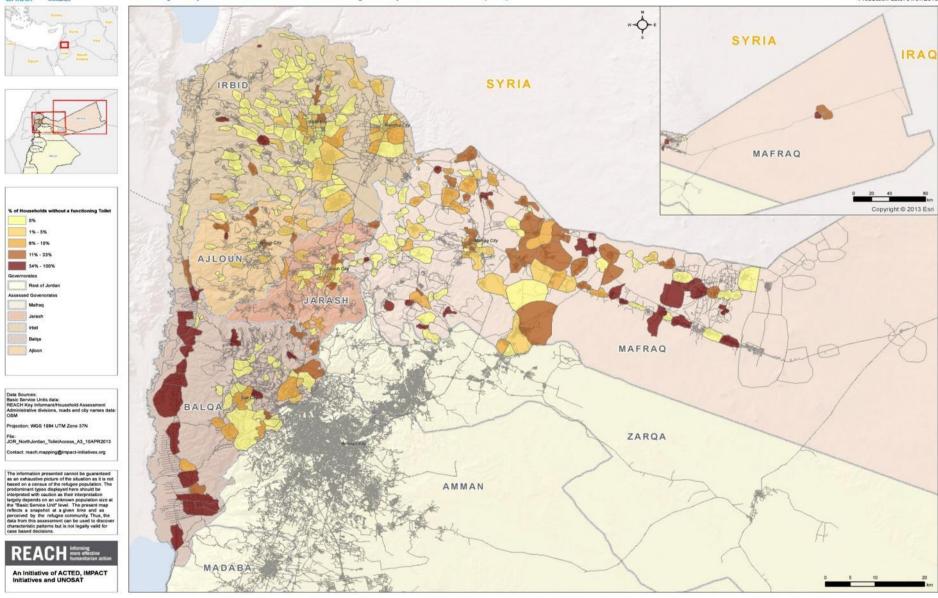
Projection: WGS 1984 UTM Zone 37N

Jordan - Northern Governorates

Percentage of Syrian Households without a Functioning Toilet by Basic Service Unit (BSU)

For humanitarian relief purpose only Draft/work in progress

Production date: 31/07/2013



Map 6: Percentage of Syrian households without a functioning toilet

Sewage system

In contrast to water services which cover 95 per cent of the population in Jordan, sewage services only cover about a third of the population and mainly in urban centers. ²⁸¹ There is again a large difference between rural and urban, with 30 per cent of rural areas accessing sewers, in contrast to 73 per cent of urban. ²⁸² Overflow of septic tanks is a concern, with approximately a third (rural-31 per cent, urban-34 per cent) overflowing at least once in the past three months. ²⁸³ This will be a key concern during winter as septic tanks are more likely to over flow due to the rainwater. Septic tanks are inadequate in construction in general; often unlined, with no partition, no outlet pipe, sporadic desludging, no maintenance with seepage into the ground. ²⁸⁴ A ban on on-site disposal of grey and black water for all residences not connected to pipe system means that these households have to store wastewater in collection tanks and then use private desludging trucks. ²⁸⁵ On average this is once every two months in winter and once a month in summer. In Mafraq, the price of desludging has risen from JOD25 to JOD30, Jordanians claim because of the increase demand from Za'atari camp. 286

A particular assessment in Mafraq found that the majority of houses, garages, basements, and apartments have toilets with septic tanks. However, most tents and farms, which made up 20 per cent of the housing of Syrians, did not have a sewers or septic tanks (67 per cent living in outdoor rooms, 75 per cent living in tents, 44 per cent living in farms). ²⁸⁷

Solid Waste management

Some areas have noticed a visible increase in the amount of environmental waste in areas where refugee numbers are higher. Communal waste management is a public service and there are reports that in Mafraq, there has been a reduction in the service recently and likewise in Amman. Oxfam found that focus groups though that there was an increased visible increase in waste in Amman and Mafraq. ²⁸⁸ The payment for this is JOD1 a month through the electricity bill, so the cost frequency is not prohibitive.

A large minority of refugees (32 per cent-rural, 40 per cent-urban) report their cleanliness of communal areas to be 'fair'. ²⁸⁹ The same assessment in the northern governorates reported that 80 per cent of communal waste bids were brimming over, full, or half-full. Informal dumping on the street has been observed, as well as waste burning. The average waste collected is 0.76 kg/p/d, with the average waste generated 0.9kg/p/d, illustrating that 0.14 kg/p/d as the excess amount of waste generated and not collected. ²⁹⁰

²⁸¹ Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection t-refers to Yarmouk Water Company data.

Water, sanitation and hygiene working group in Jordan, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordanpreliminary results. ²⁸³ Ibid

²⁸⁵ Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection t-refers to Yarmouk Water Company data.

²⁸⁷ ACTED, (Sept/ 2013) Shelter and winterization assessment in the Northern governorates.

Oxfam GB, Jordan (March 2013) Integrated Assessment in Host Communities: Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection t-refers to Yarmouk Water Company data.

Water, sanitation and hygiene working group in Jordan, Oct 2013, Interagency Water, Sanitation and Hygiene Assessment in Jordanpreliminary results. ²⁹⁰ Ibid, in reference to SWEEP NET, country profile on solid waste management-Jordan 2012

4.3 Hygiene

Hygiene items

More than three quarters of the survey population face issues in accessing hygiene items.²⁹¹ Rural areas appear to be less served than urban. 292 9% of the rural population received soap from charitable actors and 16% in urban areas, indicating an under provision of the rural population. ²⁹³ Families are coping either by prioritizing water needs over other basic services such as health and rely on charities, friends and / or relatives. ²⁹⁴ Soap, washing powder and shampoo are considered as top priority hygiene items.²⁹⁵ Refugees highlighted the fact that hygiene kits are not part of the WFP vouchers, making access to hygiene items without cash difficult.²⁹⁶ Refugees that are registered or have a large family doesn't result in increased access for having more hygiene items.²⁹⁷

Women report that there is a severe lack of female hygiene items. Only 1.8 per cent reported to have received sanitary napkins (disposable).²⁹⁸ Focus groups also reported that hygiene products are an expensive item and weren't affordable to most. Female hygiene practices differ among the population settled in host communities and those in temporary shelters, with women using cloth instead of a sanitary napkin. With declining financial resources, some women are using water and soap instead of sanitary napkins. ²⁹⁹ Not being able to afford basic hygiene items impacts their dignity and contributed to a feeling of shame for women in Ramtha and Mafraq. 300 Very few households were supported in terms of baby items (2.58%)³⁰¹ and families voiced the high price of diapers and other equipment for a baby.³⁰²

Hand washing and bathing

Though the majority of the survey participants practice hand washing at appropriate times, there are many barriers to hand-washing and bathing. Nearly half of respondents, (45%) had difficulties to wash their hands, mainly because of the cost of soap (34%) and lack of water (24%). 304 The number of diarrhoea cases in household with difficulties in handwashing is low and is not significant in comparison to the total number of diarrhoea cases. A concern is that few respondents know about causes of diarrhoea, especially in terms of faeces and dirty hands. The majority treat diarrhoea at health centre level, followed by oral rehydration salts. 305 Hand-washing in urban areas is generally the same as Syria, but in informal settlements, practice is much rarer even when soap and water are available. 306 The

²⁹¹ ibid

²⁹³ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

²⁹⁵ ibid

²⁹⁶ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

²⁹⁷ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

³⁰⁰ IRC (Nov 2012) Assessment Report Cash Transfer Program to Syrian Refugees in Jordan

³⁰¹ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

³⁰² CARE Jordan, (Oct 2012), Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman. ³⁰³ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan 304 Ibid

³⁰⁶ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

Oxfam assessment pointed to links to the lower educational levels in these settlements and therefore lack of knowledge on hand-washing.

More than the half (59.23%) of the survey population faces issues to bath on a regular basis. The main barriers for bathing are the cost of soap (19.34%), followed by the lack of water (18.09%). A small percentage (6.86%) indicates that the place of the washing area is either far or inconvenient (for example for those living in a tent). There are signs of some skin rashes on children which are associated with poor personal hygiene. 308

Water Storage facilities

There are poor practices of maintaining the cleanliness of small water storage devices, either never washing their small water storage containers (38%) or washing them less than once a week (16%). ³⁰⁹22% reported washing them every day and 24% a few times a week. ³¹⁰ The cleanliness of large water storage devices reported by respondents was worse – with nearly 80% reported either never washing their storage units or washing them less than once a year. 7% reported washing them 1-2 times a year and 15% reported washing them 3-4 times a year.

Wash in schools

An assessment on 474 schools in Irbid, Ma'an, Mafraq, Zarqa, and Amman with both Jordanian and Syrian refugees highlight the need for rehabilitation, gender segregated toilets and disabled facilities. ³¹¹ Only 83 out of 151 schools (that had disabled students) had latrines that disabled children could access. 18 per cent of the water fountains were not in a good condition, water quality of 10 per cent of the schools was bad-moderate. Concerning latrines, 4.5 per cent of the schools had latrines in a bad condition or none existed, with 27 per cent of schools having latrines in moderate condition. In mixed schools, only 37 per cent of latrines were separate for boys and girls. The sewage system was worst in schools in the governorate of Ma'an and about 10 per cent required upgrading in the other governorates. Hygiene promotion was to an adequate level, with 97 per cent students receiving messages on hygiene promotion, despite a lack of school staff training.

This is the only assessment on WASH facilities in schools available. The timing of the report was when there was approximately half the numbers of children in school compared to now, thus the facilities are likely to have deteriorated and the needs become greater since that time. This is a cause for concern as the lack of WASH facilities and/or bad conditions is often one factor for a low attendance for girls. ³¹²

In-camp hygiene practice

The use of hygiene practices was variable: men were most likely to wash their hands (90%) and use soap (59.4%), while children (no sex-disaggregation) were less likely to wash their hands (65.5%) or wash with soap (33.8%). The rate of women washing their hands was more similar to that of children (70.5%) while it was more similar to that of men using soap

³⁰⁷ Interagency (ACTED, JEN, Oxfam, Relief International), (2013) Interagency Knowledge, Attitudes and Practices Study of Syrian Refugees in Host Communities in North Jordan

³⁰⁸ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

³⁰⁹ Oxfam GB, (2013) Water Market System in Balqa, Zarqa, & Informal Settlements of Amman & the Jordan Valley – Jordan ³¹⁰ ibid

³¹¹ Japan Emergency NGO (JEN), Feb 2013, Assessment findings of schools hosting Syrian refugee students in Jordan Governorates ³¹² UNHCR. (Jan-June 2013). Syria Regional Response Plan.

(55.3%). Given the different practices, it is not clear whether men are rationing the water and soap, both of which are in limited supplies.³¹³

Protection issues associated with a lack of safety for at the latrines are an issue. 80 per cent of women do not feel safe going to the toilets at night, neither do most children, often because of lack of light and no locks. In the same study it was found that levels of hand-washing were at 59 per cent, which may have improved since then given it was conducted a year ago. A high proportion of Syrian women and children in Za'atari camp do not feel safe using WASH facilities in Za'atari camp at night: 82 per cent of women, 28 per cent of teenaged girls and 39 per cent of boys and girls under the age of 12 fear harassment occurring on the way to and from the facilities. Consequently families are creating private, basic washing facilities and open pit toilets near or inside their tents. Girls generally refrain from using toilets after 7pm because of lack of lighting in some areas of the camp and broken locks in latrines and showers. Girls and women tend to go in pairs or in groups to latrines.

Hygiene concerns for women are also present in the camp. Women and female youth (14.1%) in Za'atari camp are reporting there is a shortage of sanitary napkins, sanitary towels or diapers while 11.8 per cent are indicating that they are purchasing the shortfall. Married teenaged girls report that they have insufficient clothing such as a second pair of underwear for themselves or a second set of clothes for their children, making it more difficult to get clean.³¹⁷

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³¹³ Interagency (ACTED, JEN, Oxfam, Relief International), (Nov 2012) Za'atri Baseline Inter-Agency Knowledge, Attitudes and Practices KAP Household Survey, Jordan

Hygiene promotion and accountability working group, Nov 2012, 'Zaaatari Baseline KAP HH survey,

Interagency, (Nov 2012) Za'atri Baseline KAP Household Survey, Jordan

³¹⁶ Child Protection and Gender Based Violence sub-working Group in Jordan, (Jan 2013), Findings from the Interagency Child Protection and Gender-Based Violence Assessment in the Za'atri Refugee Camp

and Gender-Based Violence Assessment in the Za'atri Refugee Camp

317 Interagency (ACTED, JEN, Oxfam, Relief International), (Nov 2012) Za'atri Baseline Inter-Agency Knowledge, Attitudes and Practices KAP Household Survey, Jordan

5 Cross-cutting issues

5.1 Access to information and services

In principle, refugees should be able to access free health care, primary level education, WFP distributions, financial assistance from UNHCR and other key services with the Asylum Seeker Card received with UNHCR registration. However, several challenges were found in various assessments that hinder this full access.

- 1. Service provision
- 2. Registration status
- 3. Distance from services
- 4. Awareness of services
- 5. Discrimination and exploitation
- 6. Reduced movement for women and children
- 7. Expense

1. Service provision

- Reproductive health services exist, but they are limited. Community and provider knowledge of the existing services is low.³¹⁸
- Primary care clinics and outreach to communities are limited. A lack of female doctors has been reported in many assessments as a key limitation for women accessing health care. 319
- There are 19, 500 children on waiting lists to enrol in education and others are unable to access informal and non-formal education opportunities and KG level schooling.
- Key informants reported that there is a lack of referral systems which local organizations can refer domestic violence cases.³²⁰ Referral systems were more developed in the north than the south.

2. Registration status

- Assessment Capacities Projects (ACAPs) suggest that there are a numbers of Syrians that arrived after the beginning of the conflict who may have been fleeing the conflict and have not registered for a number of reasons.³²¹ This group requires further investigation in order to verify their status and then access to basic services which without being registered, would be very limited.
- Refugees must do a verification process every 6 months with UNHCR, and an out of date card will not allow the holder access services. Distance from the registration point and the need for child-care can be obstacles for families to register and reregister, resulting in the whole family to travel which can be difficult for large

³¹⁸ Women's Refugee Commission (undated) Evaluation of the Implementation of the Minimum Initial Service Package (MISP) for Reproductive Health among Syrian Refugees in Irbid City and Za'atari Camps-Jordan

³¹⁹ CARE International (2013) Syrian Refugees in Urban Jordan

CARE International (2015) Syrian Refugees in Orban Jordan (2015) Syrian Refugees in Orban Jordan (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage

³²¹ ACAPs, (Sept 2013), Host counties regional report.

- families and vulnerable refugees such as the elderly or pregnant women living in southern and central governorates. 322
- While waiting to re-register, refugees are extremely vulnerable as they can only access minor assistance from local charities and non-governmental organisations. 323
- Birth registration can be difficult for certain groups such as unregistered refugees and female headed households. To register a birth and receive a birth certificate, parents must be able to show a legal ID, an ID receipt or UNHCR registration as well as their marriage certificate, or their 'family booklet'. The authorities will accept the family booklet alone if the father is present and unable to show ID. If the wife is alone and has the family booklet, she must present two witnesses to prove her identity. Parents with no proof of marriage or women alone without proof of marriage and/or identity may be required to follow lengthy legal and administrative procedures to secure a birth certificate. For those without access to any documentation even this route may not be available. However, is unclear to what scale this may be a problem.

3. Distance from service

- Refugees particularly living in rural areas, or in temporary shelters are typically further away from services. Paying for transportation was reported as a barrier that reduced their usage, for refugees in cities such as Amman and living rurally. 326 It is often the poorest families who rent accommodation the furthest away from services due to the cheaper rent. There are some *mobile* health clinics provided in certain areas such as Zarqa and Amman, but the coverage of other services compared to where refugees reside requires further research and mapping. 327
- A new vulnerability score-card has been established by UNHCR, where distance from services will be introduced as a new vulnerability indicator. ³²⁸

4. Awareness of service

- The level of awareness of services amongst refugees varies. Refugees have relatively good knowledge on basic needs items, but much lower knowledge on other services such as mental health, GBV (Gender Based Violence) or reproductive health. Another assessment reported that most were aware of food vouchers, but lacked information on free vaccines, healthcare access and legal protection. 330
- Just under half of refugees in an assessment knew where to go for legal aid or mental health services and just over half knew of security services, women's centres and children's centres in their locality. ³³¹ The largest reason for exclusion was the lack of knowledge and providers pointed to the problems of outreach. ³³²

326 ibid

³²² International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

³²³ Interagency (UNHCR, WFP, NGOs and GoJ, (2013), Joint Assessment Mission-Preliminary findings (not yet released)

³²⁴ International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Jordan.

³²⁵ ibid

³²⁷ UNHCR (2013) Health services Guide, http://data.unhcr.org/syrianrefugees/country.php?id=107

³²⁸ UNHCR (2013), A Vulnerability Analysis Framework for Syrian Refugees in Jordan

http://data.unhcr.org/syrianrefugees/country.php?id=107

³²⁹ UNHCR, (Dec 2012), *Report of the Participatory Assessment;* UN agencies, the Government of Jordan and JHCO (Jordan Hashemite Charity Organization), 2012, Needs assessment of displaced Syrians in Jordan.

³³⁰ Interagency (UNHCR, WFP, NGOs and GoJ, (2013), Joint Assessment Mission-Preliminary findings (not yet released)

³³¹ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage ³³²Ibid

- In the North especially, many women did not know of any local specialized resource for women. In fact, out of 500 interviews with Syrian refugees, none knew of any GBV survivor services, with families or the police being the main recourse.
- A third of households did not send children to school because of a lack of awareness, amongst other reasons. 333
- Even after registration, refugees aren't always sure which services they are entitled to, such as health care and cash assistance. 334

5. Discrimination and exploitation

- Unequal and exploitative treatment in service provision has been reported. There has been criticism of unfair treatment for those with connections with local charities. 335
- In Irbid community leaders were reportedly distributing resources to their relatives first, rather than having a needs-based system. ³³⁶ The same study reported that women were being called insulting names while waiting for health services.
- In health centres, it was reported that refugees were not admitted sometimes because they didn't have money and appeared to be purposefully directed to a private clinic where they would have had to pay much more. 337
- In Zarqa, men with disabilities have reported that landlords have asked them to 'sell' their daughters in a type of marriage in order to pay their rent. As detailed in the above GBV section, some refugees have experienced aid being tied to sexual relations or favours.
- In the south there was a strong perception that women and girls were much more excluded from services than men.³³⁹ Issues with women not feeling comfortable, rather than a lack of interest was thought to be the reason.³⁴⁰
- Discussions with Syrian refugees living in Amman confirmed that landlords are reluctant to rent to unaccompanied women because they are perceived as unlikely to be able to pay rent and as 'socially problematic'. This leads to several households hosting female-led families, which means the amount of actual female headed households is often under-represented.³⁴¹

6. Restricted movement for women and children

- Women and girls face substantial obstacles in accessing services, in particular, due to restrictions in movement. From the graphs below, it is clear that men have the most access to the outside world. Almost half of girls rarely or never leave their home. Boys do leave the house more often, but yet 30 per cent of boys rarely or never leave the home.
- When these groups were asked why, (see fig below), a few reasons came up such as feeling estranged, not being allowed, with general feelings of distress and fear being

³³⁶ Women's Refugee Commission (undated) Evaluation of the Implementation of the Minimum Initial Service Package (MISP) for Reproductive Health among Syrian Refugees in Irbid City and Za'atari Camps-Jordan

³³⁷ Interagency (UNHCR, WFP, NGOs and GoJ, (2013), Joint Assessment Mission-Preliminary findings (not yet released)

³³³ REACH, (2013), Findings of Household assessment of Syrian Households in host communities in the northern governorates of Jordan

³³⁴ Jordanian Health Aid Society (July 2013), Outreach team- Syrian Refugees at East of Mafraq

³³⁵ ibid

³³⁸ UNHCR, (Dec 2012), Report of the Participatory Assessment

³³⁹ Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage 340:1::1

³⁴¹ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa

- the most common. These fears and protection needs impede all refugees' access to services, but particularly women and children.
- Numerous service providers from Jordan's middle and northern regions explained that workshops held for Syrian women were often empty and that they struggle to gather enough participants for their programs. While many key informants from Mafraq believe low participation was due to lack of interest, in fact verifications with key informants and focus groups suggested many refugee women may not be able to or not feel comfortable accessing services due to feelings or insecurity or inability to leave the home as detailed below. 343
- Due to the greater number of women and children as compared to men, there is a lot of pressure on adult or young males to under-take all contact with the outside world, including services. The reasons for this are connected to conflict with the local community and risk of harassment as outlined in the GBV section above.

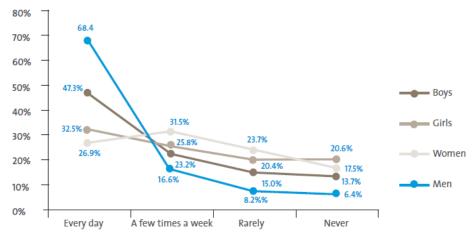


Figure 26: Survey responses to "In general, how often family members go outside the house?" 344

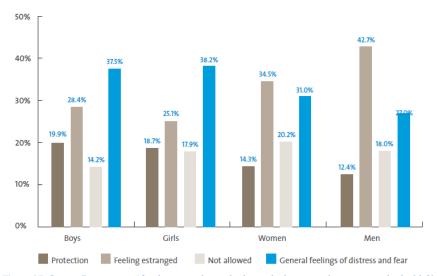


Figure 27: Survey Response to 'for those members who leave the house rarely or never, why is this?' Ref-same as above

³⁴²Child Protection and Gender Based Violence sub-working Group in Jordan, (2013), Interagency/UN Women Assessment of Gender-Based Violence and Child Protection among urban Syrian refugees in Jordan, with a focus on early marriage
³⁴³ Ibid

³⁴⁴ Ibid

7. Expense

- Health services are not all free (please see detailed guide in footnote link) and consultations for health services are set at JOD2, 20 per cent cost of medicine prescribed, and a percentage is to be paid for laboratory and radiology services. Surgical procedures are often unaffordable and the cost of medicines for chronic treatments which affects one third of families such as diabetes and hypertension results in patients were not following prescriptions.
- Despite education being free, there are certain auxiliary costs, such as uniform, stationary, a bag, and transport that has hindered parents from enrolling children in school. These are being provided by UNICEF and partners; however there is still a gap in children enrolling in school.

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³⁴⁵ UNHCR, (2013), Health service guide, in health sector section: http://data.unhcr.org/syrianrefugees/country.php?id=107

5.2 Children with disability³⁴⁷

There are indications that children with disability (sensory, physical, intellectual) may make up approximately 10 per cent or more of the Syrian children refugees. This is in light of both global indicators, ³⁴⁸ and also data received, though there is the need for further research. The 'Do No Harm' principle of humanitarian interventions described in the UNICEFs Core Commitments to Children includes ensuring that the needs of disabled children are included across sectors and access to education for children with disabilities is particularly mentioned. Children with disabilities are at a much higher risk of not attending school, 3.7 times more likely to be victims of violence, and have much higher mortality rates compared with other children. ³⁴⁹

Preliminary data from UNHCR's Registration Database in Jordan, suggests that approximately 10 per cent of refugees, children and adult included, have a disability. A recent assessment, found 4 per cent of the Syrian population had a physical disability, and 2 per cent had a psychological illness. People (including children) with disabilities are consistently described in assessments as being one of the most vulnerable groups of Syrian refugees in Jordan. The child protection section in UNICEF has been referred 193 cases of disability male and female in 2013. However, further research concerning their experiences, vulnerabilities, and numbers, especially in the host community is required. Research is planned by Handicap International and HelpAge for the end of 2013.

In the camp, though assessments on disability are limited, the Joint Education Assessment did include disabled children. Of the 149 children with disabilities interviewed, 78 per cent had a physically handicap and others involved speaking, hearing, and learning and other disabilities which were unspecified. ³⁵³ The assessment noted that physical disabilities were easier to identify than intellectual. This has implications for service planning and assessment methodologies. Parents stated that physical barriers, such as a lack of wheelchair or physical accessibility at school, prevented their disabled children attending school in the camps. Handicap International undertook an assessment of these schools in Za'atari camp and found school facilities were not suitable for wheelchairs or crutches to access, and likewise that the classroom entrance and tables and chair which were fixed to each other. ³⁵⁴ The new school built in Za'atari camp has taken account of these recommendations. Parents reported attitudinal barriers as well, such as the fear that the child may not be accepted or that parents thought education was not important for their children.

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³⁴⁷ Definition of children or person with a disability-'all persons with disabilities *including* those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various attitudinal and environmental barriers, hinders their full and effective participation in society on an equal basis with others'

 $[\]underline{http://www.un.org/esa/socdev/enable/faqs.htm\#definitionhttp://www.un.org/esa/socdev/enable/faqs.htm\#definitionhttp://www.un.org/esa/socdev/enable/faqs.htm#definitionhttp://$

³⁴⁸ 'According to the World Health Organization (WHO), around 10 per cent of the world's children and young people, some 200 million, have a sensory, intellectual or mental health impairment. Specialists, however, agree on a working approximation giving a minimum benchmark of 2.5 per cent of children aged 0-14 with self-evident moderate to severe levels of sensory, physical and intellectual impairments. An additional 8 per cent can be expected to have learning or behavioural difficulties, or both.' P. 12, UNICEF, (2007), Promoting the Rights of Children with Disabilities, Innocenti Digest no. 13.

³⁴⁹ UNICEF State of the Worlds Children , (2013), p. 12 in reference to a study by Liverpool John Moores University and the World Health Organization http://www.unicef.org/sowc2013/files/SOWC2013_Exec_Summary_ENG_Lo_Res_24_Apr_2013.pdf UNICEFs State of the Worlds Children 2013 http://www.unicef.org/sowc2013/files/SOWC2013_Exec_Summary_ENG_Lo_Res_24_Apr_2013.pdf

UNHCR, (Sept 2013), Needs, Gaps and Targets-Presentation at the Regional Response plan workshop 2013-provisional results
 ACTED/AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

³⁵² Activity info, accessed 20th Sept 2013, information system for UNICEF, UNHCR and partners.

³⁵³ Education Sector Working Group, Jordan (April 2013) Joint Education Needs Assessment: Za'atri Refugee Camp, Jordan

³⁵⁴ Handicap International, April 17, 2013, Accessibility Assessment: UNICEF Schools (School 2 & 3) Za'atari Refugee Camp, Emma Pettey, Accessibility and Inclusion Manager

In host communities, there is less known and it is presumed that a lot of facilities and services are not disable-friendly. A water and sanitation assessment in schools with Syrian students enrolled collected some information on disability. It found approximately 0.15 per cent students enrolled had a disability. This is a relatively low figure if we consider the potential numbers of disabled children. This indicates that the majority of children with disabilities are not attending school, or there is an issue of identification of disability in school which would make this number lower than it is. Secondly, only 83 out of 151 schools had latrines that disabled children could access. This would be a sizeable barrier to attendance. In an assessment by IRC on southern governorates, there were reports of deaf and blind children as well as those with complex medical problems, and these were recorded as not attending school. This was named as a concern by families in Karak in particular in this study.

In light of the lower amount of movement in the Syrian population because of their feelings of insecurity and protection concerns, children with a disability would have their life compounded by their displacement here and would also be particularly invisible due to both the physically difficultly and the prejudice that can occur. The challenges of these children accessing basic services are necessary to take into consideration in every intervention in every sector. Any adaptions that can be made to schools would also benefit the local Jordanian community. Using the multi-sectoral disability checklist provided by Handicap international would be good step forward to incorporating this approach in interventions.

³⁵⁵ International Rescue Committee, (March 2013), Cross-Sectoral Assessment of Syrian Refugees in Urban Areas of South and Central Lordan

 $^{{\}it Jordan.} \\ {\it 356} \ {\it Disability Checklist for Emergency response, year unknown, HI,} \\$

http://www.unicef.org/nutritioncluster/files/HI_disability_checklist_booklet(1).pdfhttp://www.unicef.org/nutritioncluster/files/HI_disability_checklist_booklet(1).pdf

6 Vulnerability

6.1 Overlapping vulnerabilities and coping mechanisms

Syrian refugee children in Jordan already have multiple vulnerabilities, such as children living in female headed households. Identifying these overlapping indicators can identify the most vulnerable group's disparities that can be hidden by looking at averages or only groupings. A multi-dimensional and cross-sectoral view on the most vulnerable groups can provide improve targeting in a context of limited resources. Below are examples of children and families who because of a certain grouping of characteristics are more vulnerable than one characteristic alone based on this document.

Typical overlapping vulnerabilities in the Syrian refugee population in Jordan:

*further statistics about these groups is contained in the desk review.

- Female headed households are unlikely to be working, thus often having lower income, and if they have children, are likely to be forced to engage in child labour (more often affecting boys) and may also face harassment because of their social status and experience difficulties accessing their basic needs.
- Children of families in rural areas living temporary shelter (such as Balqa, Jordan Valley, around Amman, Mafraq), who often choose this area because of the lower living costs, often have the worst access to water and hygiene facilities-unlikely to have a toilet, likely to defecate outside raising hygiene and protection worries, as well as concerns of heat and cold in summer and winter.
- Adolescent boys, who may have large psychosocial needs, are less likely to be in education, more likely to be involved in child labor.
- Disabled children, have difficulty accessing school and also are at a higher risk of being a victim of violence compared to other children, also have difficulties accessing basic services such as health.
- Children living in areas of social tension with between the host community and Jordanians, such as Mafraq, are potentially unable to attend school, unable to play outside affecting their mental health, and educational opportunities, and potentially at risk of verbal or physical violence with the host communities.

Vulnerability and coping mechanisms

These overlapping vulnerabilities also impact how individuals of families react to a hazard or external shock, such as a sudden influx of refugees, or price increases. How a family or individual can react to that shock depends on their available coping mechanisms. At the start of 2013, most households reported that they had low coping capacity (see map next page). Syrian refugees have used various coping mechanisms in order to deal with their displacement in Jordan. NGOs and UN agencies have documented a range; selling assets and donations from local charities, reducing food consumption, avoid getting medical treatment, reducing other expenditure e.g. education, increasing debt, moving to a smaller and cheaper housing or with another family, increase in begging and stealing, etc. As protracted

³⁵⁷ Guidelines for Human Rights-Based Programming Approach, Executive Directives CF/EXD/1998-004 (New York, UNICEF 1998).
358 There is a wide variety of external shocks-from individual level, household, macro-level etc. (World Bank-measuring vulnerability http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/EXTPA/0,,contentMDK:20238993~menuPK:492141~pagePK:148956~piPK:216618~theSitePK:430367,00.htmlhttp://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/EXTPA/0,,cont

entMDK:20238993~menuPK:492141~pagePK:148956~piPK:216618~theSitePK:430367,00.html) ³⁵⁹ documented in IRC cross sectoral assessment, Joint GoJ/UN assessment 2012 and CARE 2013

displacement continues, refugees may reach to increasingly negative mechanisms, such as theft, sale of natural resources, using loans for everyday consumptions, repatriating prematurely, reducing food consumption. However, some studies suggest that vulnerability decreases over time for refugees, as they settle, adopt coping mechanisms and possibly find work and other sources of income as mentioned in this reference to Guinea. More in-depth research needs to be conducted on the current coping mechanisms of Syrian refugees.

Coping mechanisms and children

A households' ability to deal with an external shock impacts on the lives of children in a variety of ways, depending on the nature of that shock. Evidence from this desk review suggests that there are various impacts on Syrian children because of a reduction in income for instance. In this situation, children are at higher risk of being withdrawn from education and engaging in child labour either outside or inside the home. Increased tension in the household because of the increased financial difficulties can heighten the likelihood of violence against children and intimate partner violence (domestic violence). The risk of early marriage may become higher. Food consumption may be reduced, increasing the likelihood of malnutrition. Ability to purchase clean water and soap can be reduced leading to increase possibilities of disease and bad hygiene practice. Evidence from other studies suggests that adolescent males are particularly at risk of negative coping mechanisms over time in a protracted crisis. They do not have the chance to assume normal male roles, and don't have opportunity to create livelihoods, and often fall into anti-social behaviour. A better understanding of the type of coping mechanisms families use over time would facilitate longer-term programming.

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³⁶⁰ Crisp, Jeff, (2002), No Solutions in Sight: the Problem of Protracted Refugee Situations in Africa, The Center for Comparative Immigration Studies, http://ccis.ucsd.edu/wp-content/uploads/2012/07/wrkg68.pdf

³⁶¹ Konyndyk, J. (2005) 'Towards a new model of post-emergency refugee assistance' http://www.odihpn.org/humanitarian-exchange-magazine/issue-31/towards-a-new-model-for-post-emergency-refugee-assistance

³⁶² Crisp, Jeff, (2002), No Solutions in Sight: the Problem of Protracted Refugee Situations in Africa, The Center for Comparative Immigration Studies

Highest Coping Capacity

Cities

File: JOR_NorthJordan_CCapacity_A3_10APR2013

The information presented cannot be guaranteed as an exhaustive picture of the situation as it is not based on a census of the relayer population. The predominant types displayed here should be interpreted with coation as the interpreted with reaction as the interpreted with coation as the interpreted with reaction and the interpreted with coation as the interpreted and the reflects a sensephel at a given time and as perceived by the refuge community. Thus, the data from this assessment can be used to discover characteristic patterns but is not legally valid for case based decisions.

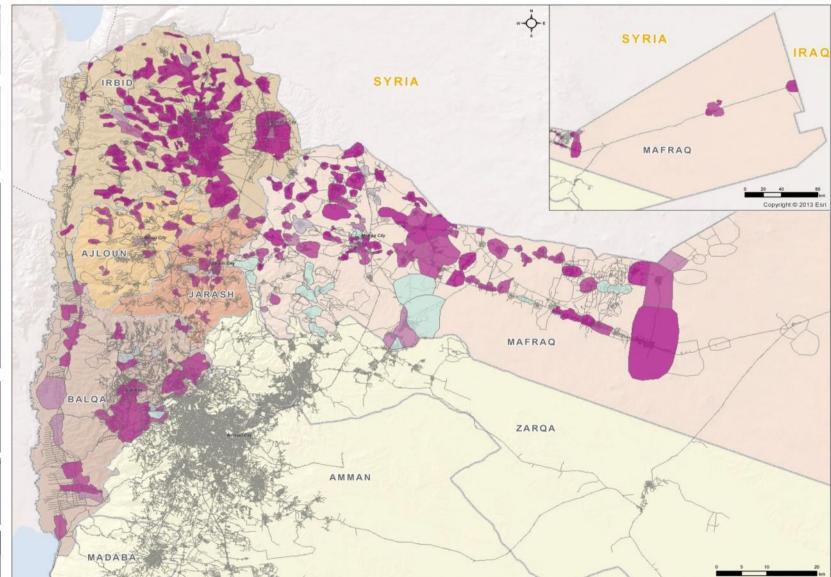
An Initiative of ACTED, IMPACT Initiatives and UNOSAT

Jordan - Northern Governorates

Coping Capacity of Syrians in Jordan by Basic Service Unit (BSU)

For humanitarian relief purpose only Draft/work in progress

Production date: 31/07/2013



Map 7: Coping capacity of Syrians in northern governorates

6.2 Impact of the crisis on Jordanians

Jordanian children living in households in host communities are being impacted by the influx. Jordanian households report increased rent, difficulties to find work, social tension, and sharing of resources and services with Syrians. This can create more tension in the household, reduced spending on food, education and health. Jordanian households in the areas where refugees have settled have significant numbers of children, with around 41 per cent consisting of children below 15 years pointing to a significant dependency ratio. A survey of 1,200 Jordanians reported that 70 per cent per cent believed that the government should stop the flow of Syrian refugees into Jordan, and over half believed that the country was moving in a negative direction because of the influx. Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of refugees than others (density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Obayd, 22.9% Some areas have a higher density of Syrians to Jordanians-district of Ba'lama, 45.2%, and Bani Oba

Evidence suggests that many of the Jordanian households in host communities are also below the poverty line. This has clear implications for children. Almost a fifth of Jordanians live underneath the 2010 poverty line in some of the governorates where Syrian refugees are, such as Ajloun (25%), Balqa (20%,) and Mafraq (19.2%). These rates may have increased since 2010. This report indicated that rural poverty can be much more severe than urban, and since a sizeable number of refugees are living rurally, this would have implications perhaps more severe than urban. However the numbers of refugees living rurally are as of yet unavailable.

One recent survey specifically on Jordanians in host communities found that income of Jordanian households was on average 23 per cent greater than that of Syrian households, (JOD193 and JOD156 per month respectively). Jordanians had slightly higher levels of debt (JOD271 for Syrians and JOD294 for Jordanians. The absolute poverty line is JOD68 per person according to UNDP, ³⁶⁷ and the average number of people per household in this study was between 5.5-6 respectively for Syrians and Jordanians. Therefore, it appears that the poverty line for an average sized household would be approximately JOD 400 per month for an average Jordanian or Syrian household. This suggests that the majority of the families in this survey were living underneath the absolute poverty line on income alone. It must be said that most households' expenditure was greater than this monthly income and further research is required in this area. However on income alone, it appears Jordanians and Syrians were living close to the poverty line.

Rent and housing are causing a lot of tension in the Mafraq and Ramtha, and other areas due to the increasing prices and lack of available housing for Jordanians. In Mafraq, the average rent has reportedly increased from JOD50 a month to JOD150-200. In Ramtha and Irbid, rent was between JOD100 and JOD120 per month, and now it costs between JOD150 and JOD200. Another report found that Jordanians were spending 77JOD a month on rent, compared to Syrians who were spending 114 JOD a month-on average across 6 governorates.

³⁶⁸ Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan.

³⁶³ ACTED and AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

³⁶⁴ University of Jordan's Centre for Strategic Studies, 4-9 April 2013

³⁶⁵ UNHCR accessed 3.10.13 http://data.unhcr.org/jordan/http://data.unhcr.org/jordan/

³⁶⁶ UNDP Jan 2013, Jordan Poverty Reduction Strategy.

³⁶⁷ ibid

³⁶⁹ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods: Water, Sanitation and Hygiene: Protection

Livelihoods; Water, Sanitation and Hygiene; Protection

370 Un Pont Per (2012), Comprehensive assessment on Syrian Refugees residing in the community in Northern Jordan 2012,

There is a perception that some Jordanians are putting off marriage because they cannot afford to rent or buy a home.³⁷²

A study recently in Mafraq found that both Jordanians and Syrians spend approximately 40 per cent of their income on food.³⁷³ This makes these families extremely sensitive to any food price increases. The removal of the fuel subsidies in 2013 has increased inflation, with total inflation in 2013 so far (Oct 1st 2013) reaching 6 per cent, with fuel and lighting prices increasing 24 per cent year-on-year. 374 This indicated that 1 per cent of Jordanians were food insecure while another 15 per cent Jordanian were at risk. 375 A World Food Programme assessment in 2012 identified a substantial proportion of the Syrian population in Zarga and Ma'an which were areas where Jordanians were already employing food coping strategies (between 50 and 90 per cent).³⁷⁶

Jordanians livelihoods are being negatively impacted by the refugee crisis. ACTED reported that Jordanians experienced increased competition from Syrians for the same roles and less demand for jobs was the biggest challenge.³⁷⁷ Unemployment rates amongst Jordanians are significant. A report for 3rd quarter of 2013 said that the highest rate of unemployment was recorded in the age group 15-19 and 20-24 years by 37.9 per cent and 34.9 per cent respectively, which is an increase in past years. The average was reported as 14 per cent. Those in border towns have less income because of a stoppage of trading with because of the on-going conflict.³⁷⁹ At the time of writing, several assessments on host communities by UNICEF partners and other development actors are in process and the results of these will significantly help assess the needs of these Jordanians.

³⁷¹ ACTED and AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

Mercy Corps, (May 2013), Mapping of Host Community-Refugee tensions in Mafraq and Ramtha, Jordan

ACTED/AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

Global Information and Early Warning System on Food and Agriculture (GIEWS), Oct 1st 2013, Country brief-Jordan.

ACTED/AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

WFP, (2012), Food insecure and vulnerable people in Jordan.

ACTED/AMEU, (July 2013) Food Security Situation and Livelihood Intervention Opportunities for Supporting Syrian Refugees and host Communities in North Jordan

378 Department Of Statistics, (2013), Unemployment rate of 14 % during third quarter of 2013 http://www.dos.gov.jo/dos.home_e/main/

Georgetown University, (2013), Syrian Refugees in Jordan and Lebanon-a snapshot from summer 2013

6.3 Capacities within the Syrian community

The Syrian community has certain capacities that can be considered resources when planning interventions that will benefit children.³⁸⁰ This approach of recognizing the capacity of those affected by a crisis, even in difficult times, has been used by IFRC (International Federation of the Red Cross) and OCHA (Office for coordination of Humanitarian Affairs) in the CHAP (Common Humanitarian Appeals Process) in order to accurately assess needs and provide a comprehensive response.³⁸¹

Syrians have capacities in terms of past work experience and skills. A large number are skilled labourers including; machine operators, computer and mobile phone technicians, tile workers, steel workers, carpenters, painters, masons, and electricians. 382 Unskilled labourers mostly worked in construction, shops, on farms, office messengers, and drivers. ³⁸³ Skilled labourers are more likely to find a job in urban areas. There are also Syrian seasonal labourers who used to come to Jordan traditionally, and have now moved here, but work is very seasonal, and reduced due to the influx of cheap labourers. ³⁸⁴

Some refugees have tried to use their skills. Last year when there was less employment competition, many were able to use their skills to find work.³⁸⁵ However this had reduced months later when households found it more difficult due to more competition in the labour market and often more people per household.³⁸⁶ Yet some had set-up home based activities which women could part-take in. ³⁸⁷ Interventions could consider using the skills of refugees in terms of labour. For example, in Mafraq, many homes require repairs, and 84 per cent of refugees said they would be willing to upgrade their homes, but lack materials and/or technical expertise. 388 Political challenges exist in terms of providing interventions to harness the livelihood capacity of Syrians. 389

Finally, there have also been notable coping capacities to deal with the mental distress psychosocial challenges experience from Syria to Jordan. Men and women both found support from talking to and visiting friends and family as coping mechanisms to deal with distress.³⁹⁰ With adolescents, coping mechanisms also centred on friends or parents. However the most commonly reported coping strategy to deal with problems for adolescents was to withdraw or hide.³⁹¹ Thus, in conjunction with Syrians capacities to be self-supporting, there is still a role for humanitarian actors to ensure children and families access their rights to regain a sense of normalcy and well-being in this challenging new environment.

³⁸⁰ M. Anderson and P. Woodrow, 1989 Rising from the Ashes: Development Strategies in Times of Disaster

³⁸² UN agencies, the Government of Jordan and JHCO (Jordan Hashemite Charity Organization), (2012), Needs Assessment of displaced Syrians in Jordan interagency

Ibid

³⁸⁵ CARE Jordan, (Oct 2012), Baseline Assessment of Community Identified Vulnerabilities among Syrian Refugees living in Amman.

³⁸⁶ CARE, (April 2013), Syria refugees in Urban Jordan; baseline assessment of community identified vulnerabilities among Syrian refugees living in Irbid, Madaba, Mafraq and Zarqa

³⁸⁸ ACTED, (Sept 2013) Shelter and winterization assessment, Mafraq.

³⁸⁹ Oxfam GB Jordan, (March 2013), Integrated Assessment of Syrian Refugees in Host Communities Emergency Food Security and Livelihoods; Water, Sanitation and Hygiene; Protection.

390 International Medical Corps and UNICEF, (2012), Displaced Syrians in Za'atari Camp: Rapid Mental Health and Psychosocial

Support Assessment.

391 International Medical Corps and UNICEF, (2013), Jordan Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari July 2013 Report



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