

the Hashemite Kingdom of Jordan
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It is perhaps not an overstatement to say that no single country in recent history has endured as many external shocks as Jordan has. Despite conflicts and wars surrounding us, disintegration of neighboring societies, and the influx of refugees seeking the safety and dignity they were denied in their homeland. Despite all odds and challenges, we have proved to ourselves and the entire world – time and again - that we stand tall, strong and resolute in our unity.

Sixth-discussion-paper-rule-law-and-civil-state

By Abdullah II ibn Al Hussein

Sunday, 16 October 2016

Will we leave refugees to languish in camps and settlements and slums? Or will we give them the tools to contribute to the new economy and rebuild their homelands when the time comes?

Will we watch our political, economic, and social institutions fall apart, and allow terror and instability to ripple outward? Or will we partner across countries and sectors to come up with sustainable solutions?

In Jordan, we are determined to craft opportunity from crisis. We are working with the World Bank, the EU, and others in the international community to transition from aid and relief toward development and investment.

Queen Rania's speech at UN Summit for Refugees and Migrants - NY, USA

September 19, 2016

Preface

In The Name Of Allah the Most Merciful Most Compassionate

The Hashemite Kingdom of Jordan has received refugee families from all over the world with warm welcome and hospitality surpassing international policies and programs. These families fled fear and hunger. The government and people of Jordan have served a humanitarian role in Arab, Islamic and humanitarian unity to address the needs of refugee families. Jordan has strengthened its humanitarian response at the policy and practical level in national frameworks, including through the Jordan Response Plans during the Syria crisis. However, the challenges facing the Kingdom are inherent in the exhaustion of available resources, which requires working side by side with countries all over the world to support refugees and improve their opportunities, and to ensure Jordan's resilience.

This report, prepared in cooperation with the United Nations High Commissioner for Refugees (UNHCR), is a specialized source of information about the refugee family, reflecting their economic, educational, health and psychological conditions, as well as their living conditions, family relations, and participation in public life. This information was collected through a scientific field survey of a representative sample of refugees registered with UNHCR, drawing an integrated picture of the status of these refugee families to serve as a valuable reference in the hands of decision makers, institutions and stakeholders. The report should serve as a general guide for policy-making and designing programs and interventions to address the needs of these families, and also to strengthen the national governmental and non-governmental institutional partnerships. We hope that this report may serve as a mirror that reflects the reality of the refugee family, and provides scientific data that will contribute to the formulation of policies and strategies

We extend our thanks and gratitude to the partners of the United Nations High Commissioner for Refugees for their support in accomplishing this project and to the experts who contributed to this report, including the members of the Technical Committee, who provided advice at all stages of the project. We are grateful to those governmental and non-governmental institutions and international partners that participated in specialized analysis working groups.

Asking the Almighty to keep this country safe and secure the generosity of prosperity under His Majesty King Abdullah II bin Al Hussein. May Allah praise him .

God grants success

**Secretary-General
Mohammed Fakhri Meqdady**

Refugee Families in Jordan Situation Report 2017

the NCFA in collaboration with UNHCR has initiated the surveying of refugee families in Jordan. This will enhance understanding of quality of services, needs, issues, and priorities of refugee families in Jordan, and will provide baseline data for future reports.

The purposes of the survey are to:

1. Describe the conditions of refugee families and investigate their demographic, social, economic, cultural, educational, health, marriage and housing characteristics and other characteristics related to displacement.
2. Review national and international policies and strategies and their compatibility with the needs of the refugee families.
3. Provide evidence-based research outcomes to inform family - related policies and programs.
4. Identification of national priorities with respect to refugee family issues.
5. Provide recommendations regarding humanitarian situations and the interventions required to respond to the priorities of refugee families and gaps in services according to the results of the field survey.

A cross sectional, explorative quantitative approach was used to survey refugee families, residing and registered by the UNHCR at the camps and urban areas in all governorates, the sample including 805 families from variety of nationality (Iraq, Syria, Sourmal, Yamin, Sudan and others).

Demographics Characteristics:

Official statistics shows that the largest percentage of refugees in Jordan comes from Syria, which represents 73% of the total refugees, 9% from Palestine and 3% from Iraq. It is worth noting that 13% of the refugees are born in Jordan. Of whom about 95% are registered with the official authorities and carry refugee documentation*. The surveyed families, there were 48.8% (n= 1508) male members and 51.2% (n= 1584) female members.

The national statistics** reflect the age construction of refugees in Jordan, found that 2.81% of all refugees in Jordan are aged 60 years or over (1.42% of those aged 64 years or over). 38.8% of the refugees are between the ages of 5-19 years and 15.4% are under 4 years of age. Therefore, the proportion of individuals aged 19 years or less is 54.2% of the total refugee population

Regarding reasons for displacement to Jordan, the majority of refugee families reported (92%, 741 families) that the main reason for their flight is for safety reasons, followed by political reasons (6%), while only nine families (1.1%) revealed that economic constraints are the reasons for fleeing

The most recent report of the UNHCR (2017)*** mentioned that 20% of all registered refugees in Jordan resided inside official camps, while 80% resided among Jordan's host communities in the northern and central regions specifically.

It is clear that the refugee community in Jordan is relatively young. Future research, assistance programs and policies must therefore focus on young people and their specific needs

* Department of Statistics, Population and Housing Census. 2015

** Department of Statistics, Population and Housing Census. 2015

*** UNHCR & UNICEF (2017). A promise of tomorrow: The effects of UNHCR and UNICEF cash assistance on Syrian refugees in Jordan

Family Relations and Participation in Public Life

The average size of refugee families is 3.8 persons. Families comprising two members were the most prevalent in the sample at 19.5%, followed by families with three members (19.4%), families with four members representing (17.6%), and less frequent family sizes of 13 and of 11 member representing 0.1% and 0.2%. The majority of families were male-headed (83%), (n=668) with 17% (n=137) female-headed families.

In terms of family type, the results showed that 52% of the families consisted of both parents and their children 12% were families comprised of couples living alone, 9% were fathers living alone, and only 2% described their families as extended families with grandchildren and / or grandparents and other relatives

In terms of marriage and the appropriate age for marriage from the family point of view, the results showed that 66.1% of the family members in the age group (16 years and over) were married, while 22.1% were single, 7.9% were widows, 1.8% were divorced or divorcee, while the percentage of those who were separated was the lowest among the family members in the age group (16 years and over) by 0.9%

With regard to family decisions, the results revealed that health decisions related to the timing of pregnancy and childbirth in most families are taken by the father and mother together (64.7%) or by the father alone in 16% of the families or by the mother in 11% of the families

The father and mother took the decision to use family planning in most families (66%), and the mother took it individually in 14% of families. The results also show that the decision of the medical and surgical interventions of a family member is decided mainly by the father and mother together (38%) of the families

In terms of economic decisions, family members were responsible for managing family expenses (43.7%). The father alone takes the decisions in 12% of the families. In case of decisions on the educational situation, the son / daughter chooses his or her specialization (secondary, university, college and postgraduate) in 34.4% of the families. In 34% of families, the father and mother together decide on planning family activities.

The heads of families also indicated that The survey shows that residents outside the camps, who are the majority (85%), are less aware about the available services (41% outside the camps compared to 62% for the residents in the camps), while refugees in camps and outside camps are almost equal in their level of satisfaction of the quality of services (32% vs. 35%) male children are always free to choose a life partner by 14% compared to 12% for girls, while 18% of families indicated that male children are never free to choose a partner, compared with 21% for girls in choosing a life partner

Regarding family's priority issues for family dynamics, the most important priorities were family relations (45.1%), extended families (15.4%), family decisions (17%), and juvenile delinquency

As for the priorities related to participation in public life according to their feedback on the a list of classified issues, the answers showed that the most important priorities according to the families were migration by 36.9% and returning home aspire by 29.8%, while the least important portent priorities were extremism and volunteerism

The need to study family relations dynamics and the role of fathers and mothers in the family, especially since most families indicated that the mother and father do not spend enough time with family members on a regular basis

Health Characteristics:

The current survey showed that 57% benefit from Jordan's governmental facilities, while 17% benefit from facilities, Regarding availability of health services, the results showed that government health centers are the most prevalent and needed than private sector (72% versus 32%). While private hospitals were the least available (22%) and the least needed (16%)

The survey shows that residents outside the camps, who are the majority (85%), are less aware about the available services (41% outside the camps compared to 62% for the residents in the camps), while refugees in camps and outside camps are almost equal in their level of satisfaction of the quality of services (32% vs. 35%) Also, residents outside the camps see health services at hospitals and clinics they referred to excellent (53%) and much more than those residing in the camps (44%).

in terms of current morbidities, results showed that the majority of family members in this survey were not having any type of chronic illness 83.2%, and the remaining members 15.1% were having chronic diseases. The most prevalent chronic disease was hypertension 5.6%, diabetes 3.1%, and asthma and allergies 2.9%

Furthermore, results showed that most of family members did not have any type of disability (89.9%). The highest frequent disabilities were mobility disabilities (1.8%), then vision impairments (1.7%), followed by hearing impairments (0.8%)

The results of the survey showed that 57.9% of the families prefer breastfeeding to artificial breastfeeding, and 59.5% of the families encourage their daughters to breastfeed their children.

The results of the survey showed that most of the refugee family members were non-smokers (85.8%), and only 8.2% of them smokes only cigarettes, 0.8% uses narghile, and only 0.4% smokes cigarettes and narghile

In terms of sports practice and attitudes, 5.3% of family members are practicing sports, although family attitudes have been positive about the importance of sport to health where 50% highlight its importance

In the survey, 24.7% of the families reported that drugs are prevalent among university and young students according to their perspectives, compared to 23% who don't agree. About 24% of the families also reported that drugs are prevalent among adolescents and children

The survey showed that 31% of the families have an individual receiving mental health treatment due to the experience of refuge, and that 32% of the families suffer from psychological problems due to the displacement and traumatic events experienced. The results also showed that most families (48%) confirmed that they would not hesitate to seek professional psychological assistance in case of any of their members suffering psychological symptoms.

The survey showed that 73% of them feel very depressed, and 73% of them have a flashback of events before they sought refuge.

The survey also found that 77.5% of the heads of the families had a fair positive experience of the events where 78% of them have positive interaction with society, and 64% did not ask for any psychological help to cope with the experience of refuge.

The survey has also addressed issues related to happiness and satisfaction with life among refugee families. The results showed that 36% of refugee families expressed their happiness in general, while 33% did not consider their families happy. About 36% of refugee families indicated that their lives were not close to ideal, while 35% considered that their lives were close to idealism. When asked about their health-related priorities, families listed accessibility to hospitals (51%), burden of healthcare services (42%), and availability of health centers (39%) as their top priority, while school health (3%) and early detection of diseases (3%) were the least priorities.

The importance of supporting healthy lifestyles for refugees through special programs that promote sport and the provision of special facilities that take into consideration gender differences and the requirements of each category, as well as monitor their feeding patterns in specialized studies.

The results showed that 42% of the families live in houses that are convenient and do not need maintenance, 41% of families live in convenient houses that need maintenance, and 12.5% live in houses that are inconvenient but can be fixed, while about 5% (n=38) live in inconvenient houses that cannot be fixed. In terms of sources of drinking water, the results of the analysis showed that water from purification services is the main source of drinking water (36%), followed by mineral water (29%), and public water network (tap water) (27%).

The result also showed that the main source of heating inside the house is gas units (52.5%), followed by kerosene (25%), and electric heating unit (8.2%), while 10.3% of families reported that they don't own any source of heating inside the house. The main source for air conditioning in the house is fans (81.5%), followed by air conditioners (2.4%), while 15.4% of the families reported that they had no source of air conditioning at all.

According to the results of the study, the most frequent priorities among the refugee families related to housing according to heads of families are: electricity (30.3%), followed by water priority (16%) and then sanitation and maintenance of house (each of 11.2%). The least priority was air conditioning (6%) and air pollution (6.6%).

Education Characteristics:

About 51% of the refugee population in the survey is under the age of 18, the results showed that 56% of the family members surveyed were aged 16 years or older. Of these, 27.5% hold a secondary degree, 20.4% hold primary school degrees and 10.7% were literate. In addition, 3.5% hold a bachelor's degree, and 2.4% hold a diploma degree. While 13.5% do not read or write.

The vast majority (89%) reported that their children under the age of 6 do not attend any pre-school educational facilities, while 5% reported sending their children to kindergarten 2, 4% sent their children to kindergarten 1, and only 2% sent their young children to nurseries

As for the refugee children, according to the survey, 52.5% of the families have children between 6 and 18 years of age. Of whom 70% were enrolled in an educational institution, while 30% were not registered. The results showed that only 3% were enrolled in high educational institution, while 97% were not registered. The survey also showed that refugees living outside the camps do not have similar access to educational services compared to families in the camps. About 58% of the families of those living outside the camps reported that the basic public school is available compared to 82% of camp families, Also about 40% of the families living outside the camps reported that they needed the basic government school compared to 63% for families in camps .

Regarding accessibility of various educational facilities, the survey showed that families in general found it difficult to reach universities and community colleges, while it was easy to access public basic schools and public high schools

For the camp families, the greatest difficulties were the private secondary school (90.3%) and basic school (90.1%), and that was expected. For refugees residing outside the camps, the greatest difficulties were access to vocational training centers (75.5%) and kindergartens (71.7%)

1.6% (11 working children) of children were working children , seven children (1%) work during school holidays only, while two families (0.3%) have their children work during school hours, and two after school hours. It is interesting to note that 15.3% of the families indicated that they had to force their children to work, while later indicated that there were no working children according to their responses.

Interestingly, about 15% of families believe that sexual abuse is prevalent in universities compared to 8% at schools; which is the least prevalent form of abuse. it has been reported that the most prevalent types was physical violence (56%) at schools compared to 35% at colleges or universities

The survey showed that 12% of the families never turn to any entity if violence occurs, while 43% do, and 26% sometimes do so

According to the heads of the families, the most important priorities related to education were the quality of teachers (22.7%), the cost of education (school supplies and transportation) (18.4%), and educational counseling services (14.9%). They have also reported that the least priority were for school infrastructure (7.3%), availability of kindergartens (5.8%), and violence at universities (2.5%).

Where most of the educational services available to children are found to be difficult to reach, a study is needed to assess the reasons behind this, and map the services and geographical distribution inside and outside the camps, as well as the need to provide appropriate transportation or protection groups to accompany students to their schools

Develop appropriate policies to deal with working children and reduce child labor, including work in the agricultural sector and in vehicle repair, by improving the educational environment, providing economic alternatives for children and their families in need, and applying compulsory education

Economic Characteristics:

Few families in the current survey described their current economic status as good (20%) compared to (44%) before refuge, very good (3%) compared to (31%) before refuge, and as excellent (0.2%) compared to (11%) before refuge, while the majority (74%) described their situation as "bad" (10%) before refuge

As for the family monthly income, the results showed that the majority of refugee families (86.7%) reported the average income was less than 366 JD, while about 5.3% (43 family) received income between JD 367- 400. One family reported its income to be more than 1500 dinars. It is worth mentioning that these figures reflect family income rather than per capita income. The results showed that the most common source of income for families was from international and local charitable organizations in the form of food vouchers 82% of the families, while 18% did not receive any vouchers. While 81% of the families received salaries and wages, 19% did not receive any salaries or wages.

63% received financial assistance from international and local charitable organizations, while 37% have not received such assistance. These findings indicate that refugee families in Jordan rely on aids and subsidies provided by institutions and organizations

The heads of family provided varying responses regarding the employment status of family members aged 16 or over, with only 26% of family members working for pay, and 15% unemployed, despite seeking jobs. 37% were housewives, followed by 4% who were in schools, 3% were patients or disabled persons, and 3% were elderly. But 10% of females do not work or seek employment, especially young women living in camps

In the current survey, the most important priorities among family sample were high prices/life expenses 58.8%, job opportunities 49.9%, and wages 40.9%. While the least important priorities were Healthy environment for work, Work suitable for women, and In-kind assistance from international and local organizations.

the provision of adequate jobs in non-traditional ways, in addition to continue providing cash and in-kind assistance to families in need, Providing opportunities for microfinancing through existing funds and facilitating related conditions and procedures for refugee families, The importance of developing special policies and laws to eliminate wage discrimination, establish mechanisms to monitor this issue, and ensure that the worker obtains all rights according to national laws.

CHAPTER ONE

Introduction and Methodology

War is a man-made situation that compromises the mental, physical and social wellbeing of people. Studies showed that individuals exposed to displacement (such as refugees) are at risk of developing severe social, mental and psychological problems due to their living situations before, during and after traumatic events and due to the displacement experience¹.

As a result of political conflict and war, life-threatening environments continue to force many individuals to become refugees. According to the 1951 United Nations Convention relating to the Status of Refugees, a refugee is defined as an individual who is outside his or her native country, and who is unable or unwilling to return due to a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular group, or political opinion². The most recent reports show increased numbers of refugees globally, creating an international concern for their security and well-being.

According to UNHCR, an unprecedented 65.3 million people around the world have been forced from home. Among them are nearly 21.3 million refugees, over half of whom are under the age of 18 years of age³. Most refugees came from Syria (4.7 million), Afghanistan (2.7 million) or Somalia (1.1 million)⁴.

There are also 10 million stateless people who have been denied a nationality and access to basic rights such as education, healthcare, employment and freedom of movement. In Jordan, there are 664,000 Syrian refugees registered with UNHCR. In a world where nearly 34,000 people are forcibly displaced every day as a result of conflict or persecution, more attention toward need for these people; physical, socially, and psychologically. Jordan, in particular, hosts the second highest number (87) of refugees per 1,000 inhabitants in the world. Jordan is the sixth highest refugee-hosting country in the world, and 93% of refugees are living outside of camps under the Jordanian poverty line⁵.

Refugee families in Jordan

Migration, whether forced or voluntary, contributes to changes in the host population. Displaced persons must adapt to the host community, and to applicable laws, policies and institutions of the host state. Various terms have been suggested for what migration may entail from social consequences, including assimilation, adaptation, interdependence, and integration⁶. Many studies document and discuss the various aspects of integration of refugees⁷.

1-Derluyn, I., Broekaert, E., & Schuyten, G. (2008). Emotional and behavioural problems in migrant adolescents in Belgium. *European Child and Adolescent Psychiatry*, 17(1), 54-62

2-UNHCR (1994). *Refugee children. Guidelines on protection and care* Geneva: United Nations High Commissioner for Refugees.

3-UNHCR (2017). <http://www.unhcr.org/aftr/figures-at-a-glance.html>

4-UNHCR (2017). <http://www.unhcr.org/aftr/figures-at-a-glance.html>

5-UNHCR (2015). *GLOBAL TRENDS: FORCED DISPLACEMENT IN 2015*

6-Wiesbrock, A. (2009). "Discrimination instead of Integration? Integration Requirements in Denmark and Germany", in E. Guild, K. Groenendijk and S. Carrera (eds), *liberal Liberal States: Immigration, Citizenship and Integration in the EU*. Aldershot: Ashgate.

7-S. Carrera, *In Search of the Perfect Citizen? The Intersection between Integration, Immigration and Nationality in the EU*, Leiden: Martinus Nijhoff Publishers, 2009(a).

often noting social integration of refugees as one of the most important issues that must be considered when examining displacement from scientific and interventional perspectives⁸

Studies have shown that the integration of refugees in their host communities depends mainly on the extent to which refugees are affected by the surrounding environment, the extent to which opportunities exist for integration, and the personal capacities of refugees through which they invest opportunities and accelerate integration⁹.

Refugee families are subjected to a number of physical, social and psychological risks. Part of this is linked to their experiences and conditions in their home country and in the countries receiving them as refugees. These conditions, along with an uncertain future and a constant state of insecurity, put great stress on families and communities. Prolonged stress can break some people down emotionally and mentally, leading to mental health problems. These problems may exhibit themselves physically (fatigue, headache, back pains), emotionally (fear, anxiety, mood changes), or through major changes in behavior (domestic violence, alcohol abuse). Many of these problems can be dealt with,¹⁰

however, if these problems are not addressed early, people can suffer long after the emergency is over¹¹.

Moreover, during conflict, exposure to stressful life events is increased, resulting in immediate effects on physical and psychosocial wellbeing. The process of displacement and becoming a refugee has an effect on the physical and mental wellbeing of children and adults similar to that of surviving natural disaster. Refugee experiences very often include the death of family members, loss of home and possessions, and threats to individual lives¹². Their lived experience leads to a high risk of developing of mental disorders, developmental disorders, and physical disorders¹³⁻¹⁴

Jordan has long been a refuge for people forcibly displaced by war and political conflict. The first refugee crisis in Jordan dates back to the late Ottoman period when, as a result of the Ottoman-Russian War of 1877-1878, hundreds of thousands of families from the Balkans and from Eastern Anatolia fled their homes. A first group of Circassian refugees settled in Jordan in 1878¹⁵

The arrival of Circassians was gradual, as they settled in Amman, Jerash, Naour, Sweileh and Rsaifeh¹⁵, while people fleeing Chechnya in the northeast Caucasus settled in Zarqa, Sweileh, Al-Sokhna and Azraq¹⁶. Jordan also served as a refuge for Armenian refugees who survived the genocide that began in 1915¹⁷.

Since the independence of the Hashemite Kingdom of Jordan in 1946, it was the habitat of all Arabs from Lebanon, Syria, Palestine and Iraq until the Palestine War of 1948 and then the second Palestinian migration in 1967. This has resulted in international institutions establishing and presence in Jordan and providing services in the country.

8-UNHCR (2004). 2003 Global refugee trends. Overview of refugee populations, new arrivals, durable solutions, asylum-seekers and other persons of concern to UNHCR. Geneva: United Nations High Commissioner for Refugee

9-Urth, H. (2005). "Building a Momentum for the Integration of Third-Country Nationals in the European Union", *European Journal of Migration and Law*, Vol. 7, No. 2, pp. 163-180.

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14-World Health Organization and United Nations High Commissioner for Refugees. Assessing mental health and psychosocial needs and resources: a toolkit for major humanitarian settings. 2012. World Health Organization: Geneva

15-Abou Ghonaim, Ziad. The Circassians emigrated to Jordan. Manuscript published electronically via: <http://www.almadinahnews.com/article/58681>

16-History of Chechnya in Jordan. Manuscript published at <http://www.1jordan1.com>

17-Hamed-Troyansky, H. (2014). A Transnational Refugee Family History: Circassian Social Networks Across the Ottoman Empire, 1890-1905. <http://stanford.academia.edu>

During the Iran-Iraq war in the 1980s, thousands of Iraqi and Palestinian families took refuge in Jordan, with the arrival of many more triggered by the Iraq – Kuwait crisis in 1990, when many Palestinians living in Kuwait fled to Jordan. After the outbreak of war in Iraq in 2003, many Iraqis and remaining Palestinians in Iraq fled to Jordan, of which many continue to reside in the country. Others have considered Jordan as transit point to West Europe and North America. Currently, more than 42% of the Palestinian refugees in Jordan reside in ten camps: Jerash Camp, New Amman Camp, Marka Camp, Baqa Camp, Souf Camp Al-Husn camp, Talbiya camp, Irbid camp, Zarqa camp and Jabal al-Hussein camp. These camps have a total of 280,000 refugees, representing 18% of the 1.7 million Palestinian refugees registered at UNRWA in Jordan¹⁸

Jordan is currently experiencing a refugee crisis due to the devastating war in Syria that began in 2011. Refugees fleeing political unrest and violence in Syria began arriving in Jordan in 2011. According to UNHCR, by January 2014, the number of Syrian refugees in Jordan had reached 576,354 individuals.¹⁸ In addition, refugees from Iraq and other Arab countries fled to Jordan long before the Syrians, but in smaller numbers. Jordan has become the sixth largest host country for refugees in the world as of June 2017. Although Jordan has three official camps for Syrian refugees in the northern region (the Emirate Jordanian Camp, Azraq, and Zatari camps), about 80% of the refugees live outside camps in the governorates with competition for resources and services with the most host community. About 93% of those living outside camps live below the Jordanian poverty line. In addition, only one in every five refugees registered with the United Nations High Commissioner for Refugees (UNHCR) in Jordan receives cash assistance from the United Nations Agency to assist in meeting basic needs¹⁹.

Jordan has remained stable despite the conflicts in neighboring countries in Middle East and the region. Jordan has been a host to refugees from at least 27 countries in the region for the past two decades. However, as a result of the Syrian crisis, Jordan has entered a new struggle to host and support refugees in light of severe shortage of natural and financial resources. Most refugees are located in urban areas, increasing the pressure on resources and opportunities²⁰. The increased influx of refugees into Jordan has increased the burden of the Jordanian Government's commitment to the provision of general services and infrastructure needs. With a projected decline in funding for refugee programs, the quality of services provided to refugees may be reduced, exacerbating protection concerns, psychosocial needs and increased pressure on the infrastructure²¹. The Syria crisis and influx of Syrian refugees has had an overwhelming impact on the Jordanian economy. According to the Jordanian Economic and Social Council²², the Syrian crisis cost Jordan \$1.7 billion in 2017.

Refugee life in Jordan, whether in camps or in urban areas, is considered as a transitional and temporary situation. Refugees in camps in particular see their lives unstable, with an unknown future. This is confirmed by research²³, which finds that Syrian families in the camps feel more helpless and lacking in power, which negatively affects their lives.

Jordan hosts refugees through a complex cooperative system that includes international organizations, multiple government agencies, ministries, municipalities and non-

18-Bocco, R. (2009). UNRWA and the Palestinian Refugees: A History within History. *Refugee Survey Quarterly*, 28 (2-3), 229–252. <https://doi.org/10.1093/rsq/hdq001>
19-United Nations High Commissioner for Refugees. Syria Regional Refugee Response 2015; Available from: <http://data.unhcr.org/syrianrefugees/regional.php>
20-United Nations High Commissioner for Refugees. Syria Regional Refugee Response 2015; Available from: <http://data.unhcr.org/syrianrefugees/regional.php>
21-Ministry of Planning and International Cooperation. The Jordan Response plan for Syria Crisis 2017-2019. <http://www.jpssc.org/>
22-United Nations High Commissioner for Refugees. Syria Regional Refugee Response 2015; Available from: <http://data.unhcr.org/syrianrefugees/regional.php>
23-Statement issued by the ministry of foreign affairs and expatriate affairs 9/10/2017

governmental organizations. The services provided are culturally-sensitive to refugees' situations, and include community interventions that aim at meeting the needs of refugees including material support and infrastructure, as well as social, legal and psychological services. However, there are challenges for service providers to meet refugee needs. The Government of the Hashemite Kingdom of Jordan has facilitated efforts, in cooperation with international organizations, non-profit organizations, voluntary associations, international governments and the private sector to ensure a dignified life for refugees and to assist refugees to be productive participants in Jordanian society²⁴ Refugees have been provided with basic government services such as health and education, while Azraq and Za'atri refugee camps were built on land provided by the Jordanian authorities.

In Jordan, there is no refugee law or specific legal framework to address refugees. A 1998 Memorandum of Understanding (MoU) between UNHCR and the government, partially amended in 2014, forms the basis of UNHCR activities in Jordan and includes commitments by the government to the international refugee definition and to respect the institution of asylum and principle of non-refoulement. The MOU sets out the criteria for cooperation between UNHCR and the Jordanian government and defines the legal basis for refugees in Jordan, as it grants refugees a number of rights²⁵. This includes rights to litigate before all courts, the right to work if applicable laws and regulations applied, as well as, waving refugees from departure tax and residency taxes. The MOU also states that both Jordanian and the UNHCR work collaboratively in the emergency situation and organize all needed services that includes food, water, sanitation, shelter and medical care and to enhance the physical safety of refugees and asylum-seekers.

As part of its efforts to coordinate and coordinate efforts in response to the Syrian crisis, the Jordanian government adopted an integrated plan entitled "Jordan Response Plan for the Syrian Crisis" for the years 2017-2019, designed and distributed by the Ministry of Planning and International Cooperation to the relevant authorities in the Kingdom. The plan aims to strengthen the efforts required to respond to this crisis and mitigate its negative effects on both the refugees and the host Jordanian society. The Jordanian government stressed that this plan is the only approved document, which should provide international grants and agencies to respond to the Syrian crisis through this three years' plan. The plan is based on a comprehensive assessment of the vulnerabilities of refugees in the host communities to enhance prevention and mitigation of negative consequences caused by the Syrian crisis. The plan allocates the available budgets to the required objects of expenditure, with allocations of 2.7, 2.6 and 2.4 billion dollars for 2017, 2018 and 2019, respectively ²⁶.

In terms of educational policies, more than a third of the Syrian children were refugees (or 36%) of school age in January 2016. Since the beginning of the Syrian conflict, Jordan has given Syrian refugee students free access to public schools. The Government approved refugee schools in refugee camps established in 2012 in Za'atri and 2014 in Azraq. Acknowledging that there are many international organizations and local associations that provide non-formal education and in-formal education to children who are unable to join formal education system or do not qualify for their special needs, the availability of educa-

24-Özer, S., Şirin, S., & Oppedal, B. (2013). Bahçeşehir study of Syrian refugee children in Turkey. Available in www.fhi.no/dokumenter/c83Fb3a78c.pdf.

25-UNHCR, Global Appeal 2015.

26-Ministry of Planning and International Cooperation. The Jordan Response plan for Syria Crisis 2017-2019. <http://www.jrpsc.org/>

tion for Syrian refugees in Jordan depends on government-approved programs, which are heavily financed by international humanitarian support.

In addition to free primary and secondary education, Jordan provides subsidized health care to Syrian refugees and supports a number of basic supplies similar to Jordanians such as bread, fuel, water and electricity through state subsidies. According to the World Bank's estimate of 2016, hosting refugees cost Jordan more than \$ 2.5 billion annually, equivalent to 6% of GDP and 25% of annual government revenues. The education of Syrian refugees in public schools costs \$193 million annually. Donors played an important role in supporting the refugee education crisis and their health care²⁷ .

Study Significance

Assessing social, psychological, environmental and cultural related concerns within the context of displacement among refugee family is essential to maintain humanitarian support and to foster integration. The Jordanian governmental in collaboration with local and international organization is struggling to meet the increasing needs and demands of refugees in Jordan. The economic constraints and pressure on infrastructure have called for more attention to quality of life and livelihood status of refugees in Jordan²⁸ .

In 2002, the National Council for Family Affairs (NCFA) first implemented the Jordanian family survey, which includes eight main components: housing, infrastructure, environmental, education, health, economic status, and the labor market, and the social safety, culture, entertainment and recreation and public life. The results contributed to the formulation of NCFA policies and the establishment of national strategies for the Jordanian family. In 2014, the NCFA issued a national report on the status of the Jordanian family. The 2014 report surveyed a representative sample of Jordanian families, including 1,900 family heads of households) and 819 family members. The report provided a complete picture of family status across the above-mentioned eight domains.

For the present study, the NCFA in collaboration with UNHCR has initiated the surveying of refugee families in Jordan using the same methodology as for Jordanian families, including the same eight major domains. This will enhance understanding of quality of services, needs, issues, and priorities of refugee families in Jordan, and will provide baseline data for future reports.

The purposes of the survey are to:

1. Describe the conditions of refugee families and investigate their demographic , social, economic, cultural, educational, health, marriage and housing characteristics and other characteristics related to displacement.
2. Review national and international policies and strategies and their compatibility with the needs of the refugee families.

27-Human Rights Watch, "We are Afraid of Their Future," the barriers to education of Syrian refugee children in Jordan, 2016.

28-Ministry of Planning and International Cooperation. The Jordan Response plan for Syria Crisis 2017-2019. <http://www.jrpsc.org/>

3. Provide evidence-based research outcomes to inform family - related policies and programs.
4. Identification of national priorities with respect to refugee family issues.
5. Provide recommendations regarding humanitarian situations and the interventions required to respond to the priorities of refugee families and gaps in services according to the results of the field survey.

Methodology

Design:

A cross sectional, explorative quantitative approach was used to survey refugee families, resided and registered by the UNHCR at the camps and urban areas in all governorates. Data was collected using a survey that has been developed by the consultation and technical committee at the National Council for Family Affairs (NCFA). The survey has been used in previous studies conducted by the NCFA and has been modified and pilot tested among refugee families. In addition a psychological scale was added.

Settings:

Data was collected from refugee families in camps and urban areas. Only those registered by the UNHCR across the 12 governorates of Jordan and the two camps Za'atri and Azraq.

Sample and sampling

A multistage sampling technique was used to obtain the sample of this study. The sample unit is the family and thus the total number of refugees estimated based on the average number of members of families (Family Size).

Sample size calculation

- In this project the sample size determined as follows: Jordan has 655,344 Syrian refugees registered with UNHCR. According to the UNHCR report of December 2016, 514,274 of them live in Urban Settings²⁹. In addition, 61,004 Iraqis, 5,697 Yemenis, 3,266 Sudanese and 773 Somalis also lived in urban areas³⁰
- According to the UNHCR Data, the average family size of Syrian refugee families was 4.7³¹, and to make it more reliable we should assume it is 4 to have a representable sample. Indicating that the estimated number of Syrian refugee families in Jordan is 128,500 in urban areas and 35,300 in camps.

29-http://reliefweb.int/sites/reliefweb.int/files/resources/Syrian_Refugees_Admn4_Dec2016_A3L_0.pdf

30-UNHCR (January 2017). UNHCR OPERATIONAL UPDATE.

31- UNHCR (2016). CASH ASSISTANCE: IMPROVING REFUGEE LIVES AND SUPPORTING LOCAL ECONOMIES

- An equal estimate of non-Syrian refugees was made later, with a total of 17,683 families
- The size of the sample was calculated using a specialized program for the calculation of samples G. 3.0.10. The sample size was 805 families.
- The sample was proportional to the refugee population registered with UNHCR in each governorate as outlined in the below table;

Table1: sample size and distribution per governorates and camps³²

Gov./camp	Total pop	Families	Families 0037.	Sample Size
Governorate				
Amman				
Syrian	183778	45944.50	169.99	170
Iraq	61004	15251.00	56.43	55
Yemen	5697	1424.25	5.27	5
Sudan	3266	816.50	3.02	5
Somalia & others	773	193.25	0.72	5
Mafrq	159985	39996.25	147.99	145
Irbid	137314	34328.50	127.02	125
Zarqa	109383	27345.75	101.18	100
Balqa	19181	4795.25	17.74	15
Madaba	11398	2849.50	10.54	10
Jerash	9637	2409.25	8.91	10
Karak	8659	2164.75	8.01	10
Ajloun	7703	1925.75	7.13	10
Maan	7522	1880.50	6.96	5
Aqaba	3507	876.75	3.24	5
Tafeilah	1555	388.75	1.44	5
Total 1	731673	182918.25	676.80	680
CAMPS				
Zatari	79551	19887.75	73.58	75
Azraq	54077	13519.25	50.02	50
Total 2	141070	35267.50	130.49	125
Total 3	863990	218185.75	807.29	805

32- UNHCR (January 2017). UNHCR OPERATIONAL UPDATE. & special request data by UNHCR focal person for distribution of Syrian refugees. <https://reliefweb.int/sites/reliefweb.int/files/resources/UNHCR%20Jordan%20Operational%20Update%20January%202017%20FINAL.pdf>

33- It is worth noting that information on the demographics of the household is based on the information obtained from the head of the household,

Instrument

Data was collected using the quantitative tool used in the survey of Jordanian families prepared by the National Council for Family Affairs (2017). The project was reviewed by the technical committee of the project and adjusted to meet the needs of this study.

Tool description

The tool included several aspects including:

1. Section I: descriptive data that show the geographic aspects of the respondents (governorate, place of residence) as well as demographic information of individuals in the household (age, sex, work, education, health insurance, medical concerns and potential medication used, sports and leisure activities).³³

2. Section II: general characteristics of the family in terms of reasons of flight, and types of refuge, average income, economic situation, living and housing situation, access to services, infrastructure, aspects and sources of expenditure;

3. Section III: occurrence of violence, practices, survivors of violence and also the most perpetrators. It also includes information on a person and/or institution that the family resorts to in the case a member is being subjected to violence at home, school or within neighborhood;

4. Section IV: discusses prevalence and reasons for school drop-out and absenteeism. Here, the question is about the educational institutions that the family members attend and the fact that family members receive home schooling, private teaching, private schools and reasons for dropping out of school, if any.

5. Section V: matters related to the work of women (outside the home or as housewives); this includes the type of work and working hours and the impact on the rest of the family;

6. Section VI: concerns the question of education. Here, the educational situation of individuals is detailed according to the age group in which each individual is located, whether kindergarten, schools or universities; the question is about the specificities of each stage and its requirements, the reasons for enrollment, the reasons for non-enrollment from the point of view of the head of household, the economic cost, and the comparisons between the available education sectors and the services available in this field.

7. Section VII: concerns public life of individuals in terms of social, volunteering, recreation and entertainment activities;

8.Section VIII: attitudes, knowledge and attitudes of the refugee family and their impact on them in several aspects: economic, infrastructure, work, health, family relations, public life, socialization and a sense of satisfaction with life. The head of the family determines the point of view towards these issues and the degree of his consent to the impact of these issues on the family.

9.Section IX: situation of reproductive health and family planning and related decision making regarding within families;

10.Section X: main three priorities of each of the following axes: Population, Housing and Services, Environment, Education, Health, Economic and Labor Market, and Axis Social safety net and the center of culture and entertainment and recreation and the center of public life

Tool validation

In order to verify the validity of the tool, the National Council for Family Affairs formed a technical committee that reviewed the survey (using the face and content validity approaches) through several stages:

1. The Consultant has made the amendments to the original form (survey) in accordance to the National Council of Family Affairs survey (2017) and submitted it to Technical Committee
2. The Technical Committee proposed amendments and made a suggestion and verifications to concepts used in the survey, suitability with refugee status, and assurance of refugees' rights
3. The necessary amendments have been made and presented again to the Technical Committee.
4. A pilot study was then conducted to assure that the survey is clear, appropriate, well understood, its ease, and feasibility reaching the target sample.
5. The final amendments were then made according to inputs from pilot study, and final Arabic draft of the survey generated.
6. The form was then translated and submitted to the technical committee and translation experts to verify translation provided and to produce a final English version of the form that is equivalent to the final Arabic one.

Data Collection and reporting procedure

Training phase

A special training program (intensive training course) was held for all field researchers for two consecutive days, for training on the study tool and aspects related to refuge, including a legal lecture provided by the UNHCR.

Piloting and programming phase

The sample was drawn according to the plan prepared and the final form prepared according to the approval mechanism and the ethical conduct of scientific research and the collection of archived data, including the use of the approval form and the maintenance of confidentiality and privacy. A pilot survey was conducted on five refugee families to identify the validity of the tool, time required and any issues that need to be modified before the data collection stage. The CSPro program for data entry has been developed.

Data collection stage

During this stage, the research teams were formed, so that the governorates and camps were simultaneously surveyed within the specified period of time. The data were entered directly through the tablets on the allocated program and transferred from disk to external memory and stored daily once researcher finished data collection per day.

Phase 5: Reporting Phase

The data were analyzed according to the pre-prepared data analysis plan. The causal analysis work groups were then conducted and formed of international and national institutions and government institutions specialized in all aspects related to refugees in Jordan (49 participant).

Four working groups formed: demographic and health characteristics, economic characteristics and family housing, educational characteristics, and family relations and participation in public life.

The first draft was prepared in English and presented to the Technical Committee, UNHCR and the National Council for Family Affairs. After taking into account comments and notes, the report was presented in its final format.

Statistical Analysis Plan

The data entry process adopted using the Census and Survey Processing System (CSPro), a highly organized input program used to verify the entry of each variable, adjusts the range of variables and jumps (skip format) from one variable to another. There is also a limited set of consistency controls also present in the data entry program.

After the completion of CSPro processing copy of each individual in the file group was prepared. The data then analyzed using statistical program SPSS 21.0 for according to the following plan:

Descriptive statistics: all items of the survey addressed in terms of frequency and percentages and compared to each other. Also histogram, bar graph or pie graph has been used to represent the data for each item.

Inferential statistics: specific items used to compare using cross tabulation depending on the level of measurement for each item.

Chapter II:

Domains of the report

This chapter consists of five main domains that will present the results of this survey on the refugee families in Jordan within the Jordanian national context. The demographic characteristics of the sample will be presented and compared with the available national statistics and presented, also family relations, social issues and participation in public life will be discussed to reflect the reality and trends of the issues related. Physical, psychological well being, as well as the environmental, health characteristics have also been addressed.

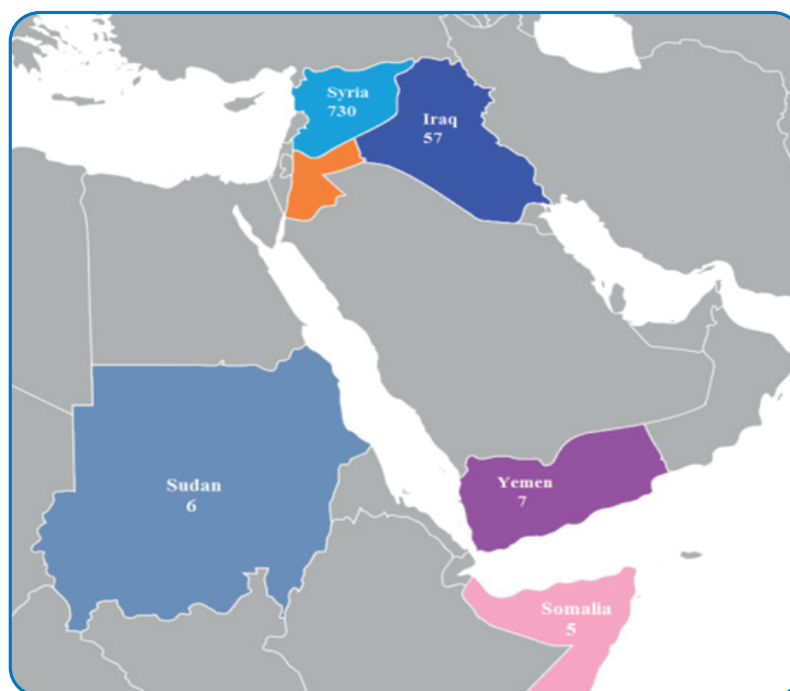
In order to review the educational and economic characteristics of each of the five areas, the description of the survey results will follow a brief description of the relevant national context and the results of previous statistics and reports. In addition, the discussion section presents the inputs of causal analysis sessions conducted with a group of experts and stakeholders on each subject to examine family issues and their immediate and underlying causes, in an attempt to better understand each problem and propose recommendations for solving each problem.

Domain I: Demographics Characteristics:

In order to be representative of the entire refugee population, the sample of this survey was designed in a proportional manner, where refugee families in all geographical locations of Jordan, both inside and outside camps, and of the top five nationalities are represented. A total number of 805 refugee families, with a total of 3,092 individual members, who reside in all twelve governorates of the Hashemite Kingdome of Jordan, were surveyed.

Of the 805 refugee families, about 91% (n=730) were Syrian, followed by 7% Iraqis (n=57), 1% Yemeni (n= 7), 0.5% Sudanese (n=6), and 0.5% Somalis (n=5). The order and proportions of countries of origin were consistent to a great extent with the statistics published by UNCHR in June 2017 and discussed in the context earlier (figure1).

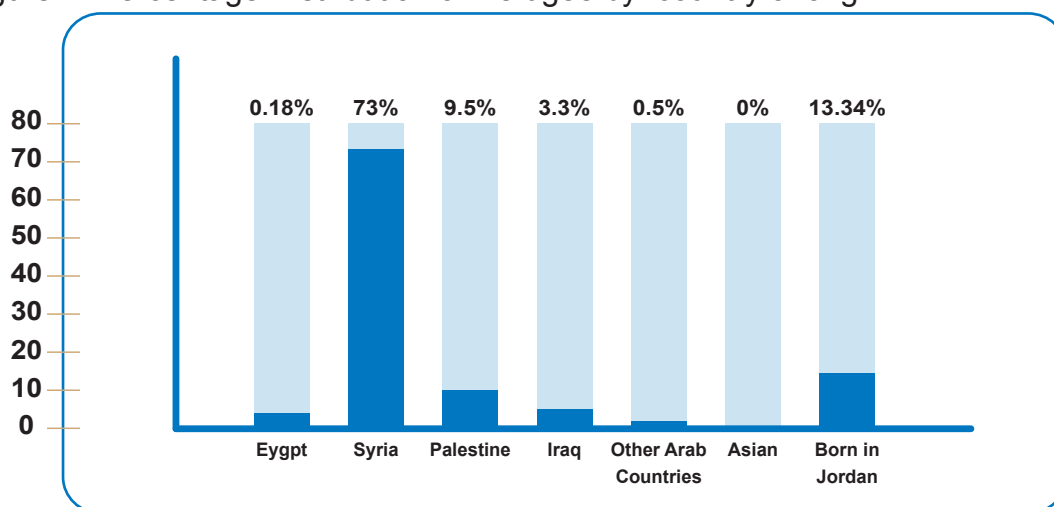
Figure 1: Number of families per country of origin



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

Official statistics shows that the largest percentage of refugees in Jordan comes from Syria, which represents 73% of the total refugees, 9% from Palestine and 3% from Iraq. It is worth noting that 13% of the refugees are born in Jordan. Of whom about 95% are registered with the official authorities and carry refugee documentation Figure (2).³⁴

Figure 2: Percentage Distribution of Refugee by country of origin



Source: Department of Statistics, Population and Housing Census. 2015.

³⁴Department of Statistics, Population and Housing Census. 2015.

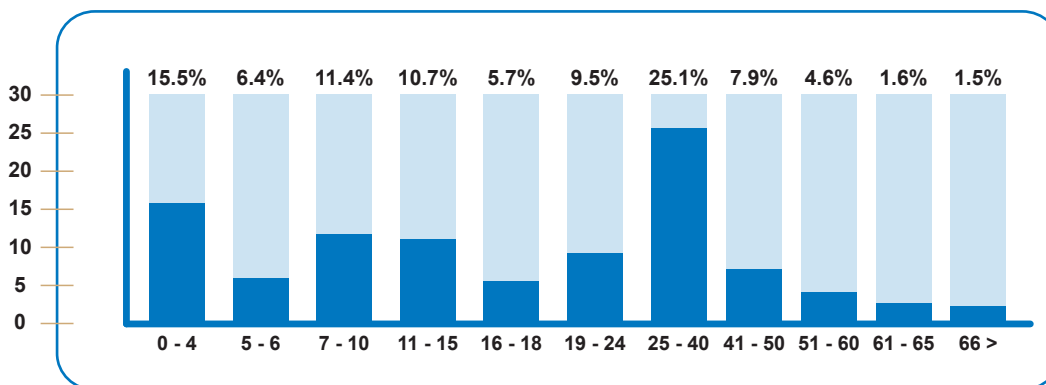
Gender Profile

In the surveyed families, there were 48.8% (n= 1508) male members and 51.2% (n= 1584) female members. This result is consistent with the national statistics of the refugee population in Jordan, as well as the host Jordanian population, where males and females are nearly equal, as reported in Jordan Demographics Profile³⁵.

Age Profile

The average age of family members in this survey were 22.1 years (standard deviation = 17.2). The results showed that 25.1% (n=777) of the family members in the age group (25-40) years, 15.5% (n=480) in the age group (0-4 years) and 11.4 (n=354) in the age group 7-10 years). The lowest age group (61-66) was 1.5% and (1.6%) were more than 66 years old . This survey shows that 59% are under the age of 25 years. Which is relatively similar to the Jordanaia population and this might be explained by the deep similarities in cultural and ethnic properties of the refugee communities and Jordan's host community, as both share the same Arabic, Middle-Eastern culture and values.

Figure3: Percentage Distribution of Refugee Family Members by age groups

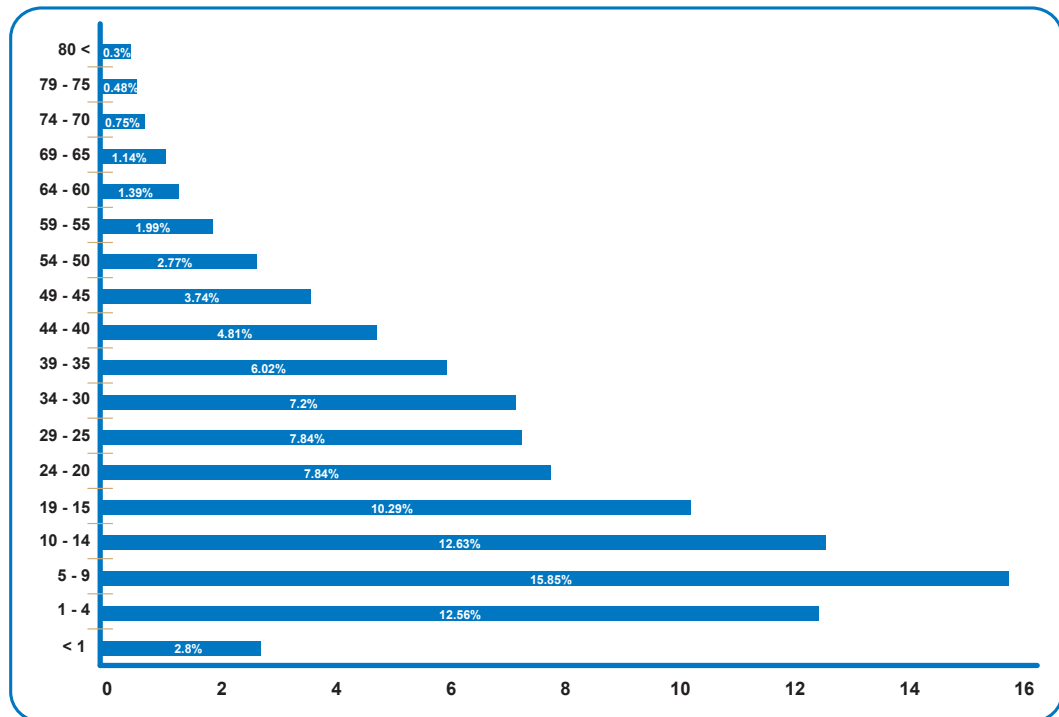


Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

In comparison to the Jordanian population, Jordan is a fairly young society, with 35% representing the aged 14 years or younger and 20% between the ages of 15 and 24 years. This means that a total of 55% of Jordan's population are under the age of 25 years. Similarly, national statistics indicates that refugee communities in Jordan are young. In comparison to the national statistics, which reflect the age construction of refugees in Jordan, it was found that 2.81% of all refugees in Jordan are aged 60 years or over (1.42% of those aged 64 years or over). 38.8% of the refugees are between the ages of 5-19 years and 15.4% are under 4 years of age. Therefore, the proportion of individuals aged 19 years or less is 54.2% of the total refugee population. (Figure 4).³⁶

35-Department of Statistics, Population and Housing Census. 2015
36-Department of Statistics, Population and Housing Census. 2015

Figure 4: Percentage Distribution of Refugees by age



Source: Department of Statistics, Population and Housing Census. 2015

Reasons for Flight and Displacement

The survey examined the reasons behind refuge. The majority of refugee 93.3% (751 families) of the families indicated that Jordan was the first country to refuge, and 3.6% (29 families) resorted to other countries before ended in Jordan. However, some families chose not to answer this question or did not know the answer. Most of the Somali refugee families (80%) indicated that Jordan was not the first country, while most Syrians (94%), Iraqis (88%), Sudanese (83%) and all Yemenis (100%) indicated that Jordan was the first country they fled to.

Regarding reasons for displacement to Jordan, the majority of refugee families reported (92%, 741 families) that the main reason for their flight is for safety reasons, followed by political reasons (6%), while only nine families (1.1%) revealed that economic constraints are the reasons for fleeing. About 93% of Syrians (977 families), 88% of Iraqis (50 families), all Sudanese (6 families) and all Somalis (5 families) have sought refuge for safety and security or to escape war. 42% (3 families) of Yemeni families reported that security and safety was their reason for refuge in Jordan, while other Yemeni families reported that economic (29%) and political (29%) reasons prompted them to seek refuge. About 40% of Yemenis had sought refuge in Jordan before the conflict in March 2015 but now

are unable to return to their country because the situation has worsened. They initially have come to Jordan seeking medical services or education. According to national statistics, Jordan has a refugee population of 2,712,992, of whom 55.1% has applied to Jordan for security reasons and as a result of the armed conflict in the country of origin (86% males and 14% females).³⁷

This survey also examined the decision of families to seek refuge in Jordan. The majority of the surveyed families (80%, 642 families) reported that they were forced to take this decision, while about 18% (147 families) reported that their decision was optional. Of the refugees currently residing in camps, 85% reported that they had been forced to flee, compared to 79% of refugees living outside camps.

Another interesting finding is that all Sudanese, all Somalis, 84% of Iraqis and 83% of Yemenis reported that they had been forced to flee, while 79% of the Syrians reported that they had been forced to flee, despite the critical situation in Syria. From analysis, it is clear that the heads of families seem to interpret the word “optional” as not being directly threatened by a life-threatening situation when they decided to flee their country.

Geographical Distribution

The most recent report of the UNHCR (2017) mentioned that 20% of all registered refugees in Jordan resided inside official camps, while 80% resided among Jordan’s host communities in the northern and central regions specifically.³⁸

This survey includes both in-camp refugees and host-community. In terms of current place of living, 15% (n=125) families reside inside camps, all of them are Syrian, whereas 85% (n= 680) reside elsewhere in Jordan.

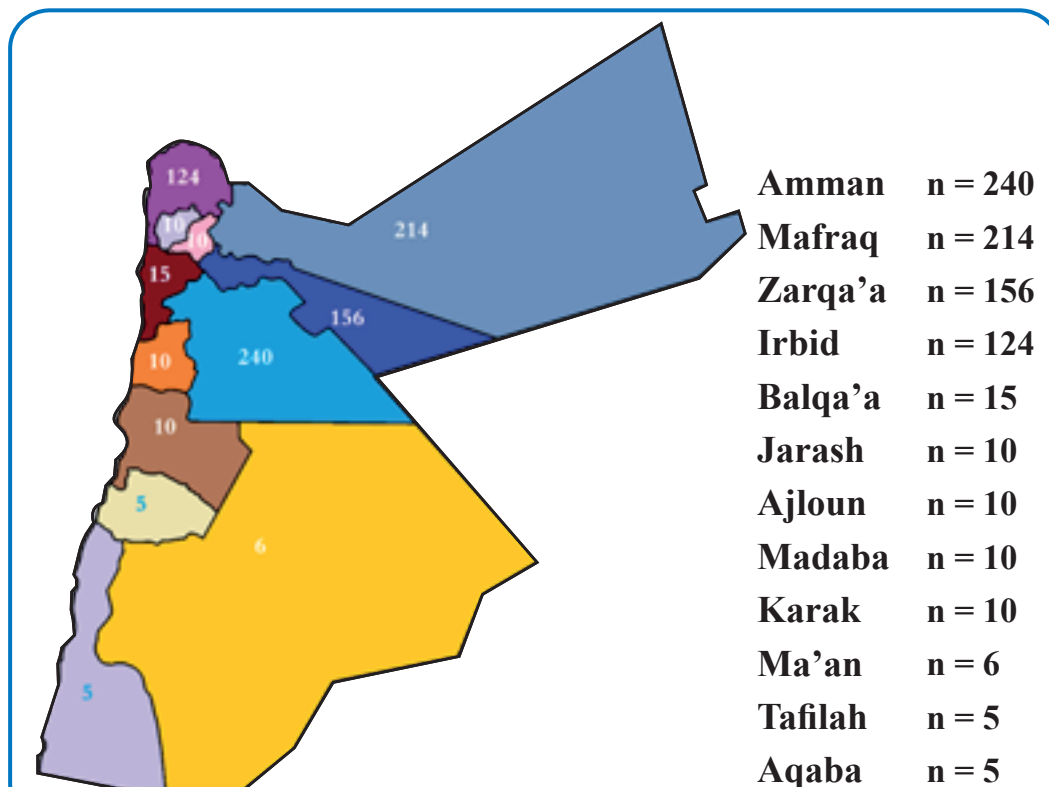
While designing the sample, the survey attempted to be a representative sample of refugee families registered in the UNHCR in all governorates, although when researchers contacted families to arrange for interviews, they found that many families move between governorates.

The map below shows the geographical distribution of the sample according to the governorate in which they reside. The sample was distributed as follows: 29.8% of the sample in Amman, 26.6% in Mafraq, 19.3% in Zarqa, 15.4% in Irbid, 1.8% in Balqa (figure 5).

37- Department of Statistics, Population and Housing Census. 2015

38- UNHCR & UNICEF (2017). A promise of tomorrow: The effects of UNHCR and UNICEF cash assistance on Syrian refugees in Jordan

Figure 5: Distribution of Refugee Family by Governorates



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

Syrians form the highest proportion of refugees in Jordan. Syrian families were surveyed in all 12 governorates.

The Iraqi families were surveyed in five governorates (Amman, Zarqa, Mafraq, Irbid and Madaba), Yemenis in three governorates (Amman, Zarqa and Madaba), Sudanese in two governorates (Amman and Irbid), while all Somali families (5) were surveyed in Amman.

The high proportion of refugee families in the capital city of Amman, Mafraq, Zarqa and Irbid can be explained by proximity to the Jordan-Syria border, and by the fact that relief agencies, health facilities and services, and education services are concentrated in these cities.

Domain II:

Family Relations and Participation in Public Life

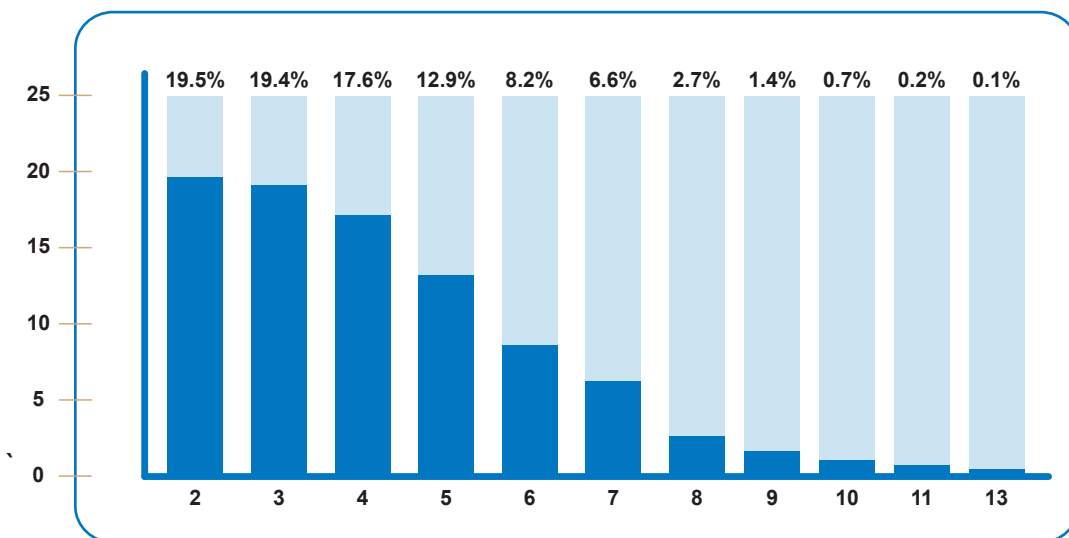
This domain addresses issues related to family characteristics, family relations and social systems. Topics include family structure, family dynamics and relationships, occurrence of violence, women’s employment issues, the use of technology and social media, and the participation of family members in public life. Family dynamics refer to patterns of association or interaction among family members.

Each family has its unique system and dynamics, but there are some common patterns. This study attempted to highlight some of these patterns in refugee families by asking questions about decision-making and child-rearing methods, as well as some family issues such as marital status and marriage age to monitor trends and reality.

Family Size

The average size of refugee families is 3.8 persons. Families comprising two members were the most prevalent in the sample at 19.5%, followed by families with three members (19.4%), families with four members representing (17.6%), and less frequent family sizes of 13 and of 11 member representing 0.1% and 0.2% (Figure 6)

Figure 6: Percentage Distribution of Refugee Families by Number of Family Members



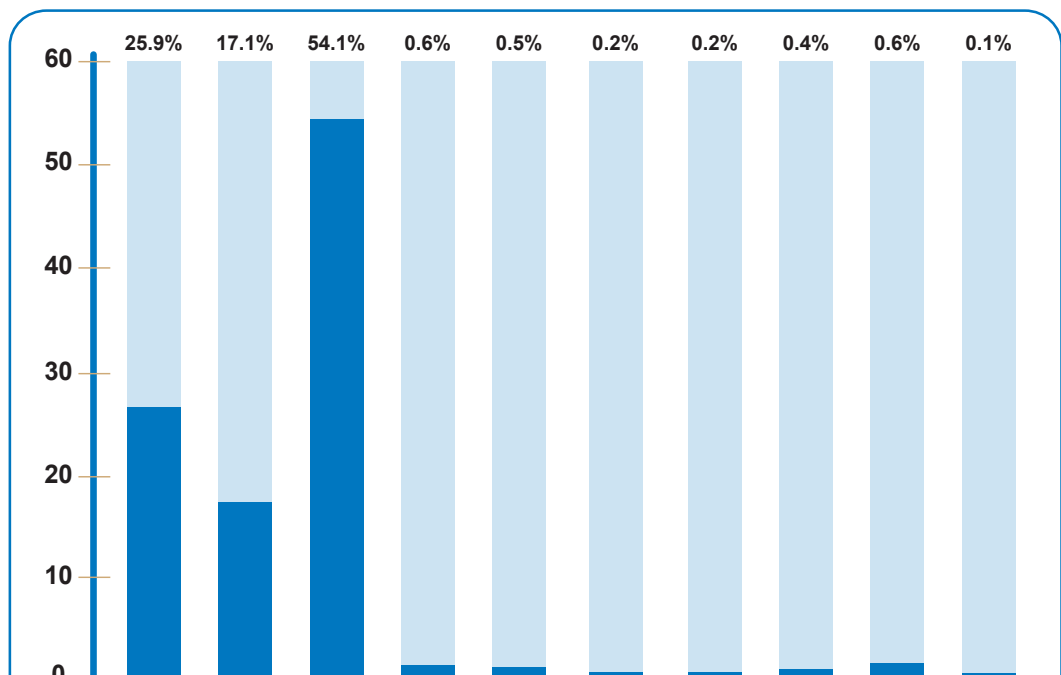
Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017
 In comparison with Jordanian families³⁹, the average size of the refugee family is lower. The average number of Jordanian family members is 4.8 members compared to 3.8 members for refugee families.

However, when comparing the size of the family among refugees in camps and refugees in host urban communities, families in the camps were larger with an average family size of 4.4 members compared with 3.7 in refugee families in urban host communities outside camps.

Head of the Household

The majority of families were male-headed (83%), (n=668) with 17% (n=137) female headed families. Families were reached through the United Nations High Commissioner for Refugees (UNHCR), covering both families headed by men or women. The study sample pointed out that 17% of the family members are the husband / wife of the head of household, and 54% are the son / daughter of the head of household. According to the results, 3% of grandparents, grandchildren, parents of a husband or wife, siblings, other relatives and even non-kin members are less than 1%. Figure (7).

Figure 7: Percentage Distribution of Refugee Family members by Relationship to Head of Household



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

39- Department of Statistics, Population and Housing Census. 2015

Family Type

In terms of family type, the results showed that 52% of the families consisted of both parents and their children, while 17.5% were single mothers and their children, 12% were families comprised of couples living alone, 9% were fathers living alone, and only 2% described their families as extended families with grandchildren and / or grandparents and other relatives.

Single fathers with their children came second in about 2%, and couples with more than one wife (polygamy) accounted for about 2 % of the families surveyed. In comparison with national statistics, the number of refugee families in Jordan headed by a woman is 17%⁴⁰, which is consistent with the characteristics of the families that appeared in the study, knowing that the sample of families headed by a woman was intentional (Table 2).

Table 2: Percentage Distribution of Refugee Families by Family Type

Family Type	%
Family consisting of husband, wife and children	51.8
Family headed by a woman	17.5
Family consisting of husband and wife	12
Parent live alone	9.4
Extended Family	2.4
A family consisting of a husband and more than a wife and her children	1.7
Family consisting of husband and children	1.7

During emergencies, children often face severe protection concerns, including exposure to threats, violence, exploitation or abuse. Children in displacement are also at high risk of separation from their parents or caregivers: some are separated or lost as a result of the conflict in their country of origin, others lose their parents or entire families during the often long and dangerous journeys during flight. Still others are sent alone by their families in hope of finding safety or hope for a better future, yet fall into the hands of exploitative or dangerous traffickers or smugglers. As a result of separation, children are often at heightened risk of abuse, exploitation and harm and many experience trauma, loss and other forms of harm.

With the aim of an effective and timely response to the complex protection situations of UASCs, UNHCR and partners implement Child Protection activities

40- Department of Statistics, annual statistics report. 2015

through a comprehensive Child protection system that includes, inter alia, specialized case management services, coordination, capacity building and monitoring of national child protection systems as well as advocacy. Due to the heightened risk unaccompanied and separated children are exposed to, UNHCR and partners place particular importance on the early identification, registration and assessment of UASC to identify risks and specific needs of the child and develop a timely response, including the identification of a suitable care arrangement as well as initiating tracing or reunification assessments. All interventions on behalf of UASCs are undertaken in accordance with the child's best interests embedded into a comprehensive Child Protection system. For particularly complex cases, including those in need of a durable solution, decisions for the child is taken by the Best Interests Determination panel, represented by major child protection stakeholders in Jordan, including the Family Protection Department, MOSD, UNICEF as well as child protection NGOs and are chaired countrywide by UNHCR. Specific partnerships are concerned with the particular protection situation and response for UASCs, which includes foster care arrangements, awareness raising, foster parenting skills, psychosocial support as well as material support.

During the Syria crisis, more than 3,000 unaccompanied children have sought refuge and protection in Jordan. Of these, 95% were subsequently reunified with parents or other family members through the efforts of the Jordanian Government and humanitarian organizations, while the remainder have been placed in alternative care arrangements, including foster care for young children and placement with mentors for older teens.

Family Decisions

With regard to family decisions, the results revealed that health decisions related to the timing of pregnancy and childbirth in most families are taken by the father and mother together (64.7%) or by the father alone in 16% of the families or by the mother in 11% of the families.

The father and mother took the decision to use family planning in most families (66%), and the mother took it individually in 14% of families. The results also show that the decision of the medical and surgical interventions of a family member is decided mainly by the father and mother together (38%) of the families.

In terms of economic decisions, family members were responsible for managing family expenses (43.7%). The father alone takes the decisions in 12% of the families, and the mother was the sole parent to take the decision in 12% of families. In case of decisions on the educational situation, the son / daughter chooses his or her specialization (secondary, university, college and postgraduate) in 34.4% of the families. In 34% of families, the father and mother together decide on planning family activities.

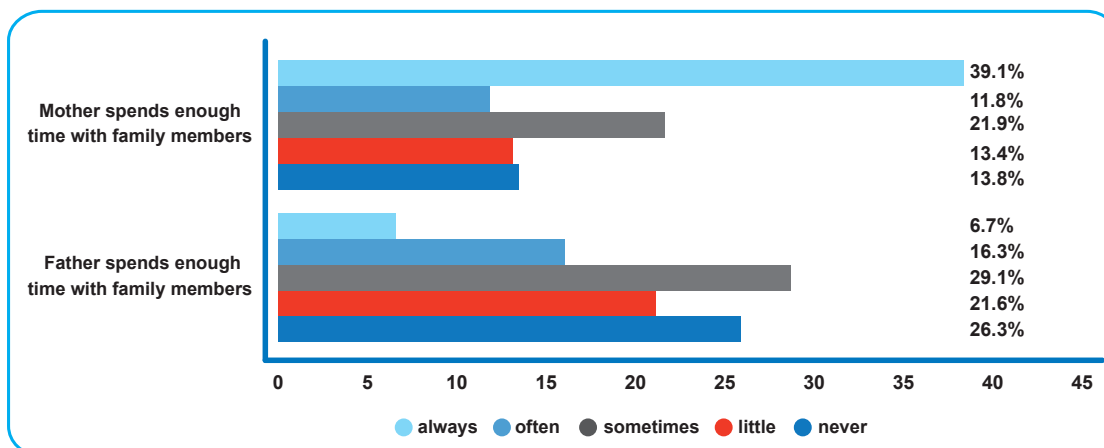
Family Disputes

The attitudes of the families regarding marital disputes differs. 37% of families indicated that disagreements occur between the spouses. 26% of the families indicated that disputes do not occur at all, compared with 31% of the families indicating that disagreements occur between the spouses sometimes.

In addition, 35% of respondents indicated that disputes between parents and their children occur a little or never (30%) while (32%) state it happens sometimes. Regarding the method of dialogue between the parents to resolve differences, the families indicated that 10% always use dialogue to resolve family disputes, compared with 26% of the families who do not discuss the dispute.

Regarding dialogue between parents and their children to solve problems, 9% of families reported that it always happens, compared to 25% where this dialogue never happens. In addition, 39% of the families reported that mothers always find time to spend with family members, compared with 7% of the families in which fathers always spend time with members. It is interesting to note that the percentage of families who never had spent enough time with the father neither the mothers respectively, reached 14% and 26% respectively. This might be linked to the fact that the mothers are not involved in the labour market as fathers (Figure 8).

Figure 8: Percentage Distribution of Refugee Families by Attitudes Toward the Family Time



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

The majority of families (52%) consider that marriage counseling is necessary for females before marriage, compared to 14% who do not find it useful. Likewise, 53% of the families find it important for males before marriage, compared to 13% of the families do not consider it important. And 56% of the families find that family

and marriage counseling services are important for the family and its members, compared to 8% that do not find it important. But only 48% of families indicated that they will consider the service if provided on a professional level. On reality, the majority (53%) of the families did not receive this service before, compared with 2% who indicated that they always receive it and 17% sometimes. Causal analysis groups with experts in social services and family counseling indicated that refugee families have a lack of access to, or lack of knowledge about existing social services. The direct causes are poor accessibility due to lack of transportation and long distances. As to the underlying causes, weakness was noted in the quality of social services and psychosocial barriers. Mismatch between services and family needs were figured out as the root cause of the problem. The group of experts also noted poor coordination among various sectors of social services as a problem.

Methods of Raising Children

With regard to methods of raising children, it was found that refugee families vary in the methods used while raising children, and that refugees do not have a specific approach to education. Families may talk, encourage, or motivate, or they may resort to beatings, or use threats and intimidation. Dialogue, encouragement and motivation came first in terms of methods always used for child discipline by mothers, with both confinement at home and expulsion from home the least chosen disciplinary measures for mothers. With regard to fathers, the order of methods in terms of use was similar to that of mothers, but the proportions varied. It should be noted that mothers resort to threats and intimidation more than fathers, while fathers resort to beating slightly more than mothers (Table 3).

Table (3): Percentage Distribution of Refugee Families by parents' discipline methods

Method	Mother			Father		
	Always(%)	Sometimes (%)	never (%)	Always(%)	Sometimes (%)	ever (%)
Dialogue	29	46	11	24	46	17
Assertiveness	8	52	26	7	52	27
Forgiveness	6	58	34	6	52	29
Promotion and Encouragement	22	47	19	19	46	22
Threatening	5	41	33	4	45	38
Hitting	2	35	40	3	38	44
Grounding	2	33	43	1	35	50
Shouting	2	37	48	2	37	47
Expelling from home	1	15	70	1	13	71
Confinement at home	2	18	65	2	19	63

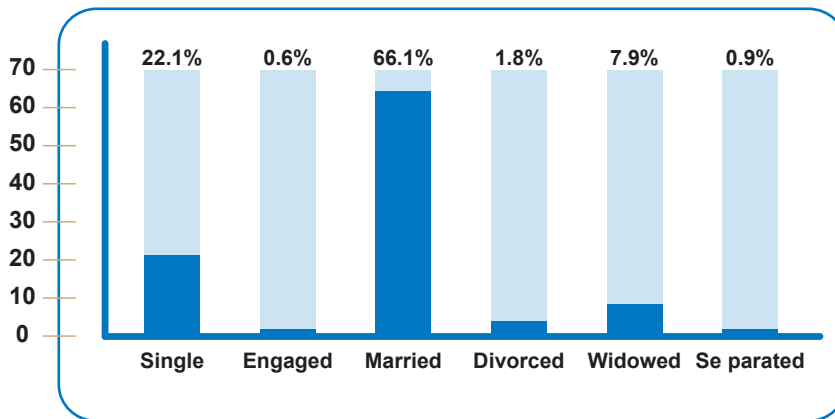
Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

About 40% of families are concerned about family building and family relations in general, while 20% are not concerned about these issues.

Marriage

In terms of marriage and the appropriate age for marriage from the family point of view, the results showed that 66.1% of the family members in the age group (16 years and over) were married, while 22.1% were single, 7.9% were widows, 1.8% were divorced or divorcee, while the percentage of those who were separated was the lowest among the family members in the age group (16 years and over) by 0.9% (Figure 9).

Figure 9: Percentage Distribution of Refugee Family members aged 16 and above by Marital Status of Family Members Aged 16 and above



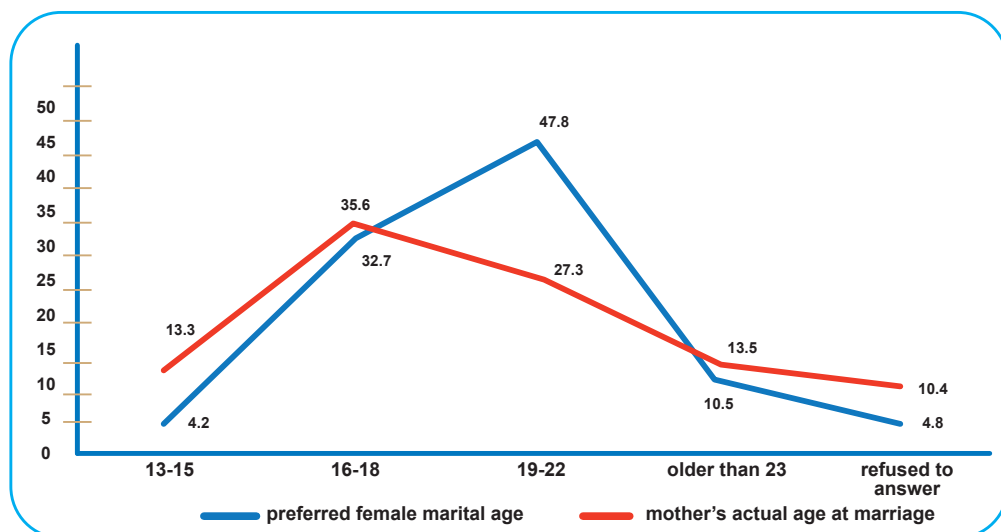
Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

As for attitudes, the results showed that the average appropriate age for marriage for females was 20.5 years, while for males were 27.3 years old. About 48% of families indicated that 19-22 years were the appropriate age for marriage, and 33% chose 16-18 years for females. While the appropriate age group for males was 25-29 for 45.7% of the families, and about 35.3% of the families that prefer age between 18-24 years as the appropriate age for male's marriage. However, the actual marriage ages of the mothers or wives showed that most of them married under the preferred age of marriage, and nearly 50% married less than 18 years.

As for family attitudes toward marriage, 31% of the families consider that marrying daughters of the family as one of the most important family projects, compared to 26% who do not. 29% of families find that marrying the family's sons as one of the most important family projects while, 28% do not. 63% of the families find that the family never suffers from the termination of the engagement before the actual

marriage occurred, 16% suffer a little, 19% sometimes and less than 1% always suffer. 3% of families always prefer to marry relatives always and 19% do not prefer it, and 35% sometimes prefer it. Only 10% of the families do not mind protection marriages (the marriage as a strategy of protection for girls) against 52% do not agree. In addition, 9% of the families accept unregistered secret marriages for one of its members, while 64% do not accept it. The Supreme Judge Court issued instructions for granting permission to marry between the ages of 15 - 17 years in 2017, which restricted to some degree the conditions in which permission may be granted for marriage under the age of 18. Including the dowry rate and linking it to the dowry of similar girls in the family and community (accepter rate), it also enforced the couple to undergo a training course on the provided by the Office of Reform and Mediation and family conciliation at the court, and also the approval of minors department (a committee of experts assessing the best interest of the child) in the court and other conditions such as the husband is not married and not to drop out of education and prove financial capacity, as well as the age difference shall not exceed fifteen years. It is noteworthy that the number of early marriages has increased significantly since the beginning of the refugee crisis in Syria, which requires a special measures for protection (Figure 10).

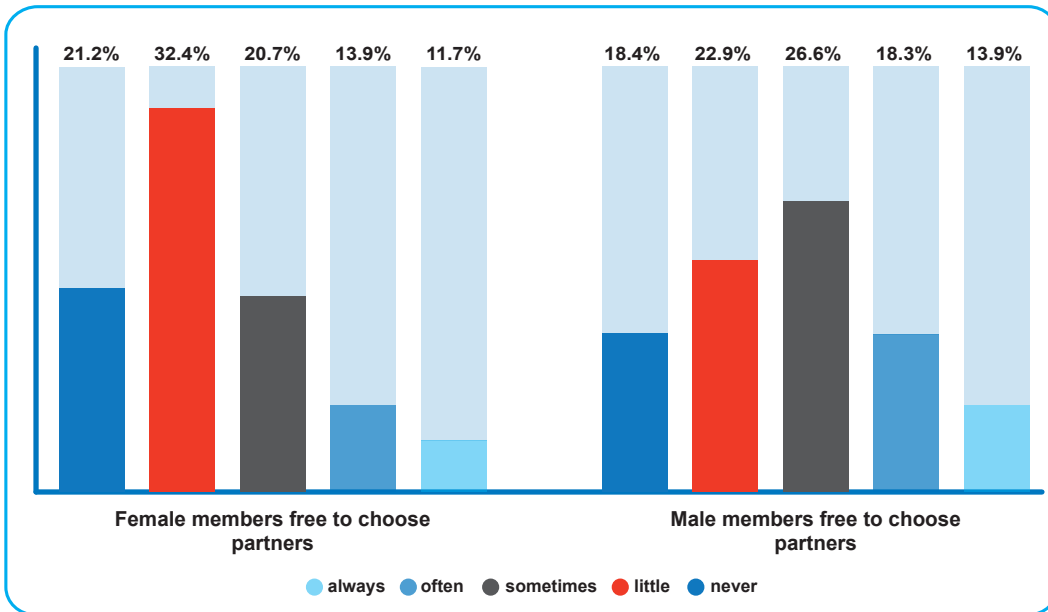
Figure 10: Percentage Distribution of Refugee Families by age of marriage of mothers versus the preferred age of marriage



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

The heads of families also indicated that male children are always free to choose a life partner by 14% compared to 12% for girls, while 18% of families indicated that male children are never free to choose a partner, compared with 21% for girls in choosing a life partner (Figure 11).

Figure 11: Percentage Distribution of Refugee Families by their attitudes towards free of choice for the spouse and gender



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

According to the national data, the percentage of female Syrian women married under the age of 18 has almost tripled during the period 2011-2015, from 12% of the total number of registered marriages in 2011 to 18.4% in 2012 to 25% in 2013 reaching to 32.3% in 2014. The rise in 2015 continued to reach 34.4%. This means that one third of the Syrian women who married in 2015 were under the age of 18 years. This percentage reached 13.4% National level in Jordan. A quantitative study revealed that child marriage occurs among Jordanian and Syrian families and in Palestinian refugee camps due to the following reasons: poverty, desire to be relieved of the financial responsibility for providing the girls in family, repeated academic failure, and the desire to be rid of the responsibility of “protecting the honor of girls, customs and traditions, social raising, female friends pressure, media, fictional TV dramas”⁴¹. As for the trends of early marriage before 18 years, 45% of the families find that early marriage has a negative effect on males, while 18% do not agree with it. 23% of the families find that it has negative effects on their daughters compared to 27% disagree, 43% of families prefer marriage before 18 for daughters, while 20% do not prefer marriage. And the same proportions for male marriages. It is noteworthy that there were many initiatives that have been taken to assist refugee families to register marriages through the specialized Shari’a courts to avoid statelessness, and for documentation to preserve the right on the couples and the children to come including the decision of the prime ministers to waive the fines imposed by the Personal

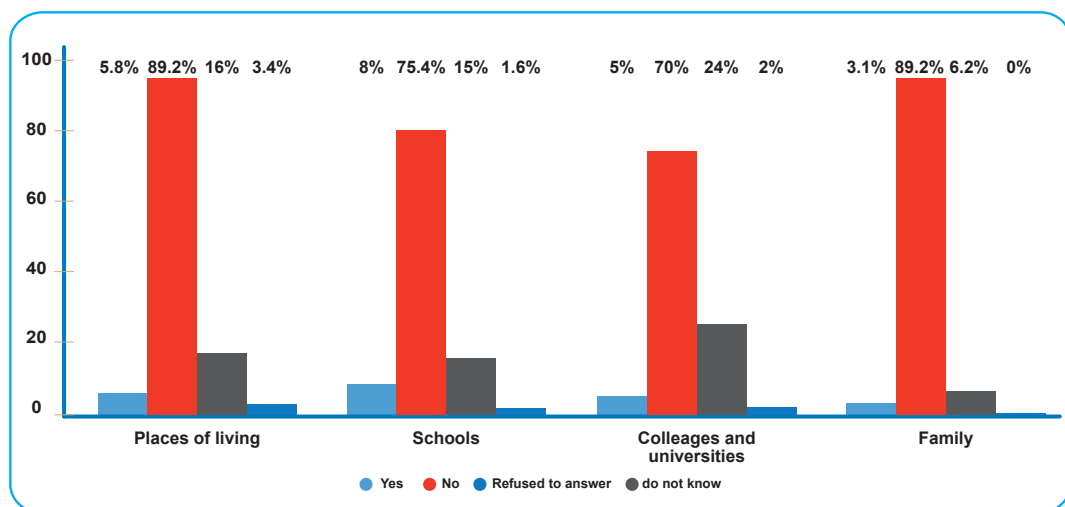
41- The Higher Population Council, Early Marriage Study (2017)

Status Law on late registration in order to encourage registering marriages and divorce of refugees. In the causal analysis session with a group of experts, the group described early marriage as a problem for the marriage of refugee girls under the age of 18, which is of great concern and should be addressed properly. Some of the direct causes might be the deterioration of the economic situation of these families and the overcrowding in the residential communities inside the camps. One of the underlying reasons for this is the culture based on the principle of preference for early marriage and protection against potential risks and social acceptance of early marriage for girls under the age of 18 and the loss of family members and support for the family. In terms of root causes, legal factors allowing marriage before the age of 18 and educational decline levels for refugees in general and the cultural acceptance of early marriage might explain this trend.

Family and Community Violence

Displaced families often face harsh living conditions and with different residential environments and the changes that accompany the situation in the social environments and may trigger violence in all its forms. However, the results showed that violence was not a major concern for the families, (tacking in consideration that the information for the family was taken by the heads of household who have been predominantly male, then we might assume that the reported data is below the actual prevalence of domestic violence which is known to be underreported in principle). Only 6% of the families reported that the violence was prevalent in their place of residence (neighborhoods), and 8% of the families confirmed that it was widespread in the school environment. As for the violence in universities, only 5% of the families reported that it was widespread and the lowest 3% of the families indicated that it was widespread within their families (Figure 12).

Figure 12: Percentage Distribution of Refugee Families by attitudes towards violence in surrounding environments



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

As for the families that indicated the spread of violence in the place of family residence, it also indicated that physical violence (45%) was most widespread, psychological (37%), sexual (11.4%), economic violence and neglect at 3% each.

And 43% of the families indicated that they do not seek assistance from any person or agency, whether governmental or non-governmental. (41%) of the husband's relatives (40%), the lowest of whom was recourse to local organizations (13%) and community police (14%). Thirty-two percent of the families said that domestic violence was a private matter. The family should not resort to official institutions in this regard, while 23% did not agree. It is also worth noting that 32% of families only know that the laws penalize those who commit domestic violence, compared to 21% do not agree that it does not know this information. Compared to 50% find that the punishment must be applied to those who commit domestic violence and 14% disagree.

More qualitative research is needed to investigate the reasons why families are hesitant to report cases of violence, particularly to authorities. At the causal analysis session after the presentation of the results, a group of experts on violence issues met to discuss the frequency problem in reporting cases of violence. The Group stated that the lack of adequate channels for reporting incidents of violence was a serious problem. The group listed three direct causes of this problem; lack of confidence in complaints and reporting mechanisms, lack of awareness of family responsibilities with respect to violence, and the undesirable consequences of reporting violence. According to the group, the underlying cause is the social determinants of the refugee community, culture and inherited customs which accepts violence in the family and reject revealing family secrets.

In a related context, the National Council for Family Affairs, in cooperation with Save the Children, the United Nations High Commissioner for Refugees, UNICEF and UNFPA launched a document setting out measures to strengthen the protection and prevention of violence against refugee children, with particular emphasis on their place of residence, either in camps or urban gatherings in Jordan.

The document is the result of extensive consultations with national and international stakeholders, involving more than 40 relevant ministries and institutions. Through this effort, the Council aimed to harmonize standards and procedures for responding to violence against refugees, especially children, as well as host communities in Jordan, and within the national framework for family protection. These actions have also identified the organizations responsible for work in the four main response sectors: health, psychosocial support, legal and security aspects ⁴² .

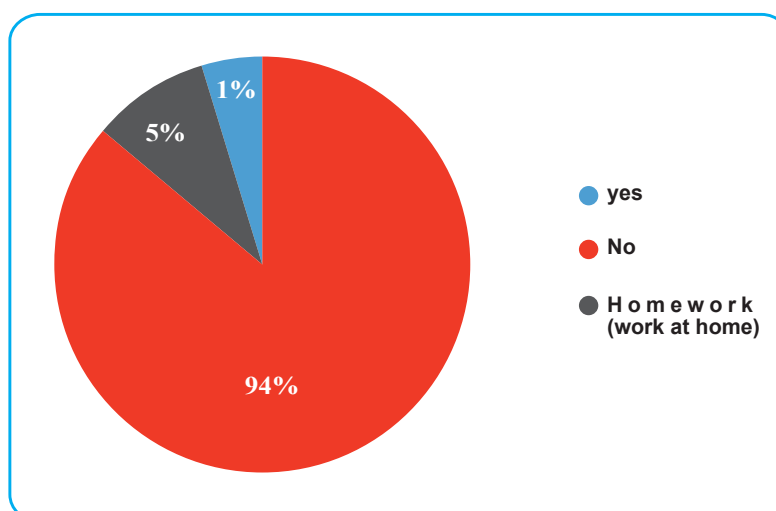
These procedures are being updated and national procedures and international refugee procedures are being integrated to become a unified national document covering all victims of violence in Jordan.

42-Inter-Agency emergency standard operating procedures for prevention of and response to gender-based violence and child protection in Jordan. UNHCR, National Council for Family Affairs and partners (2013). Accessed through: https://resourcecentre.savethechildren.net/node/7666/pdf/sops_english-soft_copy1.pdf

Woman's Work

There is likely to be additional pressure on refugee women due to the extraordinary pressures resulting from the loss of the family home and property in the country of origin, in addition to the psychological difficulties facing refugee women. In some cases, women lose their husbands and take responsibility for family needs. In other cases, women working outside the home suffer from inferior working conditions because of their vulnerability, and may be forced to work for more hours and sacrifice family relationships for this purpose. Not to mention the unequal pay of women and men, this is not only evident among refugee communities, but also in many societies around the world. The issue of women's work has been addressed to study the reality and trends of these issues. The analysis showed that 94% of the families did not have a mother working outside the home, while 5% of the families have a mother working from home and only 1% outside the home. According to the study, the main sector in which mothers work is charitable institutions, then in the government or private sector or NGOs. In the labor sector, the results indicated that they worked in the agricultural sector, the handicrafts sector and the private sector, with two women in each sector, while three women worked in the commercial sector. The study showed that five mothers worked less than 6 hours a day, while others worked 6 to 8 hours a day. As for the family's attitudes toward women's work, only 30% of the families prefer women's work, 33% do not prefer it, and 27% prefer marriage to working women, compared with 30% who do not prefer it. 52% of families find that women's work contributes to increasing family income, compared with 18% who do not find it. In addition, 65% of the families oppose women working at night, while 8% do not mind, 62% oppose women in another governorate while 9% do not mind (Figure 13).

Figure 13: Percentage Distribution of Refugee women by employment



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

Use of Technology and Social Media

Technology and social media have become an integral part of everyday life for families in most of the world's culture. The use of the Internet and social media applications in displaced communities is widely cited as a means of maintaining contact with family members and relatives abroad, as well as obtaining updates and news of the countries of origin. In this study, the use of the Internet and social media, the reasons behind its use, and the number of hours spent daily in these applications were assessed, where families reported that 25% of the families in which the mother is affiliated to one of the social networks, similar to the fathers, and the sons (13%) and (9%) of daughters. As for the number of hours of use for the father, Internet usage was one-two hours, in (29%) of the families for each, then 26% used it for 3 hours (26%). For the mother, 38% used the internet for two hours; followed by the users for three hours (28%) and one hours users (18%) of the families. The most popular sites used by the family were Facebook and WhatsApp. The reasons for using the sites were as follows: 65% for entertainment, 32% to follow the news versus 3% for work; while for mothers 82% for entertainment versus 18% to read the news; for Girls, 95% uses it for recreation, 5% for follow-up news, and for male children 97% for entertainment and 3% to follow-up news. It should be noted that all these results came from heads of families and not from other members of the family themselves may not reflect the reality of the situation for children. Twenty-five percent of families find that the Internet and communication networks have become partners in education, compared with 25% who do not find it a partner. 17% of families have a computer or a tablet, 59% of families have internet access through the phone, and 66% have a smart phone.

Participation in Public Life

As for family participation in public life and their involvement in various activities, the study found that 48% of the families encouraged their male members to volunteer in the service of the community. 6% disagreed and the rest chose neutrality. In contrast to encouraging their female members to volunteer, 42% of the families indicated that they encourage them to volunteer in community service, while 10% do not agree and the rest are neutral. On the ground, the majority of the families (92%) replied that there were no volunteers, and 8% answered yes. Among those who volunteer, (29%) in charitable work, (25%) in community work, (15%) in cultural work, (12%) religious work (11%) sports (5%) health and the 3% remaining did not specify the nature of voluntary work of their family members.

Feeling Safe

When asked whether they felt safe for their male children in schools, 41% agreed and 10% did not agree, the remaining had a neutral answer. As for their feelings of safety for their daughters in schools, 40% agreed, 12% did not, and the rest chose neutrality. 41% of the families agreed to feel safe on their children in the street, 14% did not agree, along with 36% felt safe for their daughters on the street, 17% did not and the rest have neutral opinions. As for the safety at the universities, for males, 28% of the families felt safe and 11% don't feel this way. As for their feelings of safety for their daughters at the universities, 27% indicated that they felt safe and 11% did not, and the rest chose the answer neutrally or without knowing. As for their sense of safety for their male children in the market, 39% agreed and 15% did not, and their daughter's safety in the market 36% agreed and 19% did not agree. About 30% of the families felt secured on their daughters and son at the nurseries while 11% do not feel it and 28% answered with don't know, and the rest had a neutral answer.

Favoritism and nepotism

Nepotism is one of the forms of corruption, and this study assessed a number of forms of favoritism. 29% of the families indicated that they had suffered from this issue at least once. The sectors where they suffered from nepotism varied, as (44%) of the families suffered in the health sector, (16%) for education, (14) % for food, electricity (11%), government services (8%), labor (5%), and finally infrastructure and water by 1% each. 13% of the families indicated that one of the female families had been exploited by one of the employees in return for receiving a certain service. The percentage of males who had been exploited by one of the employees in return for receiving a certain service has risen to 23%.

Extended Family

As for the relationship with the extended family, family trends indicate that most of them have lost their relationships with extended families. In 56% of the families, the extended family does not provide financial support at all, compared to 19% for a little and sometimes, 42% of the families did not receive moral support and sense of security and stability at all compared to 28% of the families were provided little and 21% sometimes by support. 50% of the families where its extended family do not contribute to the care of children compared to 22% a little and sometimes the same percentage. Perhaps it is linked to the refuge and its circumstances, which divides families and disperse family ties.

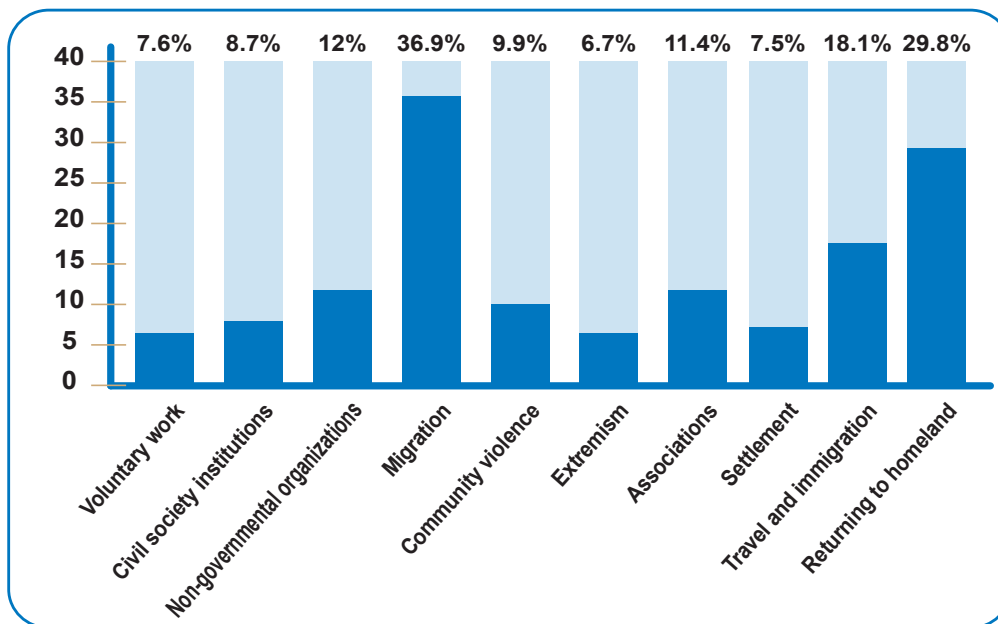
Family Priorities

In terms of family priorities for entertainment, culture and recreation issues, the most important priority issues among the family was satellite television (45%), national TV channels (35%) and internet services (32%) while the least important were libraries (1%), newspapers (magazines) and (sports centers) 2%.

As for the priorities related to participation in public life according their feedback on the a list of classified issues, the answers showed that the most important priorities according to the families were migration by 36.9% and returning home aspire by 29.8%, while the least important priorities were extremism and volunteerism.

Regarding family's priority issues for family dynamics, the most important priorities were family relations (45.1%), extended families (15.4%), family decisions (17%), and juvenile delinquency (14).

Figure 14: Percentage Distribution of Refugee Families by Priorities on Participation in Public Life



Source: National Council for Family Affairs and UNHCR, Survey of Refugee Family, 2017

Domain III: Health

One of the most important indicators of families' quality of life is the health of family members. The World Health Organization (WHO) defined health as a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.

This definition implies the holistic approach of health as a concept used for this document. The findings are described and discussed in four subtitles; health services and infrastructure, physical health, psychological environmental health, and environmental health.

Health Services & Infrastructure

The right of anyone to enjoy the highest attainable standard of physical and mental health is established in the WHO Constitution of 1948. Ratified international human rights conventions exist to protect the rights of refugee families, including their right to optimal health services and infrastructure. Nevertheless, many refugees often lack access to health services and financial means for health.

Since Jordan is a lower middle-income, aid-dependent country, the issue of ensuring fairly equal access to healthcare services to all Jordan's inhabitants (including refugees) remains a challenge. Despite its limited resources, Jordan and its international partners committed to enable refugees to access the existing health facilities, along with the host population. This adds additional pressure on the existing strained health facilities and resources.

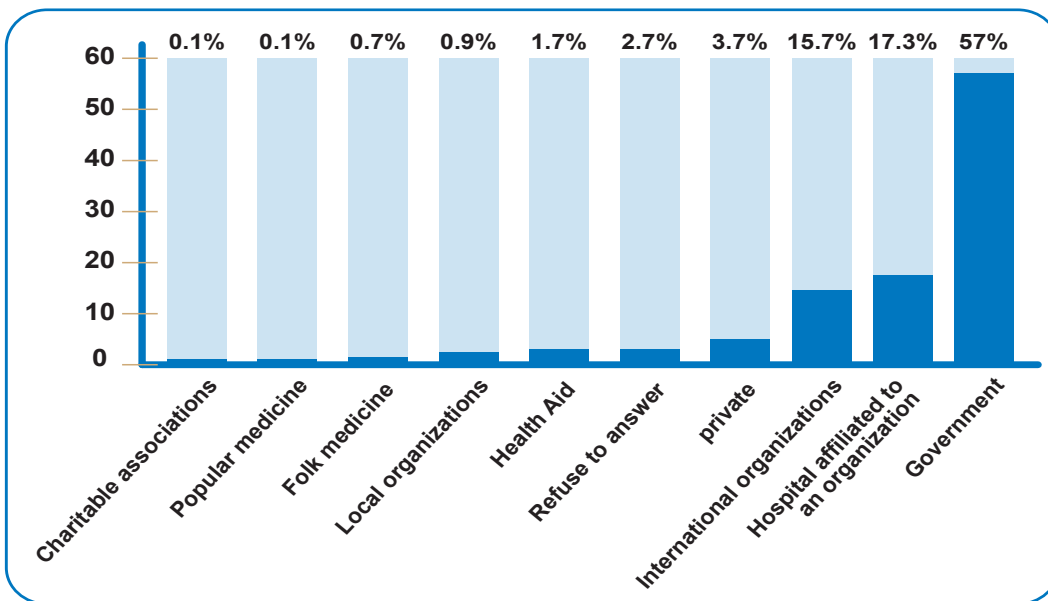
On the 18th of February 2018, Ministry of Health hospitals and primary health care centers received a directive from the ministry to start charging 80% foreigner rates for health services provided to Syrian refugees residing in urban areas. As the refugees has less resources and opportunities to meet their basic needs including health needs, the new rate increased by 2-5 times compared to the non-insured rate. Refugees will not be able to afford the new rates. regardless of their level of vulnerability (e.g. cost of normal delivery increased from 50 JDs to \approx 250 JDs while Cesarean Section operations increased from 300 JDs to \approx 700 JDs). The new rate will be additional hardship for refugees and will push higher proportion to use unsafe medical services such as irrational drug use and unsafe practice like unskilled home deliveries. Additionally, pushing refugees away from public health care system involve risks on public health stability including access to communicable disease of public health concerns.”

The current survey showed that 57% benefit from Jordan’s governmental facilities, while 17% benefit from facilities affiliated with organizations, and 16% benefits from international organizations’ health facilities specifically. The remaining 10% ranged in their access between private sector and other types of health facilities.

This can be explained by Jordan’s policies that allowed most registered refugees to seek healthcare services in reasonable and affordable costs at the Ministry of Health’s facilities, as well as the health aids that refugees receive from organizations.

The analysis shows that refugees living outside the camps are more likely to use government health services, local and international organizations and charities, while refugees living in camps mostly used Jordan Health Aid society and hospitals of international organizations (Figure 15) supported by humanitarian funding.

Figure 33: Percentage Distribution of Refugee Families According to the Types of Health Facilities they usually benefit from



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Regarding availability of health services, the results showed that government health centers are the most prevalent and needed than private sector (72% versus 32%). While private hospitals were the least available (22%) and the least needed (16%). This indicates the refugees probably have identified economic status and low income as reasons for not being concerned about availability or need for such sector. (Table 4).

Table 4: Percentage Distribution of families by Availability of and Perception of Need to Health Facilities

Health Facility	Availability		Need		Distance/M	
	No	Yes	No	Yes	M	SD
Health center, public clinic	72.9 %	26.3 %	72.4 %	21.9 %	1666.3	2531.7
Health center, private clinic	44.8 %	49.7 %	31.7 %	59.9 %	2501.1	3275.1
Pharmacy	68.9 %	26.3 %	71.8 %	20.7 %	1423.4	2684.2
Public hospital	52.7 %	43 %	65.2 %	27.8 %	3101.1	3374.6
Private hospital	21.5 %	71.2 %	15.7 %	72.9 %	4329	4213.9

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Accessibility to health facilities and services was also explored. The following table (table 5) illustrates a comparison between the difficulties faced by refugee families in accessing health facilities in camps and host communities. Families connect the availability of services with the access, where access to hospitals and private centers are the most difficult. In general, refugees find public hospitals and health centers were much easier to access (40%) and 25% expressed ease to access them, while 60% and 40% of heads of families expressed difficulty accessing these facilities. (Table 5).

Table 5: Percentage Distribution of families by Ease of Access to Health Infrastructure

Health Facility	Place of residence	Easy	Almost easy	Difficult	Very difficult	Refused to answer
Health center, public clinic	Host community	25.1%	36.8%	23.7%	9.9%	4.6%
	In camps	24.8%	39.2%	14.4%	19.2%	2.4%
Health center, private clinic	Host community	18.7%	29.4%	26.9%	8.7%	16.3%
	In camps	8.8%	4.8%	22.4%	24.0%	40%
Public hospital	Host community	13.8%	23.2%	35.0%	20.9%	7.1%
	In camps	16.8%	40.8%	10.4%	17.9%	14.4%
Private hospital	Host community	10.0%	14.7%	23.7%	32.9%	16.4%
	In camps	2.4%	2.4%	22.4%	31.2%	41.6%

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Regarding perspectives of refugee families towards health-related issues, the survey showed that there is a moderate level of knowledge related to health services provided within the camp and outside the camp. The survey showed that only 44% of families know about the available services. In addition, the survey indicated that

the satisfaction with services varies relatively between satisfied, dissatisfied, and neutral. 33% of the families were satisfied with the level of service offered by the international agencies compared to 33% non-satisfied, while 34% considered the level of health services provided in hospitals and clinics is excellent compared to 22%. It is worth mentioning here that the highest percentage of responses was in fact neutral (no opinion) which may raise the question on the reasons behind it and the way to improve the level of health services and the level of satisfaction of refugee families about it. The survey shows that residents outside the camps, who are the majority (85%), are less aware about the available services (41% outside the camps compared to 62% for the residents in the camps), while refugees in camps and outside camps are almost equal in their level of satisfaction of the quality of services (32% vs. 35%). Also, residents outside the camps see health services at hospitals and clinics they referred to excellent (53%) and much more than those residing in the camps (44%). Regarding the cost of health services, it is evident from the comparison of refugees living in and outside the camps related to cost of health care services that 35% of the families outside the camps consider that the cost of health services is a moderate economic burden compared to 11% for the residents in the camps. 22% of the families outside the camps reported that the health services is not considered as a burden compared to 60% of refugees living in the camps, and 19% in outside the camps considered health services as a huge burden compared to 2% for those living in the camps.

The results of the survey showed that there is a clear evidence of disparity in ratios between those in camps and outside camps, which requires reconsideration of the health services provided to refugee families outside the camps, the type of health insurance, and the cost of treatment and service (Table 6). It should be noted here that according to national statistics⁴³, only 32% of the refugees are health insured, although Syrian refugees, the vast majority of refugees in the survey, are similarly treated with Jordanians outside the camps in terms of health services and cost.

Table 6: Percentage Distribution of Families by Perspectives toward economic burden of health care services in camps and host community.

Items	Place of residence	Great burden	Moderate burden	Little burden	Not at all
Health care services is a burden to family.	Host community	19.0%	35.1%	24.4%	21.5%
	In camps	2.4%	11.2%	26.4%	60.0%
Knowledge and satisfaction about health care services		Agree	Neutral	Disagree	Do not know
The family is aware of the health services provided at the camp / place of residence.	Host community	40.7%	35.3%	18.8%	5.1%
	In camps	62.4%	16.0%	13.6%	8.0%
The family is satisfied about the health services provided by the organizations inside or outside the camp.	Host community	32.4%	42.5%	20.9%	4.3%
	In camps	35.2%	24.0%	33.6%	7.2%
The family considers the level of health services at the hospitals and clinics as excellent.	Host community	43.8%	34.6%	14.1%	7.5%
	In camps	52.8%	16.8%	16.0%	14.4%

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

43- Department of Statistic. Population and Housing Census. 2015

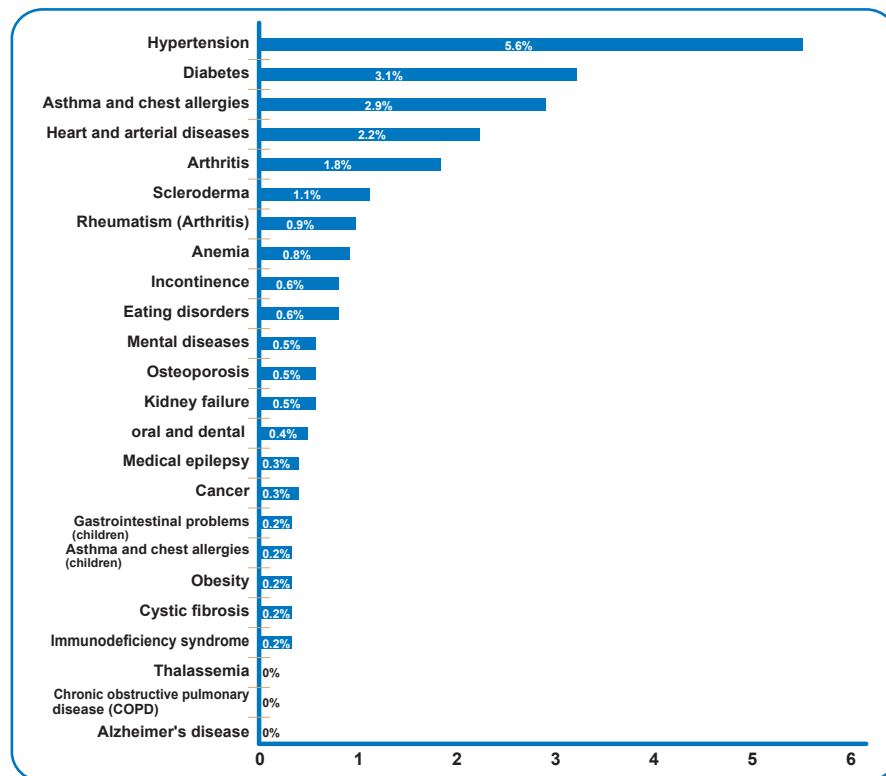
In the causality analysis session with a group of experts, held to discuss the disparity in the availability of health facilities in refugee communities inside and outside the camp and the health priorities of families, the group noted that the economic situation of refugee families and the lack of coordination between the various sectors health service providers are among the reasons affecting the level of service provided.

In terms of root causes, the group also mentioned that lack of coordination of health services between agencies make it inadequate or absents. Also, Jordan's scarcity of resources are among the reasons that cause in adequate services and dissatisfaction.

Physical Health

In terms of current morbidities, results showed that the majority of family members in this survey were not having any type of chronic illness 83.2%, and the remaining members 15.1% of family members were having chronic diseases. The most prevalent chronic disease was hypertension 5.6%, diabetes 3.1%, and asthma and allergies 2.9%. Thalassemia was the least reported chronic disease among family members in this study 0.1%, then Alzheimer's disease, Chronic obstructive pulmonary disease (COPD), and Obesity came by the same frequency 0.2% (figure 16).

Figure 16: Percentage Distribution of Family members by Prevalence of Chronic Illnesses

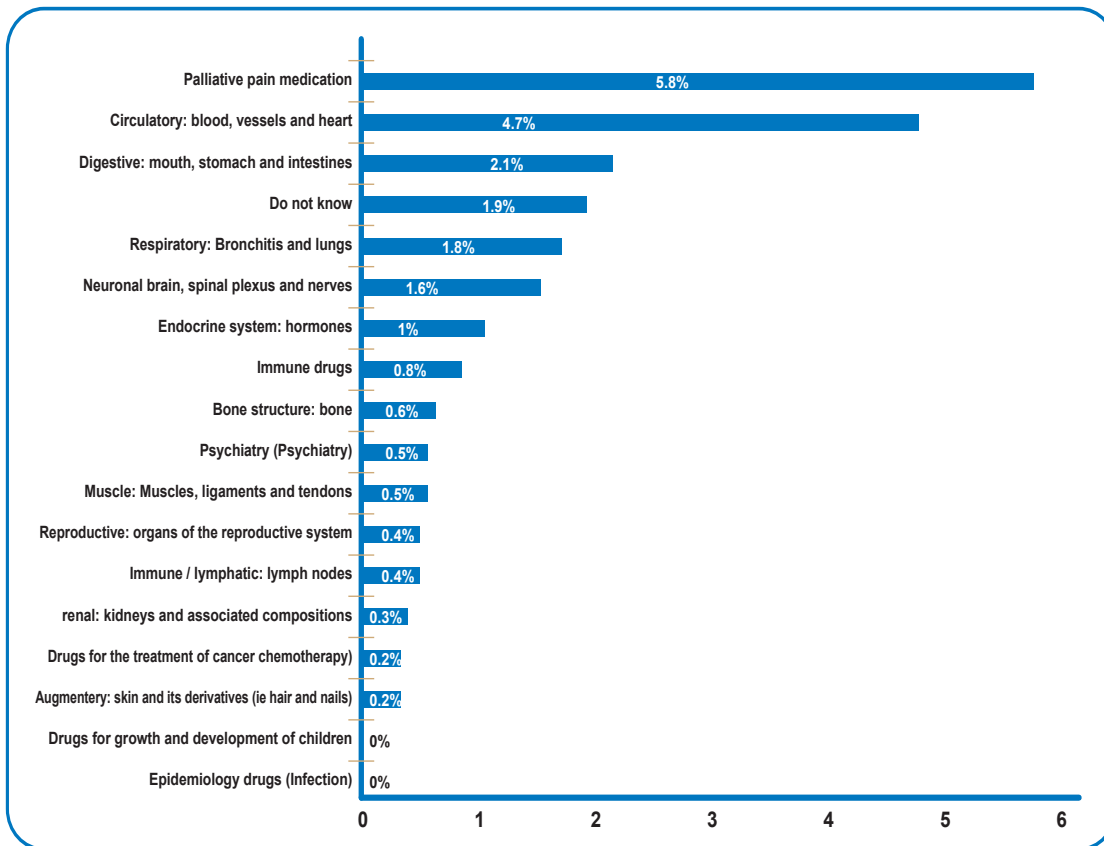


Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

It is very important here to mention that interpreting the results requires to recognize that most of the refugees in Jordan in this survey (60%) are under the age of 24 years in which age is one significant factor while discussing the incidence and prevalence of chronic diseases, especially diabetes, heart and rheumatism. Chronic illnesses affect older people more frequently than younger people; this may interpret why low ration of chronic illnesses observed in this survey.

The results of this study showed that the majority of family members did not use any type of medication (81.7%), and only 16.4% used at least one type of medication. Pain medication was the most common among family members at 5.8%, followed by medications prescribed for circulatory diseases by 4.7%. The least common medications used by family members were those related to epidemic diseases (infection), problems of growth and development, children’s medicines (1%), then medications used for skin problems and chemotherapy drugs (0.2% each). (Figure 17).

Figure 17: Percentage Distribution of family members by Type of Medication Used



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Disabilities

Furthermore, results showed that most of family members did not have any type of disability (89.9%). The highest frequent disabilities were mobility disabilities (1.8%), then vision impairments (1.7%), followed by hearing impairments (0.8%). While memory problems, physical impairments of the upper body and mental illnesses were the least frequent among family members (up to 0.3%). Results of this survey revealed that the majority of family members were not using any type of health aids 96.4%, and only 3.6% were using at least one type of health aids.

Regarding health aids used by refugee family members, it was found that the most commonly used health aids among family members were eye glasses (1.9% of the total sample), followed by earpieces (0.5%), then medical crutches (canes) (0.4%), and 0.3% for wheelchair.

In comparison to the Jordanian figures, the Department of Statistics⁴⁴(2015) reported that 11.1% of the Jordanian families have at least one member with disabilities which is the same percentage that was recorded in this survey. Also the motor, visual and hearing disabilities were the highest mentioned three types of disabilities in the Jordanian and refugee reports. The results of this study showed that the vast majority of refugee families (92%) do not have facilities at their place of residence to be used by people with disabilities and special needs.

Breastfeeding

The results of the survey showed that 57.9% of the families prefer breastfeeding to artificial breastfeeding, and 59.5% of the families encourage their daughters to breastfeed their children. Moreover, 59% of the families believe that breastfeeding will enhance the relationship between the child and the mother.

Healthy lifestyles

Smoking

The results of the survey showed that most of the refugee family members were non-smokers (85.8%), and only 8.2% of them smokes only cigarettes, 0.8% uses narghile, and only 0.4% smokes cigarettes and narghile. About 4.8% of household members do not know if a family member is smoking or using narghile. About 32% reported that that smoking is prevalent compared to 26% do not agree.

A very important point should be noted when interpreting the results, that most of the refugees in Jordan (60%) are under the age of 24 years and that 24% of them under the age of 5 years, which is important when discussing prevalence of smoking and its various forms and that would explain the low percentages.

44-Department of Statistic. Population and Housing Census. 2015

Sports

In terms of sports practice and attitudes, 5.3% of family members are practicing sports, although family attitudes have been positive about the importance of sport to health where 50% highlight its importance. Among those practicing sports (5.3%), most of them were practicing in schools (32.2%), homes (31.1%), public places (12.4%), (8.7%) at the neighborhood, 2.5% bodybuilding halls (Gym), and 4.3% at indoor halls.

Drugs

In the survey, 24.7% of the families reported that drugs are prevalent among university and young students according to their perspectives, compared to 23% who don't agree. About 24% of the families also reported that drugs are prevalent among adolescents and children. It is worth noting that the high proportion respondent were neutral this might indicate the lack of family awareness on this issue or not preferring to address this issue.

Mental health and psychosocial support

The refugee community might show particular vulnerabilities and a higher prevalence of psychological problems due to the difficult conditions they experienced, including the loss of their homes and property, and the disruption of the social system. The survey showed that 31% of the families have an individual receiving mental health treatment due the experience of refuge, and that 32% of the families suffer from psychological problems due to the displacement and traumatic events experienced. The results also showed that most families (48%) confirmed that they would not hesitate to seek professional psychological assistance in case of any of their members suffer psychological symptoms.

Regarding families' satisfaction with the psychological services, a third of the families expressed their satisfaction with the level and quality of mental health services available, while one-third expressed dissatisfaction, while one-third were neutral. In addition, the survey showed that 33% agreed that the services are differing from the country of origin; almost equal percentage was also for those who reported that the services are not different and those who have no opinion.

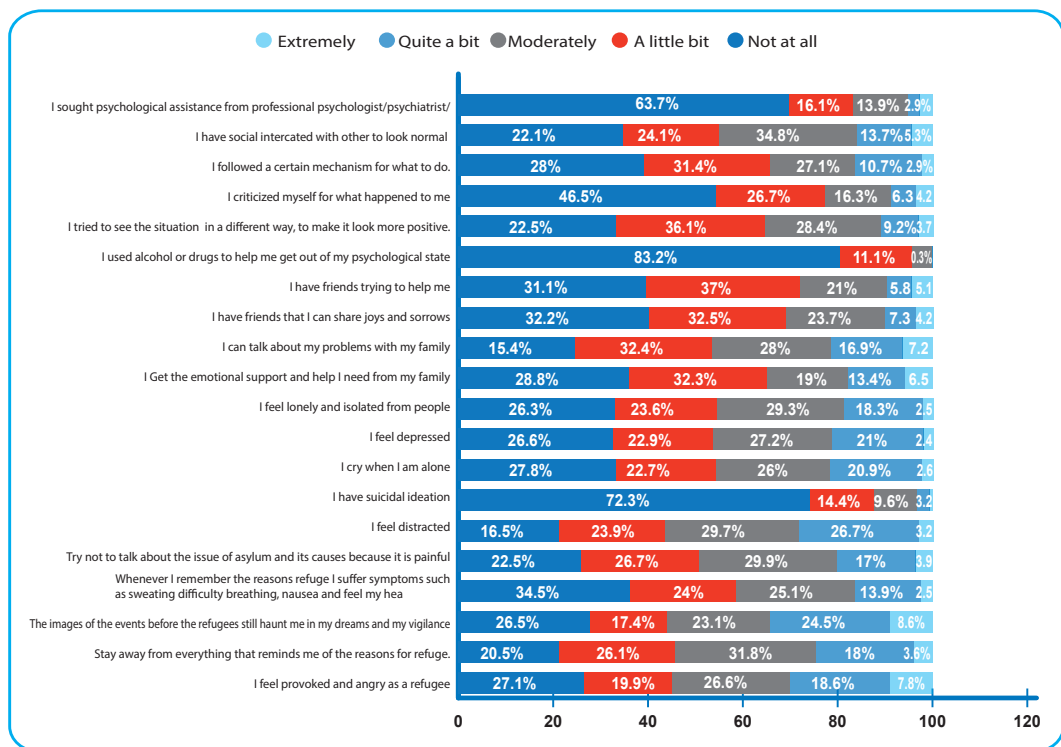
Once again, being not in need for such service may contribute to families perspectives. Among 52% of the families addressed that the illness of a family member with a mental health problem is considered an economic burden on the family.

Regarding the psychosocial health status of refugees, it was found, surveying the heads of family only that most of the heads of the family do not suffer from psychological problems due to displacement.

The survey showed that 72% did not think of committing suicide, compared to 28% who thought very little to very much, although 73% of them feel very depressed, and 73% of them have a flashbacks of events before they sought refuge. At the same time, we find that most of heads of family have low perception of social support from friends and family where 60% of the responses were not to get support from the family and friends.

This was consistent with what was mentioned earlier about the relationship with the extended family where family trends indicate that most of them have lost their relationships with extended families. About 83% of the families did not resort to drugs and alcohol, and 17% of those who use alcohol and drugs do use it to get out of their mental state and to overcome their suffer. The survey also found that 77.5% of the heads of the families had fair positive experience of the events where 78% of them have positive interaction with society, and 64% did not ask for any psychological help to cope with the experience of refuge. (Figure 18)

Figure 18: Percentage Distribution of Heads of Family by Psychosocial Status



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Happiness, Satisfaction and Interaction with host community

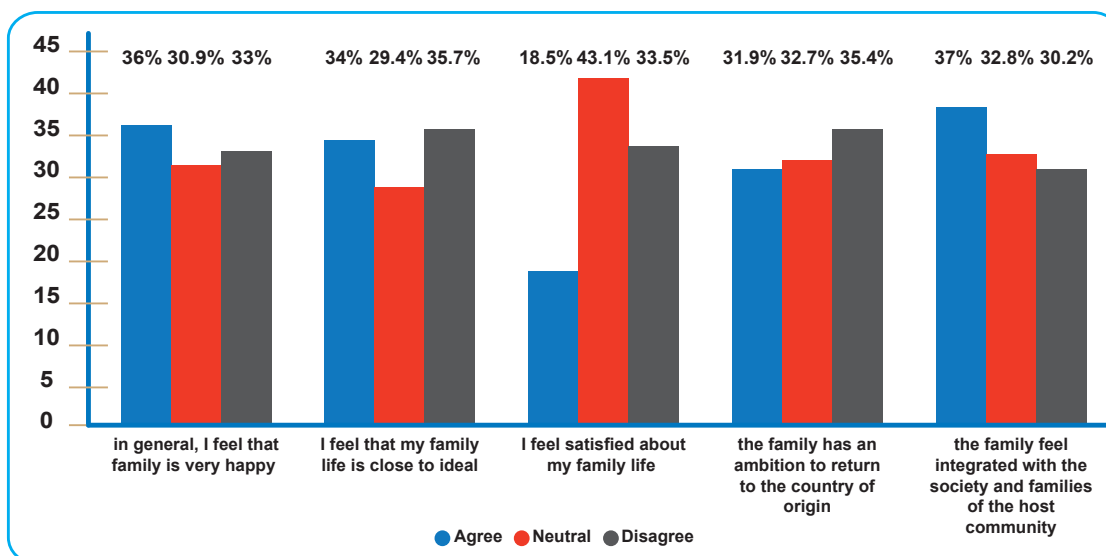
The survey has also addressed issue related to happiness and satisfaction with life among refugee families. The results showed that 36% of refugee families expressed their happiness in general, while 33% did not consider their families happy. About 36% of refugee families indicated that their lives were not close to ideal one, while 35% considered that their lives were close to idealism.

Regarding general satisfaction with life, the results of this study showed that only 19% of families expressed their satisfaction with life, while 33.5% were dissatisfied. In terms of social adjustment and integration with the host community and the desire to return home, the survey found that 35% of the families expressed their lack of ambition to return to their country of origin, while 32% expressed their ambition to return.

About 37% of the families considered themselves succeeded in integrating with the host community, while 33% did not. In contrast, 35% of families have positive relations with host families, compared to 32% have no relations.

Only 33% have positive relations with other refugee families, while 32% of the families feel discriminated against from the host community. It is worth to note that about 30% of the families have not expressed their opinion and preferred to choose “neutral” responses. (Figure 19)

Figure 19: Percentage Distribution of Families by their Perception on their Happiness, Satisfaction and interaction with the Host community



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

In a causality analysis session with a group of health experts, the group discussed the problem of mental health services provided to refugee communities. They described the psychological services as one point of weakness in the services provided in refugee communities.

The direct cause, according to the group, was the cultural factors as well as health sectors did not prioritize mental health services among the top needed ones.

The underlying causes of the problem have been summarized in terms of gap in age and family conflicts. While the root causes of the problem as described by the group included cultural and educational barriers.

The group noted a range of threats affecting these aspects, including high costs and lack of funding of psychological evidence-based programs, as well as, lack of policies that ensure training and rehabilitation of patients with mental illness.

Lack of awareness of the importance of mental health among refugee communities, stigma associated with people suffering from psychiatric illness, and the lack of confidence in mental health care providers have also been addressed.

This is in addition to the weak qualification of professional psychologists at universities and specialized institutes, and the deactivating of the role of these consultants in the educational process and services adequately.

Family Health Priorities

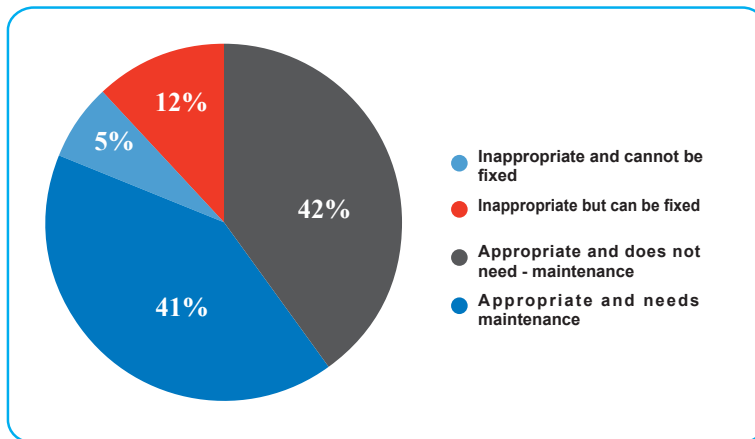
When asked about their health-related priorities, families listed accessibility to hospitals (51%), burden of healthcare services (42%) and availability of health centers (39%) as their top priority, while school health (3%) and early detection of diseases (3%) were the least priorities.

Housing

The results showed that a 42% of the families live in houses that is convenient and does not need maintenance, 41% of families live in convenient houses that need maintenance, and 12.5% live in houses that are inconvenient but can be fixed, while about 5% (n=38) live in inconvenient houses that cannot be fixed (figure 20).

The results indicated that 8.6% of the families owned their house, compared to 73% renting the house, 3.1% have free housing, and 13.9% owned by one of their relatives.

Figure 20: Percentage Distribution of Families by Perceived Housing Quality



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

In comparison to those living in and outside the camps, the survey showed that the vast majority of those living outside the camp (44.7% and 41.2%) live in houses either convenient/does not need maintenance or convenient and does need maintenance. While 24% of those living at the camps their shelters were convenient and does not need maintenance, and 27.2% convenient but need maintenance. The largest percentage (38.4%) was living in suitable houses that need maintenance.

In addition, 51% of the families outside the camp find that the place of residence provides them with privacy, compared to 13% disagree, while 48% of the families in the camp find that the home provides privacy compared to 21% who do not find the camp provides enough privacy.

The results of the survey also showed that 42.2% of refugee family ' houses consisted of two rooms, and about 27.5% of refugee families' houses consisted of three rooms, while 17% of refugee families had only one room, and only three families had a six or more. In addition, the analysis showed that the living space is divided into four categories as follows: 35% of families live in 91-120 m², 34% live in (51-90) m², and 22% (31-50) m², and only 9% live in (121 and above) m².

The statistical analysis also showed that the average area per person living in the camps was 10.8 m² compared to 34.4 m² for each refugee residing outside the camps, with an average of 30.7 m² per person for refugees in general (inside and outside camps).

Housing services

In terms of sources of drinking water, the results of the analysis showed that water from purification services is the main source of drinking water (36%), followed by mineral water 29%, and public water network (tap water) (27%).

Only six families reported that rain water is their main source of drinking water. It was also found that 14.5% of families consider the cost of water not an economic burden compared to 35.5% and 17.4% consider it an average burden to a large burden, respectively. It was also found that 15% of the families are satisfied with the water quality of the tap water compared to 41.9% unsatisfied and 23.6% of the families do not consider the water sufficient, compared to 37.0% who consider it sufficient.

It was also found that the residents of the camps depend more on the tap water and the mineral water (38% for each), while the water from the water purification stations was the main source of drinking water (41%) among the refugees living outside the camp, and up to 25% and 27% rely more on the tap water and mineral water, respectively.

It is worth noting that water coming from tanks is the main source for 17% of families residing in camps compared to 5.6% for residents outside the camp. (Table 7).

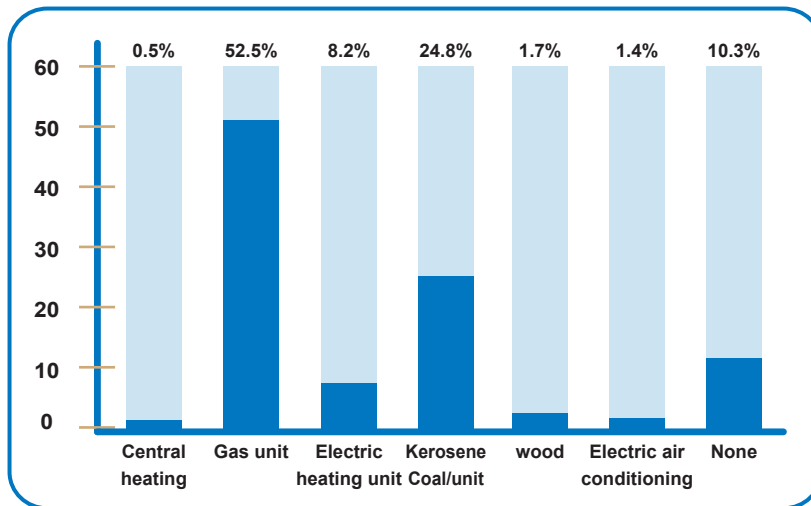
Table 7: Percentage Distribution of Refugee Families by sources of drinking water in camps and host communities

Source of drinking water	Place of residence	
	In camps	Outside camps
Public network	38.4	25.1
Mineral water	38.4	27.1
Purification stations	6.4	41.0
Rain water	0	0.9
Tanks (portable)	16.8	5.6

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

The result also showed that the main source of heating inside the house is gas units 52.5%, followed by kerosene 25%, and electric heating unit 8.2%, while 10.3% of families reported that they don't own any source of heating inside the house (Figure 21).

Figure 21: Percentage Distribution of Refugee Families by Heating Source



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

It was also found that residents in camp and outside rely most of the time on gas units as their main source of heating (78% vs. 48%), and secondly on kerosene (14.4% vs. 27%). It has also been found that kerosene is more prevalent among residents outside camps than the families living inside camps. The survey found that 4% of the refugees inside and 11.5% outside the camp have no source for heating at all.

The main source for air conditioning in the house is fans (81.5%), followed by air conditioners by 2.4%, while 15.4% of the families reported that they had no source of air conditioning at all. It was found that the majority of refugees inside (74%) and outside camps (83%) are using fans as the main source of cooling (air-conditioning) with little higher rate for families outside camps. While 24% of families living inside the camp reported that have no cooling device at all compared to 14% of those living outside the camp. In addition, 19% of the families indicated that their houses suffer from frequent interrupted power supplies compared to 43% who did not. Taking in consideration that the electricity in the camps is provided to families in specific hours daily.

Regarding alternative energy use, 28% of the families prefer to use alternative energy to save electricity compared to 22% who are not. Moreover, 50% of the families use energy saving tools (solar heaters or saving lamps).

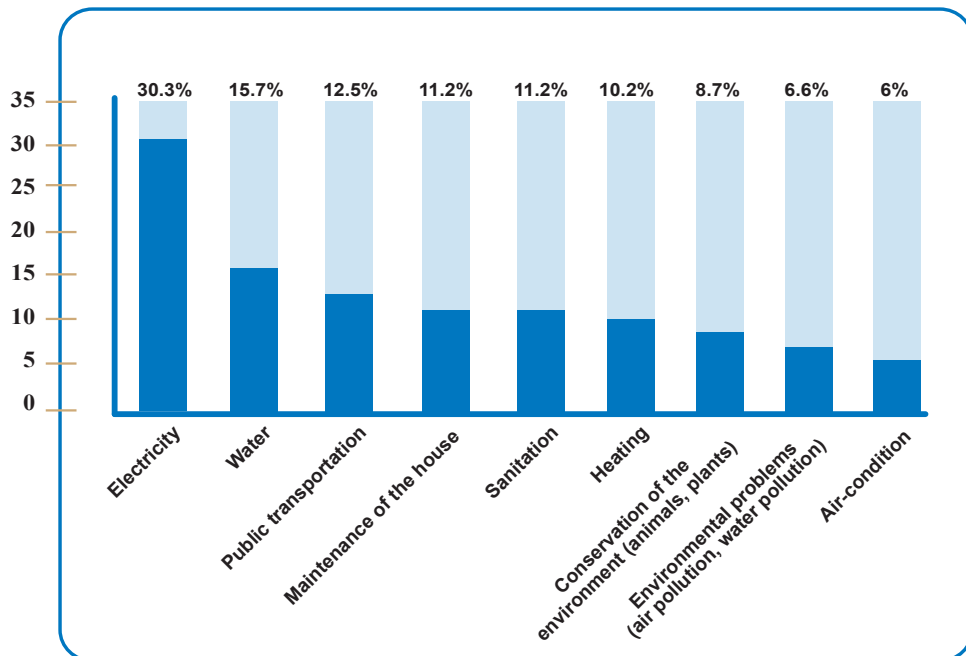
According to the study, 91.2% of refugee families reported that they do not have a garden at their house, while only 3% of refugee families have a private garden, and 4% have shared gardens with neighbors.

Only 26% of the families reported that public transport network meets their needs, compared with 30% who reported noted does not meet their needs. About 42% of the families prefer to use the public transportation network if it had excellent quality of services compared to private transportation, while 15% do not prefer it. Moreover, 86% of the families reported that they have a public transportation services at their place of living compared to 31% where it is not available.

Environmental Health Priorities

According to the results of the study, the most frequent priorities among the refugee families related to housing according to heads of families are: electricity by 30.3%, followed by water priority (16%) and then sanitation and maintenance of house (each of 11.2%). The least priority was air conditioning (6%) and air pollution (6.6%) (Figure 22).

Figure 22: Percentage Distribution of Families by Priorities Related to Housing Services



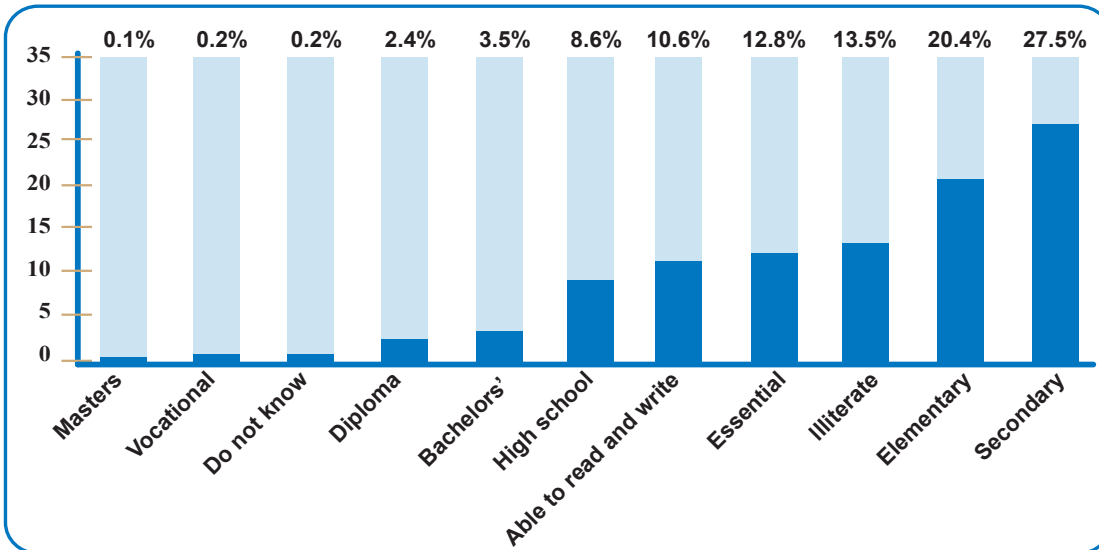
Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017

Domain IV: Education

About 51% of the refugee population in the survey is under the age of 18, which force a great demands on the available educational capacity. The Jordanian education sector is suffering from overcrowded classrooms, shifting to two school periods, in addition to other concerns, which caused the educational sector to become more demanding. In this section, educational issues are discussed by type of schooling (pre-school, basic and secondary school education, and higher education), educational infrastructure, and dropout as well as linked concerns such as child labor.

The survey shows that the refugee community in Jordan has a relatively low level of education. The level of education of refugees aged 16 years or older has been studied in this survey. The results showed that 56% of the family members surveyed were aged 16 years or older. Of these, 27.5% hold a secondary degree, 20.4% hold primary school degrees and 10.7% were literate. In addition, 3.5% hold a bachelor’s degree, and 2.4% hold a diploma degree. While 13.5% do not read or write. (Figure 23).

Figure 23: Percentage Distribution of Refugee Family Members Aged 16 or more by their Educational Level



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

In their survey of the Syrian refugee crisis in 2015, ILO stated that only 16% of Syrian refugees above 15 have finished secondary school.⁴⁵ When comparing the number with this sample’s finding, we observe an increase in the ration of refugees who holds a secondary degree between 2015 and today.

45-International Labor Organization, Access to work for Syrian Refugees in Jordan. 2015.

This may be due to the difference in surveyed samples, but might be also an improvement in the educational profile of refugees over time. In comparison with Jordan's host population, there is a clear educational disadvantage and concentration of illiteracy among refugees, as recent statistics⁴⁶ showed that literacy rate in Jordan is as high as 98%.

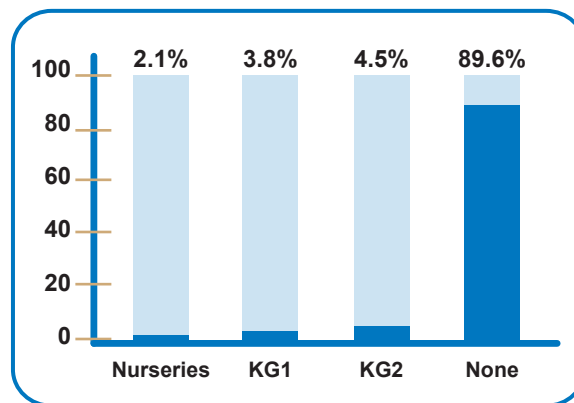
Pre-school Education

The vast majority (89%) reported that their children under the age of 6 do not attend any pre-school educational facilities, while 5% reported sending their children to kindergarten 2, 4% sent their children to kindergarten 1, and only 2% sent their young children to nurseries.

This means that refugee young children's pre-school enrollment ratio is as low as 11% (figure 23).

Compared to Jordan's pre-school education, a clear disadvantage of refugee young children's pre-school education is notable. According to national statistics⁴⁷, the reports showed that 33% is the rate of preschool enrollment among the Jordanian population (figure 24).

Figure 24: Percentage Distribution of Refugee Family members aged between (0-4) by Pre-school Education Enrollment to



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

46- Department of Statistics, Annual Statistical Report, 2016.

47-Ministry of Education, Statistical Report for the academic year 2015/2016.

School Education

The national statistics for Jordanian children showed that enrollment rate in national educational institutions reached 97% for basic and 75% for secondary⁴⁸.

As for the refugee children, according to the survey, 52.5% of the families have children between 6 and 18 years of age. Of whom 70% were enrolled in an educational institution, while 30% were not registered.

The survey shows that 28% of Syrians are not registered in schools, compared to 34% for Iraqis and 20% for Yemenis. Somalis and Sudanese's children are all registered (100%) in educational institutions (Table 8).

Regarding type of school in which the child was enrolled, the results showed that 95% of children between the ages of 6 and 18 were enrolled in a governmental institution, while 4% were enrolled in non-formal education through institutions, and only one child had a home education.

None of the families surveyed had sent their children to private schools. This may be due to the relatively high costs of private education in the host community in Jordan, while in Jordan, 44% of Jordanian students attend private schools⁴⁹.

The national statistics showed that 28% of the refugee population aged 4 years and above are currently enrolled in educational institutions, and 49% have already joined and 23% have not joined yet⁵⁰.

Table 8: Percentage Distribution of Refugee Family Members aged between (6-18) years By Enrollment in Education and Country of Origin

Country of origin	Yes	No	Refuse to answer
Syria	70.6	28.0	1.4
Iraq	63.6	36.4	0
Sudan	100.0	0	0
Yemen	80.0	20.0	0
Somalia	100.0	0	0

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

48-Ministry of Education, Statistical Report for the academic year 2015/2016.

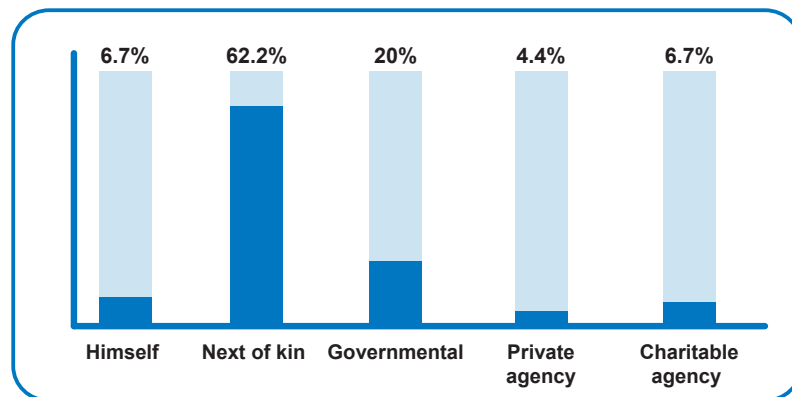
49- Department of Statistics, Annual Statistical Report, 2016.

50- Department of Statistics, Population and Housing Census, 2015.

Higher Education

For family members aged between (18 years or older) (99.8% of families), the results showed that only 3% were enrolled in an educational institution, while 97% were not registered. Regarding the type of college or university in which the individual is enrolled, the results showed that 75.5% were enrolled in a government college or university, 15.5% were enrolled in a private college or university. In terms of payment of tuition fees, the results showed that 62.2% were paid by their relatives, 20% were covered by government payments, while 6.7% were covered by charitable agencies and the same proportion (6.7%) are self-paid, and only two family members are covered by a private agency. (Figure 25)

Figure 25: Percentage Distribution of Refugee Family Members enrolled in Higher Education by the Tuition Paying Entity



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Educational services

The survey also assessed the quality of educational facilities, their availability and the demand for them. The answers varied as public facilities were more accessible than others, and private facilities were less needed. However, most of the education services were needed and sometimes its availability is much more than its demand. Only public universities were needed more than its availability. It is interesting to note that colleges are much more needed than the universities.

The survey also showed that refugees living outside the camps do not have similar access to educational services compared to families in the camps. About 58% of the families of those living outside the camps reported that the basic public school is available compared to 82% of camp families.

Also about 40% of the families living outside the camps reported that they needed the basic government school compared to 63% for families in camps. Similarly, for

kindergartens, 22% of the families living outside the camps reported that public kindergartens were available and 20% emphasized its need compared to 66% for families in camps, and that 50% of them reported the need for government kindergartens. It is quite different when talking about government high schools, where 51% of the families outside the camps indicated that the secondary government school is available compared to 35% for families inside the camp. 35% of them indicated that they need government secondary schools compared to 42 percent camp families. (Table 9).

Table 9: Percentage Distribution of Refugee Families by Perspectives Toward Availability and Need for Educational Services in camps and host communities

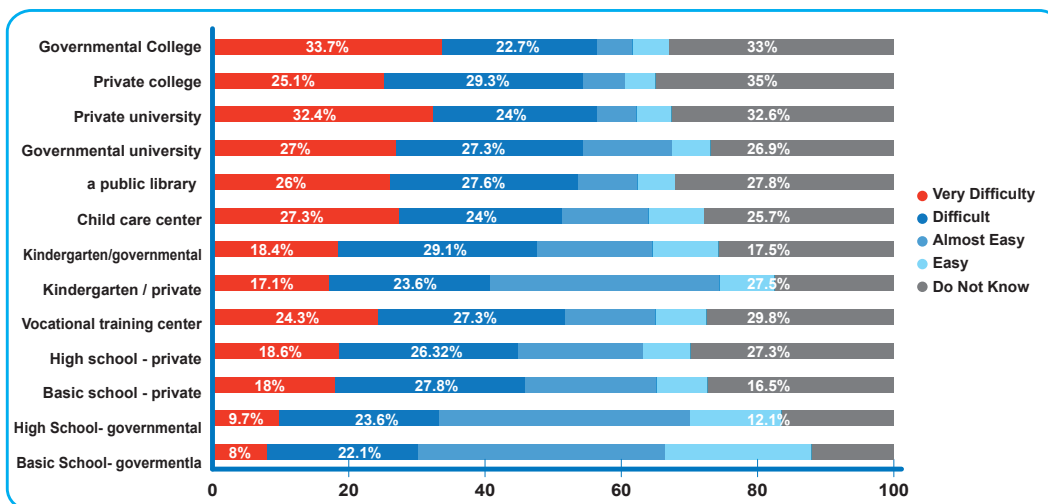
Education Service		Host Community		In Camps	
		Availability	Need	Availability	Need
1	Public basic school	57.8%	39.7 %	82.4 %	63.2 %
2	Public high school	51.2%	28.7 %	35.0 %	42.4 %
3	Private basic school	30.7%	5.6 %	0.8 %	6.4 %
4	Private high school	24.0%	4.1 %	0.8 %	6.4 %
5	Vocational training	13.2%	13.4 %	45.6 %	44.0 %
6	Private kindergarten	33.4%	6.8 %	9.6 %	12.8 %
7	Public kindergarten	21.5%	19.3 %	65.6 %	49.6 %
8	daycare	16.3%	4.3 %	18.4 %	14.4 %

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Regarding accessibility of various educational facilities, the survey showed that families in general found it difficult to reach universities and community colleges, while it was easy to access public basic schools and public high schools.

It is interesting to reflect that families did not find it easy to access most educational services, which requires an in-depth study to find out the reasons (Figure 26).

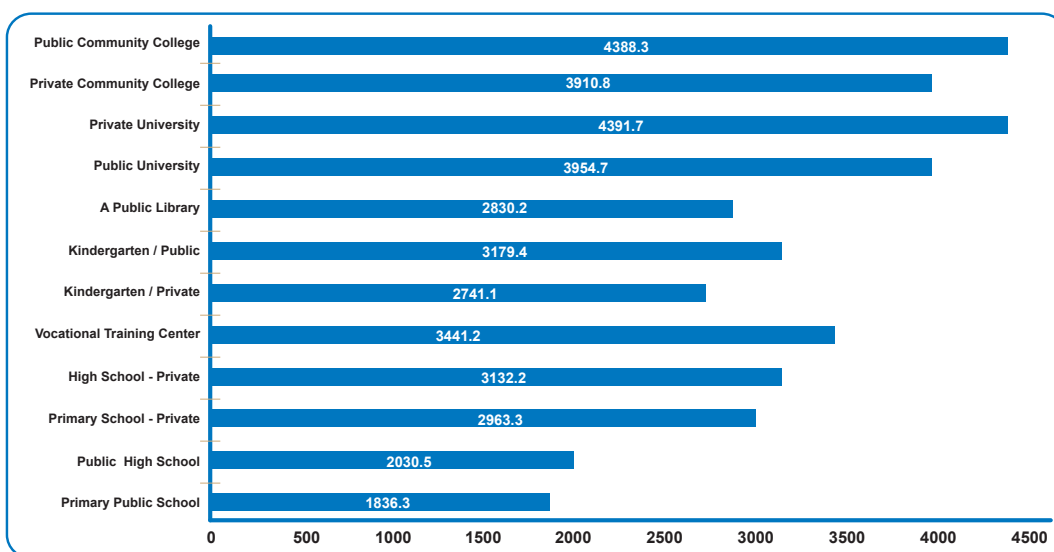
Figure 26: Percentage Distribution of Refugee Families by Perspectives toward Accessibility to Educational Settings



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

In comparison between camp families and families residing host communities, it is evident that the families inside camps have more difficulties reaching educational services, except for nurseries and private kindergartens, and the primary public schools. For the camp families, the greatest difficulties were the private secondary school (90.3%) and basic school (90.1%), and that was expected. For refugees residing outside the camps, the greatest difficulties were access to vocational training centers (75.5%) and kindergartens (71.7%).

Figure 27: Distance to Educational Facilities by Meter



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

School dropout and child labor

According to the studies, poverty and unemployment among male and female refugees have significantly prompted refugee families to adopt negative coping strategies, including the drop-out of school children, and involvement in the labor market. National surveys on working children by nationality shows that Syrian refugee working children are presenting 15% of all children working in Jordan⁵¹. The total number of working children Syrian refugees is 11098 children, and more than half of Syrian children (58%) work more than 48 hours per week compared to more than half of Jordanian children (60%) work less than 36 hours per week⁵². Approximately 60% of working Syrian children work in closed places compared to 47% for Jordanian children. About 15% of working Syrian children works in a particular street or a park to sell stuff compared to 9% of Jordanian children. About 35% of working Syrian children work in wholesale and retail trade, and repair of motor vehicles and motorcycles compared to 28% of Jordanians work in the same activity. Also 21% of Syrian children work in construction compared to 9% for Jordanian children⁵³.

The results of the survey show that 52.5% of the families have children aged 6-18 years. 66% of children aged 6-18 were enrolled in an educational institution, while 28% were not registered. 1.6% (11 working children) of children were working children, seven children (1%) work during school holidays only, while two families (0.3%) have their children work during school hours, and two after school hours. It is interesting to note that 15.3% of the families indicated that they had to force their children to work, while later indicated that there were no working children according to their responses...

When comparing the average monthly income of the families that reported having to force their children to work, it was found that there was a statistically significant negative correlation with the level of income of the family. It shows that families of low income are more likely to force their children to work than higher income families.

During the causality analysis session, a group of education experts and stakeholders discussed concerns regarding school drop-out. In their description of the problem, the group identified two immediate causes of this problem: child labor and gender inequality. Two other indirect factors were identified, the acceptance of low educational opportunities, and the inherited attitudes that did not consider education to be important for girls. The importance of implementation of the Compulsory Basic Education Law in refugee communities was also mentioned. Improving school infrastructure and providing playgrounds for children in schools.

51- CARE International (June 2017). Livelihood of Syrian Refugees in Jordan Survey.

52- Center for Strategic Studies / University of Jordan, International Labor Organization, Department of Statistics, National Survey of Child Labor in Jordan, 2016.

53- Center for Strategic Studies / University of Jordan, International Labor Organization, Department of Statistics, National Survey of Child Labor in Jordan, 2016.

Regarding school dropout, the survey showed that only seven families have children who drop-out school (either leaving before the end of all classes and between classes or leaving for long periods) and represented less than 1% of children between the ages of 6 and 18. The rate of drop-out was as follows: five children dropped out once to three times a week, One drop out once a week, and one child drop out more than three times a week for business purposes or for other purposes. The survey showed that the reasons for drop-out from the point of view of the heads of families, whether they have children dropping- out of school or not are related to the economic situation of the family (28%), the child has a tendency towards certain skills or vocation such as craft or practice sports (25%), family does not have enough time to follow up their children at schools (24%), or early marriage (21.5). On the other hand, families reported other reasons related to the educational system such as low school capacity (25%), teaching methods that alienate students from school (23.2%), lack of contact with families (21.7%), distance (23.6%), and the difficulty of the curriculum (22.5%).

Regarding children-related factors for dropout, the survey showed that the reasons include preference for the child to work instead of studying (20%), lack of desire for education (23.6%), registered in a lower school grade (24%), health-related reasons (19.4%), and exposure to bullying (17.5%). There are other reasons related to family issues such as: physical instability and moving between houses 24%, recent arrival to country (22.7%), lack of knowledge about educational processes and laws (16%) and child labor (22.5%).

Violence in Educational Settings

Violence is one of the most important influences on the stability of family life. The survey found that violence is not prevalent in high rates at refugee families' residence. However, regarding violence in schools, survey showed that 8% of the families consider violence prevalent at schools compared to 5% consider it prevalent at universities. Of those who noted the prevalence of violence in schools and universities, it has been reported that the most prevalent types was physical violence (56%) at schools compared to 35% at colleges or universities.

while psychological violence came on the second place by 33% in schools and 15% in colleges and Universities. Interestingly, about 15% of families believe that sexual abuse is prevalent in universities compared to 8% at schools; which is the least prevalent form of abuse.

The survey showed that 12% of the families never turn to any entity if violence occurs, while 43% do, and 26% sometimes do so.

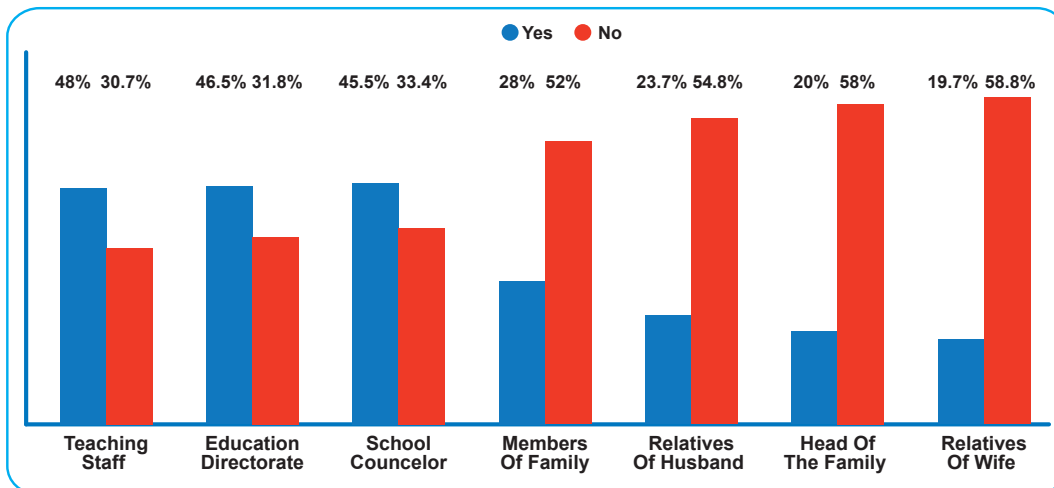
As for the families who prefer to seek help in case of violence acts against their

children at schools, the survey showed that 14% always seek help from the head of the school (principal) and teaching staff compared to 31% who do not prefer that. Those who seek help from educational counselor were only 8% compared to 33% whom not.

About 3% of the families seek help from the education directorate compared to 47% whom not. In addition, only 0.7% always calls the Hotline at the Ministry of Education compared to 63% will noy.

In contrast, about 3% of the families resort to relatives of the husband and 2% of families go to relatives of the wife (Figure 28).

Figure 28: Percentage Distribution of Refugee Families by Entities family seeks help from in case of violence at schools



* Percentage do not equal 100% due to the (refuse to answer) option.

* The yes answer includes always and sometimes.

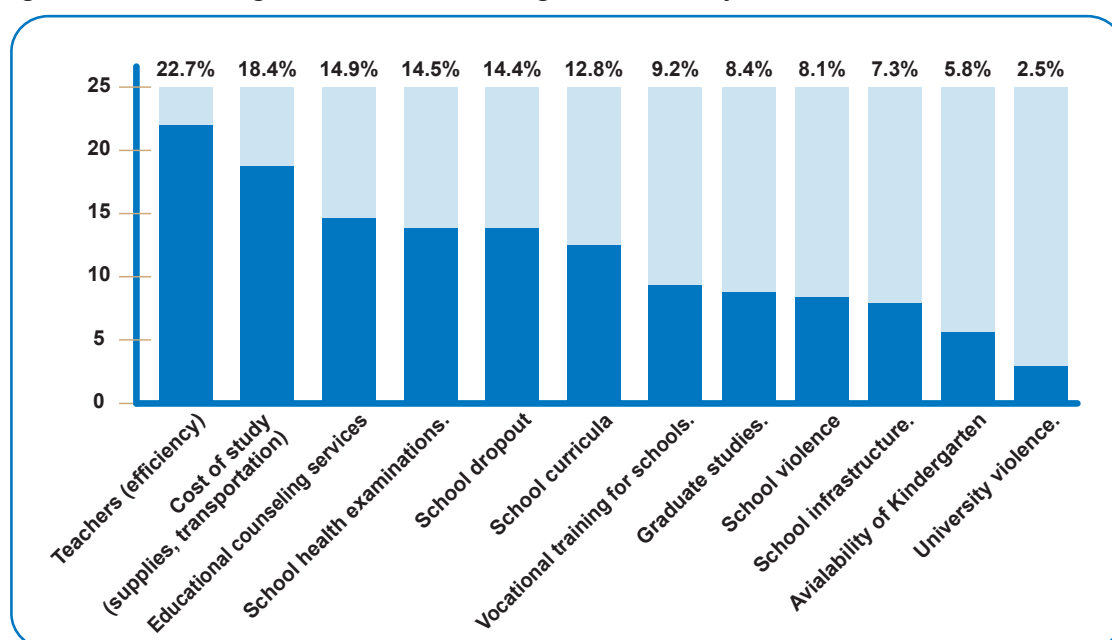
Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Priorities Related To Education

According to the heads of the families, the most important priorities related to education were the quality of teachers (22.7%), the cost of education (school supplies and transportation) (18.4%), and educational counseling services (14.9%).

They have also reported that the least priority were for school infrastructure (7.3%), availability of kindergartens (5.8%), and violence at universities (2.5%).

Figure 29: Percentage Distribution of Refugee Families by Priorities Related To Education



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Domain V: Economy Characteristics

Economy is one of the most important determinants of quality of life in any community. In a study on refugees in Jordan⁵⁴, it found a clear concentration of poverty and unemployment among refugees in Jordan, specifically among refugees residing in camps. This domain describes and discusses the economic status of refugee communities in Jordan relating to income, expenditure & livelihood, and work. In Jordan, an online based database RAIS was initially developed by UNHCR in 2009 to address the demands for a more coordinated approach by partners delivering refugee assistance, including cash assistance. RAIS is the main database to document and monitor assistance delivery in countries across the region (Lebanon, Jordan, Egypt, and Iraq) for over 200 organizations actively using RAIS.

The economic situation of households continues to be difficult of Syrian refugees in spite of increased access to work thanks to the Jordan Compact .Access to work opportunities are limited and with low wages; for women the major challenges to work are social norms, transport and childcare. Much of the work of men and women remains informal. An important source of complementary income for women are home based businesses especially in food processing, an area of work the Government would like to see not only regulated but done jointly with Jordanians. The livelihoods sector and especially the ILO are advocating for flexible work permits in manufacturing and services sector (the way agriculture and construction are), more opportunities with flexible working hours, an expansion of

54- Alduraidi, H & Waters, C (2017). Health- related quality of life of Palestinian refugee inside and outside camps in Jordan. Nursing outlook, 65; pp: 436-443.

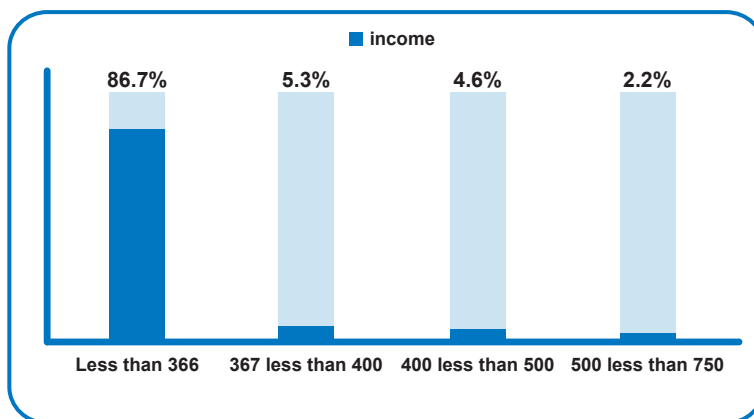
the occupations non-Jordanians are allowed to work in, and a simple and efficient system for registering and licencing HOME BASED BUSINESSES.

Family Income and Expenditure

In their 2014 survey of Syrian refugees in Jordan, the UN High Commissioner for Refugees (UNHCR) described the livelihoods of refugee families in Jordan⁵⁵. According to the study, only 2% of the respondents described their living situation as good, 40% described it as bad, and 51% described it as livable according. This reflects the importance of refugee livelihoods as a subject to further assessment and further integration as a priority in the development plans, or social welfare programs. In this survey, families were asked to describe their economic status before and after displacement. It is worth noting that Jordan developed a pilot project which used the fingerprint system to enable refugees to obtain their financial assistance and many forms of support without the need for bank cards or a personal identification code. Similarly with the findings of the study, very few families in the current survey described their current economic status as good (20%) compared to (44%) before refuge, very good (3%) compared to (31%) before refuge, and as excellent (0.2%) compared to (11%) before refuge, while the majority (74%) described their situation as “bad” (10%) before refuge.

As for the family monthly income, the results showed that the majority of refugee families (86.7%) reported the average income was less than 366 JD, while about 5.3% (43 family) received income between JD 367- 400. One family reported its income to be more than 1500 dinars. It is worth mentioning that these figures reflect family income rather than per capita income. (Figure 30)

Figure 30: Percentage Distribution of Refugee Families by Monthly Income in JOD



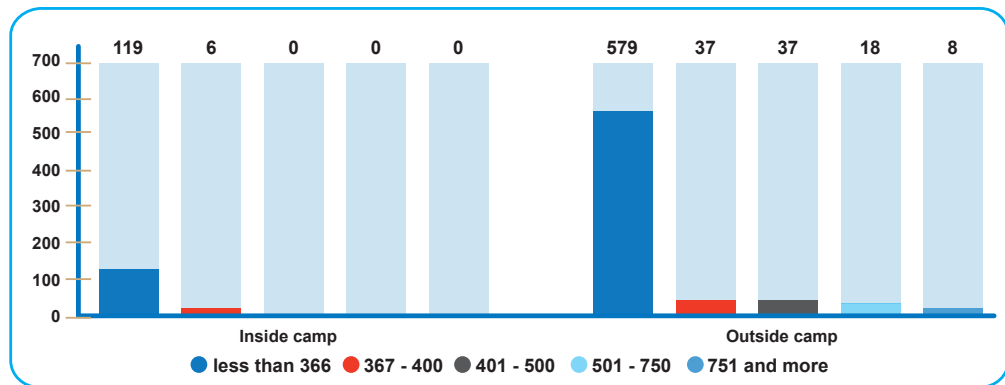
Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

When comparing families inside and outside camps, it is clear that there is a statistically significant higher concentration of poverty inside the camp compared to outside the camp. The analysis showed that 95% (119 families) of the families living in camps had monthly income of less than 366 JD and 5% (6 families) living

55- UNHCR & IRD. (2014). Livelihood of Syrian Refugees in Jordan (Home Visits).

in the camps had monthly income of 367 to 400 JD. While 85% (579 families) living outside camps had monthly income of less than 366 JD. 5.5% of the families received 367 to 400 JD, and the rest between 401 and 500 JD, while 2.6% (18 families) outside the camps, their monthly income was between 501 to 750 dinars, and only 8 families outside the camps, earning more than 750 Jordanian dinars per month. (Figure 31).

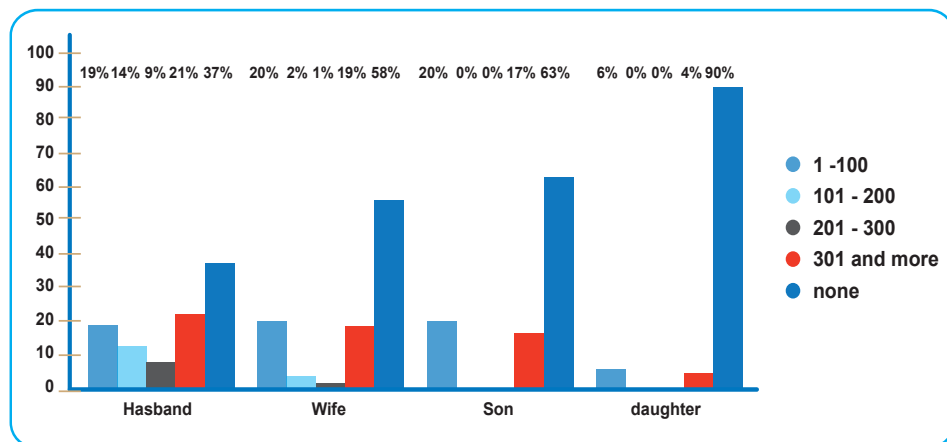
Figure 31: Percentage Distribution of Refugee Families by Monthly income inside camps and outside



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Families were asked about their sources of income. The results showed that the most common source of income for families was from international and local charitable organizations in the form of food vouchers 82% of the families, while 18% did not receive any vouchers. While 81% of the families received salaries and wages, 19% did not receive any salaries or wages. 63% received financial assistance from international and local charitable organizations, while 37% have not received such assistance. These findings indicate that refugee families in Jordan rely on aids and subsidies provided by institutions and organizations (Figure 32).

Figure 32: Percentage Distribution of Refugee Families by by income sources

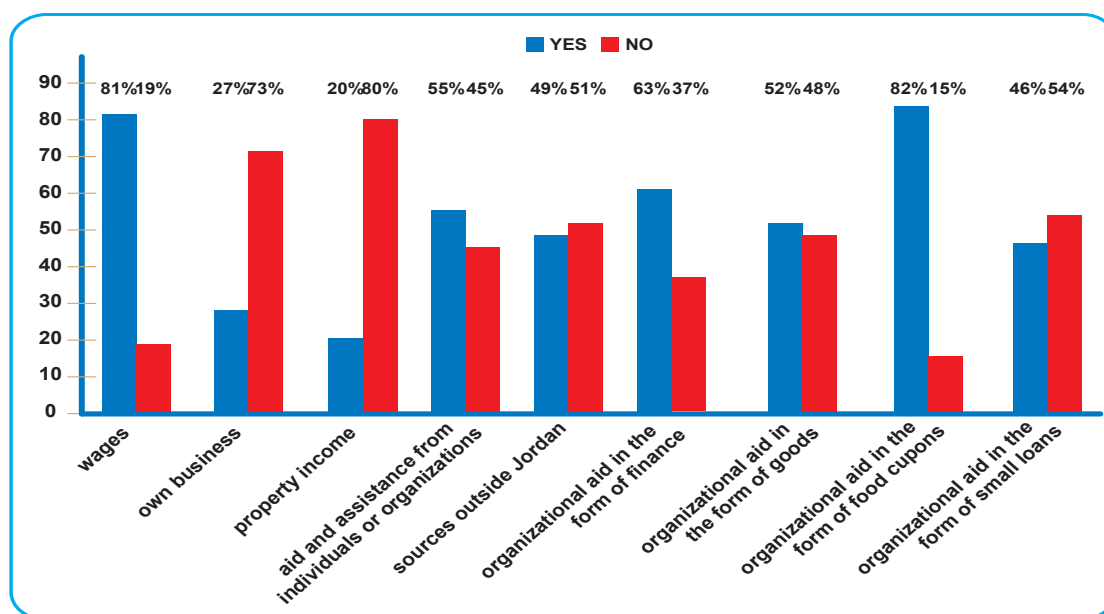


Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

These results are consistent with the results of a previous study on Syrian refugees, where 34% of families reported no income, while the remaining 66% families' income was 190 Jordanian dinars.⁵⁶ However, 41% get an income equal to 150 JD or less. In addition, 72% of the families surveyed reported that they were in debt, which is on average over 500 JD, and 95% of surveyed families received a kind of assistance from local organizations at least once..

As for the contribution of family members to the monthly income of the family, the results showed that the husband's contribution to family income during the last year was 47.6% by the husband, 16.8% by the wife, 20.3% by the male son and only 1.5% by the female daughter. The figure below shows the amount of each contribution by category in Dinars (Figure 33).

Figure 33: Percentage Distribution of Refugee Families by Members' Contribution to Family Income in JOD

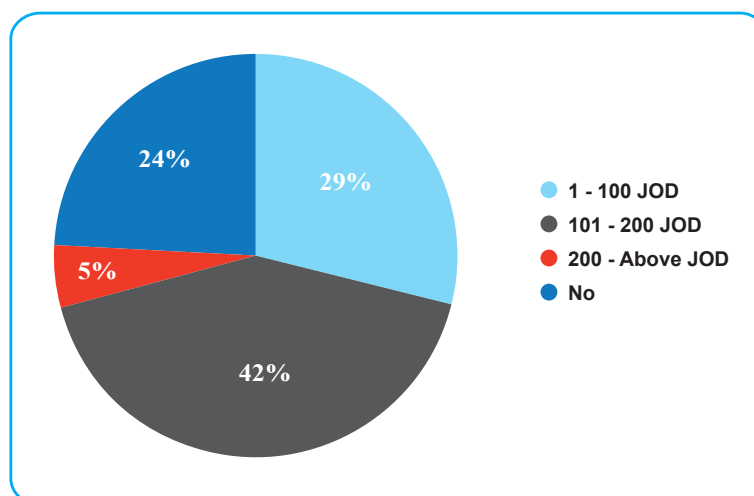


Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results shows that 29% of the families spend between 1 and 100 JOD for housing, 42% spend between 101 to 200 JOD monthly for housing, and 5% spend more than 200 JOD monthly, while 24% do not pay for housing.

Figure 34: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Housing in JOD

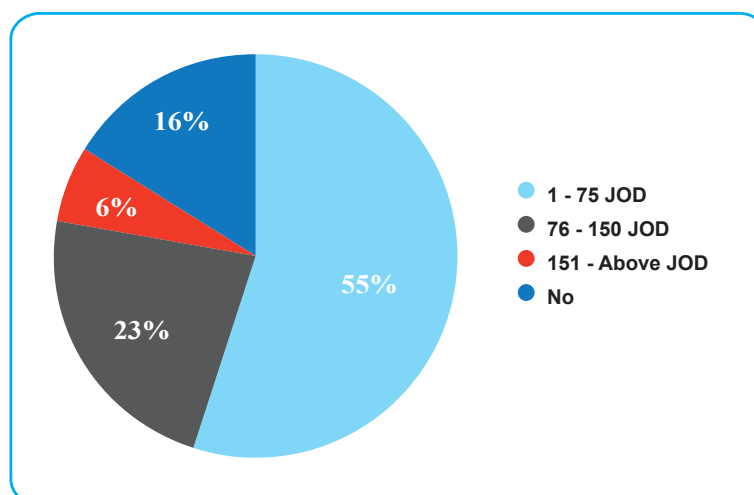
56- CARE Jordan - Syrian refugee Assessment in Jordan April (2014)
<https://www.care-international.org/files/files/publications/CARE-Syrian-refugee-Assessment-in-Jordan-April-2014.pdf>



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results also shows that 55% of the families spend between one and 75 JOD monthly on food, 22.5% spends between 76 and 150 JOD, and 5.6% spend more than 151 JOD monthly, while 15.7% do not pay for food.

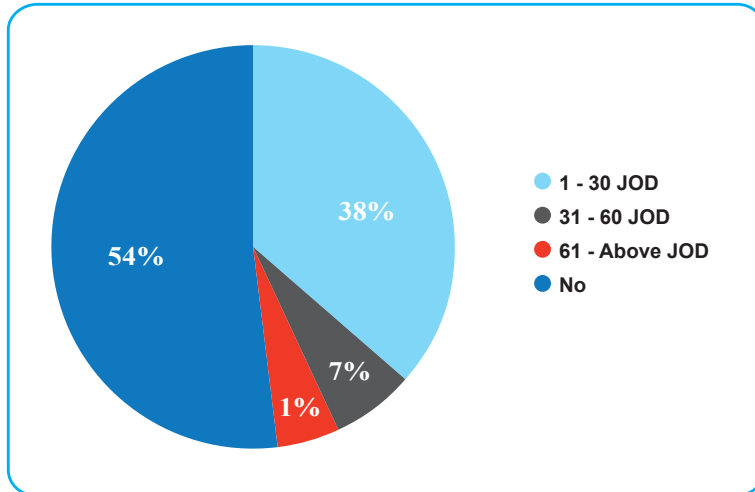
Figure 35: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Food in JOD



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results shows that 38% of the families spend between 1 and 30 JOD monthly for clothing and other group 7% spend between 31-60 JOD monthly, while 54% do not pay for clothing.

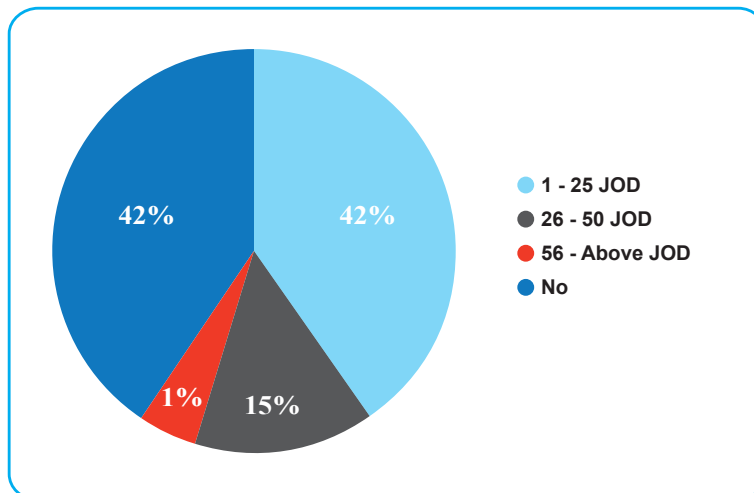
Figure 36: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Clothing in JOD



Source: Department of Statistics, Population and Housing Census. 2015.

The results shows that 42% of the families spend between 1 and 25 JOD monthly for transportation, a 15% spend between 26 and 50 JOD, and 1% spend more than 51 JOD monthly, while 42% do not spend on transportation.(Figure 37)

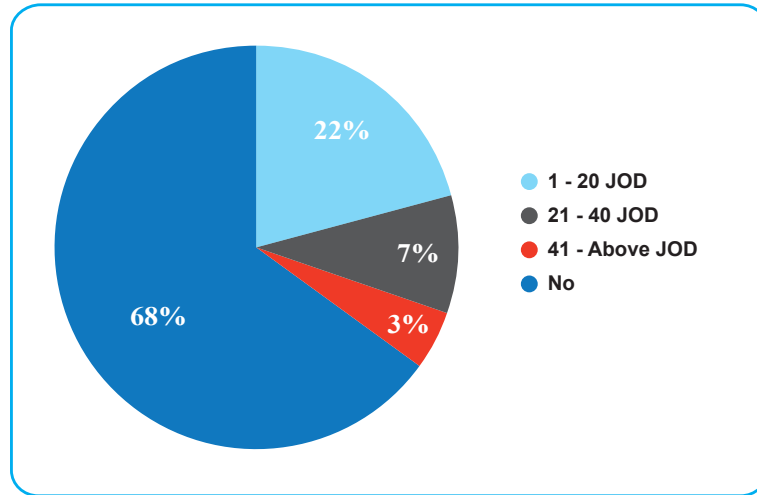
Figure 37: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Transportation in JOD



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results shows that a 22% of the families spend between 1 and 20 JOD monthly on education, 7% spend between 21 and 40 JOD, and 3% spend more than 41 JOD monthly, while 68%do not pay on education. (Figure 38)

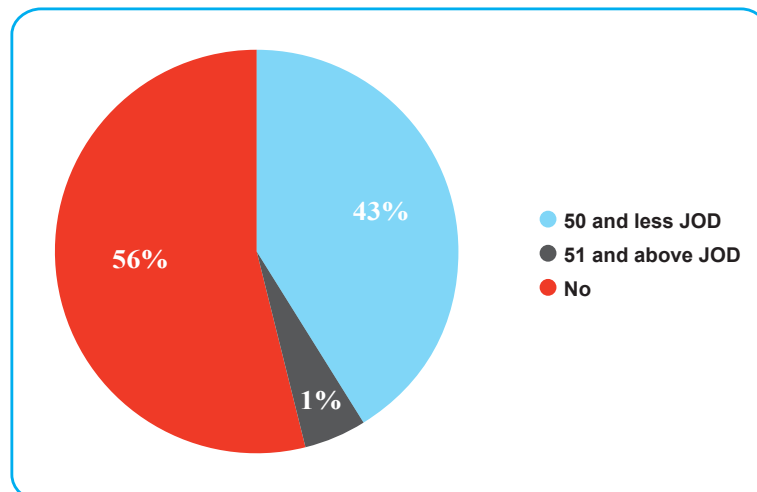
Figure 38: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Education in JOD



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results showed that a 43% of the families spend between 1 and 15 JOD monthly on health and medication, 1.4% spend more than 51 JOD monthly, while 56% do not pay for health and medication (Figure 39).

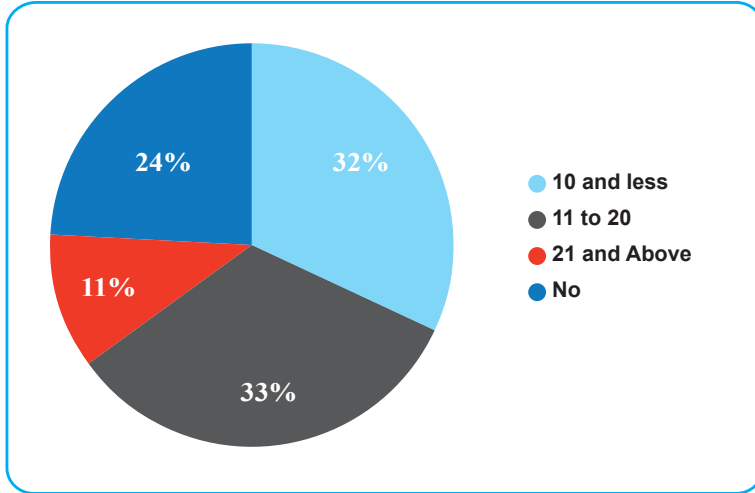
Figure 39: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Health and Medication in JOD



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The analysis shows that 32% of the families spend between 10 and less JOD monthly on electricity, 32.7% spend 11 to 20 JOD monthly, 11% spend more than 21 JOD monthly, while 24.2% do not pay on electricity.

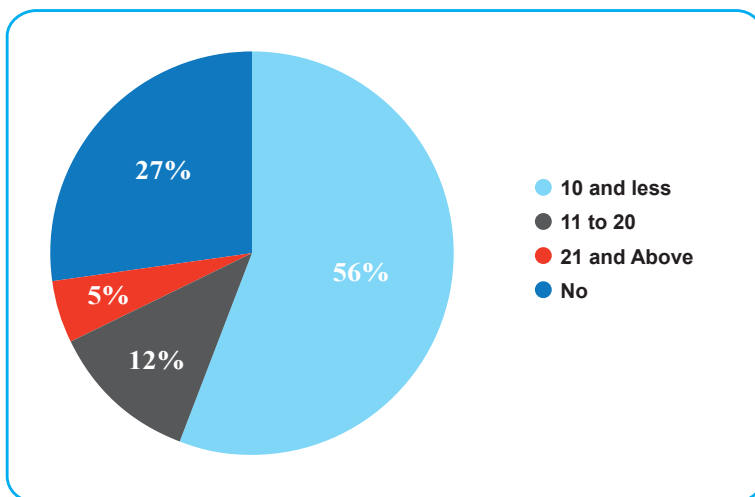
Figure 40: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Electricity in JOD



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The analysis shows that 56% of the families spend 10 JOD or less monthly on drinking water, 12% spend 11 to 20 JOD monthly, 5% spend more than 21 JOD monthly, while 27% do not pay for it (Figure 41).

Figure 41: Percentage Distribution of Refugee Families by Average Monthly Expenditure on Drinking Water in JOD

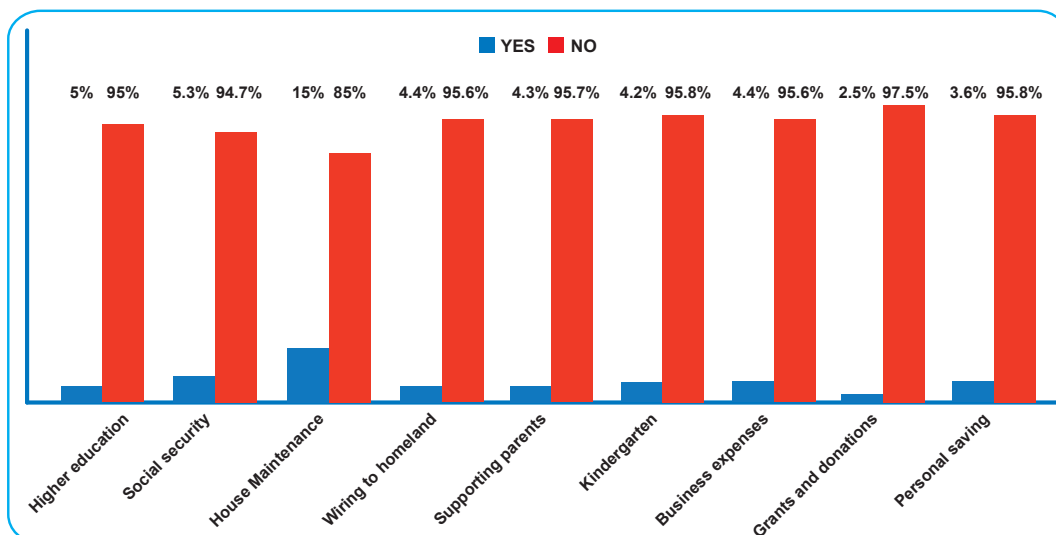


Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The analysis show that 11.7% of the families spend money on a monthly basis for recreational activities, and 86.3% do not pay for recreation. 12% of families reported a monthly payment on debt.

Also, 4,3% of the families pay for supporting parents, and the higher education 5%. And other expenditure items are shown in (figure 42).

Figure 42: Percentage Distribution of Refugee Families by Other Expenditures



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

Labor

A previous study on Syrian refugees in Jordan indicated that 45% of adult males who are able to work were employed, 55% unemployed, and no reported women's income.⁵⁷ Similarly, the current survey monitored the refugee status in Jordan.

The heads of family provided varying responses regarding the employment status of family members aged 16 or over, with only 26% of family members working for pay, and 15% unemployed, despite seeking jobs.

37% were housewives, followed by 4% who were in schools, 3% were patients or disabled persons, and 3% were elderly. But 10% of females do not work or seek employment, especially young women living in camps.

This may be explained by the prevailing culture among refugee communities, which often do demand women to work. As for the labor sector, 59% work in an unregulated private sector, followed by 24% in the private sector, 9% in NGOs, and 6% in the public sector.

34% of the families emphasized that the presence of unemployed family members negatively affects the family relations compared to 26% do not agree.

57- CARE International (June 2017). Livelihood of Syrian Refugees in Jordan Survey.

Refugee families also pointed to a very important issue, as 48% of the families find that the salaries and wages they receive are not compatible with the amount of work, compared with only 11% which agree.

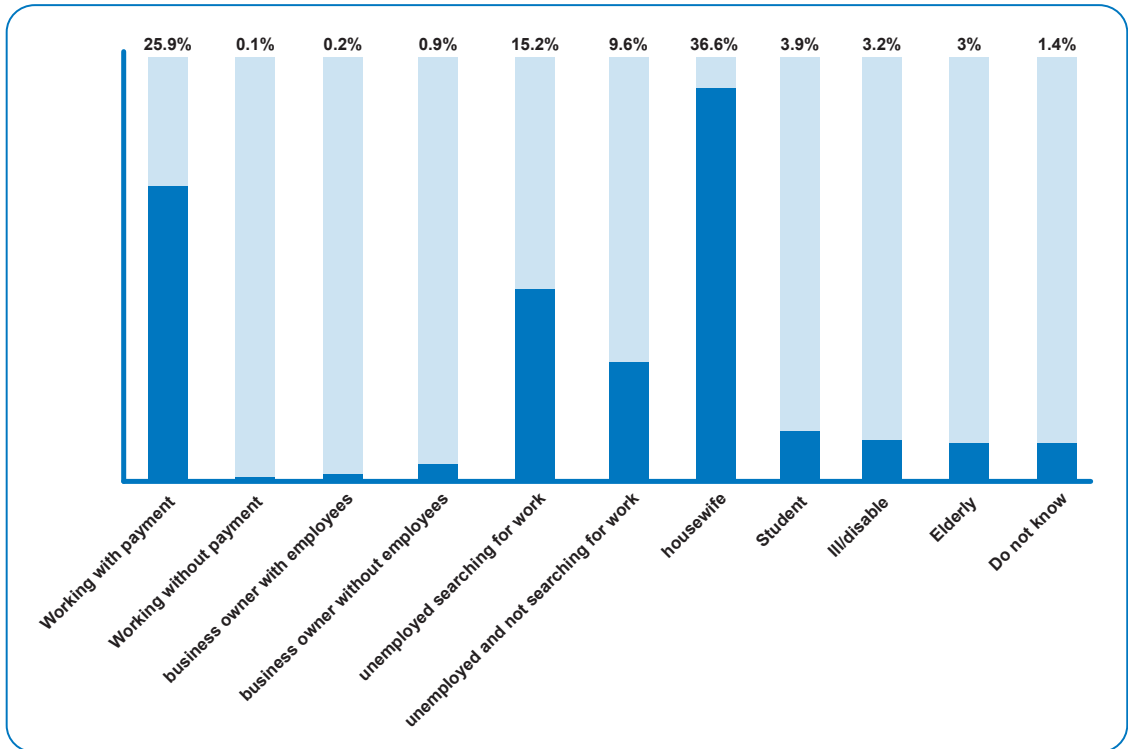
In addition, 53% of the families find that the wages they receive are not equal to the salaries of the citizens of the country, compared to 5% agreed. They find that they are close and 42% find that working family members do not receive all their rights at work, while 11% do. Only 13% of the families finds that jobs opportunities are available, compared with 44% who do not think they are available.

And 35% of the families find that there is competition in the labor market and employment with the citizens of the host country, compared to 23% don't agree. In addition, 20% of the families prefer to work in the agricultural sector, compared to 35% of the families do not prefer. 39% of the families indicated that the family should produce some of its needs such as clothing and food industries while 21% did not agree. (Figure 43)

It should be noted that Jordan is seeking through many initiatives to work on the employment of refugees, most recently by issuing work permits to Syrian refugees working in the construction and agricultural sector and other sectors permitted for non-Jordanians, as well as permits that are not linked to a specific employer or a specific position, and this initiative is the first of its kind in the Arab region since the outbreak of the Syrian crisis in 2011.

This new step came after the Ministry of Labor and the General Union of Trade Unions in Jordan, signed a memorandum of understanding in 2017 as a correspondence to the donors 2016 conference in London and Jordan's commitments to create Jobs for the Syrian refugees. There are many national initiatives for refugee's employment, including cooperation agreements with the Vocational Training Corporation and the opening of an employment office for Syrian refugees in Za'atri camp.

Figure 43: Percentage Distribution of Refugee Family members aged 16 and more by Employment Status



Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

In terms of business ownership, the vast majority reported not owning the business where they work. The result showed that only 2.6% of refugee families own their own business, while 97% of families do not.

Family Priorities

In the current survey, the most important priorities among family sample were high prices/life expenses 58.8%, job opportunities 49.9%, and wages 40.9% .

While the least important priorities were Healthy environment for work 12.4% , Work suitable for women 15.2%,and In-kind assistance from international and local organizations 16.6%>

Table 10: Percentage Distribution of Refugee Families by Economic Priorities of Refugee Families

Priorities	%	N
Wages.	40.9	329
Job opportunities.	49.9	402
High prices/life expenses	58.8	473
Work suitable for women	15.2	122
Healthy environment for work	12.4	100
Food coupons	30.9	249
• Financial assistance from international and local organizations	27.3	220
In-kind assistance from international and local organizations	16.6	134

Source: National Council for Family Affairs and UNHCR, Refugee Family Survey, 2017.

The results of this domain highlight the serious deprivation and the clear disparities in terms of income and livelihood. These issues are in serious need for further analysis and proper planning in light of previous and current research findings.

In a causality analysis session with a group of experts to discuss the economic situation of the refugees, the group noted that most refugee families rely on aid and subsidies from agencies, governmental, non-governmental and international organizations. The group has included two direct causes of this problem : limited employment opportunities for refugees in the host country and loss of original sources of income in their countries. The group also identified two underlying causes of the problem: the fragile economic situation of the host country and high competition for employment opportunities, prompting refugees to accept lower salaries and returns for their work, taking into account the low levels of education.

In terms of root causes, the group also included two of them; the political and military conflicts in the countries of origin of the refugees that forced them to resort to Jordan, as well as the legal situation in Jordan, which may limit the chances of refugees to work and invest, compared to Jordanian citizens. It should also be noted that the groups also cited the importance of supporting information to verify refugees' self-reported economic information, and the difficulty of tracking work information for refugees working outside the organized labor sector.

Recommendations

This chapter reflects the recommendations agreed upon by the expert groups and relevant stakeholders in each of the five areas of the survey. These recommendations were made after careful review of previous surveys and statistics, national policies and legislation, as well as the results of the current survey. The recommendations relate to a variety of levels, including the level of research, legislation, social awareness, the educational environment, the healthy environment, management and coordination, quality of services and social and cultural determinants, respectively.

Demographic Characteristics

- It is clear that the refugee community in Jordan is relatively young. Future research, assistance programs and policies must therefore focus on young people and their specific needs.
- The importance of studying the impact of refugees on achieving the “demographic dividend” that Jordan is waiting for with great anticipation, and developed its national policies to respond to this event represented in the demographic dividend policy document. The policies related to refugees should be integrated in the relevant national policies.
- There is a pressing need to understand better the characteristics and needs of female-headed households.

Family Relations and Participation in Public Life

- The need to study family relations dynamics and the role of fathers and mothers in the family, especially since most families indicated that the mother and father do not spend enough time with family members on a regular basis.
- Poor access to social services such as family counseling and pre-marriage counseling programs. This could reflect the lack of such services. It is necessary to coordinate between international institutions and community-based organizations to provide a high quality services in refugee communities, and to work to reduce the duplication of service provision and to rely on a unified database for these services. In addition it is important to benefit from the available educational services and facilities to support the provision of social services. Further capacity building for social workers to undertake case management and provide family counseling.

- The issue of early marriage among refugee girls remains a concern, which calls for more studies that reflect the consequences on couples, and to assess to the effectiveness of the recent legal marriage documentation restrictions, along with the need to design awareness programs to change mindsets (communication for behavioral impact) and to expand opportunities for girls to study and work and intensify programs to empower girls. It is also necessary to work on solutions at the root causes level, including overcrowding and the space allocated for housing, so families do not force their children to marry as a mean to secure a residential area. Direct intervention to improve the economic conditions of these families should be considered. The importance of activating referral programs for pre-marital situations to contribute to the providing of alternatives according to the case management approach. The need to coordinate efforts among organizations working in this area within a common umbrella is crucial as the national taskforce is working to develop a national plan of action. .

- It is apparent that the use of internet, social media and communication technology by all members of the family is weak which may limit the chances of remaining in contact with relatives and friends and to access to information, media and may lead in the future to a gap knowledge between generations, as communication technology has become a requirement of the age to progress and prosperity, which calls for the need to study the possibility of providing these services within centers for the benefit of refugee families, especially families in the camps There is also a need to increase access of girls and women to social, recreational and community activities.

- The need to study the issue of nepotism and exploitation of refugees through scientific studies to monitor these violations of the rights of refugees in all sectors, and to develop programs to reduce it and to spread transparency.

- It is necessary to work on the design of programs for reunification of refugee families to connect with extended families if possible and to study existing relations and ways to strengthen them, especially as this issue is a priority for the family.

- Since the majority of refugees consider violence to be a private matter, and should not be addressed to official authorities, making it difficult to monitor cases, follow up and have a clear vision on the reality of violence in these communities. Further qualitative and quantitative research is needed to understand the phenomenon. The need to educate families of the means of reporting and services available and to raise awareness through behavioral change campaigns to disseminate a culture free of violence and to train

the concerned institutions to manage the situation based on the national framework for family protection, with the need to coordinate efforts in an integrated manner between all partners and to improve the quality of shelters available to victims of violence. further emphasis on global SGBV and CP standards following child-friendly procedures and applying a truly survivor-centered approach might increase building trust with survivor

Health Characteristics

- The survey revealed the lack of awareness of refugee families on the available health services, especially for families outside the camps. Therefore, it is necessary to promote awareness of the services, availability of options, and to strengthen coordination between health providers, especially within the camps. Taking into account the current decline in programs to support refugee health, while promoting health services provided through schools and other educational services. And to disseminate standard for health services provided to refugees to ensure their quality as well as follow up on these standards.
- The importance of supporting healthy lifestyles for refugees through special programs that promote sport and the provision of special facilities that take into consideration gender differences and the requirements of each category, as well as monitor their feeding patterns in specialized studies.
- With regards to mental health services, it is necessary to monitor the quality of services available to refugees, to activate the role of educational counselors and social workers and to provide psychological support services in primary health care centers where they seek health services, and to strengthen the case management services and tools. Further, the need to develop preventive programs and mental health awareness activities has been identified. It also important to establish a national umbrella for mental health programs in general.

Educational Characteristics

- Compared with the literacy rates of the Jordanian population, the level of literacy and educational level in general is low among refugees. This requires reviewing the educational policies targeting for all refugees by governmental and non-governmental organizations and supporting educational institutions to provide quality education programs, taking into account the need to apply national legislation on refugees, in addition to providing adult educational services for literacy classes and vocational continuing education and training programs targeting specific kind of career to keep them updated.

- Urgent action should be taken to develop policies to monitor the enrollment and follow-up of refugee students in schools and to monitor school dropouts, especially outside the camps. Stronger and effective systems shall be established to deal with individual cases to provide the necessary requirements for admission to the available educational services, with the importance of coordinating efforts in this area among all institutions, and improve educational services to attract children at all levels, the most important educational facilities and overcrowding, teachers and the educational process as a whole, as well as training teachers on the mechanisms of dealing with children at risk of dropout. With the need to provide appropriate school feeding programs for children, and provide school health clinics.

- Where most of the educational services available to children are found to be difficult to reach, a study is needed to assess the reasons behind this, and map the services and geographical distribution inside and outside the camps, as well as the need to provide appropriate transportation or protection groups to accompany students to their schools.

- Increase vocational training opportunities in light of available livelihoods opportunities, particularly for youth; Provide professional services at the level of vocational schools and specialized professional programs, taking into account that families did not express their need for vocational training centers, which make it a need to study the available services and programs.

- Enhance educational opportunities at the higher education level for graduates of secondary education, to encourage families to educate their children and to spread the culture of science and learning.

- Develop appropriate policies to deal with working children and reduce child labor, including work in the agricultural sector and in vehicle repair, by improving the educational environment, providing economic alternatives for children and their families in need, and applying compulsory education.

Economic Characteristics

- the provision of adequate jobs in non-traditional ways, in addition to continue providing cash and in-kind assistance to families in need.

- The importance of developing special policies and laws to eliminate wage discrimination, establish mechanisms to monitor this issue, and ensure that the worker obtains all rights according to national laws.

- Encouraging women's work through productive projects and providing them with child care services, especially for female-headed households.
- Providing opportunities for microfinancing through existing funds and facilitating related conditions and procedures for refugee families.

Acknowledgments:

This report on the situation of refugee families, in cooperation with UNHCR, serves as a national reference document for each refugee-related body, where it presents to the relevant international institutions, bodies and organizations working in the field of refugees the most important results that will assist in the development of programs and policies pursued by these agencies. To work on them and set the priorities of refugee families as seen by the family at all locations.

We express our appreciation, thanks and appreciation to the team of all institutions, experts and auditors, and we thank you

Working Group Report

Working Group of the National Council for Family Affairs

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The groups of Causal Analysis

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Ministry of Social Development
Ministry of Labor
Ministry of Health
Ministry of Education
Ministry of Planning
Ministry of Water and Irrigation
Directorate of General security
Department of Justice Judge
Department of Statistics
Supreme Council of Population
Norwegian Refugee Council
King Hussein Foundation
Vocational Training Corporation
Jordan River Foundation
Health Aid Foundation
Save the Children Foundation
QuestScope Foundation
Family Health Care Institute
World Health Organization
United Nations Population Fund
International Labor Organization
United Nations Children's Fund
United Nations Educational,
Jordan Red Crescent
Islamic Relief Organization
United Nations Development Programme
Catholic International Committee
on Migration

International Rescue Committee
Islamic Center Association
CARITAS
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Terre Des Hommes
Humanity and Inclusion (HI)
CARE International
Mercy Corps
Jordan Women's Union
Plan International
Social support center for
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