



SHATTERED

Challenges and Priorities for
Syrian Children and Women
in Jordan

unite for
children

LIVES

unicef 



FOREWORD

With the conflict in the Syrian Arab Republic now in its third year, more than 3 million Syrians have been internally displaced. Over 1.6 million refugees have poured into neighbouring countries; thousands continue to cross the border into Jordan every week. More than half of them are children whose lives have been shattered.

This is not their conflict, yet children bear the brunt of the suffering. Their families are being torn apart; they are traumatised by what they have seen; some of them have been out of school for years; they feel alienated and out of place living in refugee camps or host communities; many are working on farms or selling tea on the streets to help their families make ends meet. A sense of normality is lost.

Host countries such as Jordan continue to show generous hospitality to allow vulnerable populations to seek refuge from the violence and insecurity in their home towns in Syria. However, Jordan's coping capacity is stretched to the limits. The Jordanian Government and the international community, including UN and other relief agencies, have at times been overwhelmed by the sheer number of refugees pouring into the country on a daily basis.

A number of assessments have been conducted by UN agencies and their partners to inform emergency response operations in a variety of specific programme areas. These assessments tell us who the most vulnerable people are, where they live, and what are the adequate and sustainable means to help them. A holistic understanding of the situation of Syrian refugees living in Jordan and how it affects Jordanians is still necessary to better be able to target our support.

This report presents a synthesis of what we know about what it means to be a Syrian refugee child or woman in Jordan. They are the most affected by this conflict and their experiences direct us to develop and better target our services. Communities torn apart by war can also lead the way in finding creative initiatives to participate and improve their lives.

This document brings together the voices of children and women who we have met in our daily work, with evidence from a range of assessments completed over the past 12 months. It highlights the key challenges and priorities for action in the areas of child protection and gender-based violence; education; water, sanitation and hygiene; nutrition and health; mental health and psychosocial support; and adolescent development and participation.

These are key areas of UNICEF's expertise that we work on with numerous partners. We hope that all development partners will benefit from this report and will use the information to help target their emergency response operations. Providing the best support possible for Syrian children and women who find themselves in a battle for survival is critical.

Dominique Hyde
Representative
UNICEF Jordan

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EXECUTIVE SUMMARY

As of 4 June 2013, there are 470,573 Syrian refugees in Jordan. 53% are children under 18 years of age. The majority of Syrian refugees live in host communities in Jordan, mainly in the northern and central governorates. Approximately 120,000 Syrians live in Za'atari camp, Jordan's largest refugee camp. Thousands of refugees continue to enter the country every week and new camps are due to open shortly.

The Jordanian government has asked the international community to share the burden of the response. United Nations (UN) agencies and international non-governmental organisations (INGOs) provide refugees in camps with shelter and access to basic services. Refugees in host communities also receive assistance from UN agencies and INGOs as well as community-based organisations (CBOs) and are granted free access to basic public services by the Jordanian government.

This report combines the conclusions of a wide range of detailed assessments with insights from Syrian refugee children and women, INGOs and UNICEF sector specialists to help build a holistic picture of the situation faced by Syrian children and women in Jordan. It is guided by two overarching questions:

- What are the key challenges in realizing the rights of Syrian girls, boys and women in Jordan?
- What are the priority recommendations for action in the following programme sectors
(i) child protection and gender-based violence (ii) education (iii) water, sanitation and hygiene (iv) nutrition and health (v) mental health and psychosocial support and (vi) adolescent development and participation?

Three contextual lenses of analysis – gender, age and area of residence – helped to identify differences in the experiences of Syrian girls, boys and women.

Urgent needs across all the programming sectors are identified. There are also severe funding shortfalls. Maintaining the existing programme is a challenge given the influx of thousands of new Syrian refugees to Jordan each week. Scaling up or starting new programming is highly challenging without substantial new financial resources.

In Za'atari camp, the security situation is rapidly deteriorating, theft and vandalism are common and public health risks are increasing. Syrians living in host communities are less visible to the international community but their needs are pressing and support for them is underfunded. Refugee children in camps and host communities remain highly vulnerable and require urgent assistance. Without a scaling up of the international donor community's response, the situation for Syrian refugees in Jordan will only get worse. The international community must act now.



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KEY FINDINGS OF THE REPORT

The following are the key challenges on which the report recommends urgent action.



Child Protection and Gender-Based Violence

The conflict in the Syrian Arab Republic (henceforth referred to as 'Syria') and the subsequent displacement of Syrians to Jordan has led to the breakdown of traditional protective mechanisms and exposed women and children to the risk of gender-based violence and abuse, neglect, exploitation and violence against children. The critical challenges in Jordan are:

- Increased domestic violence, especially against adolescent girls, boys and women,
- Heightened fear of sexual harassment and sexual violence among girls and women,
- Separation of children from their families or primary care-giver,
- The exclusion from services of female-headed households and Syrians with disabilities.

Additional risks to Syrian girls and boys in Jordan that require closer scrutiny are early marriage, child labour, gang activity, and allegations of recruitment by armed groups.



Education

Most Syrian girls and boys in Jordan do not go to school. Some 78% of children in Za'atari camp and 50% to 95% across host communities are out of school. The key reasons include:

- Lack of information about education services available,
- Syrians' belief that they will return home soon,
- Violence and harassment en route to and from school,
- Domestic or work commitments for children,
- Long distances to school, especially for girls,
- Transportation costs.

For Syrian children who are in school, learning environments are compromised by:

- Students' poor nutrition,
- Crowded classrooms,
- Inadequate school supplies,
- Corporal punishment by teachers and principals,
- Violence and harassment by students,
- Discrimination in host community schools,
- Inexperienced teachers in Za'atari camp.



Water, Sanitation and Hygiene

Water, sanitation and hygiene (WASH) challenges for Syrian children and women in Jordan are serious and growing. The critical problems are:

- Fear among refugees that drinking water is 'unsafe' and the cost of bottled water,
- Tension between Syrians and Jordanians over public water supply systems,
- Shortages in hygiene-related products such as soap,
- Theft and vandalism of WASH facilities in Za'atari camp,
- Dirty WASH facilities and degradation of facilities in overly congested areas in Za'atari camp,
- Fear among women and children of using WASH facilities at night in Za'atari camp,
- Risks to children's health from the untreated wastewater of private washing and toilet facilities in Za'atari camp.



Nutrition and Health

There are several threats to the nutritional status and health of Syrian girls, boys and women in Jordan:

- Global Acute Malnutrition in children under 5 years is rated as 'poor' by the World Health Organisation (5.8% in Za'atari camp and 5.1% in host communities),
- Alarming rates of children at risk of acute malnutrition in Za'atari camp (5.6%),
- Over 6% of women of reproductive age are malnourished, with approximately 1% severely malnourished,
- Poor breastfeeding and infant and young child feeding practices among Syrians,
- The risk of serious health complications for Syrian children, including death, from the combination of infectious diseases and malnutrition,
- The risk of a measles or polio outbreak and the need for greater vaccination coverage of Syrians and Jordanians,
- Distance to health centres for Syrians living in newer areas of Za'atari camp and denial of access to health services for some unregistered refugees in host communities.



Mental Health and Psychosocial Support

Events in Syria and Jordan have had a significant impact on the mental health and psychosocial well-being of Syrian girls, boys and women. Grief, fear, anger, depression and stress are to be expected given the crisis. While it is likely that many Syrians will recover over time drawing on personal coping skills and a supportive environment, some will require assistance for mental health problems. The urgent requirements in this sector are:

- Provision of basic services and security in a way that supports the participation and well-being of refugees,
- Increased support for families and communities as a means of reducing threats to their mental health and psychosocial well-being,
- Improved quality of 'focused, non-specialised support' for children and their families,
- Provision of specialised assistance for girls, boys and women with on-going anxiety, aggression, depression or 'profound stress'.



Adolescent Development and Participation

Approximately 25% of the residents of Za'atari camp are adolescents and youth between 15–24 years of age. The numbers are similar in host communities. The key challenges for Syrian adolescents are:

- Absence of adolescent-specific programming, especially vocational training, recreational, and cultural activities,
- Shortage of income generation opportunities,
- Limited support for adolescent mothers, including a lack of family planning information,
- Changing family relationships including increased domestic violence and authoritarian decision-making by parents,
- Lack of volunteer opportunities,
- Exclusion from camp planning processes.

“

We spoke on the phone and he would tell me he was fine, but I knew he wasn't. Sometimes I could hear the bombs, he would drop the phone and hide. I was so scared when my son was still in Syria.

Refugee woman now reunited with her son, 17, in Mafraq

”

“

The moment I stepped out of the bus that brought us here in Za'atari, I thought of my house in Syria, of my friends back home. I did not want to leave. I was forced by the bombings.

Boy, age 13, in Za'atari Camp

”

“

I have a strange feeling of being away from home. Everything is strange to us. I don't like it.

Boy, age 13, in Irbid

”

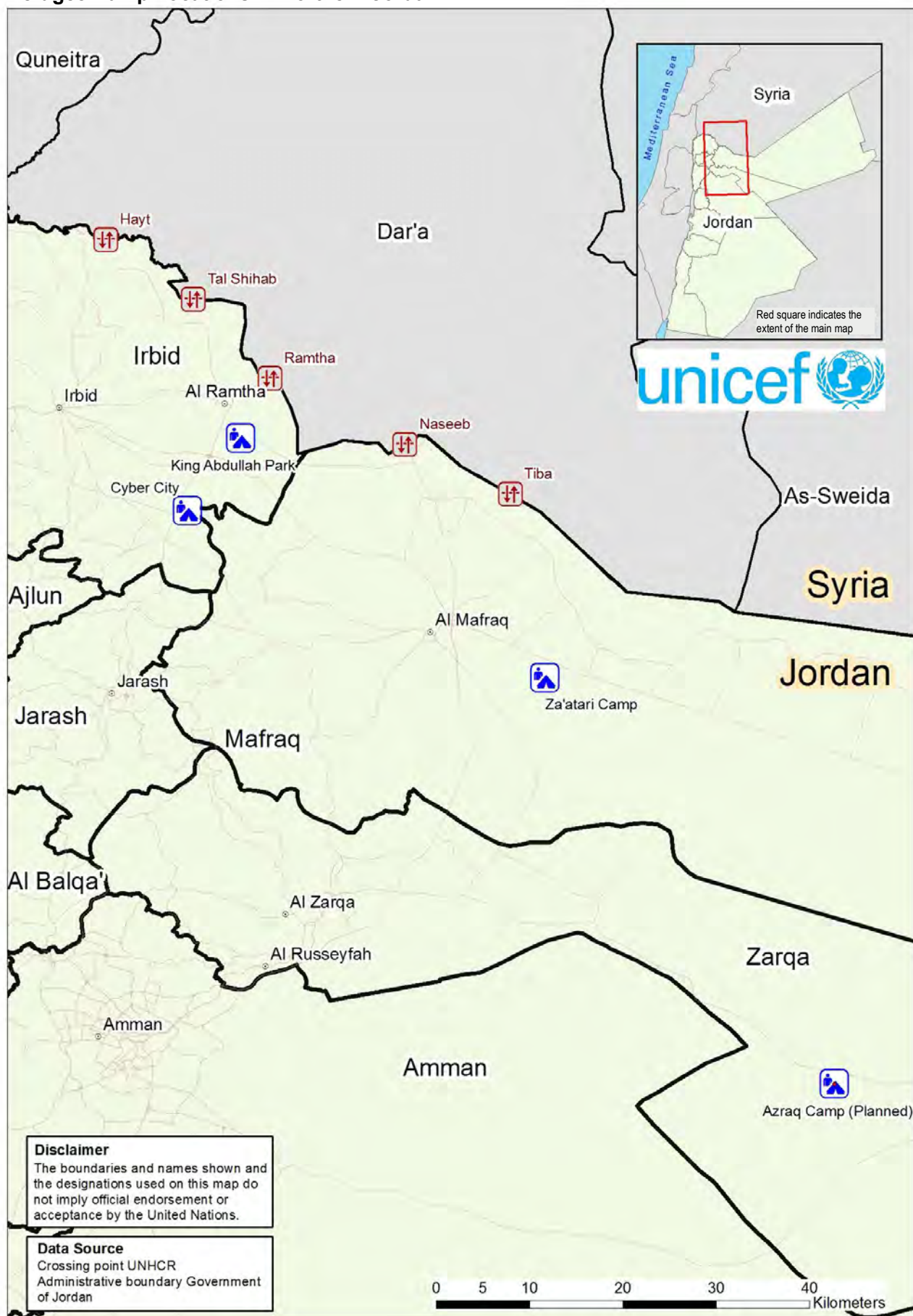


A calligraphic drawing of 'al ghourbeh', describing a sense of exile and feeling like a stranger, out of place.

Many children participating in activities in child-friendly spaces have expressed this feeling of 'al ghourbeh'.



Refugee Camp Locations in Northern Jordan



Source: UNICEF 2013

SHATTERED LIVES: CHALLENGES AND PRIORITIES FOR SYRIAN CHILDREN AND WOMEN IN JORDAN

Since the onset of the crisis in Syria in mid-2011, ever-increasing numbers of Syrians have sought refuge and assistance in neighbouring Jordan. As of 4 June 2013, there are 470,573 Syrian refugees in Jordan, of whom 53% are children below the age of 18.¹ The vast majority of Syrian refugees live in host communities in Jordan, mainly in the northern and central governorates. Approximately 120,000 Syrians live in Za'atari camp, Jordan's largest refugee camp; were it a city, Za'atari camp would be Jordan's fifth largest. Thousands of new refugees enter the country every week and new camps are due to open shortly.²

The Jordanian Government has shown tremendous hospitality and continues to maintain an open border policy. They have requested that UN agencies and INGOs share the burden of the response to this crisis that is now testing Jordan's coping capacity. New arrivals from Syria are transferred to refugee camps such as Za'atari, where UN agencies and INGO partners provide shelter and ensure access to basic services. Syrian refugees in host communities also receive assistance from UN agencies and INGOs, as well as CBOs and are granted free access to basic public services such as health and education by the Jordanian government.

A number of studies and rapid assessments of the situation of Syrian refugees in Jordan have been conducted over the last eight months and others are on-going. The majority focus on a thematic sector or on specific host communities. This report draws on the results of a wide range of these assessments and adds insights from UNICEF sector specialists, INGOs and refugees to develop a more holistic understanding. The voices of refugee children and adolescents living in Za'atari camp and host communities are also included in this report. Their opinions were captured through child-friendly participatory activities and focus group discussions.

Two overarching questions guided the development of this report:

- What are the key challenges in realizing the rights of Syrian girls, boys and women in Jordan?
- What are the priority recommendations for action in the following programme sectors:
 - (i) child protection and gender-based violence;
 - (ii) education;
 - (iii) water, sanitation and hygiene;
 - (iv) nutrition and health;
 - (v) mental health and psychosocial support; and
 - (vi) adolescent development and participation?

To the extent possible given the data available, three contextual lenses of analysis were used to disaggregate the different experiences of individuals: gender (female and male); age (younger and older children); and area of residence (Za'atari camp or host communities).

“

No matter how hard I try to explain, you can't realise what we went through in Syria. What is happening there has not happened anywhere else.

A refugee living in a women's shelter in Jordan with six children and two grandchildren

”



CHILD PROTECTION AND GENDER-BASED VIOLENCE



“

I have children of 10 years old working on my farm about ten hours a day.
If I don't hire the children, the father will not work for me either.

Farmer in Ghor

”

IN ZA'ATARI CAMP



The on-going conflict in Syria and the subsequent displacement of Syrians to Za'atari camp has resulted in the breakdown of traditional protective mechanisms and increased gender-based violence and abuse, neglect, exploitation and violence against girls and boys. Critical challenges in Za'atari refugee camp include: family violence; fear of sexual harassment and sexual violence; identifying and caring for unaccompanied and separated children; and the exclusion from services of some female-headed households, as well as children and women with disabilities. The extent of early marriage of Syrian girls below the age of 18 is not known but requires careful, on-going monitoring, particularly as economic conditions worsen. Child labour is a growing challenge in Za'atari camp but the nature of children's work and whether it is harmful to their well-being needs to be better understood. Some boys are involved in gangs in Za'atari camp. Allegations of recruitment of boys by armed groups from Syria needs to be followed up on.

Violence

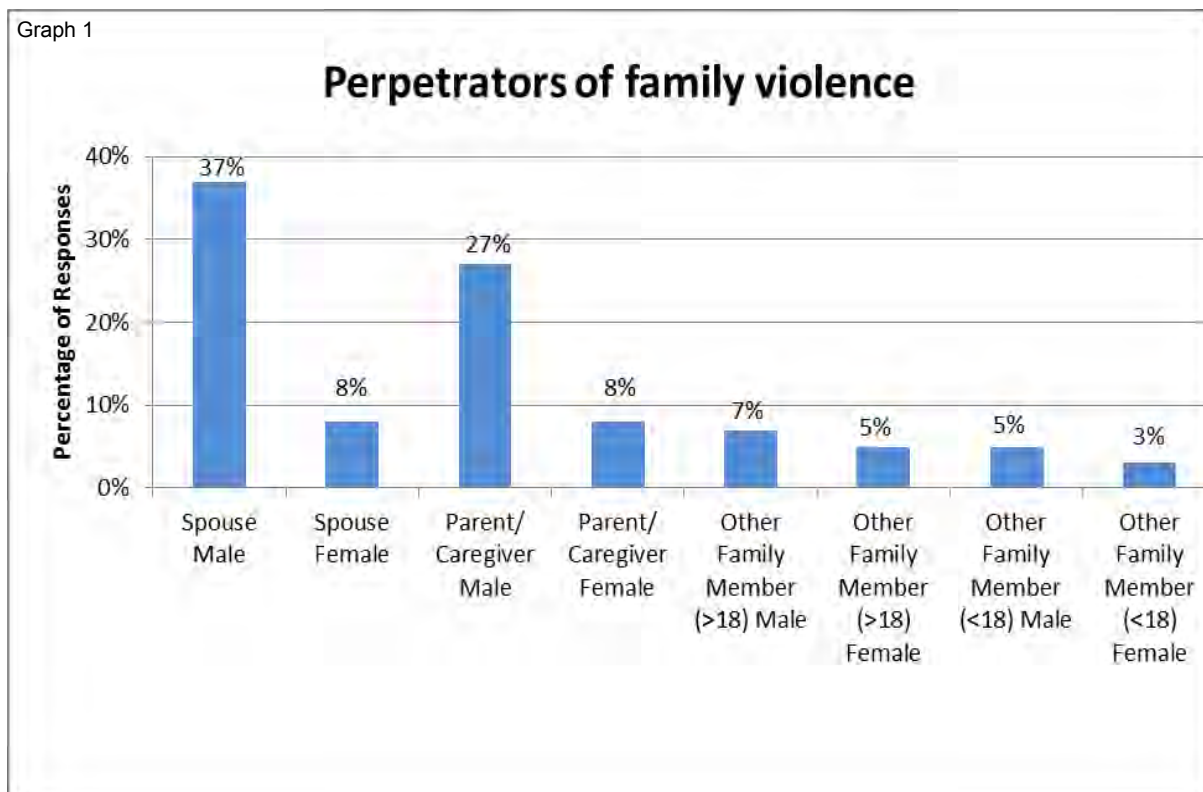
Syrian refugees and service providers consider domestic violence the most prevalent type of violence in Za'atari camp.³ According to adolescent girls, there has been an increase in domestic violence since they came to Jordan. Women and girls aged 12–18 are the most likely targets for domestic violence, but boys are also affected. Male spouses and male parents/caregivers are considered the main perpetrators as detailed in the diagram below. Domestic violence goes largely unreported in Za'atari camp as according to Syrian social norms, the realm of the home is 'private' and actions at home are not for public judgment.

Civil unrest is the second most prevalent form of violence in Za'atari camp mainly involving boys aged 12–18.⁴ According to Syrian mothers, boys are under threat of attack from the Jordanian army if they participate in camp demonstrations. The Jordanian Gendarmerie has arrested adolescent males during demonstrations in Za'atari camp and put them in detention. Instead of referring the adolescent males under 18 to the juvenile police department in keeping with the Convention on the Rights of the Child, they are referred to the State Security Court.

Criminal violence is the third most prevalent form of violence in Za'atari camp, including vandalism against communal infrastructure.⁵ Adolescent boys have reported that they have been asked by adults to steal from other tents.

The exact prevalence of sexual violence in Za'atari camp is unknown since it is rarely reported. Yet it is clear that many Syrian girls, boys and women experience sexual harassment and express concern about the threat of sexual violence. 'Unsafe' spaces identified by Syrian girls and women include homes/tents (due to a lack of locks, overcrowding with male relatives, and the lack of privacy), showers and latrines, especially at night, (due to poor lighting and broken locks), and communal areas such as kitchens (if men are present).

Graph 1

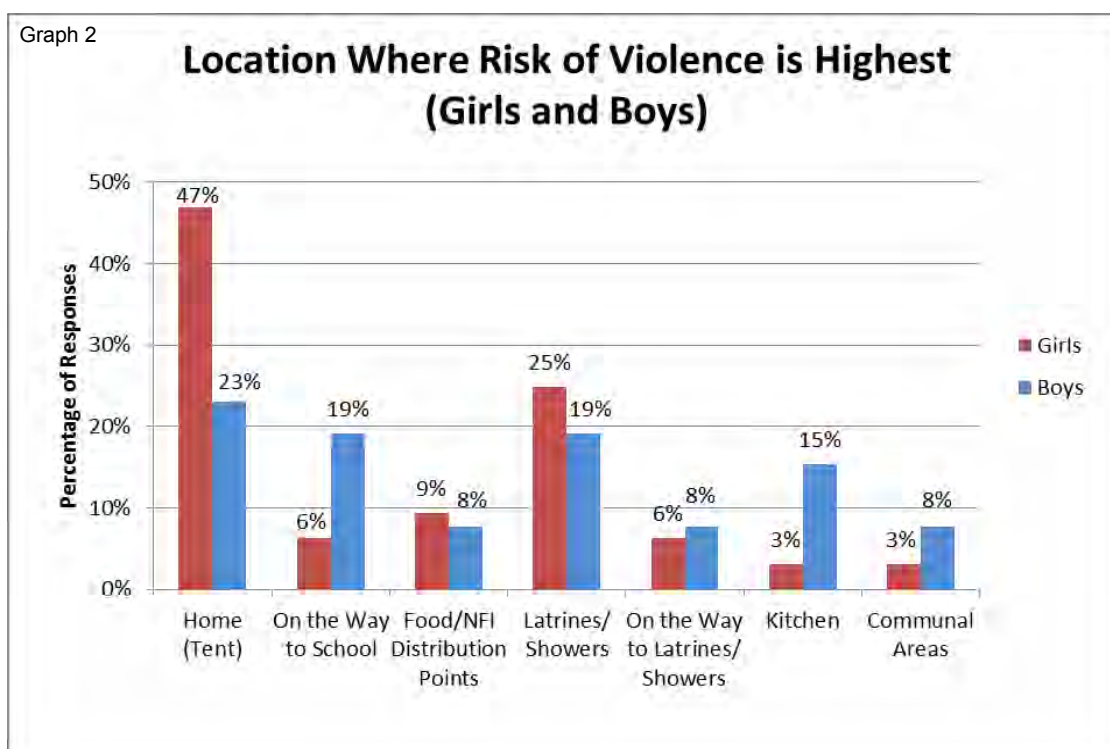


Source: Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp (January 2013).

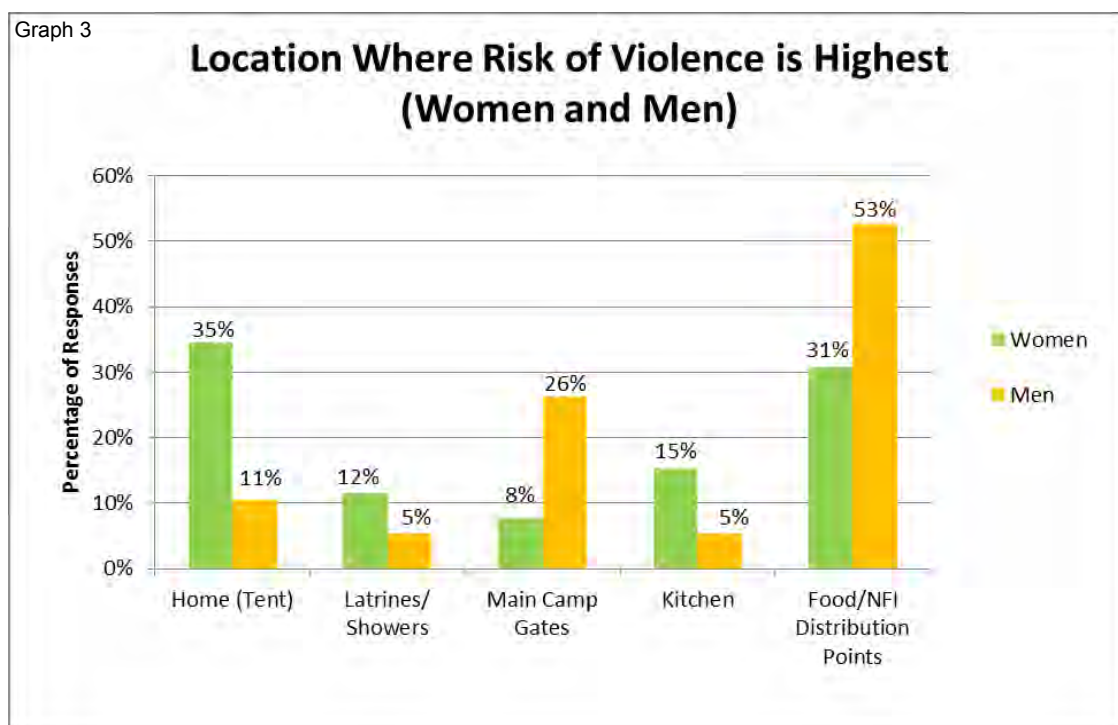
Syrian boys are at risk of violence in their homes/tents and in communal spaces such as latrines, kitchens and at the main camp gates and the camp's periphery. Boys are more at risk of violence on their way to school than girls.

The two graphs below highlight the locations where the risk of violence in Za'atari camp is perceived to be the highest for girls and boys according to refugees and service providers.

Graph 2



Source: Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp (January 2013).



Source: Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp (January 2013).

Syrian women are especially at risk of violence in their homes/tents and in food/non-food distribution lines – the latter is a particular concern for women from female-headed households as they have to queue at crowded distribution points where those collecting supplies for their families are predominantly males. The graph above highlights the locations where the risk of violence is perceived to be the highest for women, according to refugees and service providers in Za'atari camp.

Gangs

There are growing reports of gang activity in Za'atari camp involving mostly Syrian men but also some boys. Gangs are often associated with certain streets or areas within the camp. According to refugees and service providers, gangs control access to important resources such as caravans, play a role in determining who gets access to the vendors' area and dictate prices on the black market. According to Syrian men in a local child protection committee, gang members physically threaten those who challenge their authority.

“

We tried to talk to the boys (in the gang) but they started swearing big words not used by children. Their parents are not giving them attention. If you take a child and squeeze him to his limits, he is going to explode.

Father in Za'atari camp

”

Unaccompanied and Separated Children

The vast majority of children who have fled to Jordan from Syria came with family members. Unaccompanied and separated children⁶, identified through UNHCR registration, comprise 0.5% of the population, though the actual number is likely to be closer to 2%.⁷ 307 unaccompanied children (217 boys and 90 girls) and 323 separated children (213 boys and 110 girls) were registered with UNHCR in

Za'atari camp as of the end of March 2013.⁸ Out of the recent cases of unaccompanied children between February and the end of April 2013, 53% have been reunified with their families and alternative care arrangements have been found for 15 children.⁹



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Many unaccompanied and separated children in Za'atari camp left Syria because of the unsafe environment, including fear of conscription into the Syrian military or arrest for having family members in the opposition forces. In some instances, Syrian children travelled to Jordan on their own ahead of family members who stayed behind in Syria. In other cases, children came to Jordan to reunite with family already in Jordan. To a lesser extent, access to services such as education and health influenced the children to leave Syria and come to Jordan.

Identifying unaccompanied and separated children as they enter Za'atari camp is a significant challenge as many Syrian children travelling alone join unrelated families to cross the Jordanian border. After identification, rigorous verification of family links is required prior to reuniting the family. This is critical to prevent possible exploitation.

Finding interim care for unaccompanied and separated children in Za'atari camp has been challenging but foster care families have recently been identified, screened and approved. Efforts are now underway to formalise this process with the Jordanian government.

The 'bail-out system'¹⁰ and 'return buses to Syria'¹¹ both pose risks to unaccompanied and separated children but more information is required. If unaccompanied and separated children leave the camp under their own initiative, it is almost impossible to identify and support them afterwards.

Children Associated with Armed Groups

According to Syrian adults and children, many boys currently living in Za'atari camp were involved in armed groups in Syria.¹² Some adolescent girls participated by cooking for armed groups, particularly when they came to their houses. Boys are reportedly returning to Syria after using Za'atari camp as an interim source for medical treatment. Syrian refugees and service providers believe that boys returning to Syria to fight are doing so of their own volition. There have been recent allegations of recruitment of boys in the camp by armed groups coming from Syria and these are being monitored.

Early Marriage

Early marriage of girls under the age of 18 is practiced by many families in Syria where the legal age of marriage is 16 but where girls marry as young as 13.¹³ The extent to which early marriage occurs in Za'atari camp is unknown. There is anecdotal evidence of a shift from girls marrying boys their own age in Syria to girls marrying much older men in Jordan. There is also evidence to suggest that some Syrian families are delaying the age of marriage for their daughters given their unstable situation. According to Syrian girls and women, some families reject marriage proposals from Jordanian men and other nationalities, as they are disrespectful to their daughters. The bail-out system¹⁰ increases the risk of exploitation of Syrian girls, and early marriages may increase as the economic situation worsens. The practice of early marriage requires careful, on-going monitoring.

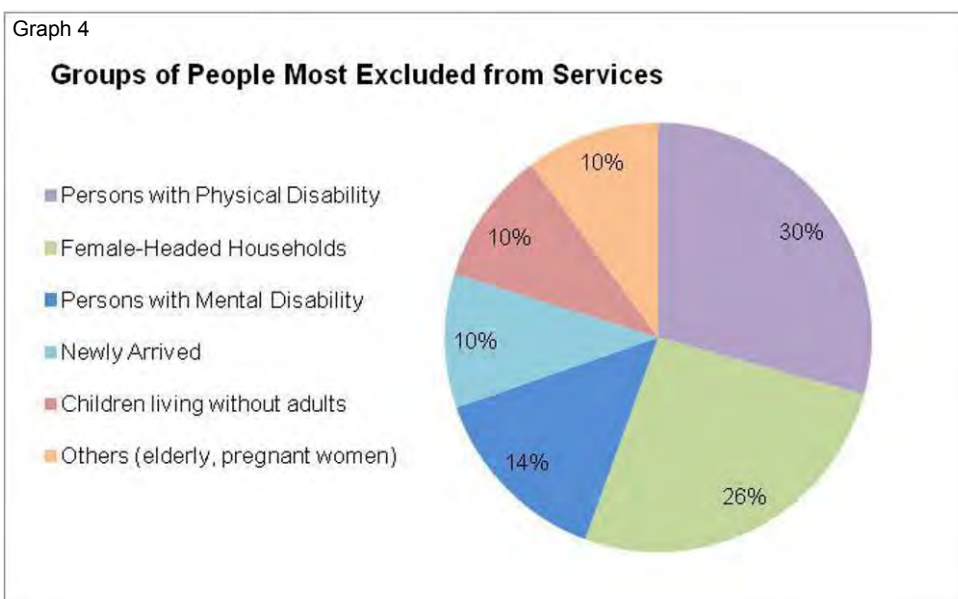
Child Labour

Child labour is common in Syria, especially in poorer areas, and is socially acceptable. As a result, some Syrian parents in Za'atari camp are encouraging their children to work since it is easier for them to find jobs than adults.

There is evidence of children working within Za'atari camp but the lack of adequate monitoring mechanisms does not allow service providers to estimate the extent of this or identify the worst forms of child labour. Examples of the type of work done by Syrian boys include selling goods, begging, cleaning, construction, and standing in line for adults to receive food or non-food items. To a much lesser extent, there are examples of Syrian girls selling goods, begging and cleaning in Za'atari camp. Although some Syrian adults report that children are being taken away from the camp for work purposes, Syrian adolescents argue that their attempts to find work in Za'atari camp are not generally accepted. Syrian children's perspectives on their work are currently unknown. Any significant programming intervention would require greater understanding of whether children consider their work harmful or helpful to their well-being and self-esteem.

Access to Services

The lack of gender-disaggregated services was identified as a barrier to accessing services by a minority of Syrian girls and women. They also cited 'denial of permission by family members' and the 'distance to services' as other barriers. Female headed households and persons with mental or physical disabilities were considered the groups most excluded from accessing services in Za'atari camp as detailed in the figure below.



Source: Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp (January 2013).

For mothers, the lack of access to health services for children with disabilities is especially difficult. There is no assessment on disability when entering Za'atari camp, nor is there a point of referral for people with disabilities in the camp.

IN HOST COMMUNITIES



There is evidence of gender-based violence and abuse, neglect, exploitation and violence against Syrian children in host communities in Jordan, although there is less information available than in Za'atari camp.

Child labour appears to be widespread, especially for younger boys. In the Jordan valley (Ghor), Syrian boys and girls work long hours on farms alongside their parents, in exchange for the right to live on these farms. In Ghor, out of the 4,300 kindergarten-aged and school-aged Syrian children, 44% are working on farms.¹⁴ In Irbid, children are employed in construction, food services, the retail industry and manufacturing. As in Za'atari camp, children's perspectives on whether their work is harmful or helpful to their well-being are not yet known.

Early marriage is a risk for Syrian girls in various host communities in Jordan. Some families arrange early marriage as a means of 'protecting' their daughters in what they perceive to be an unsafe environment. Other families are using early marriage as a means of gaining economic support from their new sons-in-law.

Another risk in host communities is the recruitment of boys by armed groups from Syria. Recent allegations of recruitment of boys in Northern Jordanian cities have not yet been verified and are currently under investigation.

There are reports of domestic violence against women and children in various host communities in Jordan but information is limited. Lack of freedom of movement on the part of many women and children prevents those affected by violence from accessing support, including medical and mental health services.

Lack of information about available services such as education and health care is a significant challenge for many Syrian women and children, especially in southern Jordan where refugees appear to have limited contact with UNHCR or other international organisations.

I was arrested in Syria. I was out buying bread for the house and they arrested me. When they checked my papers, I was in the book. After hitting me, they took me to jail. I stayed four hours passed out from being hit. After I woke up they electrocuted me... They sent me to the court and assigned a lawyer but he was on their side. I was sent to the judge. He was a good person and he treated me as his child and he let me go. I was ready to be executed. It was a miracle. We stayed for one month and then came to Jordan with my family... If our city goes back to Free Syria, we will go back there.... Free Syria comes to Jordan to tell people what is happening, to see their relatives. Every week or 2 weeks... They told me my father died... I may go back when the road opens.

Boy, age 14, in Irbid



KEY RECOMMENDATIONS

Improve identification of and outreach to the most vulnerable Syrian children and women not being reached currently by programming, including survivors of gender-based violence, unaccompanied and separated children, children with disabilities and children at imminent risk of abuse, neglect, violence and exploitation.

Ensure that children engaged in the worst forms of child labour and their families receive targeted assistance and support, including access to education and alternative livelihoods.

Ensure that the practice of early marriage is addressed through a community-based approach, in particular through the involvement of women, community and religious leaders.

Provide sustainable solutions for boys and girls at risk of recruitment or use by armed groups through vocational training, life skills, formal / informal / non-formal education and psychosocial support, and engage state and non-state actors to help prevent recruitment.

Ensure all child protection related interventions for Syrian refugees in host communities are linked to and help strengthen national and sub-national child protection systems in Jordan and help build the capacity of the Jordanian government to respond to child protection risks.

Empower women to take an active part in the prevention of gender-based violence through community-based initiatives on early marriage and domestic violence. Ensure access to services for married adolescents and survivors of domestic violence.

Continue to provide Code of Conduct training and ensure all volunteers and staff of agencies working in camps have been trained and signed Code of Conduct agreements.

Conduct awareness raising and training for humanitarian staff on the protection of refugees from sexual exploitation and abuse and create an effective complaint mechanism and response system.

Build and strengthen community-based child protection committees and empower them with the knowledge and skills to protect children and respond to neglect, abuse, exploitation and violence including through referral to appropriate agencies. Link community-based child protection committees to other existing structures such as parent-teacher associations, school councils, child friendly spaces.



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EDUCATION



“ I have told other girls my age that they should go to school in the camp, otherwise they will lose a year. Some have registered at the school, but they are not going to class anymore. They tell me that they will go back to school when they return to Syria. But I say: ‘what if we stay here for a long time? You would be wasting your life.’ They can’t answer me. They are not taking my advice.

Girl, age 13, in Za’atari camp

IN ZA’ATARI CAMP



In principle, all Syrian girls and boys in Za’atari camp have access to education, except for the final year of secondary schooling. In practice, the vast majority of girls and boys in the camp do not attend school. For those who do, it has provided a return to normalcy and important learning opportunities. However, a child’s ability to learn is affected by poor nutrition, crowded classrooms, corporal punishment and bullying and violence between students. School facilities in Za’atari camp need repair. Jordanian teachers feel unsafe in Za’atari camp and are often inexperienced with many of them having only recently graduated.

School Attendance

Formal education is provided in Za’atari camp by the Jordanian Ministry of Education and UNICEF in two education complexes with a capacity of 5,000 students each covering all grades except the final year of secondary school.¹⁵ These schools are not currently operating at full capacity. 76% of girls and 80% of boys between 6 and 18 years old do not attend school.¹⁶ Rates of school attendance are at the same low level for girls and boys in primary school, but are even lower for boys at the secondary school level.

Table 1	Primary school aged children			Secondary school aged children			Total	
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls
Attending	23%	23%	23%	15%	24%	20%	20%	24%
Not attending	77%	77%	77%	84%	76%	80%	80%	76%

Source: Joint Education Needs Assessment, Za’atari Refugee Camp, Jordan (April 2013).

According to parents, the main reason why children do not attend school is lack of interest. They also cite family expectations of returning soon to Syria and violence against children en route to and from school. However, the majority of primary and secondary school-aged children themselves report that they would like to go to school. They say their key reasons for non-attendance (or drop out) are violence and harassment en route to and from school and between students at school, corporal punishment, insecurity about leaving their family even for a few hours, having to help at home or work to earn money, the distance to school and the lack of appropriate toilets.

There are indications that children with disabilities generally do not go to school in Za’atari camp. According to parents, obstacles include the shortage of wheelchairs and other physical aids, lack of physical accessibility at schools, fear that other children will not accept their child’s disability and parents’ own belief that education is not important for their children.



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66% of children in Za'atari camp lost less than three months of schooling before arriving while 23% lost more than a year.¹⁷ Boys have generally been out of school longer than girls. The longer the disruption, the less incentive to re-enrol – only 7% of the children who have lost more than a year are currently in school in Za'atari camp.¹⁸

Compromised Learning Environment

The learning environment at schools in Za'atari camp is negatively affected by many factors. Some girls and boys are coming to school hungry, which affects their ability to concentrate. Harassment and violence between students at school is a serious problem, especially among boys. Jordanian teachers and Syrian assistant teachers use verbal abuse and corporal punishment against their students, especially primary school age boys. Large class sizes are hard for teachers to manage and prevent follow-up with individual students when they fall behind. The constant flow of visitors and media to classrooms is disruptive. Some students lack appropriate clothing and shoes for school. Without access to the internet, Syrian children are unable to do the research required by the Jordanian curriculum. After being occupied by refugees as a temporary shelter, school buildings are in need of repair.

Absence of final year of education

Only grades 1–11 are available in Za'atari camp, as the Ministry of Education does not allow children to enter grade 12 without a formal certificate that shows completion of grade 11 in Jordan. Without grade 12, Syrian students cannot take their final secondary school exam, a prerequisite to higher education. Plans are underway to enable grade 11 students currently studying in Za'atari camp to start grade 12 in the 2013/14 school year.

Teachers' Concerns

Some Jordanian teachers do not feel safe working in Za'atari camp and are experiencing 'constant anxiety'. Jordanian teachers report being threatened and attacked by students as well as suffering from tear gas inhalation during camp protests. Jordanian teachers find transportation to the camp costly and difficult, and some of them have had their cars damaged during camp protests. However these teachers have a crucial role to play, given that the Jordanian curriculum needs to be instructed by Jordanians so that children are eligible to receive certification by the Ministry of Education.

For every 2 Jordanian teachers, there is approximately one Syrian assistant teacher. Syrian teachers are frustrated that they are only allowed to work as assistants in Za'atari camp given they are fully qualified teachers and may have more experience than the Jordanian teachers.

Many of the Jordanian teachers are new recruits and their inexperience means they feel ill equipped to provide psychosocial support to their students or deal with large class sizes. Teachers want more training, better collaboration between Jordanian teachers and Syrian assistant teachers and active parent engagement in schools.

“ **I want to register to go to school next year. Older boys stand in front of the school and I am not familiar with that. I'm afraid to walk alone to school.** ”

Girl, age 13, in East Amman

IN HOST COMMUNITIES



There is much less information about education for Syrian children in host communities compared to Za'atari camp, but key challenges are evident.

All Syrian children have free access to public schools across the country. As of June 2013, this grace period will end and children will need to be officially registered with UNHCR to attend school. The number of Syrian children registered in public schools in host communities increased from 7,400 children in May 2012 to over 42,000 in April 2013.¹⁹

However, the majority of Syrian girls and boys in host communities are not attending school. In the Northern Governorates of Jarash, Irbid and Balqa, 50% or more of school-aged Syrian children are not attending school.²⁰ In the Jordan Valley, up to 95% of Syrian girls and boys do not attend school and an estimated 40% of these children work on farms.²¹ It appears that many Syrian families lack information about the education services available or believe they will soon be returning to Syria. Other reasons given by families across Jordan to explain their children's non-attendance at school include the lack of available spaces in local schools, domestic or other work commitments, transportation costs, and the distance to schools, especially for girls.

For Syrian children who do attend schools in host communities, there are challenges. According to Syrian boys in Irbid, registering for school was a complex and demanding process, involving visits to several different schools.

Syrian boys and girls have reported discrimination against themselves and their parents by teachers and principals. Corporal punishment is also widespread in Jordanian schools and as a result, experienced by many Syrian students.

“ **The Arabic teacher is mean. He hits us with a pipe. He hits us in the hand when we come late to school.** ”

Boy, age 11, in East Amman

“

My father went to ten schools. Finally, I was registered. They referred us to one school with all the Syrian children. Now they want to move us to another school farther away. When we go to school, no-one respects us. My father wanted to cry because the principal doesn't respect us.

Boy, age 14, in Irbid

”

KEY RECOMMENDATIONS

Continue dialogue with the Government of Jordan to eliminate their requirement for Syrian children to register with UNHCR or the Ministry of Interior prior to public school admission in host communities.

Advocate with the Ministry of Education to institutionalise placement exams for Syrian students to ensure they are placed in the appropriate grade levels. Dialogue with the Government of Jordan about allowing Syrian children to complete their final year of secondary schooling if they succeed in their placement exams.

Continue outreach on school enrolment in Za'atari camp, with a particular focus on areas with the highest number of children not attending schools and new arrivals. Scale up outreach efforts to Syrian families, school staff and local authorities in host communities to facilitate registration of Syrian children in schools. Involve local child protection committees and religious leaders in outreach campaigns and help increase awareness among parents of the formal recognition of school certificates obtained in Jordan.

Protect children from violence en route to and from school. For example, mobilise Syrian adolescents and local child protection committee members to accompany children to school.

Advocate with the Ministry of Education to deploy supervisors and counselors to Za'atari camp schools as soon as possible. Enforce zero tolerance of violence at schools and train all school staff on positive discipline and non-violent classroom management. Develop a code of conduct for all school staff.

Address aggressiveness in students by increasing the number of recreational activities offered, strengthening psycho-social support services and developing a school level behavioural modification programme which involves school staff, students and parents.

Support the Ministry of Education in their planning for increasing numbers of students in public schools in host communities. Support an increase of double-shifted schools and the installation of prefabricated classrooms while maintaining the quality of education.

Ensure relevant, on-going teacher training including for newly recruited teachers for both camps and host communities.



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Support the Ministry of Education in establishing services for inclusive education for children with physical, sensory, intellectual or mental health impairments and strengthen referrals from schools to psychosocial services.

Provide Syrian children with basic school supplies in host communities and continue to support the distribution of school supplies in Za'atari camp. Advocate with the Ministry of Education to streamline the provision of textbooks.

Advocate with donors to dedicate resources to informal and non-formal education for all children who are not involved in formal education.

“

I came from Dar'a three months ago with my three kids. I was scared of having my children go to school as I was alone and felt insecure. But when my husband followed us later, he was mad that our children were not in school yet. It's soothing now to know that my kids can continue their schooling, as my husband and I believe in education.

Mother accompanying her daughter to public school in Irbid

”



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WATER, SANITATION AND HYGIENE



“

We are worried about using the toilets because they can be dirty and there may be diseases. But the drinking water seems clean and available.

Girl, age 16, Za'atari camp

”

IN ZA'ATARI CAMP AND HOST COMMUNITIES



The majority of Syrian refugees in Za'atari camp and host communities have access to sufficient water for their family needs. Despite rigorous testing to ensure the safety of water, Syrians in Za'atari camp believe it is of bad quality and are increasingly buying their drinking water. Many Syrians in host communities also buy their drinking water. The strain on public water supply systems in host communities is resulting in increasing tensions between Syrians and Jordanians. Keeping the public toilet and shower units in Za'atari camp clean is a challenge and the disposal of wastewater is costly. A high proportion of Syrian women and children under the age of 12 do not feel safe using the public showers and toilet facilities in Za'atari camp at night. There is a growing number of private, basic washing facilities and open pit toilets near tents resulting in a new challenge of how best to dispose of untreated wastewater. There continues to be a serious lack of hygiene related products such as soap for many Syrian refugees in Jordan, especially those living in Za'atari camp. The deteriorating security situation in Za'atari camp and increasing vandalism and theft²² has resulted in over \$1 million dollars of damage and has meant service providers are reluctant to install new infrastructure such as additional lighting.

Water

The majority of Syrian refugee families in Za'atari camp have sufficient water for their family needs, ranging from 70–94% according to a perception survey.²³ Water supply in Za'atari camp has been reduced from 50 litres per person per day to 35 litres, because of increasing demand and more efficient water use. 35 litres still exceeds the Sphere indicator of 15 litres of water per person per day as minimum standard in humanitarian response operations.²⁴ 81% of Syrian families in host communities have access to sufficient water for family needs.²⁵

All water coming into Za'atari camp is tested for residual chlorine to ensure it is potable and safe for human consumption before trucks are allowed to distribute the water in several storage tanks. Despite these measures, there is a problem in Za'atari camp with 63% of Syrian refugees believing the water to be of 'bad' or 'very bad' quality.²⁶ 43% of Syrians in Za'atari camp believe that water is the main cause of illness in the camp.²⁷ This perception likely stems from the fact that most Syrian refugees are unaccustomed to the taste of chlorinated water and are unfamiliar with the taste of water from the Za'atari aquifer. As a result, over 50% of the refugees in the camp are now buying water for drinking purposes.

Syrians in host communities also buy their drinking water. The cost of buying bottled water was identified by 54% of families in host communities as 'a main water problem'.²⁸ Syrian families living in rural and urban areas in the Northern Governorates of Jordan cited high food and water costs as one of the top reasons for being unable to live independently for more than two months after February 2013.²⁹

There are indications that public water supply systems in host communities are under severe stress, serving up to 50% more people in certain areas as a result of the refugee population.³⁰ For example, the influx of Syrians refugees to Mafraq has increased the city's population by 65% and resulted in a water

shortage – demand is at 700 cubic metres per hour, while supply is approximately 300 cubic metres.³¹ In some locations, low water availability leads to increased tensions between Syrians and Jordanians.



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Sanitation

WASH facilities in Za'atari camp are basic toilets and shower units with an approximate ratio of 1 toilet per 50 people. In heavily congested areas of Za'atari camp, overuse of WASH facilities is speeding their degradation. Disposal of wastewater from the WASH facilities is a challenge as it has to be collected and disposed of at a treatment plant 35 kilometres away from the camp. Efforts are made to ensure each WASH facility is equipped with one toilet and shower with disability access including a wheelchair ramp but this has not always been possible. This is becoming less of a problem as WASH facilities are upgraded in the older parts of Za'atari camp and Syrians with disabilities are increasingly provided with portable toilets known as commode chairs.

A high proportion of Syrian women and children do not feel safe using WASH facilities in Za'atari camp at night. This includes 82% of women, 28% of girls age 12 and over, and 39% of boys and girls age 11 and under.³² Women and children are fearful of potential harassment and the distance to WASH facilities.

As a result of women and children's fear of using WASH facilities at night and a general dislike for large WASH blocks among some Syrian refugees, private, basic washing facilities and open pit toilets are being built by refugees near to or inside their tents. This is happening especially in the older parts of Za'atari camp and is causing a new challenge of how best to dispose of untreated wastewater. The government of Jordan does not currently allow for on-site disposal of wastewater out of concern for contamination of the critical fresh water aquifers underlying Za'atari camp. The private toilets and occurrences of 'open defecation' in the camp are an increasing public health risk for refugees.

Hygiene

28% of families in host communities reported that they did not have soap and/or hygienic products.³³ In Za'atari camp, the majority of households had a shortage of hygiene related products as detailed in the table below.

Table 2: Perceived shortages of sanitation and hygiene products in Za'atari camp

Item Shortage	Item Shortage?		Buying Item?	
	N° cit.	%	N° cit.	%
Washing powder	350	90.0%	270	69.4%
Soap	340	87.4%	267	68.6%
Sanitary napkins/ towels/diapers	55	14.1%	46	11.8%

Source: Za'atari Baseline KAP HH Survey (November 2012).

Sample size: 389 households in Za'atari camp



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Only 60% of Syrians in Za'atari camp believe that 'people will get sick' and 'diseases will spread' if everyone stops washing their hands.³⁴ Observations of hand washing practices in Za'atari camp in November 2012 reveal 'room for improving' hygiene related knowledge among Syrians, including better understanding of the critical link between hand washing and diarrhea. 54% of Syrians in Za'atari camp reported not being able to wash their hands with soap, usually due to a soap shortage.³⁵ The table below shows that Syrian children and women in Za'atari camp are washing their hands (with or without soap) less frequently than Syrian men.

Table 3: Hand washing practices of women, men and children in Za'atari camp

% Overall hand washing	73.6	% Overall hand washing with soap	49.4
% Male hand washing	90	% Male hand washing with soap	59.4
% Female hand washing	70.5	% Female hand washing with soap	55.3
% Children hand washing	65.5	% Children hand washing with soap	33.8

Source: Za'atari Baseline KAP HH Survey (November 2012). Sample size: 389 households in Za'atari camp

Married female adolescents in Za'atari camp identified the lack of essential clothing for themselves – for example, a second pair of underwear – as another hygiene problem. Without a second set of clothing for their children, adolescent mothers in Za'atari camp struggle to keep their children clean and healthy. The lack of soap and other hygienic products in Za'atari camp is clearly a supply issue, but these basic items are available in the camp's market if refugees have the means to buy them.

Theft and Vandalism

The deteriorating security situation in Za'atari camp and increasing vandalism and theft³⁶ has had a negative impact on the WASH sector. Extensive vandalism and theft at WASH facilities has amounted to over \$1 million dollars in cumulative damages and losses.³⁷ It has also made service providers cautious about installing new infrastructure, such as more lighting in WASH facilities.

KEY RECOMMENDATIONS

Advocate with the Jordanian government for a greater security presence in the camp to safeguard investments of physical infrastructure in the WASH sector.

Retain intense focus on WASH sector in Za'atari camp, with a strong emphasis on the need for water conservation.

Dialogue with the Government of Jordan about the growing problem of untreated wastewater from private, basic washing and open pit toilets in Za'atari camp and agree on treatment options for on-site wastewater.

Scale up hygiene promotion activities to reach all refugees in camps and continue outreach to refugees in host communities.

Continue the rigorous quality monitoring of the water being delivered to camps to forestall possible disease outbreaks.

Continue to work with communities and partners to improve solid waste management in Za'atari Camp to ensure a clean and safe environment for refugees.

Mobilise the community in camps to ensure WASH facilities are well maintained through the establishment and support of local WASH committees. Increase awareness about the importance of water conservation and good hygiene with children and families in schools, child and adolescent friendly spaces and infant and young child feeding centres.

Work with camp management to ensure sufficient lighting in strategic/insecure areas in camps, in particular around common areas such as WASH facilities and kitchens.

Ensure access for children and adults with disabilities to WASH facilities or provide portable toilets.

Address WASH related challenges for the most vulnerable households in host communities through the identification of and targeted distributions to vulnerable Syrians including female-headed households and Syrians with disabilities.

Rehabilitate and install gender appropriate WASH facilities for boys and girls in schools, child and adolescent friendly spaces, and public spaces in camps and host communities.



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NUTRITION AND HEALTH



“

My sister has trouble with her ears and hears only loud voices. She can't go to the health centre because we are not registered. I keep telling the teacher to put her in front to hear well, but she is still behind the others. My father and brother are sick and can't get medical help.

Girl, age 11, in East Amman

”

IN ZA'ATARI CAMP AND HOST COMMUNITIES



There is no 'nutrition screening' of Syrians at the points of entry into Jordan. As of November 2012, the public health significance of the Global Acute Malnutrition rate in Syrian children was not 'critical' but 'poor' according to World Health Organisation classifications. However, children and women's nutrition is likely to be deteriorating as a result of several factors. Poor breastfeeding and infant and young child feeding practices among Syrians may result in an increase in chronic malnutrition rates in children. The combination of malnutrition and infectious diseases in children can result in higher risks of health complications, including death. Syrian children have benefitted from routine immunization programmes in Jordan but the extent of this benefit is unknown. Given the recent cases of measles in Jordan and high risks of contagion, efforts will continue to be needed to immunise Syrian children against measles and polio. The majority of Syrian refugees in Jordan have access to health services but it remains difficult for some Syrians in newer areas of Za'atari camp and some unregistered refugees in host communities.

Malnutrition in Children and Women

5.8% of children under 5 years in Za'atari camp have Global Acute Malnutrition (GAM) compared with 5.1% of children in host communities.³⁸ This is considered 'poor' by World Health Organisation classifications. An alarming number of children in Za'atari camp are at risk of acute malnutrition – more so than children living in host communities. GAM rates above 10% are considered serious to critical by the international community and as a result, the 'at risk' population of Syrian children requires close monitoring. There is also an increasing number of Syrians with disabilities with acute malnutrition.

Table 4

ACUTE MALNUTRITION IN CHILDREN UNDER 5 YEARS			
Survey area	Host communities (8–24 October 2012)	Za'atari camp (4–13 November 2012)	Classification of public health significance
Global Acute Malnutrition	5.1%	5.8%	Critical: if $\geq 15\%$ Serious: 10 - 14.9 % Poor: 5 - 9.9%
At Risk Acute Malnutrition	4.6%	5.6%	

Source: Inter-Agency Nutrition Assessment Syrian Refugees in Jordan Host Communities and Za'atari Camp (January 2013).

In Za'atari camp, 6.1% of women aged 15–49 years are acutely malnourished, with 1.1% severely malnourished.³⁹ In host communities, 6.3% of women of reproductive age (15–49 years) are malnourished, with 0.9% of them severely malnourished.⁴⁰ Although the overall nutrition situation for women is comparable between Za'atari camp and host communities, malnutrition is highest among younger women (age 15–19 years old) in Za'atari camp, while women age 25–29 are the most affected in host communities.

It is very likely that the nutrition situation of Syrian children and women has deteriorated since November 2012 as a result of several aggravating factors including the risk of food insecurity, lack of food diversity, a reduction in cash assistance programmes and ever increasing numbers of refugees putting pressure on existing resources.

Breastfeeding and Infant and Young Child Feeding

According to World Health Organisation guidelines, babies under six months old should be exclusively breastfed and breastfeeding should continue until two years of age. 49.6% of Syrian children less than two years old in Za'atari camp are still breastfed by their mothers, with rates of 42.7% of Syrian children in host communities.⁴¹ According to best practices, complementary feeding for breastfed children over 6 months of age involves solid food adapted for their age, five times a day or more. Only 7.9% of mothers/caregivers in Za'atari camp and 13.3% of mothers/caregivers in host communities are following these best practices.⁴² Poor food practices may result in an increase in chronic malnutrition in Syrian children.



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Diseases in Children

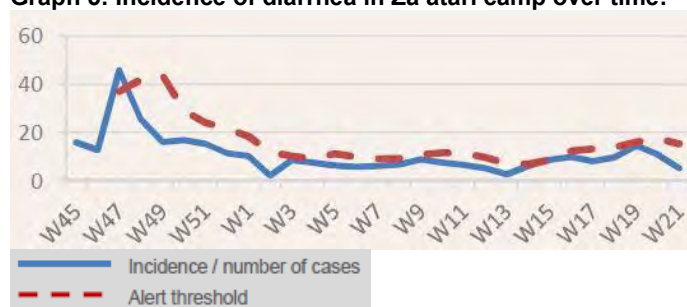
Respiratory tract infections and diarrhea are the most common diseases in Syrian children in Za'atari camp as highlighted in the table below.

Table 5

New cases of disease, week 15 (6–12 April 2013)	Age 0–4		Total < 5	Age 5–17		Total 5–17	Total 0–17	% by cause 0–17
	M	F		M	F			
Upper Respiratory Tract Infection	563	552	1115	617	643	1260	2375	29%
Influenza-like illness	175	113	288	215	187	402	690	9%
Lower Respiratory Tract infection	81	92	173	121	123	244	417	5%
Watery diarrhea	321	231	552	108	111	219	771	10%
Bloody diarrhea	30	22	52	6	4	10	62	1%
Skin infection	62	64	126	57	55	112	238	3%
Eye infection	67	60	127	55	38	93	220	3%
Dental Conditions	8	29	37	49	68	117	154	2%
Intestinal Worms	30	25	55	15	20	35	90	1%
Acute Jaundice Syndrome	11	15	26	19	19	38	64	1%
Measles	1	1	2	0	0	0	2	0%
Tuberculosis (suspected)	0	0	0	0	0	0	0	0%
Fever of unknown origin	10	16	26	2	0	2	28	0%
Sexually Transmitted Infection (STI)	0	0	0	0	0	0	0	0%
Other	719	726	1445	767	784	1551	2996	37%
Total:	2078	1946	4024	2031	2052	4083	8107	100%

Source: UNHCR Health Information System, Za'atari Camp, Week 15 (6–12 April 2013).

However, rates of diarrhea in children have decreased over time and even stabilised in recent weeks as indicated in the following diagram.

Graph 5: Incidence of diarrhea in Za'atari camp over time:

Source: UNHCR Health Information System, Za'atari Camp (9 Nov 2012 to 24 May 2013)

Malnourished Syrian children are more susceptible to infectious disease because their immunity is poor and if they get an infectious disease, their nutritional status will deteriorate. The combination of malnutrition and infectious disease can result in higher risks of health complications for children, including death.

Immunization

Routine childhood immunization in Jordan, known as the Expanded Programme for Immunization, is available to Syrian children in camps and host communities. Syrian children have benefitted from this programme, but the extent of this benefit is unknown. Recent campaigns in Za'atari camp and upcoming campaigns in host communities to vaccinate thousands of Syrian children against measles and polio are important given how common and contagious these diseases are. As a result of several recent cases of measles in Jordan and the measles outbreak in several neighbouring countries, a new national immunization campaign is planned to vaccinate all Jordanian and Syrians under the age of 30 against measles and all children under the age of 5 against polio.

Access to health services

More than 90% of families in Za'atari camp had access to free health services as of November 2012.⁴³ Despite the opening of a paediatric clinic, health clinics for mothers and children are lacking in Za'atari camp. Most of the primary health care centres are also in the older part of the camp making it difficult for some refugees living in the newer areas of Za'atari camp to visit them. This is especially true for women and children with limited mobility.

As of November 2012, 79% of Syrian refugees in host communities had access to free health services – either public health facilities of the Ministry of Health or international or national non-governmental organization clinics.⁴⁴ However, some unregistered refugees are reportedly denied access to health services.



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KEY RECOMMENDATIONS

Continue to promote breastfeeding for children up to the age of two and limit access to formula in Za'atari camp for medical exceptions.

Reach all mothers with children below the age of two with education about good infant and young child feeding practices, as well as fortified foods.

Ensure all Syrian children have access to routine immunization in Jordan and support the national campaign against measles and polio. Support the introduction of the measles and polio vaccine at points of entry into Jordan. Assist the Ministry of Health in replenishing their stocks of vaccines.

Support the capacity building of the Ministry of Health and other health providers in Jordan on the Integrated Management of Childhood Illnesses.

Create new health centres in Za'atari camp to ensure better access for all Syrian refugees and improve outreach to Syrians in host communities with information about available health services in Jordan.

Establish dedicated mother and child health centres in camps.

Finalise the protocol on the prevention of and response to cholera outbreaks in camps.



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MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT



“

We should not tell our mother everything. Our mother is crying all the time. We have three older sisters in Syria and they are alone there. Our father died in Syria and our brother is fighting with the opposition.

Girl, age 11, in East Amman

”

IN ZA'ATARI CAMP AND HOST COMMUNITIES



Events experienced in Syria and subsequently in Jordan have had a significant impact on the mental health and psychosocial well-being of Syrian girls, boys and women.⁴⁵ Grief, fear, anger, depression and stress are to be expected given the crisis. While it is likely that many Syrians will recover over time drawing on personal coping skills and a supportive environment, efforts are required to help create such a supportive environment and to provide additional, specialised assistance for those with on-going mental health problems. Mental Health and Psychosocial Support (MHPSS) is currently strongest in 'focused, non-specialised supports', although some experts have queried the quality of this support. Greater attention should shift instead to 'community and family support'.

Psychosocial concerns among children and women

While many Syrian families in Jordan have good relations with neighbours and access to community networks, almost all families struggle with feelings of isolation and 'al ghourbeh – a sense of exile and of being a stranger'.

Exacerbated levels of aggression are a significant problem in some Syrian children. This often manifests itself in physical fighting between children. Other Syrian girls and boys show signs of being disconnected from their friends and family.

Some Syrian children show signs of profound stress. A group of girls aged 11–14 in Za'atari camp expressed feeling under constant threat and being unable to stop replaying memories of violent events in Syria, including shelling and scenes of death.

Parents recognise that their children have changed but may mistakenly seek physical health solutions for mental health problems. Many Syrian parents worry about their ability to care for their children in Jordan given the instability of their situation.

“

I am struggling with my children. All our routine is gone. We don't have breakfast, lunch or dinner together anymore. There is no more bedtime. My older boy is not listening to me. He spends a lot of time with other boys learning bad words and bad manners. He was not so aggressive in Syria.

Father of five children in Za'atari camp

”

Syrian women are experiencing a range of feelings as highlighted in the boxes below.

Frequently cited problems for younger women (age 18-24) in Za'atari camp are:

- Not feeling safe in the camp
- Boredom
- Feeling isolated in tents
- Worry (about early marriage, disrupted school attendance, not knowing anything about family back home)
- Fear (of the Syrian regime and about safety in Jordan)
- Guilt (because of friends left behind in Syria)

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

Frequently cited problems for Syrian women (older than 24) in Za'atari camp are:

- Worry about family, properties and inadequate health services for infants and children in Syria
- Fear about safety (especially at night) and uncertain future
- Psychological distress and crying due to camp's conditions and having to take care of the family
- Discomfort due to camp conditions and not having privacy and access to needs
- Aggressiveness towards family and aid workers
- Unspecified or exaggerated health complaints
- Depression

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

Mental Health and Psychosocial Support Services

MHPSS interventions usually aim to provide “a layered system of complementary support that meets the needs of different groups of people.”⁴⁶ At the bottom of the ‘intervention pyramid’ reaching the most people are ‘basic services and security’, followed by ‘community and family supports’ and then ‘focused, non-specialised supports’. ‘Specialised services’ by mental health professionals form the top of the pyramid and are usually for a small percentage of the population.

“

I get support from my family and my relatives. I like our neighbours. I like playing in the park.

Girl, age 10, in Irbid

”

Syrians in Jordan have expressed the need for greater assistance across all four levels. Examples include improved access to services for female-headed households, more child friendly spaces, individual and group counselling for adolescents showing signs of aggression, and specialised care for family members with chronic mental health problems.

According to a recent mapping exercise, MHPSS is currently strongest in ‘focused, non-specialised supports’, although some experts have queried the quality of this support. Some MHPSS providers in Jordan argue that greater attention should shift instead to ‘community and family support’ since this will benefit a larger number of Syrians.

KEY RECOMMENDATIONS

Create more child and adolescent friendly spaces that provide structured play, recreation, leisure and learning activities that are carried out in safe, community supported, inclusive and stimulating environments.

Invest in the recreational infrastructure that supports Syrian children's well-being including playgrounds and sports fields and recruit Syrian volunteers to provide adult supervision in these spaces.

Train Syrian adolescent and adult volunteers on the principles of psychosocial well-being and provide on-going mentoring and support for volunteers' own well-being.

Provide support to those parents needing help reconnecting with their children and include parenting sessions in community mobilization activities.

Provide on-going psychosocial support training and mentoring for Jordanian teachers and Syrian assistant teachers.

Build the capacity of CBOs to provide quality psychosocial support to Syrians and to be able to identify people requiring specialised support and referral.

Provide 'focused, non-specialised supports' and 'specialised services' for Syrians, including child mental health services.

Train all child protection staff on the Inter-Agency Standing Committee's (IASC) Guidelines on Mental Health and Psychosocial Support in Emergency Settings and ensure that staff adheres to these guidelines.

Improve the quality of psychosocial support services by involving all stakeholders in the MPHSS Coordination Working Group in Jordan and by raising awareness of the IASC Guidelines and the Jordanian specific inter-agency guidance notes.



“

I don't like my home. I don't like my family. I don't have any friends.

Girl, age 10, in Irbid

”



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ADOLESCENTS



“

**I can wish all I want but wishing will not get me what I want.
I want to be an activist. I do not believe in war.**

Boy, age 15, in Za'atari camp

”

IN ZA'ATARI CAMP



Adolescents and youth aged 15–24 make up approximately 25% of the population of Za'atari camp.⁴⁷ Consistent with funding patterns in other emergencies, there is a lack of adolescent-specific programming. Adolescents suffer from boredom, frustration and for females especially, limited mobility. The majority of adolescents below the age of 18 are out of school. Adolescents want income generation activities and greater access to education, vocational training, recreational and cultural activities. Family relations are changing and domestic violence is increasing. Adolescent mothers face specific challenges in caring for their children. Adolescents help new arrivals to Za'atari camp but would benefit from more volunteer opportunities and better inclusion in camp management and planning. Youth leadership and civic education opportunities for adolescents are currently lacking.

Boredom and limited mobility

Adolescents struggle with boredom and frustration as a result of too much free time and being out of school. While male adolescents spend time with their friends in the camp, female adolescents make family visits inside the camp or spend time close to their tent. Freedom of movement is restricted for those male adolescents who have assumed the role of head of household and must accompany their mothers on a daily basis. However, mobility is especially restricted for female adolescents, many of whom must seek permission before leaving their tents or are caring for siblings or family members with disabilities.

All adolescents would like safe places to do sports, creative and cultural activities and more opportunities to spend time with their peers. For some females, adolescent friendly spaces (AFS) are the only places their parents allow them to spend time independently.

Work and Vocational Training

There are few sustainable, safe income generation activities for adolescents. This is especially difficult for male adolescents heading households, but females also want to help their families.

Many male adolescents had stopped attending school in Syria and begun formal apprenticeships before they left for Jordan. They lack opportunities to continue apprenticeships in their chosen fields or start new apprentices in Za'atari camp. There is a high demand for vocational training by all adolescents. Males would like training in masonry, metal work, tailoring, car repair, electrical work, plumbing, mobile phone repair and plumbing. Females already have strong domestic skills and would like training in sewing, art, computers and nursing. Given access to materials, many females would like to start weaving and sewing clothes for sale within the camp.

Changing Family Relationships and Adolescent Mothers

Adolescents are experiencing significant changes in their family relationships since coming to Za'atari camp, including an increase in authoritarian decision-making by parents and domestic violence, as anecdotal evidence suggests. Female adolescents also report more 'problem behaviors' among boys. Adolescent mothers find taking care of their children and household chores difficult given their living conditions. They also lack crucial information about family planning.

Female adolescents age 14–23 in Za'atari camp identified the following priorities:

- Parents not allowing girls to go to school due to security
- Disabled people's issues and needs in the camp not adequately met
- Services not distributed well in the camp leading to people not being able to get their basic needs met
- Safety and other issues related to the girls themselves
- Places for youth to go to give their complaints

Source: Notes from Youth Committee Meeting of Girls age 14–23 in Za'atari Camp (April 2013)

Volunteering and involvement in community mobilization

Adolescents often play a role in helping new arrivals to Za'atari camp and benefit from doing so. For example, female adolescents orient new neighbours to their community by explaining available basic social services. Many adolescents want to do more volunteer work, especially to help younger children, the elderly and people with disabilities. The potential for adolescents to make important contributions to their communities is clear. However, negative stereotyping of youth, including by the international donor community, limits the extent to which youth are asked to volunteer or participate in camp planning efforts. Adolescents want opportunities to develop their leadership skills. Important opportunities are being missed for building civic engagement in Syrian youth.



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“

Give me school or give me work.

Boy, age 17, in Irbid

”

IN HOST COMMUNITIES



Although there is a lack of information about Syrian adolescents in host communities, it appears they are facing many of the same challenges as adolescents in Za'atari camp – boredom, frustration, limited mobility (especially for females), limited work opportunities, lack of vocational training, changing family relationships and few volunteer opportunities. In addition, adolescents in host communities face great pressure to work given high living costs outside of camps.

Male adolescents in Irbid aged 13–16 years listed their top three challenges as 'problems with education', 'the lack of work opportunities and no income' and '*al ghourbeh* – a sense of exile and of being a stranger'. Other problems identified were abuse by employers including non-payment of wages, increasing tension between Syrians and Jordanians, and discrimination by community based organisations in the distribution of services to Syrians.

KEY RECOMMENDATIONS

Advocate with donors to provide more funding for adolescent programming in particular from a stabilization and peace building perspective.

Conduct a needs assessment of the situation of adolescents, including peer led research by adolescents.

Assist adolescents in forming their own youth committees to discuss their specific experiences, to communicate better with relevant actors in their communities and to advocate for change. In camp settings, assist youth committees in contributing to camp planning and management.

Create more adolescent friendly spaces, including extending shifts in existing child friendly spaces specifically for adolescents, and ensure there are opportunities for females and males to access them separately. Use AFS for life skills training and for non-formal and informal education.

Provide a wide range of well-coordinated social and extracurricular activities for adolescents, including sports, arts and cultural programmes and environmental activities.

Provide 'focused, non-specialised' psychosocial support to adolescents including engaging adolescents in telling their stories and expressing their concerns with each other, as well as providing opportunities for adolescents to communicate with their friends and family in Syria.

Develop culturally appropriate health education for adolescent mothers.

Create opportunities for adolescents to volunteer and involve adolescents in community mobilization efforts including relevant community committees.

Better understand the skills and aspirations of Syrian adolescents, as well as the work opportunities, to provide the most appropriate skills/vocational training.

Develop civic education programmes for adolescents to encourage their positive engagement in their communities in Jordan and to prepare them to participate in the future rebuilding of Syria.



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CONCLUSION

Without a rapid change in the scale of the international community's response, the situation for Syrian refugees in Jordan will become progressively untenable. An entire generation of Syrian girls and boys are at risk of losing an education. Gender-based violence and threats to the protection of children are on the rise. Families are struggling to heal without sufficient psychosocial support. Adolescents are losing hope for their future and need to be engaged in meaningful activities for their own development and for the well-being of their communities. In Za'atari camp, the security situation is deteriorating, theft and vandalism are growing. In host communities, tensions between Syrians and Jordanians are escalating, and more support to Jordanians is needed.

Good programmes in Za'atari camp are being overwhelmed by the thousands of new Syrians arriving each week. Support for Syrians in host communities is hugely under-funded – though less visible to the international community than refugees in camps, their needs are just as great. Scaling up or starting new programmes is highly challenging without strengthened operational partnerships and substantial new financial resources. Yet investments must be made in Syrian refugees to help build resilience in themselves, their families and their communities. With additional support, there is enormous potential for children and adolescents to play a role in promoting peace with their neighbours, their communities and their host country.



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The photos on this page were taken by adolescents in Za'atari Camp.

Annex A: Documents Included in the Desk Review

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End Notes

¹ United Nations High Commissioner for Refugees, 'Syria Regional Refugee Response: Inter-agency Information Sharing Portal, Jordan', <data.unhcr.org/syrianrefugees/country.php?id=107>, accessed 4 June 2013.

² Ibid.

³ Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp*, Jordan, January 2013, p. 3. The findings of this assessment are based on three main tools for data collection: 27 key informant (KI) interviews, six focus group discussions (FGDs), and a Safety Audit. The sample does not represent the entire population or representatives from all service providers in Za'atari camp, but provides an overview of priority child protection and gender-based violence concerns.

⁴ Ibid., p. 21.

⁵ Ibid.

⁶ "Separated Children are those separated from both parents, or from their previous legal or customary primary care-giver, but not necessarily from other relatives. Unaccompanied children 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", International Committee of the Red Cross, *Inter-Agency Guiding Principles on Unaccompanied and Separated Children*, Geneva, 2004, p. 13.

⁷ Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp*, Jordan, January 2013, p. 18.

⁸ United Nations, *Inter-Agency Regional Response for Syrian Refugees: Egypt, Iraq, Jordan, Lebanon, Turkey*, New York, 7 June 2013.

⁹ International Rescue Committee, 'Weekly Report', Jordan, 9 May 2013.

¹⁰ The bail-out system is the official policy of the Jordanian government whereby Syrians can legally leave refugee camps and move to host communities when sponsored by a Jordanian.

¹¹ The Government of Jordan has begun organizing buses to return refugees from Za'atari camp to the border with Syria, for those who would like to return voluntarily. Although refugees are to formally apply with UNHCR before taking these 'return buses', in practice, this is not always happening and unaccompanied or separated children may be among those on the buses.

¹² Child Protection and Gender-Based Violence Sub-Working Group Jordan, *Findings from the Inter-Agency Child Protection and Gender-Based Violence Assessment in the Za'atari Refugee Camp*, Jordan, January 2013, p. 19.

¹³ The minimum age of marriage in Jordan is 18 for girls and boys but early marriage remains lawful for girls as young as 15 with court approval.

¹⁴ Save the Children Jordan and United Nations Children's Fund, *Comprehensive Outreach to Syrians in Ghor and Irbid on Educational Needs*, Jordan, April 2013, p. 3.

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¹⁷ Ibid., p. 19.

¹⁸ Ibid., p. 20.

¹⁹ Jordanian Ministry of Education.

²⁰ IMPACT Initiatives, Agence d'aide à la coopération technique et au développement, and United Nations Institute for Training and Research Operational Satellite Applications Programme, *Findings of the Households Assessments of Syrian Households in Host Communities, Aljoon Governorate, Balqa Governorate, Jerash Governorate*, The REACH Project, Jordan, February 2013.

²¹ Save the Children Jordan and United Nations Children's Fund, *Comprehensive Outreach to Syrians in Ghor and Irbid on Educational Needs*, Jordan, April 2013, p. 2.

²² Reports from UNICEF field staff; implementing partners' damage reports.

²³ Agence d'aide à la coopération technique et au développement, JEN, Oxfam, Relief International, *Za'atari Baseline KAP HH Survey*, Jordan, November 2012, p. 3. This survey is based on a representative sample of 389 households in Za'atari camp.

²⁴ The Sphere Project, *Humanitarian Charter and Minimum Standards in Humanitarian Response*, Rugby, United Kingdom, 2011, p. 97.

²⁵ United Nations Children's Fund and World Food Programme, *Inter-Agency Nutrition Assessment: Syrian Refugees in Jordan, Host Communities and Za'atari Camp*, Jordan, January 2013, p. 44.

²⁶ Agence d'aide à la coopération technique et au développement, JEN, Oxfam, Relief International, *Za'atari Baseline KAP HH Survey*, Jordan, November 2012, p. 4.

²⁷ Ibid., p. 6.

²⁸ United Nations Children's Fund and World Food Programme, *Inter-Agency Nutrition Assessment: Syrian Refugees in Jordan, Host Communities and Za'atari Camp*, Jordan, January 2013.

²⁹ IMPACT Initiatives, Agence d'aide à la coopération technique et au développement, and United Nations Institute for Training and Research Operational Satellite Applications Programme, *Findings of the Households Assessments of Syrian Households in Host Communities, Aljoon Governorate, Balqa Governorate, Jerash Governorate*, The REACH Project, Jordan, February 2013.

³⁰ United Nations, *Inter-Agency Regional Response for Syrian Refugees: Egypt, Iraq, Jordan, Lebanon, Turkey*, New York, 7 June 2013.

³¹ Estimate according to the Jordanian Ministry of Water and Irrigation, Yarmouk Water Company, and UNICEF, May 2013.

³² Agence d'aide à la coopération technique et au développement, JEN, Oxfam, Relief International, *Za'atari Baseline KAP HH Survey*, Jordan, November 2012, p. 9.

³³ United Nations Children's Fund and World Food Programme, *Inter-Agency Nutrition Assessment: Syrian Refugees in Jordan, Host Communities and Za'atari Camp*, Jordan, January 2013, p. 44.

³⁴ Agence d'aide à la coopération technique et au développement, JEN, Oxfam, Relief International, *Za'atari Baseline KAP HH Survey*, Jordan, November 2012, p. 8.

³⁵ Ibid., p. 7.

³⁶ Reports from UNICEF field staff and implementing partners' damage reports.

³⁷ Weekly THW (Technisches Hilfswerk) Damage Reports.

³⁸ United Nations Children's Fund and World Food Programme, *Inter-Agency Nutrition Assessment: Syrian Refugees in Jordan, Host Communities and Za'atari Camp*, Jordan, January 2013, p 10.

³⁹ Ibid., p. 43.

⁴⁰ Ibid.

⁴¹ Ibid., p. 40.

⁴² Ibid., p. 41.

⁴³ Ibid., p. 31.

⁴⁴ Ibid.

⁴⁵ Mental Health and Psychosocial support is defined as "any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder", Inter-Agency Standing Committee, *Guidelines on Mental Health and Psychosocial Support in Emergency Settings*, Geneva, 2007, p. 1.

⁴⁶ Ibid., p. 11.

⁴⁷ United Nations High Commissioner for Refugees, Refugee Assistance Information System (RAIS).

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