A promise of tomorrow

The effects of UNHCR and UNICEF cash assistance on Syrian refugees in Jordan

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With Aida Essaid, Said Ebbini, Kifah Bani Odeh, Deya’eddin Bazadough, Hala Abu Taleb, Hadeel Al Amayreh and Jude Sadji

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<td>ATM</td>
<td>Automated teller machine</td>
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<td>BCC</td>
<td>Behaviour change communication</td>
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<td>C4D</td>
<td>Communication for Development</td>
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<td>CaLP</td>
<td>Cash Learning Partnership</td>
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<td>CBO</td>
<td>Community-based organisation</td>
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<td>CCF</td>
<td>Common Cash Facility</td>
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<td>Child Cash Grant (UNICEF)</td>
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<td>CCT</td>
<td>Conditional cash transfer</td>
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<td>Community Support Committee</td>
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<td>Cash transfer</td>
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<td>GAM</td>
<td>Global acute malnutrition</td>
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<td>HPC</td>
<td>Higher Population Council</td>
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<td>IFPRI</td>
<td>International Food Policy Research Institute</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>International non-governmental organisation</td>
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<td>International Rescue Committee</td>
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<td>PDM</td>
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<td>QoL</td>
<td>Quality of Life</td>
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<td>SEZ</td>
<td>Special Economic Zone</td>
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<td>SMEB</td>
<td>Survival Minimum Expenditure Basket</td>
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<tr>
<td>SRHR</td>
<td>Sexual and reproductive health and rights</td>
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<td>UN</td>
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<td>UNFPA</td>
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<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>VAF</td>
<td>Vulnerability Assessment Framework</td>
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<td>WASH</td>
<td>Water, sanitation and hygiene</td>
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<td>WFP</td>
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As the conflict in Syria enters its seventh year, the Hashemite Kingdom of Jordan again stands at the forefront of meeting the challenges the war has wrought on its neighbours. The people of Jordan have welcomed refugees, despite the strain their presence has placed upon them, with the situation becoming more challenging over time. In long term exile, refugee families and their children are living in ever more precarious situations, with any savings depleted, their means to survive diminishing and negative coping mechanisms being adopted in response to growing financial stress – which is having direct impact on children. The challenges are particularly acute for the around 80 per cent of Syrian refugees living in urban areas in Jordan, primarily among the country’s most disadvantaged communities. Struggling to make ends meet while bearing the trauma of displacement, the majority live below the Jordanian poverty line. For the most vulnerable among them, receiving cash assistance is a literal lifeline.

Following an extensive process of interaction with refugees across Jordan, including over 250,000 home visits to gather a detailed understanding of their lives, UNHCR and UNICEF utilize a joint Vulnerability Assessment Framework (VAF) to view, with the same lens, refugee vulnerabilities in ten sectors, including areas such as shelter, health and education. This understanding of vulnerability is the basis for cash assistance programmes that deliver assistance to vulnerable refugees in a timely, dignified, cost effective and fraud proof manner.

UNHCR and UNICEF’s cash-based interventions are also the first large-scale programmes to use biometrics to verify the identity of those receiving assistance. Joining forces with a range of humanitarian partners via The Common Cash Facility (CFF), we are able to deliver money to the people who need it most.

With this system, refugees are able to withdraw money directly through ATMs at Cairo Amman Bank using iris-scan technology. This not only provides predictability of assistance to refugee families receiving cash assistance, it also allows them to spend money in local markets in support of the local economy, resulting in protection and social cohesion dividends through strengthened relationships between refugee and host community populations.

Cash assistance is one of UNHCR and UNICEF’s most important social protection tools in humanitarian response. In addition to enabling refugees to pay rent, utilities, access to education, and other essential needs, it has the parallel benefit of being effective at reducing harmful coping mechanisms such as withdrawing children from school, child marriage, child labour begging and other survival tactics.

In the long run, Jordan’s approach to cash assistance provides an opportunity to document lessons-learned and best practices from the use of technology for payment process, the common vulnerability assessment, and a strong monitoring platform. This could be a window of opportunity to strengthen national social protection systems in Jordan.

UNHCR and UNICEF, in cooperation with the Overseas Development Institute (ODI), are now able to deepen our understanding of the long-term impact of our cash-based interventions on individuals, families, children and the host community. However, this report also clearly outlines that refugee families and children in Jordan remain extremely vulnerable, and the now protracted nature of their exile means that continued support is more vital than ever.

There have been many laudable steps made by the Government of Jordan in supporting refugees, for example in access to work and education. The sustained support of the international community to the most vulnerable is vital; Jordan cannot be left to foot the bill alone after so many years of the Syrian crisis. Assistance depends on the strong support shown by donors, and we continue to advocate that this support remains robust and linked to longer term investment.

We must however continue to ensure that the most vulnerable families and their children receive essential support, and do not slip through the cracks. Cash assistance is both nimble and goes more directly to people in need; it is one of the cornerstones of solutions to huge humanitarian needs. This assistance in Jordan, in the words of the Grand Bargain, is too important to fail.

Stefano Severe
UNHCR Representative Jordan

Robert Jenkins
UNICEF Representative in Jordan
Graph colour key

The following key outlines the abbreviations and colours attributed to the different cash assistance groupings within the graphs throughout the report.

Group A-Graphs where we do not distinguish between full- and half-value WFP vouchers—these are by “broad” benefit package:

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<tr>
<th>Colour</th>
<th>Name</th>
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<tr>
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<td>UNICEF + UNHCR + WFP</td>
<td>3 UN</td>
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<td>WFP only</td>
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Group B-Graphs where we distinguish between full- and half- value WFP vouchers—these are by “fine grained” benefit package:

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<td></td>
<td>All 3 UN benefits + WFP (full)</td>
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<td>All 3 UN benefits + WFP (half)</td>
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Executive summary

Despite the generous hosting by the Government and people of Jordan of Syrian refugees, more than 650,000 registered Syrian refugees in the country, continue to face a highly uncertain future. They cannot go home, given the ongoing conflict and insecurity in Syria; many of the most vulnerable struggle to find suitable employment that would enable them to support themselves and their families while in Jordan; around 80% reside outside of the camps amongst the host community; and the United Nations (UN) cash assistance programmes that enabled them to make ends meet are increasingly jeopardised by budget cuts.

Unfortunately, while refugees’ options are heavily restricted, their needs are not. With their savings exhausted, assets already sold, and borrowing and debt on the rise, despite recently improved access to work opportunities, UN social assistance programmes are helping tens of thousands of registered refugee families make ends meet on a daily basis. It is against this background that our research is set.

This study aimed to find out what effects the United Nations High Commissioner for Refugees (UNHCR) and United Nations Children’s Fund (UNICEF) cash assistance has had on beneficiaries’ lives. It had the following objectives: (1) to evaluate beneficiary spending patterns and their effect on family well-being; (2) to evaluate the efficiency, effectiveness and accountability of cash assistance provided by UNHCR and the Child Cash Grant (CCG) provided by the UNICEF; and (3) to evaluate the complementarity of (as well as gaps in) programming by UNICEF, UNHCR and the World Food Programme (WFP) in targeting the most vulnerable groups.

Methods
Our mixed-methods study included a literature review as well as one round of quantitative data collection and two rounds of qualitative data collection.

The quantitative findings were collected through household surveys completed by respondents in 2,114 randomly selected households spread across four governorates (Amman, Irbid, Ma’al and Zarqa) between December 2016 and March 2017. In order to explore the effects of different types of cash assistance, as well as to ascertain how they complement one another, respondent households were selected from six groups of social assistance beneficiaries – i.e. those receiving:

1. UNHCR cash assistance, UNICEF CCG, plus full-value WFP vouchers;
2. UNHCR cash assistance, UNICEF CCG, plus half-value WFP vouchers;
3. UNHCR cash assistance plus full-value WFP vouchers;
4. UNHCR cash assistance plus half-value WFP vouchers;
5. WFP full-value vouchers and no cash assistance;
6. WFP half-value vouchers and no cash assistance.

In addition, where possible, household-level changes were assessed by comparing households’ vulnerability status at the time of UNHCR’s first home visit – undertaken as part of the Vulnerability Assessment Framework (VAF) in 2014-2016 – with findings from the Overseas Development Institute (ODI) survey undertaken in 2016-2017.

The two rounds of qualitative data collection were undertaken in December 2016 and May 2017. They covered the same four governorates as the quantitative work. In order to engage with a wide array of stakeholders, qualitative researchers visited urban and semi-rural communities, including informal tented settlements, and used focus group discussions (FGDs) (with adults and children separately), key informant interviews (KII) and case studies.

Key findings
Our primary research found that refugee households remain highly vulnerable. Most have expenditures that exceed their reported incomes – in some cases quite dramatically – and are living in overcrowded conditions that exacerbate health risks. Many children, especially older adolescents, remain out of school, and good nutrition is impossible for the majority. Refugees’ psychosocial well-being is poor and their opportunities for socialisation and participation limited, especially for women. Fortunately, our research found that UN cash assistance is broadly making lives better – especially when it is combined with full-value WFP vouchers.

Here, we summarise our findings, organised (as in the body of the report) by domain.

Household income and expenditure
Cash assistance is critical but does not fully meet basic expenditure needs
Our research confirmed that the vast majority of refugee households are living below the Jordanian poverty line. On a monthly basis, across our entire sample, median household expenditure exceeds median household income by 20 Jordanian Dinar (JOD) (285 vs 265 JOD). We also found that expenditures are rising over time. On a monthly...
basis, for example: rent is now a median of 10 JOD higher than it was at UNHCR baseline (findings compiled from first home visits in 2014-2016); expenditure on utilities has risen from 20 JOD to 35 JOD; health costs are up from 15 JOD to 29 JOD; education expenditures are up from 9 JOD to 35 JOD; and transport costs have doubled from 10 JOD to 20 JOD. In some cases, cost increases are likely positive – e.g. rising spending on education reflecting children’s improving access to school. In other cases, such as health care, rising costs likely reflect households’ shrinking access to free and reduced-price services.

Our research found that UN cash assistance is critical to helping households meet their expenditure needs. Indeed, over 50% of participants reported UN cash assistance being their sole source of income. Households receiving all three UN types of assistance – UNHCR cash assistance, the UNICEF CCG and full-value WFP vouchers – have median incomes that exceed their median expenditures (370 JOD vs 321 JOD). This is not the case for households receiving only WFP vouchers (a median of 180 JOD vs 248 JOD).

WFP vouchers play a key role in household survival
Critically, our research found that full-value WFP vouchers are a necessary package component. Households that receive both forms of cash assistance but only half-value vouchers spend more each month than they bring in (a median of 300 JOD vs 260 JOD). Effects are particularly visible on a per capita basis: median income for those that receive all three cash assistance is 58 JOD (vs 51 JOD in expenditures). Those receiving no cash, only half-value vouchers, have median expenditures that far exceed their incomes (65 JOD vs 45 JOD). Those receiving both of the cash transfers but only half-value WFP vouchers have median per capita incomes of 64 JOD – and median per capita expenditures of 70 JOD.

Research participants reported that cash had helped them meet a range of household expenses. For example, 92% of respondents said that cash assistance had helped them to pay the rent and 40% that it enabled them to pay utilities or move to a better house. About one-fifth also reported improvements in debt-load, ability to buy clothes for children, and ability to give children an allowance. The UNICEF CCG was felt to be particularly important for improving children’s well-being. Nearly four-fifths of beneficiaries said that the CCG had helped them buy clothes and shoes for their children and over half reported buying more food and accessing more health care as a result of the grant.

The majority of female respondents reported that they control spending (ranging from 67% on food and toiletries to 85% on water, sanitation and hygiene (WASH)). Just over two-thirds reported that cash has helped give women a greater say in household expenditure.

Employment opportunities
Cash assistance is not a springboard to employment
While our qualitative work suggests under-reporting, only 18% of survey respondents reported earned income from wages in the past year, and only 15% across all assistance categories earned income from self-employment. Respondents living in Amman were far more likely to report earned income (29% from wages and 31% from self-employment) than those living in Irbid (2% from wages and 0.4% from self-employment). We also found that fathers were more likely to earn an income than mothers, and that when women work, it is mostly home-based self-employment (or domestic service), due to social norms that constrain their mobility outside the home.

While survey respondents told us that few children were engaged in child labour – and very few children earned an income – our qualitative work suggests a different reality. Indeed, we found that most adolescent boys appear to work – sometimes for long hours in exploitative conditions and almost always for very low pay.

Despite the 2016 Jordan Compact, which promised to open 200,000 work opportunities for Syrians and ease the permit application process, only half of survey respondents knew they could get a work permit. Of those, only 20% had applied for one. Those who had not applied found the process overwhelming, were too ill to work, or – in the case of women – reported that work was not socially acceptable. In FGDs, refugees also told us that Syrians remain locked out of the most desirable jobs and are often exploited when they undertake work.

Our research found that cash is not a springboard to employment. Indeed, those receiving cash are less likely to report income from wages or income from self-employment than those not receiving cash – regardless of the cash assistance package. Differences are quite large: for example, only 11% of those receiving UNHCR cash report income from self-employment – vs 23% of those not receiving UNHCR cash. A partial explanation could be that agencies target the most vulnerable for cash assistance, including those who are unable to pursue full employment due to factors including disabilities, single headed female households and the trauma effects of conflict. In addition, those that are receiving cash might be afraid to report earned income because they fear losing access to cash assistance. It is also possible that the cash assistance is working as designed and is helping families avoid the need to have their sons engage in child labour.

Coping mechanisms
Cash assistance is helping families avoid harmful coping strategies
Refugee households employ a wide variety of coping mechanisms to help make ends meet. Most survey respondents, for example, reported eating less expensive food (75%), reducing accommodation costs (73%), reducing food intake (72%), and borrowing (60%). Very few, however, admitted to using the types of coping strategies that they perceive will be frowned upon. For instance, only 1% said they have sent their children to work in the past month, only 3% said they had married
their daughters to reduce expenditure, and only 5% said they had pulled children out of school. Our qualitative work suggests very considerable under-reporting.

Our research found that cash assistance is helping families avoid dangerous coping strategies. When asked what strategies they had been able to avoid because of cash assistance, half of respondents reported eating cheaper food, eating less food or reducing housing costs. Nearly 45% said they had been avoiding going further into debt. Similarly, whereas 26% of households had pulled a child out of school due to financial reasons at the UNHCR baseline (2015), only 5% of ODI’s sample had done so. A similar pattern was seen in regard to borrowing money – the frequency of which declined from 79% to 26%.

**Shelter and living conditions**

**Cash assistance is improving access to housing**

Our research found that the living conditions of Syrian refugees are overall quite poor. While 95% of our respondents were living in permanent housing – as opposed to informal tented settlements (ITS) – crowding remains extreme due to supply constraints. We found a median of 3.7 people sharing a single bedroom, up from 2.5 at UNHCR baseline, probably due to the subdivision of already small spaces. Households receiving larger assistance packages, which tend to be poorer and have more members, have higher crowding ratios – as do those living in urban areas. About one-fifth of families are still sharing toilets (down from 30% at baseline), 12% had run out of water at least once in the past month (down from 20% at baseline), and only 76% of homes were connected to the public sewer (up from 69% at baseline). Nearly all, however, had electricity (96%), a TV (90%) and a refrigerator (85%). Interestingly, most households (62%) understood the constraints to adequate shelter well enough to report being ‘satisfied’ with their housing, regardless of conditions.

Our qualitative work found that some groups of refugees were far more vulnerable than others. For example, those living in ITS tended to have dangerously unhygienic WASH conditions. Similarly, girls and women and those with disabilities were often far more affected by bad housing conditions than boys and men and those without disabilities – because they were largely confined to home.

Our research found that cash assistance is improving Syrian refugees’ access to housing, with over 90% of respondents reporting that cash was helping them to pay rent and 40% that it had helped them move to better housing. Only 27% of those receiving all three types of UN cash assistance, for example, reported that they cannot pay in full for rent, compared to 52% of those receiving only WFP vouchers. Findings are similar for households’ ability to pay for electricity, fuel and heat.

Furthermore, while 72% of those receiving only WFP vouchers reported that their housing is bad – and 26% reported that they are not satisfied with their housing – rates for those also receiving UNHCR and UNICEF cash assistance modalities were notably lower, at 58% and 19% respectively. Indeed, when asked to identify how the cash assistance had contributed most to their family’s well-being, 26% of survey respondents said ‘better housing’.

**Food consumption and nutrition**

Cash assistance is enhancing household food consumption as are full value WFP food vouchers

Our research found that Syrian refugees living in Jordan, especially those in informal tented settlements, are highly vulnerable to food insecurity. Over half of the survey respondents (55%) reported having experienced a food shortage in the past month. Indeed, the average number of food shortage incidences in the past month was 8.5 (median 5). Larger households, those headed by women and those in Amman were especially likely to experience food shortages. In addition, 70% of respondents admitted to skipping at least one meal in the past week due to lack of money, and 60% reported having reduced either the frequency of meals. When asked how many meals their family had consumed yesterday, 73% of respondents said two and 10% said only one. Over 60% of adults had restricted their own food intake so that children could eat more.

Our research found that cash assistance is helping refugee families eat more and higher-quality (i.e. protein-rich) food on a more regular basis. While noting that the value of WFP vouchers in 2017 is half what it was in 2015 – a reality which has hit even families receiving cash assistance hard – those benefiting from both UNHCR cash and the UNICEF CCG are less likely to experience a food shortage (51% vs 57% of those receiving only full-value WFP vouchers). They are also less likely – on a weekly basis – to forgo meat (27% vs 38%), eggs (10% vs 13%) and dairy (14% vs 20%), and more likely to have an acceptable food consumption score (90% vs 82%) and be able to pay for drinking water.

Unsurprisingly, full-value WFP vouchers are also critical to household food security. Across both cash beneficiary groups (those receiving both UNHCR and UNICEF cash assistance and those receiving only UNHCR cash), households receiving full-value vouchers are more food secure than those receiving half-value vouchers.

**Education**

Cash assistance is supporting greater spending on schooling and improved academic performance but is not linked to a significant increase in enrolment

Our quantitative survey found that despite the commitment of the Jordanian government, UN bodies and non-governmental organisation (NGO) partners, school-aged Syrian refugees still face considerable barriers to education. Overall, 20% of children under the age of 18 remain out of school, with younger children far more likely to be in school than older adolescents (90% for those under 12 vs 48% for those over 16). Girls have higher enrolment rates and lower
truancy rates than boys at all ages, possibly reflecting boys’ greater involvement with child labour. Children in Mafraq and those living in smaller households were less likely to attend school than their peers in other governorates and in larger households (70% vs just over 80%), due to greater needs for transportation and child labour respectively. Respondents reported that the primary reasons that children were out of school had to do with lack of space (38%), inability to pay for transportation (33%) and inability to pay for school-related costs (30%).

Our qualitative work highlighted a variety of other issues with refugee children’s access to schooling. For example, many adolescents are out of school because they are now too old to attend regular school. After years out of the classroom, they are now so over-aged that they are required to attended informal rather than formal school (per government regulations). Parents and children also reported rampant bullying (especially of boys), sexual harassment for girls, and concerns about educational quality that are partially attributable to overcrowded classrooms but also seen by refugees themselves as evidence of teachers’ under-commitment to Syrian students.

Our research found that outside of a small minority of children – mostly younger students who had not been out of school for long – cash was not able to facilitate a return to the classroom. Enrolment rates, while slightly higher in 2017 than at UNHCR baseline (80% vs 75%, probably due to supply expansion), were the same regardless of UN assistance package. Our qualitative work suggests that for adolescent girls, it is largely social norms around their purity that keep them out of school, while for adolescent boys, it is their families’ need for their wages.

On the other hand, for children who are enrolled in school, cash assistance helps their families spend more on education (56 JOD/month vs 39 JOD/month, comparing students living in households receiving the complete UN assistance package with those receiving only full WFP vouchers). Most parents (60%) also reported that their children’s academic performance improved since beginning to receive cash assistance.

**Health care**

*Cash assistance does not lead to greater spending on adult health care but does lead to improvements in spending on child health*

Poor health and limited access to health care are common among Syrian refugees. We found that just over one-third of households had at least one member with a chronic illness and 19% had a child who had been sick within the past two weeks. In addition, 7% had at least one member – most often a child – with a disability. Due to the implementation of user fees by the Jordanian government in 2014, the majority of refugee households (61%) struggle to afford health care. We also found that healthcare spending doubled from baseline, which may be linked to increased assistance provided by UNHCR cash for health programming. Respondents told us that the costs of transportation and medication were particularly prohibitive and often prevented them accessing even ostensibly free care. Our qualitative work found that those living in informal tented settlements were especially likely to be unhealthy (due to living conditions) and deprived of health care (due to geographic isolation).

While one-quarter of respondents reported that cash assistance had enabled them to access health care, we found no expenditure evidence of this – at least for adults. Cash beneficiaries are no more likely to report spending on health care, and do not have higher median health care spending than those who do not receive cash assistance.

There is, however, some evidence that cash beneficiaries do access more care for their children. Almost half (46%) of households receiving both the UNICEF CCG and UNHCR cash assistance reported spending money on children’s health care, compared to only 20% of those benefiting from full-value WFP vouchers only. Notably, access to full-value WFP vouchers also appears to improve children’s access to health care, even when families are also receiving cash – probably because it frees up money that would otherwise have been spent on food.

**Social capital and participation**

*Cash assistance has only a limited effect on social participation although it was found to improve intra-household relationships due to reduced stress levels*

Our research found that on the whole, Syrian refugees have limited opportunities for socialisation and participation. Three-quarters of adult survey participants reported that they had not taken part in a single social event in the past six months, primarily because they could not afford to or did not have the time. Women were particularly isolated, as they not only have heavy caretaking responsibilities but are also generally confined to home unless they have a chaperone. Just over half of women told us that they are not allowed to leave home alone. Our qualitative work echoed our quantitative findings. We found refugee women to be almost completely isolated and struggling with conflict- and poverty-related stress and anxiety. Many told us that the research interview was the first time they had shared their experiences and feelings with anyone.

We also found that Syrian children and adolescents have little time to socialise and play. Parents told us that even younger children do not play outside much, because of fears for their safety. Over one-quarter (28%) told us that their children under the age of 12 are never allowed to play outside. Based on our qualitative work, most children

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appear to spend their days watching TV. Older children and adolescents, especially girls (who face heavy restrictions on their mobility), also have limited recreational opportunities. Three-quarters had not had a single social opportunity in the past week. Not only do they lack the financial resources to afford social experiences, such as trips to the market to buy sweets with friends, but they face increasing bullying from peers when they do go out.

Our research found that cash assistance is primarily helping refugee families by reducing their stress and thus improving intra-household relationships. Given the many other demands on income, we found little evidence that cash is improving opportunities for extra-familial socialisation and participation, largely because the amount is insufficient to cover competing expenditure priorities. Critically, however, we also found no evidence that cash is fomenting jealousy or exacerbating tensions between refugees and host communities. Adolescents reported more engagement with peers due to cash assistance, primarily the result of their having pocket money to spend with friends. UNICEF's Makani centres emerged in our research as critical to improving adolescents lives, and especially adolescent girls' lives. They not only provide a safe space where they can be with friends, and make new Jordanian friends, they also provide the opportunity to learn life skills and practice speaking up for themselves. A further alternative is provided by UNHCR funded Community Support Committee (CSC) which offer numerous training opportunities and social activities.

**Psychosocial well-being**

**Cash assistance had helped adults and children feel less stressed, but they also needed psychosocial support**

Our research found extreme levels of trauma and stress among Syrian refugees, with nearly three-quarters of adult respondents reporting that their psychosocial well-being was bad because of the war and nearly 40% saying their overall quality of life was bad or very bad. Only 12% reported that their lives were good – with no differences between men and women or rural and urban respondents. Our qualitative work found that many, if not most, refugees have been traumatised by the combination of violence and poverty and that gender relations in particular have been turned upside down by the war. Many men, unable to provide for their families, feel emasculated and are responding by further exacerbating tensions between refugees and host communities. Beneficiaries were generally satisfied with the way they were treated by agency staff, although there was dissatisfaction with the level and scope of interaction, particularly the limited nature of home visits, which beneficiaries felt made it difficult for staff to really understand their struggles. Finally, only half of all respondents were aware of a complaints system and many doubted that submitting a complaint would change anything. There were also repeated complaints about inability to get through to the UNHCR telephone helpline, with many people giving up before their call was answered.

**Conclusions and recommendations**

Our findings highlight a number of ways in which UN cash assistance programming could be strengthened to more effectively tackle the multi-dimensionality of poverty and vulnerability. First, it is critical to work towards a cross-sectoral and joint stakeholder roadmap in implementing the more detailed recommendations below. While being clear about what the proposed theory of change is in terms of improving outcomes across different wellbeing...
domains, it is essential that the larger social protection framework ensure an integrated approach, with linkages to complementary programming if the services needed go beyond the specific remit of the implementing agency. Only with a coordinated response will the multiple vulnerabilities of refugees be sustainably addressed; indeed, one of the overarching recommendations from our research is to invest in a broader, longer-term social protection system, led by the government, with support from UN agencies, donors and NGOs/CSOs.

Second, as part of this roadmap, it will be important to identify a clear sequencing of recommendations, including quick wins. Clearly, all of these different vulnerabilities need to be factored in but it is also clear that those receiving the full package (and thus the larger amount of cash) are better able to meet their basic expenditure needs. In addition to these material needs, our study highlights one other area that requires much greater investment: tackling the psychosocial and social capital challenges that are unique to the refugee experience. And in this regard, it is urgent to invest in a cash-plus approach. One example highlighted in the report, which could serve as an important model for future investigation and investment, is UNICEF’s integrated social protection package of services for children, adolescent and youth though Makkani and cash transfer programme. This tackles educational, protection, skills-building and psychosocial and social cohesion objectives in an integrated package.

More specifically, our research findings point to the following recommendations which both resonate and build on recommendations identified in the secondary literature:

### Income and employment

- Explore setting up a referral pathway involving Syrian community leaders, teachers, health workers and other local service providers to link families who have working children with partners offering cash assistance and with Makani centres.
- Invest in public awareness campaigns to explain the work permit process and set up centres where refugees can get practical help to apply.
- Advocate for changes in labour law currently linking the work permit to a single employer and explore an alternative, transferable permit (not specific to a location or employer) for certain professions in certain sectors.
- Advocate for the extension of the types of work Syrian refugees can legally do and extend the validity of work permits to more than a year.
- Offer entrepreneurship and skills building training, with a specific focus on youth and women.
- Monitor the enforcement of labour law (protection) regulations and set up referral mechanisms to report and address abuses in the workplace.

### Coping strategies

- Establish two-way processes to communicate clearly with beneficiaries about when and for how long they will receive cash assistance.
- Develop clearer links with UNICEF’s Makani programme and create a database of the most vulnerable adolescents and their families.
- Invest in social networking opportunities within refugee communities and with host communities. This could include working with the new UNICEF Hajati cash transfer facilitators to make phone calls and home visits for children who have dropped out of school and who will have a concrete entrypoint for engaging with vulnerable households.
- Continue promoting and funding community based organisations and their refugee support functions, such as currently undertaken by UNHCR funding 24 CSCs across Jordan.

### Shelter

- Prioritise cash-for-shelter provisions for refugees living in informal tented settlements, targeting WASH improvement in particular.
- Set minimum standards for landlords renting out living spaces and monitor the enforcement of housing arrangements.
- Facilitate negotiations between landlords and refugees and help provide legal aid support for housing contracts.

### Food security and nutrition

- Link the neediest households and individuals with WFP’s emergency food programming.
- Provide cash-for-food services / and health referrals for children.
- Provide food assistance and nutritional supplements to particularly vulnerable refugee populations, especially those living in informal tented settlements and vulnerable children attending the second school shift.
- Advocate for reinstatement of the full-value WFP voucher through increased donor support.

### Education

- Consider introducing a programme component that provides awareness-raising and support to beneficiary families to ensure that their children are in school.
- Raise awareness among parents of importance of educating children, to those whose children are currently out of school as well as those at risk of dropout.
- Provide free transport for girls to get to school.
- Invest in teacher training (including use of non-violent disciplinary methods).
- Invest in training counsellors and other forms of...
psychosocial support for children, particularly those who have experienced extreme trauma.

- Monitor all out-of-school refugees and make recommendations on referrals.
- Improve access to education for children in families living in informal tented settlements.
- Invest in informal education as well as schemes to attract adolescents back into formal education.
- Monitor and enforce equal treatment and opportunities within the double-shift system.
- Invest in sport and other recreational initiatives to bring together Syrian and Jordanian children.

**Health**

- Advocate to donors to provide funding coverage for all refugee paediatric visits (at a minimum for those under 6 years) psychosocial and mental health services.
- Ensure a functioning referral system for refugees with emergency and chronic health issues including disabilities to access cash for health services.
- Explore the feasibility of cash assistance that encourages regular health checks for the children, particularly the most vulnerable infants and young people.
- Invest in providing information, referrals, menstrual hygiene support, and affordable maternal health care and sexual and reproductive health (SRH) services for refugee women and girls.
- Build a cadre of health workers able to provide specialist psychosocial services to refugees, and where possible involve refugees in this training given they will have direct experience and could also benefit from the employment opportunity.
- Provide specialised services to vulnerable refugee populations for conditions not covered by the Jordan Health Aid Society (JHAS) system.

**Participation and social capital**

- Link vulnerable and isolated women and girls with UNICEF’s Makani programme, UNHCR’s community based organisations and other safe space initiatives.
- Set up women’s support groups (targeting Syrian and other refugee populations and Jordanian women) that provide recreational, employment and saving opportunities in safe spaces, mindful of the need to provide transport and consider safety.
- Scale up the Makani programme to include more systematic outreach and support for caregivers and adults, encouraging government to gradually take on more of the management and referrals between Makani centres and other public service providers.
- Facilitate fora where male refugees can connect with men from other refugee populations and host communities and offer recreational, livelihoods and saving opportunities.

**Quality of life and psychosocial well-being**

- Scale up cash assistance to support the most vulnerable families, focusing on households with people with disabilities, female-headed households, and children in households with large families.
- Develop indicators to measure psychosocial well-being (of cash assistance beneficiaries and the wider refugee population) and link these to households’ Vulnerability Assessment Framework (VAF) scores.
- Set up a clear and rapid referral pathway for particularly vulnerable cases with partners providing psychosocial and mental health services.
- Offer combined recreational services for refugees and host communities, investing in safe spaces and recreational service programming for women and girls, and separate activities for men and boys, to help integrate Syrian refugees with host communities and other refugee populations.

**Strengthening cash assistance programming and implementation**

- Improve overall accountability framework for cash assistance
- Invest in more face-to-face communication activities to give Syrian refugees the opportunity to ask questions and give feedback about the cash assistance programme. If the current enumerator cadre are unable to fulfil this role then consider introducing a social work cadre or retraining/skilling up the enumerator cadre.
- Make information more readily available in print, audio and web-based formats.
- Provide clear information on the time it takes to process applications for cash assistance for eligible households, and explain what applicants can do if the stipulated time is exceeded.
- Ensure that beneficiaries are aware of complaints mechanisms.
- Ensure that the UNHCR telephone helpline is much more accessible and efficient in resolving beneficiary queries.
- Provide information on the cash assistance programmes to parents of children attending Makani centres.
- Invest in capacity-building of social workers, volunteers and programme implementers to help them understand the multifaceted aspects of vulnerability.
- Organise awareness and capacity-building sessions on gender equality, intra-family violence, and psychosocial service provision for beneficiaries and programme implementers.
- Strengthen community involvement in programme decision-making, governance and accountability, setting up regular forums to promote information exchange and solicit beneficiary views about the programme.
More than 658,000 Syrian refugees (as of 31 August 2017) living in Jordan face a highly uncertain future. They cannot go home, given the ongoing conflict and insecurity in Syria; they are barred from taking up many of the forms of employment that would enable them to support themselves and their families while in Jordan; and the United Nations (UN) cash assistance that have enabled the most vulnerable amongst them to make ends meet are increasingly jeopardised by budget cuts.

Unfortunately, while refugees' options are heavily restricted, their needs are not. The longer Syria's civil war drags on, the more fragile many families' lives have become. With their savings exhausted, assets already sold, and borrowing and debt on the rise (though people can generally only borrow from family and neighbours), it is UN social assistance that prevents tens of thousands of registered refugee families from descending into destitution. It is against this background that our research is set.

This study aimed to find out what effects cash assistance has had on beneficiaries' lives. It had four objectives: (1) to evaluate beneficiary spending patterns and their effect on family well-being; (2) to evaluate the efficiency, effectiveness and accountability of UNHCR's cash assistance and the UNICEF Child Cash Grant (CCG); (3) to evaluate the complementarity of (as well as gaps in) programming by UNICEF, UNHCR and the World Food Programme (WFP) in targeting the most vulnerable groups; and (4) to provide feedback on monitoring and data analysis processes. This report focuses on the first three objectives.

The report is organised as follows. This chapter first provides a brief overview of the conceptualisation of social protection and cash assistance used in the report. It then turns to a description of the cash assistance programming at the heart of this social impact assessment, and describes our methodology, including the sampling frame and mixed-methods approach. Chapter 2 provides a short overview of the secondary literature, situating the study within the broader evidence base on Syrian refugees in Jordan. Chapter 3 sets the scene regarding the broader income and expenditure patterns for cash assistance beneficiary households. Chapters 4-11 present evidence on the different aspects (domains) of refugees’ economic and social vulnerabilities – coping strategies, shelter and living conditions, food and nutrition, education, health, participation and social capital, and psychosocial well-being. Each of those chapters first explores the patterning and trends of the vulnerabilities facing Syrian refugees in that domain, and then examines the positive effects of the cash assistance on those vulnerabilities, followed by a discussion of the remaining challenges. The penultimate chapter explores beneficiary perspectives on programme implementation, and the final chapter presents some conclusions and recommendations as to how UN cash assistance can be even more effective in meeting the needs of Syrian refugees in Jordan.

1.1. Conceptualising social protection

Social protection, at its most basic, refers to responses to vulnerability (broadly defined) and ways of managing it (Devereux and Sabates-Wheeler, 2004; Norton et al., 2001). Historically, social protection programming has largely been a response to shocks (such as death or job loss) and chronic income poverty, and consequently revolved around a set of interventions – often called 'safety nets' and including cash and in-kind transfers – aimed at mitigating shock and reducing income poverty. As such, social protection specialists distinguished between: (1) protective measures, which have the specific objective of guaranteeing relief from deprivation; (2) preventive measures, which seek to directly avert deprivation in various ways; and (3) promotional measures, which aim to enhance real incomes and capabilities. These categories usefully suggest a gradation of interventions, progressing from a more narrow approach (safety nets) to increasingly broader ones (preventive and even promotional measures) (Guhan, 1994, quoted in Holmes and Jones, 2013). In recent years, however, there has been increasing attention to addressing the underlying socio-political drivers of poverty and vulnerability, including discrimination and exclusion on the basis of gender inequalities, refugee status,
and disability (Holmes and Jones, 2013; World Bank, 2017). Devereux and Sabates-Wheeler’s (2004) emphasis on ‘transformative’ social protection and programming has been central to shifting the concept of social protection. They have highlighted the need to go beyond protective, preventive and promotive interventions and include measures to transform broader structural discriminatory influences.

Such transformations may be promoted through the design of core social protection programmes or they may entail explicit linkages to complementary interventions, including health care, rights awareness campaigns and behavioural change communication (BCC) efforts, and/or social equity measures (such as the introduction of non-discrimination legislation). Within the broader social protection umbrella, cash assistance is one instrument that has gained salience globally as an effective way to mitigate a range of vulnerabilities in both humanitarian and development settings (Molyneux et al., 2016).

Transformative social protection is fundamentally rooted in Sen’s (1999) ‘capabilities approach’, which has evolved as a broad normative framework exploring the kinds of assets (economic, human, political, emotional and social) that expand the capacity of individuals to achieve valued ways of ‘doing and being’. At its core, it goes beyond a focus on a fixed bundle of external assets, instead emphasising investment in diverse individuals’ skills, knowledge and voice. The capabilities approach is critical to designing social protection programmes that are responsive to humanitarian crises and the specific needs of refugees, given that their economic and social vulnerabilities are exacerbated by displacement, loss of family members, conflict-related trauma and/or injury, restricted livelihood opportunities, and a range of exclusions and discrimination on the part of host communities. This means that crisis-responsive social protection adapted to refugee-specific needs must be designed to tackle multiple and intersecting vulnerabilities by responding to needs, including access to survival needs, basic services, psychosocial support, and protection from violence and abuse.

1.2. Overview of UN social assistance³ programming for Syrian refugees in Jordan

This section gives a brief history and overview of UN social assistance programming for Syrian refugees, covering cash assistance provided by UNHCR and UNICEF (the Child Cash Grant (CCG)) and food vouchers provided by WFP. Prior to providing these details it is important to briefly situate this programming within the broader policy and programming landscape in Jordan (for further details see Plank and Samuels, 2017).

The three-year Jordan Response Plan (JRP), led by the Ministry of Planning and International Cooperation (MoPIC), is the primary national strategy document for the joint humanitarian and community response, covering activities of more than 200 partners across eight sector working groups. The Jordan Response Platform for the Syria Crisis (JRPSC) provides a partnership mechanism to enable the government of Jordan, donors and UN agencies to implement the plan. These platforms have been reinforced by a Jordan Compact, which was published in February 2016 and comprises three interlinked pillars:

- ‘turning the Syrian refugee crisis into a development opportunity that attracts new investments and creates jobs for Jordanians and Syrian refugees’
- ‘rebuilding and strengthening the resilience of host communities through adequate financing for the JRP 2017-2019’
- ‘mobilising sufficient grants and concessionary financing to support the macroeconomic framework as Jordan enters into a new Extended Fund Facility programme with the International Monetary Fund (IMF)’

As part of this Compact, £1.6 bn in foreign assistance and investment was pledged to the Jordanian government in exchange for the offer of up to 200,000 work opportunities to Syrians. In order to enable this provisions were put in place to exempt Syrian refugees from medical check-ups (required of other migrants) and permit fees usually paid by employees (originally through the end of 2016 and since extended to the end of 2017) were waived. One and a half years on, Jordan has secured $923.6 m in funding, including $147 m in low interest World Bank loans and a cash transfer from the United States (in December 2016) of close to half a billion dollars (Williams, 2017). As of August 2017, however, only 58,026 work permits for Syrian workers had been approved by the Ministry of Labour (Yacoub, 2017).

In addition to missing total targets, which Kelberer and Sullivan (2017) attribute to a variety of factors, including limited capacity at the Ministry – which, until the compact, had been issuing only 3,000 permits a year – and beliefs within the refugee community (about the costs and benefits of a work permit), it is also important to note that Syrian refugees remain barred from various sectors and professions,⁴ leaving many skilled and educated refugees to

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3 This refers to both cash and in-kind assistance, which in this case includes WFP food vouchers.

4 These sectors include medical professions, engineering professions, administrative and accounting professions, clerical work (including typing and secretarial work), switchboards, telephones and connection works, warehouse works, sales works, hairdressing, decoration, teaching, fuel selling, electricity works, mechanical and car repairs, driving, guards and servants, and building servants and doorman.
Box 1. The Vulnerability Assessment Framework

The Vulnerability Assessment Framework (VAF) includes a common, multi-sectoral data collection form, a collection of formulas for assessing multi-dimensional vulnerabilities, and database access to the results for all VAF partners. It is used to provide a non-compulsory but standardised means to present vulnerability at the case level that can, among many things, be a determining factor for eligibility for cash assistance. VAF results are presented at the sector level (food security, water, sanitation and hygiene (WASH), shelter, health, education and basic needs), as well as several indicators that are non-sector specific or universal (predicted welfare, dependency ratio, coping strategies and documentation status).

The VAF seeks to enable humanitarian partners to target assistance in a more consistent, effective and equitable manner and allow for monitoring of changes in vulnerability over time. Between May 2014 and February 2017, 139,435 VAF assessments have been conducted for non-camp Syrian refugee families.

Eligibility for UNHCR cash assistance is partly based on a combination of predicted welfare and the Jordanian poverty line. Once eligibility has been established, the Survival Minimum Expenditure Basket (SMEB) and family size are used to determine the value of cash assistance. The SMEB is an annual market assessment of the minimum needs of refugee populations. Assistance ranges from 132 JOD ($186) for single-headed households to an upper limit of 323 JOD ($455), which is paid to families of seven people or more (Verme et al., 2016).

Challenges of the VAF include presenting complex vulnerability information in a simple and meaningful way, and keeping the vulnerability formulas up to date as the context changes over time.

seek work as unskilled workers on a one-year valid working permit (Kelberer and Sullivan, 2017; European Union (EU), 2017; International Rescue Committee (IRC), 2017; Williams, 2017; JRPS, 2016; Luck, 2016; Reznick, 2016; Ministry of Labour, pers. comm, 2017) (for further details see Annex 1). As of September 2017, the overwhelming majority of work opportunities created for Syrians were in agriculture (19,000) and manufacturing (11,000) (Yacoub, 2017). Only 209 work permits had been issued for education and 92 in health care and social work (ibid.).

The programme of monthly multi-purpose cash assistance (MPCA) was initiated by the United Nations High Commissioner for Refugees (UNHCR) first for Iraqi refugees in Jordan starting in 2008, and later to include Syrian refugees living in host communities, beginning in 2012. The cash assistance was intended as an early response mechanism for social protection to cover basic needs. Basic needs are generally defined as cost of shelter (rent) and water/sanitation. As the population of non-camp refugees rose, the number of families in need of assistance increased. UNHCR supports only the most vulnerable families (approximately 23% of the non-camp population) as defined by the Vulnerability Assessment Framework (VAF). This includes 32,800 families, mostly Syrian but also refugees of other nationalities. In 2014, $50.5 m was disbursed to refugee Syrian families, including the winterisation support supplement, and by late 2016 the programme distributed $98 m, including a large winterisation effort that targeted under-served populations.

In February 2015, UNICEF began to distribute an unconditional CCG to assist the most vulnerable Syrian refugee families with children (those under the age of 18) living in host communities. The CCG consists of a monthly cash transfer of 20 JOD ($28) per child, which is provided with a maximum cap based on family size (currently 75 JOD ($106) for four children or more per family). It aims to increase spending on child-specific needs and prevent families resorting to negative coping strategies that affect child well-being. Since February 2015, the programme assisted on average 55,000 children from 15,000 of the most vulnerable refugee families every month, with eligibility based on their poverty and protection status as identified through the inter-agency VAF (see Box 1 below).

The WFP voucher programme was introduced for those living in host communities in 2012 and later in Zaatari camp to help create some sense of normalcy for Syrian refugees by allowing them to shop in certain supermarkets for their preferred foods and to offer them access to a greater diversity of foods with higher nutritional value (Luce, 2014). The WFP programme has shifted completely to electronic vouchers, with each refugee receiving monthly vouchers based on the cost of a basic food basket that provides each person with approximately 2,100 kcals per day - extremely vulnerable families receive $20 while vulnerable families receive $10 (WFP, 2016). Note that prior to July 2015 families were receiving double this amount but due to funding shortages WFP was forced to make significant cuts. Contracted supermarkets in host communities are located in areas with a sizeable concentration of refugees. Camps (beginning with Azraq in 2014) have their own WFP supermarkets to enable new arrivals to begin to purchase their own food immediately (Luce, 2014). WFP is currently offering the voucher programme to 23,000 families in refugee camps and 120,000 families in host communities.
1.3. **Mixed-methods approach**

This study used a mixed-methods approach involving a literature review, one round of quantitative data collection and two rounds of qualitative data collection. The quantitative component aimed to obtain more generalisable findings across the population group sampled, particularly around the effects of cash assistance on Syrian refugees’ lives and their vulnerabilities. The qualitative data sought to explore, in greater depth, what effects the cash had on different types of beneficiaries and non-beneficiaries, and how it affected refugees’ lives. The data collected were triangulated to produce a layered analysis, enabling us to more fully explore the effects of the cash assistance programming on children, their families and caregivers. (A separate document is available online that includes the qualitative and quantitative data collection tools.)

### 1.3.1. Quantitative component

The quantitative findings presented in this report were collected through a household survey completed by respondents in 2,114 randomly selected households spread across four governorates (Amman, Irbid, Maafraq and Zarqa) between December 2016 and March 2017. These governorates were selected for a number of reasons: (1) they are home to 85% of Syrian refugees; (2) they are where 90% of cash assistance beneficiaries live; and (3) they are diverse in terms of levels of vulnerability and degree of urbanisation.

Respondent households were selected from six groups based on the sampling frame – i.e. those receiving:

1. The UNHCR cash assistance, UNICEF CCG, plus full-value WFP vouchers (627 households);
2. The UNHCR cash assistance, UNICEF CCG, plus half-value WFP vouchers (418 households);

The above households are often referred to in the text as UNICEF recipients, as what sets them apart from other beneficiaries is that they receive the UNICEF CCG in addition to UNHCR cash assistance and WFP vouchers.

3. UNHCR cash assistance plus full-value WFP vouchers (165 households);
4. UNHCR cash assistance plus half-value WFP vouchers (42 households);

The above households are often referred to in the text as UNHCR recipients, as what sets them apart from the families receiving only WFP vouchers is that they also receive UNHCR cash.

5. WFP full-value vouchers (251 households);
6. WFP half-value vouchers (611 households) (the above households are often referred to in the text as WFP beneficiaries, as they only receive vouchers and not cash).

Within these parameters the distribution of the sample was designed as a probability multi-stage proportionate random sample.5

It is important to note that within our sample, cash beneficiaries looked much like non-cash beneficiaries in most regards. While families receiving the UNICEF CCG had more children (a mean of 3.8 vs 1.5 for those receiving UNHCR cash but not the UNICEF CCG and 1.9 for those receiving only WFP vouchers), with total household size varying accordingly, those receiving cash were broadly just as likely to live in an urban as opposed to rural area, to live in a permanent dwelling, and to have lived in the same dwelling for more than a year. All groups had also lived in Jordan for the same amount of time and were similarly likely to own a mobile phone.

### 1.3.2. Qualitative component

Two rounds of qualitative data collection were undertaken, in December 2016 and May 2017, covering the same four governorates as the quantitative survey. Qualitative researchers visited both urban and semi-rural communities in the four governorates and used focus group discussions (FGDs) (with male and female adults separately and male and female children separately), key informant interviews (KIIs) and case studies to engage with a wide array of stakeholders.

A purposive sampling technique was used, to include various household types (e.g. female-headed, male-headed, and child-headed families; families hosting unaccompanied and separated children; extended families; etc.) in each governorate (see Table 2 and, for more details, Annex 2). This approach enabled us to provide a broad picture of the experiences of a diverse group of Syrian refugees and to tease out similarities and differences among different social groups in each context. In total, we talked to 432 adults and children receiving different types of social assistance.

### 1.4. Mixed-methods analysis approach

The analysis process involved two main steps. First, the quantitative and qualitative data were cleaned and coded thematically according to: (1) a multi-dimensional

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5 The approach followed in designing the sample included various steps. Initially, UNHCR provided lists of refugee beneficiaries (a total of 114,271 families) in host communities in Jordan receiving social assistance. Data were cleaned to take out families other than Syrian refugees and those from the four selected governorates. The cleaning process resulted in 96,945 eligible families benefiting from different assistance modalities or combinations of modalities. This was followed by multi-stage probability sampling during which beneficiaries were classified by governorate and type of assistance they were receiving. Then the sample from each governorate was taken proportionate to the number of beneficiary families at each of them. Within each governorate, a simple random sample was electronically computed using SPSS. To compensate for non-respondents and inaccessible households (due, for example, to wrong phone number or address, or the family having moved or migrated), additional cases were selected and added to the sample.
Table 1: Distribution of surveyed households by demographic characteristics

<table>
<thead>
<tr>
<th>Items</th>
<th>Number of households</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governorate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amman</td>
<td>753</td>
<td>35.6</td>
</tr>
<tr>
<td>Irbid</td>
<td>703</td>
<td>33.3</td>
</tr>
<tr>
<td>Mafraq</td>
<td>379</td>
<td>17.9</td>
</tr>
<tr>
<td>Zarqa</td>
<td>279</td>
<td>13.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
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<td><strong>100.0</strong></td>
</tr>
<tr>
<td>Type of locality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>639</td>
<td>30.2</td>
</tr>
<tr>
<td>Urban</td>
<td>1475</td>
<td>69.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2114</strong></td>
<td><strong>100.0</strong></td>
</tr>
<tr>
<td>Respondents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother/wife</td>
<td>1035</td>
<td>49.0</td>
</tr>
<tr>
<td>Father/husband</td>
<td>988</td>
<td>46.7</td>
</tr>
<tr>
<td>Siblings</td>
<td>44</td>
<td>2.1</td>
</tr>
<tr>
<td>Others/relatives</td>
<td>47</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2114</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Gender of respondents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>1057</td>
<td>50.0</td>
</tr>
<tr>
<td>Male</td>
<td>1057</td>
<td>50.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2114</strong></td>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Family size</td>
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<td></td>
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<tr>
<td>Up to three members</td>
<td>706</td>
<td>33.4</td>
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<tr>
<td>Four to five members</td>
<td>688</td>
<td>32.5</td>
</tr>
<tr>
<td>Six members and more</td>
<td>720</td>
<td>34.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2114</strong></td>
<td><strong>100.0</strong></td>
</tr>
<tr>
<td>Having children &lt; 18 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>1763</td>
<td>83.4</td>
</tr>
<tr>
<td>No</td>
<td>351</td>
<td>16.6</td>
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<tr>
<td><strong>Total</strong></td>
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<td><strong>100</strong></td>
</tr>
<tr>
<td>Longevity of stay in Jordan after leaving Syria</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0- 4 years</td>
<td>1157</td>
<td>54.7</td>
</tr>
<tr>
<td>5 and more</td>
<td>957</td>
<td>45.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2114</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Table 2: Number of respondents by research instrument and governorate

<table>
<thead>
<tr>
<th>First round of fieldwork</th>
<th>Mafraq</th>
<th>Zarqa</th>
<th>Irbid</th>
<th>Amman</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key informant interviews</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>16</td>
<td>34</td>
</tr>
<tr>
<td>Participants in FGDs (9)</td>
<td>38</td>
<td>28</td>
<td>29</td>
<td>0</td>
<td>95</td>
</tr>
<tr>
<td>Child participants in FGDs (11)</td>
<td>32</td>
<td>25</td>
<td>20</td>
<td>0</td>
<td>77</td>
</tr>
<tr>
<td>Family case studies (20)</td>
<td>16</td>
<td>18</td>
<td>16</td>
<td>0</td>
<td>50</td>
</tr>
<tr>
<td><strong>Total number of participants</strong></td>
<td><strong>92</strong></td>
<td><strong>77</strong></td>
<td><strong>71</strong></td>
<td><strong>16</strong></td>
<td><strong>256</strong></td>
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</table>

<table>
<thead>
<tr>
<th>Second round of fieldwork</th>
<th>Mafraq</th>
<th>Zarqa</th>
<th>Irbid</th>
<th>Amman</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key informant interviews (KIs)</td>
<td>3</td>
<td>27</td>
<td>0</td>
<td>0</td>
<td>30</td>
</tr>
<tr>
<td>Participants in FGDs (12)</td>
<td>20</td>
<td>62</td>
<td>24</td>
<td>24</td>
<td>82</td>
</tr>
<tr>
<td>Child participants in FGDs (2)</td>
<td>0</td>
<td>24</td>
<td>0</td>
<td>0</td>
<td>24</td>
</tr>
<tr>
<td>Family case studies (10)</td>
<td>16</td>
<td>24</td>
<td>0</td>
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<td><strong>Total number of participants</strong></td>
<td><strong>39</strong></td>
<td><strong>137</strong></td>
<td><strong>176</strong></td>
<td></td>
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</tr>
</tbody>
</table>
understanding of households’ current vulnerability; and (2) the positive contributions of the cash assistance in mediating and mitigating these vulnerabilities on the one hand, and the shortcomings of such programming vis-à-vis specific types of vulnerabilities on the other. We explored the findings from both methodologies and wove them together in order to maximise our understanding of a complex reality – analysing (where possible) the specific contributions of different combinations of assistance packages. Effectively using those who received only WFP vouchers as a control group – as the main focus of the research was to ascertain the effect of cash on households’ well-being – we also broke down groups of cash recipients by whether they were receiving half or full vouchers, once the importance of vouchers became apparent. We paid particular attention to gender, age and (dis)ability factors in shaping experiences of vulnerabilities and the effectiveness or otherwise of the cash assistance provided.

Quantitative data were imported, cleaned and analysed using SPSS 24. Frequency analysis and central tendency measurements were conducted first, followed by inferential analysis to examine the statistical differences among the variables. P value was regarded as statistically significant when it fell below 0.05.

In order to better understand the effects of the cash assistance on reducing beneficiaries’ vulnerabilities, the Overseas Development Institute (ODI) research team worked with relevant staff at UNHCR and UNICEF to compile and analyse the data collected during household assessment visits, using the UNHCR Vulnerability Home Visit Forms (HV3, HV4 and HV5) in 2014, 2015 and the first half of 2016 respectively. The result of this exercise was a master file of 1,594 household visits, which acted as a baseline for this ODI study – as households were not yet receiving cash at the point of the home visit data collection (and this is what we mean when in subsequent chapters we refer to the ‘baseline’). Further details can be found in Annex 3.

In the case of the qualitative data, we anonymised all the recorded interview transcripts and translated them from Arabic into English. These were then coded thematically using a qualitative data software package (MAXQDA) in line with the themes followed in the group and individual interviews. Summaries were then written up in order to facilitate the mixed-methods data analysis process.

1.5. Limitations

It is important to note some limitations of the study.

- There was no comprehensive baseline against which to assess progress over time for some vulnerability domains. The VAF was developed for monitoring and not research purposes.
- There were not sufficient resources to sample a control group – i.e. because there are fewer households in the UNHCR-only pool (most cash assistance beneficiaries receive cash support from both UNICEF and UNHCR), it is likely that our findings cannot always adequately distinguish between the two groups of cash beneficiaries.
- The quantitative data collected were solely reliant on self-reported responses, which can be inaccurate because some respondents are unwilling or unable to accurately describe their experiences, attitudes or feelings (for example, adults were reticent to discuss child labour and child marriage).
- There were some survey implementation challenges in the field. For example, while the survey was designed to be completed by households’ female caregivers, who are better positioned to answer questions about child-related spending and dietary diversity, 50% of surveys were completed by men; this is because of difficulties in obtaining permission from husbands for their wives to be the main household respondent, largely due to conservative gender norms. Similarly, 60% of adolescents were not allowed by their parents to complete the KIDSCREEN tool. A further 20% refused to participate despite having received parental permission. It is thus possible that our sample, which included 194 boys and 208 girls (a total of 402 children with a median age of 14), is not representative of the broader population of Syrian adolescents living in Jordan.

1.6. Ethical considerations

Ethical clearance was obtained from the ODI Ethics Committee. During data collection, the principles of research ethics were respected and, as some of the research was undertaken directly with children, child protection standards (which formed part of the training with enumerators) were strictly adhered to. To protect the rights of participants at the household and facility levels, each participant received a complete, standardised explanation of the purpose and parameters of the research, and informed consent was sought. The field data collectors were also trained in techniques to conduct research with children.

6 These forms are used by UNHCR staff and partners to ascertain whether households are eligible for cash assistance – and, if so, to determine the level of cash assistance required. An example can be found at: http://www.unhcr.jo/Living-in-the-shadows/VulnerabilityForm-Oct-13-English.pdf

7 For coping strategies, the baseline is smaller (567 households). These households are a subset of the larger baseline and represent those that have been visited by UNHCR not just once but three times.
2. Overview of the existing evidence base on Syrian refugees in Jordan

This chapter provides a brief overview from the existing evidence base of the situation of Syrian refugees in Jordan, both to situate the analysis of our primary data in subsequent chapters as well as to highlight how the ODI study is contributing to key evidence gaps (for further details see also Plank and Samuels, 2017). The structure of this chapter mirrors the subsequent thematic chapters, whereby each chapter represents a different theme.

2.1. Household expenditure
The 2016 VAF found that 80% of Syrian refugees were living below the Jordanian poverty line of 68 JOD/month/capita (UNHCR, 2016d). Poverty rates are driven by restricted access to employment, but also by the reality that costs of living are generally higher in Jordan than in Syria (Sloane, 2014). Housing costs are especially high. A recent survey of 2,200 Syrian households across Jordan and Lebanon found that food and rent accounted for 75% of the average household’s monthly expenditure (Ipsos MENA, 2016) and the 2016 UNHCR Post-Distribution Monitoring (PDM) report found that in Jordan, rent alone accounted for about half of monthly costs (123 of 271 JOD) (see Figure 1). Food is also expensive: the 2016 PDM reported that food expenditure, ex-WFP vouchers, averages 66 JOD/month (UNHCR, 2016d). As Figure 1 shows, monthly expenditures on health care (41 JOD) and debt repayment (39 JOD) are also notable. Overall, while the 2016 PDM found that 99% of respondents felt that cash had reduced their financial burden, only 16% reported that cash assistance had enabled them to cover all their basic needs.

2.2. Employment opportunities and income
Until the 2016 London conference, formal access to employment for refugees was very limited in Jordan. Refugees who worked – estimated by the Ministry of Labour to be about 160,000 people – worked in informal jobs, often under hazardous conditions and for very low pay, and almost all in low-skilled sectors.

Figure 1: Average monthly expenditure in each category (in JOD)

Source: UNHCR, 2016d
such as agriculture and construction (Verme et al., 2016; International Labour Organization (ILO), 2015). As noted above, the Jordan Compact has paved the way for some improvement in this regard.

However, as also noted above, the swift expansion of work opportunities envisioned by donors and the Government of Jordan under the terms of the Jordan Compact has yet to materialise (Kelberer and Sullivan, 2017). While the government had hoped to scale up the permit application process (almost overnight) – in part because the Compact aimed to create five work opportunities for Jordanians for every one work opportunity created for Syrians, boosting the country’s economy and reducing tensions in host communities, these hopes have not fully materialised. As of mid-2017, only 54,841 work permits had been issued to Syrians (LSWG, 2017).

Kelberer and Sullivan (2017) note that in addition to capacity constraints within the Ministry, there are a number of other reasons that the planned increase in permits for Syrian refugees has lagged. For example, even though permits are now free of charge to Syrian refugees, many refugees continue to be concerned about other ‘costs’. Some are worried that they will lose flexibility of work arrangements, because the permits tie them to a single employer. Others are worried that they will lose access to aid or that their wages will go down. Kelberer and Sullivan (2017) also observe that it is difficult to formalise female home-based workers, who require access to services such as childcare in order to work. These concerns are echoed in other research. A rapid assessment conducted by UNHCR in November 2016 found that the main reason cited by Syrian refugees for not having a work permit was that the respondent’s job was not eligible for regularisation, due to it falling outside of permissible sectors, and that freelance employment was better suited to the individual’s occupation. Refugees also cited concerns about potential future permit renewal costs and the ineligibility of unregistered refugees (UNHCR, 2016d). For women, legal barriers that restrict access to work opportunities are compounded by social norms, with the result that Syrian women’s labour market participation is the lowest in the region (Hudock et al., 2016) – even more notable because the Middle East and North Africa (MENA) ranks lowest globally in terms of women’s economic participation (Bellamy et al., forthcoming). It should also be noted that because it is employers (rather than refugees) that must apply for permits, the process is highly dependent on finding willing Jordanian guarantors.

Some refugees forgo work because they continue to fear internment or deportation if they are caught. Before the Compact, it was not uncommon for refugees who were caught working without a permit to be sent to Azraq camp. While this practice appears to have ended, its effects continue to reverberate in Syrian communities, not only keeping adults from seeking employment but also pushing children into child labour as children are perceived to be less likely to be send to the camp. Indeed, the 2016 National Child Labour Survey found that Syrians have the highest child labour rate in the country, at 3.22% (ILO and Government of Jordan, 2016). Most child labourers receive 3-5 JOD/day (approximately $4-$7) (Terres des Hommes, 2016), and most of these children said they were not working before arriving in Jordan. Three out of four reported health problems as the result of working and around 20% reported experiencing physical abuse. Only 26% of economically active children attended school (UNICEF and Save the Children, 2014).

In post-distribution monitoring, UNHCR found that access to employment remains limited for cash beneficiaries. Only 33% of beneficiaries reported having income from wages – a figure nearly matched (32%) by those that said UNHCR cash was their sole source of income (UNHCR, 2016d).

2.3. Coping mechanisms

Given high rates of poverty, it is not surprising that most Syrian refugees (81% according to the VAF) are being forced to rely on a variety of negative coping strategies such as cutting back on food, sending family members (including children) to beg, or resorting to high-risk and informal jobs. Indeed, the protracted nature of the crisis has worn most households’ buffers thin. WFP (2015) found that the percentage of households in debt increased from 77% in 2014 to 86% in 2015 and that over 60% of non-camp families have incurred a ‘high’ or ‘severe’ level of debt per capita.

Both UNHCR and UNICEF cash assistance have been found to help families avoid using negative coping strategies, including accruing debt (UNICEF, 2015; Sloane, 2014), and together, UNHCR cash assistance and WFP vouchers have been found to reduce the poverty headcount by around 53 percentage points (Verme et al., 2016). But even so, households receiving both UNHCR and UNICEF...
cash assistance have continued to rely on negative coping strategies. This is largely due to the deteriorating external environment and the suspension of other cash assistance programmes as a result of funding shortfalls (particularly the part-suspension of the WFP food voucher programme in July / August 2015) (UNICEF, 2015). Indeed, while the 2016 PDM found that cash was enabling households to repay debt, it also found that borrowing actually increased after receipt of cash – presumably because they felt more confident to borrow money, knowing they would be able to repay it (UNHCR, 2016d).

2.4. Shelter and living conditions
Among Syrian refugees living in host communities, over 75% of individuals were assessed by UNHCR (2015) to be highly or severely shelter-vulnerable. For most families who have insecure livelihoods or considerable debts, rent represents a considerable burden, with arrears posing both financial and protection risks. Most rented urban dwellings are considered ‘poor quality’, with 50% of the dwellings assessed showing at least one sign of poor quality and 34% two or more. One-third of respondents had no rental agreement (UNHCR, 2015a). In addition, inability to meet basic household needs is a key driver of secondary displacement, with a third of all households
surveyed in late 2015 reporting that they would be forced to change their place of residence in the next three months, mostly because they were unable to pay their rent (Norwegian Refugee Council [NRC], 2016).

A total of 60% of Syrians are assessed to be severely vulnerable in terms of water, sanitation and hygiene (WASH) services, which often remain unavailable or exorbitant (UNHCR, 2015a). For most families, collection of solid waste is the biggest WASH constraint they face. While nearly 90% of refugees have access to national water and sewage networks, including regular water supply, 20% reported experiencing waste-water overflows more than once during the previous year. In addition, the most vulnerable may not have safe (or sufficient) water storage. Furthermore, although more than 50% of families have secure access to bathing facilities, 15% share these facilities with three or more other families. WASH expenditure varies considerably, with 32% of refugees identified by UNHCR (2015a) to be severely vulnerable, spending more than 25% of their expenditure on WASH items.

Overall, cash assistance is improving many refugees’ housing conditions. The 2016 PDM found that one-third of beneficiaries felt that cash had helped them acquire better accommodation (UNHCR, 2016d).  

2.5. Food consumption and nutrition

A 2016 WFP study found that 72% of Syrian refugees living in host communities were reported to be highly or severely vulnerable to food insecurity, compared to 5.7% of Jordanian households (WFP and Government of Jordan, 2016). In 2015, 46% of Syrian refugee households were categorized as severely food insecure because of low food expenditures; 72% were categorized that way because they had adopted emergency coping strategies, such as incurring debt and/or cutting back on food intake to meet their food needs (UNHCR, 2015a). The prevalence rates for global acute malnutrition (GAM, or wasting) have been assessed at 5.1% among refugees living in urban communities. Additionally, 6.3% of pregnant and nursing women and girls were found to be moderately malnourished, while less than half of children under two years of age are breastfed (Sebuliba and El-Zubi, 2015). The 2016 PDM found that cash assistance is helping some beneficiaries to achieve better nutrition, with nearly 85% reporting spending cash on food. Almost a quarter of those said they were buying better quality food and 13% said they were eating larger portions (UNHCR, 2016d).

2.6. Education and learning

The Ministry of Education estimates that there were 167,000 Syrian children enrolled in formal education in the 2016/2017 school year – a 15% increase on the previous year, mostly attributed to the funding increase since the London donor conference in February 2016. However, findings from the VAF indicate that 97% of school-aged refugee children display a high risk of non-attendance (UNHCR, 2015a), while a UNICEF (2016a) study found that, in October 2016, 28.5% of those in informal education attended school on a part-time basis (one-to-three days per week). With an estimated 64,000 Syrian refugee children out of school, according to findings from earlier research (e.g. NRC, 2016), refugees stated that the main obstacles to attendance were: economic hardship and the need for male children to work; the costs associated with schooling; distances to school; and limited transport options (and associated safety concerns). Access was found to be particularly difficult for children in rural areas and children in families engaged in transient agricultural work. The same applied to refugees without the necessary documentation, such as refugees without ‘bail-outs’ from camps, or a fixed address. Syrian refugee parents have also faced many challenges getting their children into schools in the first place, with one survey indicating that in almost 85% of cases, parents could not register their children in schools in urban and semi-urban areas because they were told that schools lacked capacity or that new procedures limited schools’ ability to register refugee children (NRC, 2016)

Cash assistance – both that from UNHCR and UNICEF – has been found to help some children return to school. The 2016 PDM, for example, reports that 5% of beneficiaries sent their children back to school as a result of cash assistance. It also found that families were spending cash on school supplies, uniforms and school transport (UNHCR, 2016d). A 2015 UNICEF post distribution monitoring of the UNICEF CCG found similar effects on both enrolment and expenditure (UNICEF, 2015).

Reported effects on child labour, however, remain mixed. While UNHCR and Oxfam cash assistance enabled some families to support their children to return to school, many others continued to work (Hagen-Zanker et al., 2017; Sloane, 2014). The 2016 PDM, for example, found that only1% of beneficiaries reported that cash had enabled their children to stop working (UNHCR, 2016d). Cash alone also does not allow families to overcome other barriers to education (especially for adolescent girls), which include early marriage and fears about security while travelling to and from school (Hagen-Zanker et al., 2017).

11 https://www.unicef.org/jordan/2_Education_-_2017_ForWEB.pdf
2.7. Health and health care

Between 2011 and 2014, Syrians with the necessary documentations (MOI cards) could access free health care services at all levels (primary, secondary and tertiary health care services). Jordanians. Since November 2014, however, they have had to pay the same health fees as uninsured Jordanians, while those without the Ministry-issued cards are treated like other foreigners accessing public health care and required to pay fees that are 35%-60% higher than the rate for uninsured Jordanians (Amnesty International, 2016).

A 2014 survey of Syrians living outside camps found that cost was the greatest barrier to health care, although more than 60% of adults were able to access such care without making an out-of-pocket payment (Doocy et al., 2014). Average household spending on health in the month preceding the survey was 57 JOD ($80.3) – 32.1 JOD on consultation and diagnostic fees and 24.9 JOD on medication. More recent studies indicate that refugees are increasingly seeking health care outside the public system because of the expense of public services, their sub-standard care and procedural constraints (UNICEF, 2016c).

In 2015, UNHCR found that around 56% of Syrian refugees belonged to families classed as having ‘severe’ or ‘high’ health vulnerabilities, with 16% reporting pre-existing medical conditions that have a negative effect on the daily life of a family member. A sizeable proportion (10%) reported more than 25% of their expenditure on health-related items (UNHCR, 2015a) – though the average monthly health expenditure reported by the 2016 PDM was only 15% of household income (41/271 JOD) (UNHCR, 2016d).

In October 2016, 43% of households had attended a public clinic/hospital to access health care for a child during the previous six months, 18% had attended an NGO-operated or Syrian community clinic, and 13% a private clinic or hospital. In January 2016, 10% of households with a medical need for a child had been unable to access public health care facilities during the preceding six months, falling to 3% in October 2016. In that same month, 69% of households cited the cost of medical fees as a deterrent, 19% the cost of transport, and 6% the unavailability of relevant medical services. In addition, 61% of those who had accessed private health care did so because of poor services at public health facilities (UNICEF, 2016a).

2.8. Participation and social capital\footnote{Social capital refers to ‘connections among individuals – social networks and the norms of reciprocity and trustworthiness that arise from them’ (Putnam, 2000)}

Evidence of programme effects on Syrian refugees’ social capital has been minimal. Oxfam’s cash assistance was found to have reduced stress around household finances and promoted social cohesion at community level. The assistance primarily enabled families to repay their debts (a finding repeated in UNHCR PDM) and enhance their social networks (Sloane, 2014). The 2014 impact assessment of the UNHCR cash assistance programme suggested that it had provided some protective elements by avoiding distribution modalities that can stigmatisate refugees, such as in-kind assistance at designated centres (Schimmel, 2015). However, this is a key area where our study can contribute given the dearth of quantitative and qualitative data on this dimension of Syrian refugees’ vulnerability and the related effects of cash assistance programming.

2.9. Quality of life and psychosocial well-being

The psychosocial needs of Syrian refugees in Jordan cannot be overstated. All have been uprooted from their homes and livelihoods and most have either witnessed or experienced violence as they fled for safety. Most have now lived for years with the daily pressures inherent in abject poverty, exacerbated by increasing resentment from host communities as competition for employment and housing intensifies (UNDP and UNHCR, 2015; Francis, 2015; Carrion, 2015; REACH, 2015). Women and adolescent girls sometimes spend months trapped inside their own homes, largely due to social norms prohibiting family honour, while adolescent boys are regularly forced to forgo schooling in order to do low-paid and often dangerous work. Men – who were largely prohibited from formal sector employment for years and continue to face many obstacles to gainful employment even after the Jordan Compact – have lost their main source of personal identity and social status. Mental health is the most prevalent health concern for school-aged children in Jordan (UNHCR, 2013). Although psychosocial support services have expanded rapidly in recent years (356,000 appointments provided in 2014 compared to only 5,600 in 2012) (UNHCR, 2014; UNHCR, 2013; UNICEF, 2017\footnote{https://www.unicef.org/jordan/Makani_Guidelines_English(1).pdf}), availability has not kept pace with demand.

Cash assistance has been found to improve refugees’ psychosocial well-being. UNHCR’s 2016 PDM, for example, reports that nearly two-thirds of beneficiaries identified improved psychological well-being and reduced...
stress as a result of cash assistance (UNHCR, 2016d). Similarly, UNICEF (2015) found that the CCG improved children’s voice and empowerment and reduced caregivers’ levels of stress and anxiety. Some respondents in a recent ODI study noted lower levels of stress and anxiety as a result of the UNHCR cash assistance, particularly among the most vulnerable (Hagen-Zanker et al., 2017).

Chapter summary
Overall there is a growing understanding of the vulnerabilities that Syrian refugees face in terms of poverty, employment, shelter, food security, education and health care. It is also clear that despite continued need, there has been real progress in terms of achieving the vision of the Jordan Response Plan – and even the Jordan Compact.

However, there are some significant evidence gaps. Refugees’ psychosocial and social vulnerabilities, for example, are largely unexplored. We know little about patterning by gender and age, as well as the potential of social assistance to address these dimensions. We also know less about how needs and vulnerabilities are shifting over time for the same households as their stay in Jordan is prolonged, as the numbers of refugees peaked (following the closure of the border in 2016) and as the policy, programming and funding landscape continues to evolve.

This report particularly addresses these gaps in addition to understanding the effects of cash transfer on Syrian refugees.
3. Household expenditure and the effects of cash assistance

3.1. Chapter aims
The cash assistance programmes aim to increase household-level expenditure, including expenditure on children. Evidence suggests (e.g. Bailey, 2013) that with higher levels of income, families are less likely to use negative coping mechanisms such as cutting back on food, pulling children out of school, sending family members (including children) to beg or to engage in high-risk, informal or socially degrading jobs (e.g. cleaning jobs for women, which were repeatedly cited as being socially degrading in this particular cultural context). Expenditure analysis provides a good basis to measure people’s relative well-being. Household expenditure and expenditure–income gaps largely determine vulnerability status.14

As explained in the secondary literature review (chapter 2), Syrian refugees face severe and increasing income–expenditure gaps. This chapter presents data from our primary research and sets the scene by analysing wide-ranging data on expenditure, highlighting the differential effects of cash assistance programming on income and expenditure vulnerabilities over time. To allow for fine-grained comparisons, we present household-level data and (where possible) per capita figures.

3.2. Effects of cash assistance on income and expenditure vulnerabilities
Overall, UN cash assistance programming has had an important effect on household income and expenditure. This is highlighted in Figures 2 and 3, which compare UNHCR home-visit baseline data15 with data from the ODI assessment conducted in December 2016/January 2017. Unless otherwise specified, the ODI data 2017 include the full sample – i.e. people receiving all three UN cash assistance (cash from UNHCR and UNICEF, and food vouchers from WFP).

Income and expenditure data should be interpreted in light of the minimum expenditure basket calculated by the UN Inter-Agency Task Force. It found that in 2016, a family of five would need 451 JOD/month in order to meet basic needs such as shelter, food, education, health care, WASH, etc. (UNHCR, 2016d). Meeting needs for food, shelter and WASH only was estimated to cost 256 JOD/month (ibid.).

Figure 2 shows that at baseline, mean household income was only 58 JOD/month, but after receiving cash assistance, it rose to 287 JOD/month. We would

Figure 2: Mean household income and expenditure, at UNHCR baseline and at ODI sample (JOD/month)

Table 2: Comparison of household income and expenditure, at UNHCR baseline and at ODI sample (JOD/month)

<table>
<thead>
<tr>
<th>UNHCR Visit 1</th>
<th>ODI sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td>Expenditures</td>
</tr>
<tr>
<td>58</td>
<td>200</td>
</tr>
<tr>
<td>287</td>
<td>319</td>
</tr>
</tbody>
</table>

14 Household consumption expenditure covers all purchases made to meet everyday needs such as food, clothing, rents, energy, transport, durable goods, spending on health, on leisure and on miscellaneous services.

15 Baseline data were pooled from visits completed between 2014 and 2016. Of the 1,594 baseline home visits used in this report, 800 were completed in 2014, 562 in 2015 and 233 in early 2016.
also anticipate some under-reporting of income sources, especially around remittances, support from non-governmental organisations (NGOs) and charities, and informal labour wages, which we know from the qualitative data to be not uncommon and which would, therefore, increase incomes. Figure 2 also shows the effect of cash assistance on household expenditures, which increased from a mean of 200 JOD/month at baseline to 319 JOD/month; expenditure figures appear less vulnerable to under-reporting than income, partly because it is easier for people to mentally tally their expenditures and partly because of participants’ worries that reporting higher income might lead to benefit reductions.

Figure 3 highlights the value of looking at both means and medians, as the latter are not affected by outliers. It shows that median household income at baseline was 0 JOD/month – i.e. at baseline, most households had no cash income at all. After receiving cash assistance, which just over 50% of participants reported as their sole source of income, median income rose to 265 JOD/month. Household expenditures, which again appear less vulnerable to under-reporting, rose from a median of 210 JOD/month to 285 JOD/month.

Figure 4 highlights some of the main reasons why household expenditures have increased. While median rent was only marginally higher compared to baseline (130 JOD/month vs 120 JOD/month), reported expenditures on utilities, health care, education and transport had approximately doubled. In some cases this increased spending is probably positive – reflecting the fact that more children are going to school, for example, and require both school supplies and transport. In other cases, especially health care, it probably reflects the fact that refugees have more limited access to free and reduced-price services and are now paying higher user fees. Unsurprisingly, households in urban Amman reported the highest spending levels (median of 351 JOD/month and mean of 368 JOD/month) while households in rural Irbid reported the lowest (250 and 286 JOD/month respectively). Urban respondents had higher overall expenditures than rural respondents (medians of 298 and 259 JOD/month and means of 327 and 297 JOD/month respectively).

3.3. Variation in income and expenditure between beneficiary groups

ODI survey data also underscore the positive effect of the combined food voucher and cash assistance package in supporting household expenditure needs. Figure 5 shows that households receiving all three UN cash assistance (WFP food voucher, UNHCR cash and UNICEF Child
Cash Grant (CCG)) have higher reported incomes (median of 340 JOD/month) and higher reported expenditures (median of 310 JOD/month) than those receiving only one or two of the cash assistance. Households not receiving the UNICEF CCG have monthly expenditures that far exceed their income, while those receiving only WFP vouchers have median monthly expenditures that are almost double their reported income (265 JOD/month vs 140 JOD/month). Given that WFP vouchers are worth an average of 71 JOD/month per household, gaps would be far larger if families had to pay cash for food.

Our qualitative research suggests that most Syrian refugee cash beneficiary households fill income–expenditure gaps by working without a work permit. Indeed, our focus group discussions (FGDs) suggest that the income-expenditure gaps measured in our quantitative
work do not reflect reality well, as there is substantial under-reporting of earned income. Like other research (e.g. WFP, 2015), we also found that among Syrian refugee households, borrowing is common (mostly from landlords, relatives and neighbours), with debt growing over time.\footnote{Sloane (2014) also observed that households’ economic conditions are deteriorating over time as they have exhausted other resources.}

Figure 6 further disaggregates income and expenditure by beneficiary group. As with Figure 5, it distinguishes between households receiving only WFP vouchers and those also receiving UNHCR and UNICEF cash assistance. But it further disaggregates between those receiving full-value WFP vouchers and those receiving half-value vouchers. This gives six beneficiary categories (as discussed also in chapter 1):

- UNICEF CCG, UNHCR cash assistance plus full-value WFP voucher (this will be labelled in figures as ‘3 UN-full’);
- UNICEF CCG, UNHCR cash assistance plus half-value WFP voucher (this will be labelled as ‘3 UN-half’);
- UNHCR cash assistance plus full-value WFP voucher (labelled as ‘2 UN-full’);
- UNHCR cash assistance plus half-value WFP voucher (labelled as 2 UN-half’);
- full-value WFP voucher (labelled as ‘WFP-full’);
- half-value WFP voucher (labelled as ‘WFP-half’).

The median total value of each benefit package, which is quite large relative to median income in the case of those including cash transfers, is shown below in Table 3.

Figure 6 highlights the substantial effect that WFP vouchers have had on households’ economic bottom line, with median incomes across beneficiary groups higher in households that receive full vouchers. For families also receiving UNICEF and UNHCR cash assistance, median income (those receiving full-value WFP vouchers) is 370 JOD/month compared to 260 JOD/month for those receiving half-value vouchers.

Effects are even greater among vulnerable households receiving UNHCR (but not UNICEF) cash: monthly

<table>
<thead>
<tr>
<th>Package</th>
<th>Median monthly value in JOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 UN-full</td>
<td>335</td>
</tr>
<tr>
<td>3 UN-half</td>
<td>220</td>
</tr>
<tr>
<td>2 UN-full</td>
<td>280</td>
</tr>
<tr>
<td>2 UN-half</td>
<td>130</td>
</tr>
<tr>
<td>WFP-full</td>
<td>80</td>
</tr>
<tr>
<td>WFP-half</td>
<td>40</td>
</tr>
</tbody>
</table>

The median total value of each benefit package, which is quite large relative to median income in the case of those including cash transfers, is shown below in Table 3.
in a way that increases the income of those receiving full-value WFP vouchers more than double that of those on half-value vouchers (325 JOD/month vs 150 JOD/month – the third and fourth bars in Figure 7 below). In addition, median expenditures for households receiving cash assistance are higher when those households also receive full-value vouchers. UNICEF beneficiary households also receiving full-value WFP vouchers spend 321 JOD/month (compared to 300 for those receiving half-value vouchers) because the effective dollar value of vouchers is adding to household income, while UNHCR beneficiary households spend 317 JOD/month (compared to 233 JOD/month for those on half-value vouchers).

Analysing per capita income and expenditure brings further insights. It not only highlights the value of cash assistance over food vouchers alone but also shows that UNICEF beneficiary households, because they are larger (they have a mean of 3.8 children compared to a mean of 1.5 children for households receiving UNHCR cash but not the UNICEF CCG), need both UNICEF and UNHCR cash assistance just to break even. Figure 7 shows that the median per capita income in households receiving UNHCR cash is 65 JOD/month. The median per capita income in households also receiving UNICEF cash is only 60 JOD/month. Both stand in stark contrast to reported per capita incomes among households receiving only WFP vouchers (35 JOD/month). Figure 7 also shows that despite their higher benefit levels, UNICEF beneficiary households have lower per capita spending (58 JOD/month) than households not receiving UNICEF cash (87 JOD/month for those receiving UNHCR and WFP vouchers, and 78 JOD/month for those receiving only WFP vouchers).

Figure 8 further teases out the value of WFP vouchers by showing reported per capita income and expenditure by fine-grained benefit package. It also reiterates the value of cash assistance over WFP vouchers alone, showing much higher per capita incomes in all four cash groups (58, 64, 63 and 65 JOD/month) compared to the two non-cash groups (45 and 30 JOD/month). It also captures the effect of full-value vouchers, with households on half-value vouchers – regardless of which cash package they also receive – having much higher per capita income and expenditure.
Households receiving all three UN cash assistance spend 70 JOD/month/capita when they receive half-value vouchers, whereas those that receive full-value vouchers spend only 51 JOD/month/capita. The importance of the total value of the UN benefit package is revealed most strongly in Figure 9 and Figure 11. Figure 9 shows the household income–expenditure gap by broad benefit package. Those receiving all three UN cash assistance, including full-value WFP vouchers, had a net positive median income of 73 JOD/month. Those receiving UNHCR cash assistance and full-value vouchers had a net positive median income of 30 JOD/month. Those receiving cash assistance but only half-value WFP vouchers – like those receiving only vouchers and no cash – were in debt every month. Households receiving only half-value vouchers and no cash assistance spent a median of 125 JOD/month more than their reported income. The importance of all three cash assistance can be seen in another way as well. As Figure 10 shows, while only 30% of households receiving all three cash assistance (including full-value vouchers) had monthly expenditures that exceeded their income, more than half (57%) of

**Figure 9: Median monthly household income gaps, by fine-grained UN benefit package (JOD/month)**

![Figure 9: Median monthly household income gaps, by fine-grained UN benefit package (JOD/month)](image)

**Figure 10: Percentage of households in debt each month, by fine-grained UN benefit package**

![Figure 10: Percentage of households in debt each month, by fine-grained UN benefit package](image)

**Figure 11: Median monthly per capita income gaps, by fine-grained UN benefit package (JOD/month)**

![Figure 11: Median monthly per capita income gaps, by fine-grained UN benefit package (JOD/month)](image)
households receiving cash assistance from UNHCR and UNICEF but only half-value vouchers were in debt (i.e. their expenditure was greater than their income).

Figure 11 shows median income–expenditure gaps on a per capita basis, further reinforcing the effect on households of receiving full-value WFP vouchers. It shows that while those receiving full cash assistance have adequate income to cover their expenditure needs, those receiving half-value vouchers are in debt (+7 vs -6 in the case of households receiving all three cash assistance, and +12 and -31 for UNHCR beneficiary households). It also underscores how well-targeted the UNICEF CCG is. While Figure 9 showed UNICEF beneficiary households with larger median surpluses than UNHCR beneficiary households (73 vs 30 JOD/month), Figure 11 shows that per capita surpluses are actually smaller (7 vs 12 JOD/month) – indicating that UNICEF beneficiary households are, indeed, particularly vulnerable.

Our qualitative work revealed that even the full benefit package is only barely sufficient to meet households’ needs. Mothers of larger families told us that even with cash assistance from UNICEF and UNHCR, they were still struggling to meet needs. One mother of an extended family from Homs, living in a two-room house with six children and a married son and his wife, said, ‘It barely fulfils our basic needs – 4 out of 10. We can’t regularly buy things for our children or enhance the quality of food.’ Another added, ‘[We spend the UNICEF cash assistance on] the things [the children] need, school uniforms, stationery, shoes, and [medication] if they get sick, God forbid. Of course [the aid is not sufficient for these things]. We are forced to add money.’ A woman in a female-headed household that received UNICEF / UNHCR cash assistance added: ‘We only buy necessary things, the really necessary things, there are no extra stuff for the kids, they crave bananas, apples, meat and chicken, but we can’t get this stuff.’ A man in a male-headed household receiving UNHCR cash added: ‘In that time, I worked and we started receiving UNHCR’s cash assistance and food vouchers, so we secured our housing basic needs from these sources ... you know ... We didn’t have any pieces of furniture in our house; we didn’t even have a fridge, washing machine or gas ... we also had to buy mattresses from what we earned from work ... Then, we stopped working because there were many people in the town ... A town with an estimated number of 6,000 inhabitants would not offer many job opportunities.’

3.4. What do households spend money on?

Shelter (rent and utilities) is the single largest expenditure for most households, accounting for more than two-thirds (69%) of monthly expenditures (see Annex 4 for more details). Figure 12 highlights the relative costs of various expenditures, based on median income. It shows that of a median household income of 265 JOD/month, median costs for shelter were 184 JOD.18 Housing costs were especially high in urban areas, particularly Amman, but lower in rural areas, particularly Mafraq. As discussed in greater detail in the next chapter,

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17 Mean income gaps were heavily distorted by outliers and thus are not reported here.

18 The median cost of rent was 130 JOD and the median cost of utilities was 35 JOD.
the burden of rent was another constant refrain in our qualitative work, with one respondent noting ‘One can afford living with a small amount of food … but it would be impossible without a house’ (male head of household, extended family, Mafraq).

In addition to the fact that monthly expenditures on education were relatively small (median of 25 JOD, mean of 39 JOD), few households spent on education. Across the whole sample, only 51% of respondents reported any spending on any education-related costs, while fewer than 15% spent on school transportation or uniforms. Only 33% spent on books, school supplies or pocket money. There were no substantial gender differences in expenditure patterns on education, but spending was higher in Amman (mean of 42 JOD, median of 29) than in Mafraq (mean of 32 JOD, median of 25), and was higher in rural areas (mean of 44 JOD, median of 29.5) than urban areas (mean of 36 JOD, median of 25). That said, when one looks only at households with currently enrolled students, the UNICEF CCG does increase the likelihood that households will spend on children’s education. As Figure 13 shows, 83% of households receiving full cash assistance spend on education, compared to only 68% of those who receive no cash and only half-value vouchers. Furthermore, both the UNICEF
CCG and WFP vouchers increase median spending (see Figure 13 and also chapter 8).

While health expenditures did not vary between beneficiary groups (median of 29 and mean of 51 JOD/month for the entire ODI sample), access to the UNICEF CCG has improved children’s access to health care. Figure 14 shows that 46% of households receiving UNICEF cash assistance had spent money on children’s health care – compared to only 15% of those in UNHCR beneficiary households and 20% of those in WFP-only households. Notably, access to full-value WFP vouchers also appears to improve children’s access to health care – probably because it frees up money that would otherwise have been spent on food (see Figure 15).

Household spending only varied notably between benefit packages for some expenditure categories – including housing, education, ‘other’ child expenses, and food (ex-WFP) (see Figure 16). The heterogeneity of household food spending patterns is further clarified in Figure 17, which breaks down food spending (ex-WFP) on a per capita basis. That graph highlights that for households receiving cash assistance, food spending per capita is roughly twice as high in households receiving half-value rather than full-value vouchers. Median spending on health care and ‘other’ adult expenses did not vary by beneficiary group.

3.5. Beneficiary perceptions about the effects of cash on expenditure

Asked how cash had improved their family’s well-being, nearly 92% of beneficiaries said that it was helping them pay the rent, about 40% said it had allowed them to move to a better house/area or pay their utilities, and about 20% said it had reduced their need to share costs with
host families or borrow, or had increased their ability to pay off debts and buy clothes and shoes for their children (see Figure 18). Households receiving both UNHCR and UNICEF cash – which by definition have children and thus tend to be larger and more vulnerable – were most likely to report changes in children’s well-being, especially when they were also receiving full-value WFP vouchers. Specifically, they were much more likely to be able to pay rent and utilities and to have spent more on children’s food, clothing, educational expenses and allowances.

When asked about the UNICEF CCG, most beneficiaries felt that it had improved their ability to meet their children’s needs: about 21% felt it had had a ‘large’ effect and about 52% felt it had had a ‘moderate’ effect. Most families reported that it had helped them to buy clothing and shoes for their children (77%), feed them more (56%), and get them necessary health care (53%) (see Figure 19).

These findings were echoed in our qualitative work. Several mothers, for example, told us that access to UNHCR cash had rescued their families from debts they had incurred to pay for emergency medical care, and ultimately kept their families from being evicted. One explained, ‘The landlord knows when he can get the money back, because we get the iris scan’ (woman, Amman, with six children, UNHCR / UNICEF beneficiary). Another woman in Amman, in her thirties, told us that because ‘to borrow from the bank, for us, is impossible’, receiving cash assistance has meant that her landlord has become more flexible about the timing of rent payments. Simply being able to prioritise her expenses made her feel ‘less stressed’.

Research participants also referred to the notable effects of cash on children’s lives. One mother of six, in Amman, who had thought of moving back to Baqa’a camp because of its lower cost of living, told us that UNHCR cash came just in time. Now, she and her husband ‘can pay for the basic needs of our children, their courses and so for their future’. Having access to cash assistance ‘changed their situation for the better’.
3.6. Who decides what to spend money on?

We found that most decisions about how to spend cash assistance are made by women – and that most female respondents believed that cash assistance programming is strengthening women’s role in decision-making (see Annex 4). As Figure 20 shows, 67% of female respondents reported that female caregivers control spending on food and toiletries, while 85% reported that they determine spending on water, sanitation and hygiene (WASH).

Figure 21 highlights that female beneficiaries of cash assistance programming believe that it is contributing to women having a greater say in decisions on household expenditure. Over two-thirds (68%) of survey respondents reported positive effects. That said, our qualitative research found that there is often a richer story behind the simpler ‘yes’ or ‘no’. Women also explained that where men make
decisions about household expenditure, in some cases they do this as a way of regaining some control, since many men are unable to fulfil their ideal role as father or husband because they are unemployed.

These findings about the gendered patterning of household decision-making were further reinforced by the qualitative findings, as the following quotation highlights: ‘My husband goes and collects the (WFP) vouchers and the cash and then I go to the store to buy the food. I decide what to get, the vegetables and all that we need for the house’ (woman, UNHCR/UNICEF beneficiary, Zarqa).

### 3.7. Remaining challenges

When asked directly why cash assistance had not improved household well-being, most respondents (63%) said the amount of cash was simply too small. Others said it was failing to have the desired effects because the family were so badly in debt that they had to prioritise debt repayment over day-to-day needs (26%), that their rent had gone up (20%), or because their family had stopped receiving subsided health services or food assistance, which meant that resources had to be stretched further.

### Chapter summary

Our findings echo those of previous research – that Syrian refugee households are poor and becoming poorer over time. While UN cash assistance, including cash assistance and WFP vouchers, are enabling households to ‘get by’, benefit amounts are not large enough for households to meet all of their basic needs.

**Key expenditure-related vulnerabilities:**

- On a monthly basis, across the entire ODI sample, households spend a median of 20 JOD/month more than they have coming in.
- Household expenditure is rising over time. Health care expenditures, for example, have doubled since UNHCR collected baseline data (year) – probably because the range of free services to which refugees have access has been curtailed. The rise in education expenditures, on the other hand (from 9 JOD to 25 JOD/month), probably reflects children’s growing access to schooling.

**Effects of cash assistance:**

- UN cash assistance are the sole source of income for over half of our respondents.
- Cash assistance is allowing households to meet their basic needs without going further into debt. Those receiving all three UN cash assistance – and thus the highest absolute benefit value – have incomes that exceed their expenditures, unlike those receiving only WFP vouchers.
- The proportion of households in debt is lowest among those receiving all three UN cash assistance.
- Nearly all beneficiaries report that cash has helped them pay rent, and many report that it has helped them pay utilities or move to a better area.
- The UNICEF CCG is, according to beneficiaries, helping families buy children’s clothing and improve their diets.
- Over two-thirds of female respondents report that cash is improving their access to financial decision-making.

We also found that full-value WFP vouchers are critical to households’ economic bottom line, as they effectively represent an extra 71 JOD/month (mean). Of cash beneficiaries, those receiving half-value vouchers had monthly per capita expenditures that exceeded their incomes. Those receiving full-value vouchers had incomes that exceeded their expenditures.
4. The effects of cash assistance programming on Syrian refugees’ employment opportunities and income

4.1. Chapter aims

Worldwide, employment status is among the strongest determinants of poverty and vulnerability. Work not only provides families with the incomes they need for day-to-day survival, it also helps them build a buffer to protect themselves from future shocks, enables them to invest in developing human capital, and provides a sense of identity and self-worth. Employment is also important from the perspective of programme sustainability – as households with earned income need less humanitarian support. This chapter first discusses sources of income and the vulnerabilities refugee families face around employment. It then explores how cash assistance has affected people’s access to work (adults and children), highlighting its positive effects and the remaining challenges.

4.2. Vulnerabilities facing Syrian refugee households around income and employment

Participants in our quantitative research were asked to identify all sources of household income over the past year, and to give the monthly amount received from each source. Unsurprisingly, given legal restrictions on refugees taking up formal employment, the number of refugees who have been ‘arrested and made to sign a pledge not to work’ (middle-aged mother, a former torture victim, living in Zarqa), and respondents’ fears of losing cash assistance if they report income, less than 20% reported having a household member in paid work (see Figure 22). Another 15% reported that they (or another member of the household) were self-employed. Self-employment was

Figure 22: Sources of household income (outside of UN benefits), by percentage

![Figure 22: Sources of household income (outside of UN benefits), by percentage](image-url)
particularly common for women, who are largely locked out of the labour market by restrictive gender norms that either keep them at home or preclude whole categories of work (see Box 2). Both waged work and self-employment were especially common in Amman – and very rare in Irbid (see Figure 23). Other than UN cash assistance, which were the sole source of income for just over half of all households (50.5%\(^{19}\)) – and, as noted in the previous chapter, represent the source of most household income for families receiving the full package of cash assistance – the most common source of income was loans from friends or family members.

As Figure 24 shows, survey data found that fathers are most likely to be wage earners (66%), followed by a mixed category of ‘other adults’ (20%) that often includes every able-bodied man in the household. As one woman noted, ‘My son has been working in a barbers’ shop for two years now. He makes only 2 JOD a day but it is something. Even my father – who is 75 – is forced to work … He sometimes does cleaning jobs – just cleaning the stairs for neighbours, but the worst is when he starts checking the garbage on the streets to see if there is anything we might be able to use.’ (Widow, receiving all three UN cash assistance, Irbid)

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\(^{19}\) This is not reflected in the graph as respondents were asked OTHER than UN cash assistance, what are your sources of income?
Box 2: Women’s contribution to household income

Despite strong restrictions on women’s mobility and other constraints (‘they face a lot of harassment’ – female UNHCR beneficiary, Amman), women contribute to household income in various ways. Some work from home, tutoring children, making self-care products, providing beauty services, or re-selling small items to community members. A few respondents reported cleaning for their better-off Jordanian neighbours. While refugee women’s incomes are typically low, not only does every extra dinar help with monthly expenditure, but they are glad to have something productive to do.

‘My aunt makes [detergents]. She once made soap … that helps you lose weight, hair soap, soap for fair skin, soap for acne. And fragrances. She took courses when she came. She makes trays out of straw … and ornamented verses of Quran.’ (Irbid, teenage boy)

‘Sometimes because my sister-in-law needs money, she gives lessons. She tutors boys or girls to secure some income but she barely earns anything.’ (Focus group discussion with girls aged 12-14)

‘[My mother] sells things at home, prepaid cell phone credit. She buys them at a shop [and then resells them].’ (Focus group discussion (FGD) with teenage boys, 13-15 years, Irbid)

‘I studied as a beautician back in Syria. Now I work here from home. I offer hair and beauty services to Palestinian and Jordanian women. For short hair it is 5 JOD, for longer hair 10 JOD. I have one room with a table and a mirror. I also live in a popular area so knowledge of my business has spread by word of mouth – through neighbours. My business has just spiralled.’ (Divorced mother, FGD, Amman, receiving only WFP vouchers)

‘I cleaned houses in Amman last year. I just knocked on the doors and said that I can clean and do washing. I had some work.’ (Widow, Amman, receiving cash from UNHCR and UNICEF)

A handful of the most educated Syrian women, prohibited from doing the work they trained for, have chosen instead to volunteer, forgoing wages in order to improve the lives of their community. A UNHCR beneficiary in Amman, working as a community health volunteer with vulnerable adolescent girls, told us:

‘I was a teacher in Homs and later a journalist. I had such a high education and really worked to get my degree.’ Now, ‘It was all worth nothing. I am now not allowed to work.’
Survey respondents reported that mothers and children are highly unlikely to earn wages. Of the 378 survey respondents who reported that their household had a member who received wages, 29 (or 1.4% of the entire sample) said that person was under the age of 18. As noted above, however, our qualitative work suggests considerable under-reporting on this, with some respondents not admitting to child labour until an hour or more into the interview, after some level of trust had been established with the interviewer. Indeed, our qualitative research suggests that most adolescent boys work. Not only is their labour often seen as culturally appropriate – with many older boys expected to contribute to household income in pre-war Syria – but now it is seen as a necessary part of refugee life.

Even other questions on our survey suggest under-reporting of child labour, with different wording triggering different answers from the same respondent. For example, asked directly about whether their children work, rather than sources of income and who provides those sources of income, 4% of respondents admitted that their children were engaged in work. These working children were almost all adolescent boys. We were told that while only 1% of boys under the age of 12 worked, 13% of boys aged 13-18 had worked in the past week – a figure that is particularly notable given that we collected data in the winter, when agricultural and construction work is largely unavailable. Working boys were largely out of school, worked a median of 21 hours a week (mean of 33), and were likely to be engaged in work that jeopardises their health and safety (43%) (see Box 3). According to adult respondents, less than 1% of girls, regardless of age, did any sort of work in the past week, even unpaid household work. Approximately two-thirds of children – boys and girls (63% vs 69%), adolescents and primary-aged children (67% vs 65%) – helped care for younger siblings for between 1 and 5 hours in the past week; only 6% of adolescent girls did so for 6-10 hours over the past week.

As noted in chapter 3, beneficiary households have low incomes. Mean income is only 286 JOD/month and median income only 254 JOD/month. For households with a wage earner, therefore, median wages make up about 60% of median household income (at 150 JOD/month, see Figure 25). Self-employment is similarly lucrative. Remittances and support from non-governmental organisations (NGOs) and community-based organisations (CBOs) provide a handful of households (2% and 4% respectively) with a median of 100 JOD/month, though our qualitative research suggests that the former is likely more common than was reported, due to respondents’ concerns about losing access to UNHCR cash if they were known to be receiving remittances. Where people took loans from friends and family, these were worth a median of 75 JOD/month. Income from other sources was almost negligible, both in terms of how common those sources are or how much they contribute to household income. For example, of the 54 respondents whose households received income from domestic service, the monthly median was only 45 JOD. Of the 39 households that received a gift from a family member or friend, the monthly median was only 30 JOD.
Box 3: Boys’ burden

Several adolescent boys who participated in our qualitative research told heartbreaking stories about doing child labour. All had left school, most were poorly paid (despite working long hours), and many had been injured. One, now 14, recounts what happened to him:

“When I arrived in Jordan, I was 10, I started working as a blacksmith. I used to work in the summer [and attend school but] left school. I first worked with my relatives then I worked for our neighbour, he was paying me 2 JOD per working day. After that I worked for our second neighbour, he was giving me 25-30 JOD per week. Then I worked in plastics and then at a car service station. Finally, I worked for a Palestinian who paid me 30 JOD per week. [I worked] from 8:30am to 6pm or 7pm. Fridays were off, but Saturdays were not. I had to stop working because work [with a hammer] harmed my eye and my fingers. An object entered my eye and it was only removed in the hospital.’ (Teenage boy, FGD, Zarqa)

Another boy, now 17, added:

‘I work in the construction sector, doing outdoor tiling work. I’ve been doing this for two years now – initially it was 7.5 JOD/day and now 9 JOD/day. I start work at 7.30am and finish at 8pm. There are Syrians and Jordanians – and there is no discrimination. Differences in wages depend on the number of years you have been working. But I worry about not having a work permit. I’ll apply once I’m 18 years. I feel afraid sometimes – although we usually hear when the Ministry of Labour is in the area, and we run away. The inspector caught me once – and my employer gave him a guarantee that I wouldn’t work for him again. But as soon as the inspector had left, the employer asked me to come back to work again.’ (Boy, Irbid, family receiving only WFP vouchers)

While parents were loath to admit in the survey that their boys worked for pay, having heard messages about the importance of keeping their children in school, they were more forthcoming in our qualitative research. Parents were keenly aware of the exploitative conditions under which their sons laboured. However, most felt they simply had no choice. Meeting expenses required cobbling together every extra dinar, and parents believed – based on experience – that boys working informally are less likely to be deported than adult men doing the same sorts of jobs.

‘Sometimes the children have to work. They work in supermarkets … in construction. Even if his body isn’t strong enough – they exploit them a lot – from 8 in the morning to 12 at night. For 5 JOD for the older ones and 3 JOD for the under 18’s.’ (FGD with mothers with various assistance profiles, Irbid)

‘My children are now young men, 18 and 21 years old. They stopped going to school because they wanted to work. They worked in a vegetable store. Their father and I have had surgeries and we don’t have an iris scan. The labour committee caught them and we did everything we could to bring them back, otherwise they would have been in Syria now. Two of our relatives were caught selling vegetables in the streets and were sent directly to Syria – they also have children.’ (FGD with women)

Indeed, one of the themes that emerged in our qualitative work is that cash assistance is helping some adolescent boys and young men avoid the risk of deportation, by reducing their need to engage in informal work. One mother explained:

‘When we started receiving assistance, our life became better as my son didn’t have to work without a work permit and then get stopped by the Ministry of Labour or be sent to Azraq or to Syria … I wouldn’t have to get in such problems…’ (Woman in a male-headed household, with large extended family, receiving all three UN cash assistance)

While our quantitative work found that cash is reducing some families’ reliance on child labour (12% of parents reported they had sent their children back to school since receiving cash and another 18% reported their children were attending more regularly due to the cash support), our qualitative work found that demands for boys’ labour continued to keep them from engaging in informal education such as that provided by UNICEF’s Makani centres. One teacher explained:

‘[Adolescent boys] complain about their financial situation, and that they do not receive allowances … Sometimes they do not continue [at the Makani], they come for two or three days and then they stop because they start working with their fathers or brothers on the account of not having an eye print … Around 30% to 40% of them … It is a high percentage.’ (Informal education teacher, Zarqa)

Although child labour keeps adolescents out of school and exposes them to dangers, a handful of adolescent girls were resentful that only boys were allowed to work. One girl, from Damascus but now living in Amman, said:

‘Girls can’t just go anywhere they want. But boys have the ability to work. They are so afraid for the girls. I just feel frustrated. There is so much stigma – if you are a girl – you can’t do it! I hate this idea.’ (UNHCR and UNICEF beneficiary)
4.3. Positive effects of cash assistance programming in addressing Syrian refugees’ income and employment vulnerabilities

Our survey found that UN cash assistance are critical to household income. Survey respondents reported receiving a median of 50 JOD/month worth of WFP vouchers (mean of 71 JOD), a median of 130 JOD/month from UNHCR (mean of 132 JOD), and a median of 75 JOD/month from UNICEF (mean of 60 JOD). As noted in chapter 1, cash assistance is determined by a wide range of factors – most critically household size and number of children – and per capita incomes for households receiving cash assistance are roughly similar (ranging from 58 JOD/month to 65 JOD/month depending on benefit package). Perhaps not surprisingly, given that Syrians rely on one another – and especially family – for support, about 4% of survey respondents admitted using some of the cash to help support people not listed on their UNHCR card. Most are extended family members (73%) who need help because they do not have a breadwinner (39%) or do not receive adequate support from humanitarian agencies (33%). Just over 10% had been given support because they have health issues.

The cash assistance also seems to play a protective role for young boys, with some mothers reporting that the cash kept their sons from having to work. One said, ‘When we started receiving assistance, our life became better as my son didn’t have to work without work permit and then get stopped by the Ministry of Labour or be sent to Azraq or to Syria’ (woman, receiving all three UN cash assistance, Irbid). Fear of being caught doing informal work affects many families and contributes to psychological stresses. One respondent explained, ‘Many mothers need to send their children out to work but in my case the cash assistance is our security. My older son is out of school – he finished 8th grade in Syria but has not been to school in Jordan since we arrived four years ago. His father died in a bomb attack in Turkey one month after we arrived and then when he first tried to get work he found four days of work but the police caught him almost immediately. He escaped prison but this experience has really scarred him. Now he occasionally gets odd bits of work in a local coffee shop but when he gets home his heart is racing and he is so stressed – he says he often sprints home afraid that the police will get him’ (head of female headed-household, receiving all three UN cash assistance, Amman).

4.4. Remaining challenges for cash assistance programming in addressing Syrian refugees’ income and employment-related vulnerabilities

We found a number of remaining challenges related to employment and earnings opportunities. The first employment-related challenge identified by our research is refugees’ need for information about employment opportunities. Only half of survey respondents knew that they could now work legally in Jordan. This mismatch between legal reality and refugee knowledge is critical, because it colours what they believe is possible. Most of our respondents still spoke of work using the word ‘illegal’ and believed it to entail substantial risks. Furthermore, of the 1,058 respondents who knew they could work legally, only 228 had applied for a work permit – in large part, according to our qualitative participants, because the process is perceived to be complicated (see Box 4). (That being said, of households with a work permit, 76% said it had improved their sense of security and their social and economic conditions.)

Second, ill-health and social norms also keep refugees from applying for work permits (see Figure 26 and Table 4). Of the 830 respondents who knew they could work but had not applied for a permit, the plurality (41%) said health reasons precluded them working (Figure 26). Almost half of male respondents (47%) cited health issues as the reason for not applying, compared with 33% of women (see Table 4). Women were more likely to cite ‘other’ reasons, usually – as highlighted by our qualitative research – because work was simply not seen as acceptable for women (40% vs 20% for men).

| Table 4: Reasons for not applying for a work permit (by sex) |
|---------------------------------|----------------|
| **Women (%)** | **Men (%)** |
| Would rather work without a permit | 2 | 3 |
| Fear of getting into trouble with host community | 2 | 4 |
| Fear of losing cash | 5 | 8 |
| ‘I don’t want to work’ | 11 | 7 |
| ‘I don’t know where to go for permit’ | 7 | 9 |
| Application process is too complicated | 15 | 20 |
| Health reasons preclude work | 33 | 47 |
| Other | 40 | 20 |

A third employment-related challenge identified by our research is that employment in Jordan – even after the Jordan Compact – is felt by many refugees to be both overly restricted and highly exploitive (see Box 4). Participants in our qualitative research emphasised that

20 Percentages do not add to 100 because respondents were allowed to choose multiple responses.
no matter how well-educated they are, the jobs for which they are eligible are poorly paid and often exploitative. ‘My son is a surgeon, if only he could practice his profession,’ explained one older woman (on the waiting list for cash assistance, Zarqa). ‘When they say we’ll hire Syrians it is because they want to pay them less because they are poor …’ added another (male, working informally, not receiving cash assistance, Irbid). One woman commented that this is especially the case since they know that ‘when they don’t pay, you can’t go to the police …’ (WFP beneficiary).

Finally, our research suggests that cash assistance may disincentivise work. As can be seen in Figure 27 below, those receiving cash are only about half as likely to be self-employed as those not receiving cash. They are also considerably less likely to be earning wages from a salaried job. This is true regardless of what type of cash assistance households are receiving. For example, while 23% of those not receiving UNHCR cash report earning a wage or being self-employed, only 11% of those receiving UNHCR cash are self-employed and only 14% earn wages.

Further exploration of this linkage is necessary. One possible explanation is that households receiving cash assistance are the most vulnerable and have less able bodied workers. Households receiving cash may also be less likely to report earned income, because they are afraid they might lose access to cash assistance. Another
possibility is that households receiving cash are less likely to have earned income because programming is working as intended and children are less likely to be engaged in child labour. A fourth possibility – which seems unlikely given that even households receiving full cash assistance remain very poor – is that cash is substituting for adult labour.21

Box 4: Difficulties facing Syrian refugees in obtaining work permits

Our qualitative research uncovered a plethora of problems with the work permit application process. We heard numerous stories about how hard it is for Syrians to find a Jordanian employer to support their application and the potential costs of permit renewal. As one man, now working legally in an unskilled job despite good qualifications and experience, said: ‘It is rare that someone helps. Most of the time we just swallow the knife and feel it getting stuck in our throats.’ A woman, whose husband is working informally because ‘he can’t find a guarantor who will help him get a work permit’, noted that it is particularly hard for more introverted men to secure formal jobs, because they are simply ‘not sociable enough’ – i.e. they lack social skills to approach employers (female, receiving all three UN cash assistance, Amman).

Qualitative research participants were also scathing about the types of jobs for which work permits were available. A community leader in Amman retorted, ‘The work permits – don’t make me laugh – they are not enough.’ Another man, from Irbid, said, ‘The options are very limited – and almost all for unskilled work. You can’t be a manager, for example.’ As a result, he explained, ‘This is why some take high risks to get smuggled to Europe.’ A woman added, ‘I used to have a hair salon – I was on top of my work – and really good at it. The work permits here are only for agriculture work, so very limited. I went to see a lawyer … I wanted to get a work permit and to be in hair salon … he told me that this profession is not allowed. If you want a work permit then you will have to pay at least $5,000.’22 She continued, explaining that she had tried to simply work without a permit: ‘I tried to work in a salon for 190 JOD per month – very bad conditions, no holidays and long working hours. Then Ministry of Labour came to the salon and said if there are Syrians, you should pay a fine to the owner. So after three months I had to leave’ (FGD, female-headed household, Irbid). Other respondents told us that even people with permits were sometimes targeted for deportation. One said, ‘Sometimes an officer just feels like returning them to Syria, especially when they are single young men. It is arbitrary … even if they have a work permit’ (female-headed household, receiving all three UN cash assistance, Zarqa).

Despite limited access to more interesting and more lucrative work, many research participants told us they were glad to have any work at all. Not only did they need the income, but they needed the sense of normalcy that work provides. ‘In Syria, my work was my identity,’ explained one woman (FGD, female-headed household, Irbid).

21 As noted subsequently in chapter 9, on health, we thought this might be due to chronically ill persons being over-represented among cash beneficiaries – and those households being relatively more labour-constrained due to a need to provide care. But this was not the case; not only do beneficiary groups have similar levels of chronic illness, but households with a chronically ill person are more likely to report income from work (22% vs 16%).

22 This is the price of a business permit, not a work permit.
Chapter summary

Refugees’ reported engagement with work is very low. While this may partly reflect under-reporting, it may also be due to lack of information and the complicated and costly process involved in applying for a work permit. Cash does not appear to support paid work.

Employment-related vulnerabilities:

- While our qualitative research suggests considerable under-reporting, reported income from work is fairly rare – only 18% of households say they have had income from wages in the past year.
- Reported income from self-employment is also fairly rare – only 15%.
- Those in Amman are especially likely to have earned income, while those in Irbid very unlikely to have any sort of work.
- Fathers are far more likely to be the main wage earner than mothers or children.
- When women work, it is mostly home-based self-employment (or domestic service), due to restrictive gendered social norms.
- Child labour is a fact of life for many (if not most) adolescent boys. Many boys work long hours under dangerous conditions for low pay.
- Girls rarely work, again because of restrictive gendered norms. We did hear that younger girls are sometimes sent to beg.
- Despite the work permit provisions in the 2016 Jordan Compact, only half of respondents knew they could get a work permit. Of those that did know, only 20% had applied. Those who had not applied found the process overwhelming, were too ill to work, or – in the case of women – reported that work outside the home was not socially acceptable.
- Refugees in FGDs told us that Syrians remain locked out of the most desirable jobs and are often exploited at work.

Effects of cash assistance:

- We found no correlation between receiving cash assistance and greater access to employment opportunities.
- Those receiving cash are less likely to work for wages or to be self-employed than those not receiving cash – perhaps because under-reporting out of fear of losing cash assistance, and perhaps because cash is helping boys avoid child labour. This critical dimension require further research to understand complex dynamics linked with cash and employment opportunities.
5. The effects of cash assistance programming on Syrian refugees’ coping mechanisms

5.1. Chapter aims

To date, social protection programming has largely addressed economic shocks and chronic poverty (Holmes and Jones, 2009; Molyneux et al., 2016). Evidence from the literature suggests that by mitigating shocks, cash assistance renders people less likely to resort to negative coping strategies such as food restrictions, distress sale of assets, and child labour or child marriage. This has led aid agencies and donors to increasingly accept that cash and vouchers can be appropriate and effective mechanisms for addressing a wide variety of needs across different contexts (DFID, 2011). Within humanitarian assistance, cash transfers tend to be used to enable households affected by conflict and disaster to meet their basic needs (Bailey, 2013).

This chapter first outlines the kinds of coping strategies that Syrian refugees are adopting. It then looks at the positive effects of cash assistance on household coping strategies and general well-being, and explores the remaining challenges in using cash assistance to minimise negative coping strategies.

5.2. Syrian refugees’ coping mechanisms

Unsurprisingly, given their depth of poverty and the duration of the war, our research found that Syrian refugee households in Jordan deploy a wide range of coping strategies that are likely to further jeopardise their long-term well-being but help them to survive day-to-day. As shown in Figure 28, most respondents reported eating less-expensive food, reducing accommodation costs and eating less food. A sizeable minority reported that they were thinking about immigration (e.g. to North America or Europe), doing without needed health care, or asking for money.

Very few survey respondents, however, admitted to sending their children to work (1%), marrying their under-age daughters (3%) or pulling their children out of school (5%) due to economic hardship. We make two observations about these low figures. First, our qualitative work suggests considerable under-reporting; participants who, at the beginning of an interview, told us that their children did not work admitted an hour later (after developing a measure of trust with the interviewer) that their sons did have some sort of paid work. Indeed, noting that similar survey questions – which ought to return similar answers – instead returned highly variable responses, we suspect that participants’ accuracy is quite limited. For example, when asked what coping strategies families had used to meet their food needs in the past month (rather than economic hardship), 5% said they had sent their boys to work and 8% had married their daughters. Second, we wish to highlight that our data was collected in the winter. Because questions asked about coping strategies deployed in the past month, and there is less agricultural and construction work available in the winter, the timing of our research may well have affected the responses. This is doubly true of child marriage, as the vast majority of Middle Eastern marriages take place in the summer – the official ‘marriage season’.

Many families have been in Jordan so long that they have exhausted ‘less dangerous’ coping strategies. They have spent their cash savings and sold their jewellery (some even the gold in their teeth). Now, even if they have assets back in Syria, they have no way to get to them. An older woman, the head of a female-headed household in Irbid, explained: ‘But how to get it? The neighbourhood is demolished, nothing is there anymore. You can’t officially send for it – international companies don’t operate there any more. Previously we drove buses to Syria and the bus drivers got commission on each trip to bring back things for us. They were well-trusted people – but that no longer works this way.’

Our qualitative research also uncovered a handful of stories about ‘positive’ coping mechanisms. For example,
one divorced mother opened a hair salon to help her meet her family’s needs. She explained, ‘I studied as a beautician in Syria and so I’ve set up my own small salon at home. Palestinian and Jordanian ladies come – for short hair it is 5 JOD, for longer hair it is 10 JOD. I have a table and mirror and I live in a popular area. My clients have come from word of mouth. Neighbours tell each other. I use my smile and nice words and so my business has grown … In Syria I had my own salon – I would love to do this here but life is so expensive here – I can’t think of this for now. But with my business I can now keep my children in school, pay for their transportation, give them a small amount of pocket money for snacks at school like the other children’ (WFP female-headed household beneficiary, Amman).

Other refugees told us about how more established households help newcomers, contributing the little they have to help those less fortunate than themselves, and about how Jordanians step forward to help refugees get work permits (see Box 5). One explained, ‘If a newcomer comes in the community, he has nothing. Each Syrian gives a mattress, any extra one you have, you give, if you have something, that is.’

The overwhelming theme that emerged from our qualitative research, however, is that growing desperation is pushing people into ever more dangerous activities. A focus group discussion with community leaders in Irbid, for example, highlighted that children (especially adolescent boys) are increasingly sent out to beg. One told us, ‘Recently I observed a man who had just sent his daughter to beg on the street. The father was watching her to check how much money she was getting when someone did donate some coins. The father was chatting with another father whose child was also involved in begging. However, when the fathers noticed the children not begging but playing, one father started to chase them and hit them quite publicly.’ He called for more concerted and coordinated efforts to protect children: ‘CBOs [community-based organisations] don’t have the capacities to adequately deal with such cases and the professional expertise – so I’ve repeatedly seen children return back to the streets to beg … What it is going to
Box 5: Social capital as a route to a work permit

Mohammed works as a cleaner in a supermarket; his employer (a friend) employed him formally – and Mohammed now has a valid work permit. In Syria, he was a professional house painter and was able to support his family well. But he told us that the Ministry of Labour does not allow Syrians to work as painters in Jordan because ‘they are afraid of competition by Syrians. We have skills they don’t have.’ Fortunately for him, a close friend with Jordanian citizenship was willing to undertake the complex process required in order for him to find formal (if poorly paid) work as a janitor.

Mohammed met his friend, a Palestinian, years ago, when his family first arrived in Jordan, because he and his friend have many similar interests and hobbies. Only last year did he turn to his friend for help. Mohammed explained that for several years his family had scraped by, with him taking informal painting jobs. Normally, he explained, the police ignored older workers like himself, ‘out of respect’, but not this time. Mohammed found himself at risk of being sent to Azraq refugee camp, which would have left his family with no source of support at all.

Mohammed’s friend agreed to step in and help him keep his family together, by becoming Mohammed’s employer. He applied for a one-year permit for Mohammed to clean his store – something he was only eligible to do because he already employed three native-born Jordanians. ‘Three for the price of one Syrian’ – that is the informal rule, he explained.

When asked directly about the effects of the London Compact, Mohammed had mixed opinions. On the one hand, he felt it had made ‘a big change. The applications used to cost 400 JOD – and now, in theory, they are free’. On the other hand, ‘options are still very limited – and almost all work permits are for unskilled work. A Syrian can’t be a manager, for example.’ He added that because formal work is rare – and informal work totally without protections – abuse was common. He told us that before he got his work permit, he ‘painted entire houses for 10-20 JOD and often did not get paid’. He says he suffered in silence: ‘It is not like we could call the police. We just swallowed the knife and every time we swallowed, it pained us again.’

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We also heard stories about risky ‘informal’ work, which is very common given that refugees believe it is difficult to get a formal job with a contract that pays a liveable salary (above the minimum wage of 220 JOD/month) (see also chapter 4, on employment). One man in his forties, working without a permit in Irbid, who does not receive any cash assistance, told us: ‘In the winter I get paid 10 JOD per day pressing concrete together. It was not an easy decision to leave the camp to work informally as there is the risk [when doing this kind of work] of working for an employer with whom you don’t get along. And there is no one you can rely on when it goes wrong.’

He told us that he had discovered this the hard way, when his employer refused to pay him. Another man, who has four young children and had completed three years of university in Syria before he was forced to flee, told us that he was detained by the authorities for working without a permit: ‘I was seized and they moved me to Azraq. Zaatari is like a 5-star hotel compared to Azraq – and I endured it [living in Azraq] for 100 days. Then I was smuggled out of the camp and started working informally again.’

Another man living in an informal tented settlement, whose family are registered but receiving only WFP food vouchers, explained that they were trapped because they were effectively bonded labourers. He said, ‘We work for this Pakistani man here. We can stay on his land...’

| Box 5: Social capital as a route to a work permit |

| Mohammed works as a cleaner in a supermarket; his employer (a friend) employed him formally – and Mohammed now has a valid work permit. In Syria, he was a professional house painter and was able to support his family well. But he told us that the Ministry of Labour does not allow Syrians to work as painters in Jordan because ‘they are afraid of competition by Syrians. We have skills they don’t have.’ Fortunately for him, a close friend with Jordanian citizenship was willing to undertake the complex process required in order for him to find formal (if poorly paid) work as a janitor. |

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and he provides us with water and electricity. We make around 100 JOD per month and 40 JOD goes to rent of the land that we have pitched our tents on. We all have work permits but it does not allow us to go to any other employer – the licence is only for the work on this farm. And that is why in the low season we borrow money from him.' He added that supervision is strict: ‘There is a man that registers the hours that you work – you just come sign and sign out. When you don’t do your work properly he comes and kicks you out.’

5.3. Positive effects of cash assistance on Syrian refugees’ coping mechanisms

Research participants were clear that cash was helping them to cope without resorting to more dangerous strategies. About half, for example, said that because of the cash assistance, they were no longer forced to choose less desirable food (52%), reduce food intake (52%), or seek less expensive housing (50%) (see Figure 29).

While it is difficult to make direct comparisons of coping strategies over time because the UNHCR baseline (2014) and ODI survey questions were framed slightly differently, time series data for matching questions also show the positive effects of cash (see Figure 30, which presents data from the first UNHCR home visit baseline (2014), the second visit (2015), and the ODI sample (2017)). For example, whereas about 25% of households said they had pulled their children out of school in order to cope with economic hardship at the baseline, only 5% of those in ODI’s sample said the same.

When asked what they would do if they lost access to the cash assistance, nearly 40% said they had no options at all, 27% said they would move in with a host family, and 25% admitted they would probably have to go back to Syria, no matter what dangers they faced (see Figure 31). ‘If they stop giving me this aid I would take my family and go back [to Syria]’ (boy, proxy head of household, lives with widowed mother and sister in Zarqa).

Figure 29: Percentage of respondents able to avoid or reduce negative coping strategies as a result of receiving cash assistance
5.4. Remaining challenges facing cash assistance programming in addressing Syrian refugees’ negative coping mechanisms

Although cash assistance makes some important differences to families’ coping strategies, cash cannot meet all of the needs families face and cannot resolve the underlying factors that make them vulnerable – even for households that receive all three UN cash assistance. Larger families and families burdened with additional costs due to illness or disability still struggle to cope and have to resort to negative coping mechanisms. Community leaders also noted that some negative coping strategies reflect cultural influences – including child labour or child marriage – but that they looked to UNHCR to use their positioning and credibility as an international actor and (where possible) incentivise changes in discriminatory gendered norms and practices that put children on a trajectory that continues to make them vulnerable and prevents them developing their capabilities.
Chapter summary

While most families continue to rely on a variety of coping mechanisms to meet their daily needs, respondents reported that cash has helped them considerably. However, most families need larger assistance packages to maximise its effect.

Coping mechanism vulnerabilities:

- Families are relying on a wide variety of coping strategies to meet their basic needs; most reported restricting food and cutting back on accommodation costs.
- Few survey respondents admitted to deploying the most negative coping mechanisms, such as sending boys to work or marrying under-age daughters. This appears to be related to under-reporting and the time of year in which our data were collected.
- Our qualitative research found that most families are taking on dangerous debt loads and many rely on the informal labour of boys working without permits.
- Focus group participants also reported that it is common for adult men to engage in ‘informal’ work (work without a permit), which they believe leaves them vulnerable to imprisonment and deportation back to Syria.

Effects of cash assistance:

- Respondents in both our quantitative and qualitative research reported that cash assistance is helping them to avoid negative coping strategies – mostly by helping them eat better and pay the rent.
- Comparing UNHCR baseline data with the recent ODI sample, cash appears to help families avoid taking on more debt and pulling children out of school for financial reasons.
6. The effects of cash assistance programming on Syrian refugees’ shelter and living conditions

6.1. Chapter aims

Shelter is critical to human survival, and in humanitarian settings, cash assistance programmes typically incorporate securing shelter alongside other survival needs. This chapter explores the shelter-related vulnerabilities of Syrian refugees living in Jordan, including access to, quality and affordability of utilities and assets. It then moves on to explore the effects of cash assistance, highlighting the vital role it plays for many families and the remaining challenges.

6.2. Housing-related vulnerabilities

Our survey found that while only a small proportion (less than 5%) of Syrian refugees in Jordan were living in tents or caravans, in unhealthy and unsafe conditions (see Box 6), housing conditions for many others remain poor. Most families are paying a very large proportion of their monthly income for rent – for accommodation that is too small and often in bad repair. Despite this, most families understand the rental market well enough to report being satisfied with their accommodation, no matter how bad it is.

About 60% of the households we surveyed were living in rented apartments and about 34% in rented houses. Approximately two-thirds were living in urban areas and had been in the same dwelling for at least a year. The average monthly rent was 135 JOD (vs a median of 130 JOD), though rates were higher in urban areas compared with rural areas (140 JOD vs 125 JOD) and higher in Amman compared with Zarqa (150 JOD vs 115 JOD). Rental prices have increased sharply since 2011 due to high demand. For example, rents in Mafraq have climbed from 70-150 JOD before the crisis to 200-300 ($282-$424) in 2016 (Ministry of Public Works and Housing, 2016). As noted in chapter 3, housing costs account for 69% of median household income – a figure so high that over 10% of survey respondents reported having been

Box 6: The extreme deprivation of informal settlements

Refugees living in informal settlements – many of whom are not receiving any cash assistance – face unsafe and unhealthy conditions. Most came from deprived areas of Syria so had few economic resources to fall back on, few skills and little education. These settlements have also attracted those searching for informal seasonal farm work (e.g. REACH, 2014).

One settlement we visited in Amman consisted of just a dozen tents – 10 for families, one that served as a small school room, and one (slightly larger) for sheep. We interviewed three Bedouin brothers, all of whom lived there permanently with their wives and families and worked seasonally picking tomatoes for half a dinar an hour on the landlord’s farm.

Our researchers could easily see that living conditions were challenging. While the tents had electricity, they lacked running water and toilets and pests abounded (especially flies and snakes). Conditions were far from what the brothers and their families were used to in Syria. ‘We lived in a small village in a house. We travelled to Jordan at times to pick tomatoes or cucumbers and at home we had goats and sheep for their milk. We made cheese,’ explained one of the brothers.

Another added that now, even if the landlord gives them access to a well, the water is ‘dirty’. One of the women told us, ‘He has one of those big water storage tanks that we can use. But the water has a green colour and it smells. It is not clean.’

The families’ economic situation is such that they are unable to afford any other living arrangements. While they tried to get enough extra cash to rent an apartment in a rural village, for 70 JOD/month – even selling some of their food vouchers to do so – they came back to the tents after a few months because they could no longer forgo regular meals.
evicted at least once because they were unable to pay their rent. Those in Amman, where rents are the highest, were far more likely to have been evicted due to non-payment than those in Irbid (15% vs 5%) – though those in Irbid were far more likely to have moved to a cheaper house than those in Amman (44% vs 26%).

High demand for housing has also fuelled the subdivision of already small spaces and the conversion of outbuildings into rental units. So although rents are high, space is tight. Our survey found that most refugee households have only one bedroom (median of 1 and mean of 1.5) and that only 17% of households live in a unit with more than three rooms. Given that families are quite large (see Table 1), and that it is not uncommon for two or even three families to share a house to save money, this has resulted in a mean crowding index\(^{23}\) of 4.6 persons per sleeping room (median of 3.7 – up from 2.5 at baseline). Crowding was highest in Mafraq and Amman and (unsurprisingly, given that the largest families tend to be the poorest and the poorest families tend to receive more cash assistance), among larger households and those receiving all three UN cash assistance. Indeed, as Figure 32 shows, families eligible for full-value as opposed to half-value WFP vouchers (receipt of which is contingent on a narrower definition of poverty) are the most overcrowded. Overcrowding has also forced families to share toilets and resulted in many households experiencing frequent problems with pests, though the situation has improved markedly since baseline (20% sharing toilets now, down from 30%; and 28% experiencing pest problems, down from 79%).\(^{24}\) Overall, our qualitative findings suggest that women and girls suffer the most because they are more likely to be homebound, whereas men and boys had more access to outside spaces.

Our survey echoed the findings of a UNHCR study (2015a), which showed that refugee households’ access to utilities was varied and that many faced supply constraints – albeit constraints that were gradually easing as infrastructure has been improved and families have moved out of tents and into more permanent housing. In terms of drinking water, for example, 44% of households were consuming bottled water and 34% were on the public network (the remainder used private vendors). About 12% reported they had run out of water at least once in the past month (down from 20% at baseline) (median was 2), largely due to inadequate storage tanks (37%) or because the landlord/water authority cut the supply (22%) – situations that are likely to spike in the summer rather than winter (which is when we collected data). Access to sewage disposal was similarly problematic: only 76% of surveyed households were connected to the public sewer (up from 69% at baseline), with the rest experiencing frequent overflows of cesspits (median of 3 times in the past year). However, access to electricity was high (96%) and regular (98%), with most households also having access to TV, refrigeration, mobile phones and washing machines (see Box 7).

**Figure 32: Median crowding index, by fine-grained UN benefit package**

<table>
<thead>
<tr>
<th>Package</th>
<th>Median Crowding Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 UN-full</td>
<td>4</td>
</tr>
<tr>
<td>3 UN-half</td>
<td>3</td>
</tr>
<tr>
<td>2 UN-full</td>
<td>4</td>
</tr>
<tr>
<td>2 UN-half</td>
<td>3</td>
</tr>
<tr>
<td>WFP-full</td>
<td>3.5</td>
</tr>
<tr>
<td>WFP-half</td>
<td>3</td>
</tr>
</tbody>
</table>

23 The number of household members residing in a dwelling divided by the number of sleeping rooms (excluding the kitchen and living room).

24 In the case of pests, this may be because we conducted our research during winter.
As might be expected, most survey respondents reported that their household’s living conditions were bad (see Figure 35) (only 2% reported them as good). Our qualitative research echoed these findings. One female respondent, benefiting from WFP food vouchers only, reported, ‘Our house … is in a very bad condition, the windows and the doors are broken … and when it rains, water is all over the place’. Others told us that their housing conditions had made them ill, ‘We suffered in this house because of the humidity and I developed asthma and allergy’ (female in male-headed household, Irbid) and that women bore a higher cost for bad housing than men because they were largely confined to the home (female-headed households).

What is perhaps most surprising is not that rent is high or that families are overcrowded, or indeed that housing conditions are bad – all of which have been well-documented by previous research – but that despite these problems, most households (62%) understand constraints well enough to report being ‘satisfied’ with their housing (see Figure 35). Satisfaction rates were higher in Irbid compared with Amman (80% vs 44%) and among those living in rural areas.

Despite being satisfied with their living conditions, most survey respondents indicated that with adequate resourcing, they would prefer to move to a better house with better conditions. Our research found that while 64% of households had been living in their current location for at least a year, 78% would move if they could afford to (rising to 88% in Amman). While some families had been able to move to better (23%) or larger (7%) housing, our survey found that when most people move, they do so to lower their rent (35%) – not surprising given the financial constraints they face (see Box 8). We also found that families receiving fewer and smaller cash assistance were

**Box 8: ‘Like animals in the basement’**

Mohammed and his family lived for four years in the basement of his Jordanian landlord’s house. High humidity meant their home smelt like ‘disease’, clinging to his skin and clothing and making him constantly ashamed of how poor his family had become. Now he lives in a new house. While he has resorted to coping strategies unimaginable a few short years ago, he is happy that his new house has walls covered in white paint rather than mould.

When his family first came from Syria, they had some savings. Now, having used these, they have no buffer left. Mohammed has even sold the gold out of his teeth. He has allowed his wife to begin cooking for their Jordanian neighbours, at 10-14 JOD/meal. He married a daughter just to reduce expenditures.

Mohammed does not like people to know how poor his family has become. To hide this, he dresses carefully – putting on ‘my glasses and my t-shirt and a clean shirt’ every single day. ‘People that don’t know me think I am an engineer,’ he proudly continued.

The family’s new home, which Mohammed has rewired and painted bright white, is part of his presenting a different reality – not only to the outside world but to himself. While he admits that ‘When you are stranger or refugee in another country, your family is lost. Everything has gone missing,’ he likes to pretend that his life is normal.

Pretence, however, only goes so far. Although Mohammed is proud of his new home, which is furnished with beautiful new furniture his landlord loaned him in exchange for his electrical and painting work, Mohammed admitted ‘inside we are dead’.

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25 We do not have expenditure data on durable assets.
most likely to want to move, and that very few families used their cash assistance to improve their homes as there were too many other demands on their budgets.

6.3. Positive effects of cash assistance on shelter-related vulnerabilities

Our research found that cash assistance is improving Syrian refugees’ access to housing – not only helping them afford rent and utilities (see Figure 34) but also helping them move to better housing (Figure 35), which is an indicator of household satisfaction with housing. The end result is that compared to households receiving only WFP vouchers, those receiving cash assistance are less likely to report their housing conditions as ‘bad’ and less likely to report being ‘unsatisfied’ with their housing conditions. Indeed, when asked to identify how the cash assistance had contributed most to their family’s well-being, 26% of survey respondents said ‘better housing’.

The difference the cash assistance made to families emerged strongly in our qualitative research as well. Generally (and particularly among female-headed households), the cash support was felt to have protected people from becoming homeless or living on the street. One respondent – a woman who reported having been tortured back in Syria and now lived with her only daughter in the north of Jordan – explained that with the rental market tight, rent always came first: ‘Of course, we make the housing rent payment first, and we use the rest of the money for the other house expenditures and debt.’ Another added that without cash, many households had no way to meet their rent payments: ‘Refugees wouldn’t be able to make their housing rent payments without cash assistance as they secure their living expenses from these monthly allotments. They rely

Figure 34: Percentage of families unable to afford rent and utilities in full or at all, by broad UN benefit package

![Figure 34: Percentage of families unable to afford rent and utilities in full or at all, by broad UN benefit package](image)

Figure 35: Percentage of households reporting their housing as bad and percentage not satisfied with housing, by broad UN benefit package

![Figure 35: Percentage of households reporting their housing as bad and percentage not satisfied with housing, by broad UN benefit package](image)
on this assistance for food and housing’ (male respondent, non-registered, non-beneficiary). Indeed, a third respondent explained that he/she would be willing to forgo food just to know that the rent was paid: ‘I can pay my rent even if I live off bread and water’ (FGD with Syrian community leaders, primarily activists and those volunteering with civil society organisations (CSOs)). One very worrying finding was that, according to some participants in our qualitative research, people without cash are increasingly forced to consider returning to Syria, despite the ongoing violence (see Box 9).

### Chapter summary

Shelter is the single most important basic need faced by Syrian refugees. Cash assistance plays a critical role in enabling the most vulnerable families to meet rental payments but the level of payments is not sufficient for them to have decent living conditions or to meet other basic needs such as food.

#### Key shelter-related vulnerabilities:

- Rent is the single largest expense facing refugee households.
- Nearly all Syrian refugees live in rented apartments or houses, but supply constraints (and some opportunism on the part of host communities), as noted in key informant interviews, have driven up rents and led to the subdivision of already small spaces, especially in urban areas.
- Housing conditions in urban host communities are very overcrowded and of poor quality. Access to WASH remains limited for a large number of refugee households.
- The shelter conditions of refugees living in informal tented settlements are extremely poor and dangerously unhygienic.
- Women, teenage girls and people with physical disabilities bear the highest burden in terms of poor living conditions, principally because they tend to be confined to the home (or tent, in the case of those living in informal tented settlements).

#### Effects of cash assistance:

- Cash assistance plays a critical role in supporting households’ shelter needs.
- Cash not only allows families to pay for housing and utilities, it can enable them to move into better housing.
- Households receiving all three UN cash assistance are less likely to report their housing as bad, and more likely to be satisfied with it.

### 6.4. Remaining challenges facing cash assistance programming in addressing shelter-related vulnerabilities

Cash assistance programming can help families to afford the housing that is available to them, but it is fundamentally unable to address the broader supply-side constraints that have driven up costs, driven down quality and led to severe overcrowding. Furthermore, given the level of the cash assistance, even households benefiting from all three programmes are often unable to meet all of their housing-related needs. For example, more than half of survey respondents reported that even with receiving cash support, they were unable to pay rent (55%) or buy WASH or non-food items (57%). ‘I get 140 from the eyepoint ID, and my rent is 125, so what remains for me?’ asked one participant in our qualitative research (male UNHCR and WFP beneficiary with a large family, Mafraq). ‘I had rented a house for 170 JOD, we shared the house with my son’s family … so we were left with 30 JOD’ explained another (male beneficiary, all 3 UN cash assistance, extended family). Some FGD participants admitted that when they were unable to borrow from family or friends – or to pick up enough informal work to make payments – they sometimes resorted to selling WFP vouchers in order to pay their rent. ‘If I need anything, I sell some of the coupons to complete the amount of money I need to pay rent’, one woman told us (UNHCR and WFP beneficiary, Zarqa).

### Box 9: Cash for rent

A sibling family living in very crowded circumstances in Amman explained that while their situation was very challenging, it was much better than that of their sister, whose husband – despite having a work permit – had been unable to find regular work, which had left his young family increasingly desperate.

The interviewees said: ‘They have no “Iris” [no cash assistance] – only food vouchers. Her situation is much worse as she has to keep thinking about the rent and how to secure 130-140 JOD per month. She has called UNHCR and they have told her she is on the waiting list, but she is growing desperate. If her family doesn’t get help soon, they say they will have no choice but to return to Syria. The only good thing that we have here is the money for the rent of the house – UNHCR assistance can cover the rent.’
7. The effects of cash assistance on Syrian refugees’ food consumption and nutrition-related vulnerabilities

7.1. Chapter aims
Reducing hunger and promoting food security has long been an objective of national social protection policies as well as international humanitarian responses, given the consequences for children’s health and cognitive capacities (Sanfilippo et al., 2012). Cash assistance is increasingly used in emergency situations to address food insecurity and malnutrition, helping affected families meet their immediate survival needs (Bailey and Harvey, 2015).

This chapter explores our findings on Syrian refugees’ vulnerabilities around food security. They tell a similar story to the negative picture of refugees’ housing-related vulnerabilities (chapter 6). We then discuss the positive effects of cash assistance on household food security, and highlight the remaining challenges in addressing refugees’ food and nutrition-related vulnerabilities.

7.2. Syrian refugees’ vulnerabilities related to food security
Our research found that Syrian refugees living in Jordan struggle with food security. Over half of the survey respondents (55%) reported having experienced a food shortage in the past month. Indeed, the average number of food shortage incidences in the past month was 8.5 (median 5). Larger households, those headed by women and those in Amman were especially likely to experience food shortages. In addition, 70% of respondents admitted to skipping at least one meal in the past week due to lack of money and 60% reported having reduced either the frequency or the size of meals they consume. When asked how many meals their family had consumed yesterday, 73% of respondents said two and 10% said only one. Over 60% of adults had restricted their own food intake so that children could eat more.

We also found that refugee families are compromising on the type and quality of foodstuffs they consume. For example, 52% of respondents indicated that they eat different foods now because they cannot afford the foods they are accustomed to. Adults and school-aged children – rather than preschool children and the elderly – were most likely to have changed their diets. Again, those living in Amman were especially vulnerable, presumably because the cost of living is higher. Families had primarily given up proteins in order to stretch their food budgets further: in the past week, 96% of respondents had not consumed fish, 37% had not consumed meat, 24% had not consumed pulses or nuts and seeds, and 18% had not consumed dairy. These figures are markedly worse than those recorded at baseline – 85%, 17%, 2% and 2% respectively – probably due to the fact that baseline data were largely collected before the value of WFP vouchers was slashed. As one father noted, ‘One could manage with a small amount of food … we don’t have to eat meat every 10 days … we can have it every 2 months’ (male-headed household, extended family, Mafraq). In general, the foods consumed

26 While WFP in Jordan launched a food e-voucher programme to enable vulnerable Syrian refugees living in host communities to purchase essential food items – and all the respondents to our quantitative survey are also part of this programme – the focus of this section is on the cash assistance provided by UNHCR and UNICEF rather than on the WFP programme. That said, a key finding of our work is that full-value WFP vouchers are critical to household food security and have considerable effects on households’ economic bottom line.
most regularly were those that are comparatively less nutrient-dense (as opposed to calorie-dense) – i.e. cereals (which 63% of respondents had eaten every day in the past week), sweets (44%) and oils and fats (43%).

It is important to note (see Box 10) that based on our qualitative research findings, the food insecurity and nutritional vulnerabilities faced by Syrian refugee families in the informal tented settlements appear to be more acute than those in urban settings. This needs greater analytical and programmatic attention going forward.

Despite reducing the quantity and quality of their food, refugee families were still often forced to resort to negative coping strategies to meet their basic food needs. In the past month alone, 39% of survey respondents said they had spent savings, 22% admitted to reducing essential non-food expenditures (such as health and education), and 5% had asked boys to leave school to find work (see Figure 36).

### 7.3. Positive effects of cash assistance in addressing food and nutrition-related vulnerabilities facing Syrian refugees

Our research found that cash assistance is helping refugee families eat more food, and higher-quality (protein-rich) food, on a more regular basis – a finding most respondents agreed with. Over half reported that the most important effect of the cash on their household’s well-being was ‘eating better’. A mother of four, who was widowed one month after fleeing to Jordan when her husband was killed in a bomb explosion in Turkey, explained: *The cash assistance is very important – without the cash and WFP*

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27 Note that 90% of bread sold in Jordan is highly subsidised and very inexpensive.
vouchers ... without this I can't do anything. Having this regular support and the security that I can provide food for my family gives me hope.' She eloquently continued: ‘Receiving the cash assistance is like kissing your hand that God is giving the assistance.’

Figure 37 shows that households receiving cash – and UNICEF beneficiaries in particular – were much less likely to have experienced a food shortage in the past month. While 60% of those receiving no cash and only half-value WFP vouchers ran out of food, 51% of those receiving all three UN cash assistance ran short. We make two observations regarding the apparent non-effect of UNHCR cash on food shortages. First, there are relatively fewer households in the UNHCR-only pool (most cash assistance beneficiaries receive support from UNICEF and UNHCR). This makes it highly likely that our findings are simply ‘off’ because of the size and shape of our sample. Second, given that the value of WFP vouchers was halved in 2015 due to funding shortfalls, and that households receiving WFP vouchers and UNHCR cash are more vulnerable than those receiving vouchers alone, we suspect that UNHCR recipients are simply no longer able to make ends meet. This underscores a point we will return to later: that full cash assistance are critical to (yet insufficient to ensure) the survival of the most vulnerable households (see Box 11).

UNICEF cash beneficiaries are also less likely to forgo the most nutrient-dense foods, possibly because such foods are more expensive in these settings (see Figure 38 and Annex 4). For example, while 45% of those receiving no cash and only half-value vouchers ate no meat in the past week, only 27% of those receiving both UNICEF and UNHCR cash and full-value vouchers had not eaten meat. Effects were similar for eggs (17% vs 10%), milk (21% vs 14%) and fats (10% vs 4%). These findings were echoed by our qualitative research. Two sisters from Zarqa, benefiting from the UNHCR cash assistance programme, told us that with the
cash, ‘now at times we can purchase meat and sweets like we do before’. A mother from Amman, living with her husband and four children in a two-room house, who receives UNICEF cash support, added: ‘Our children can now have a small BBQ in the summer – we can offer them that. The effect on our children is huge … At the beginning I was very depressed and keep crying about the whole situation but now it feels like a habit. It is really much better than before.’

Another mother added that the effects of these small treats the cash allows them to buy is more than nutritional. She explained that for her, weekly tea parties with her teenage daughter – which they ‘could simply not afford’ before they began receiving cash – ‘makes me feel as if we are back in Syria again’. She continued, ‘We drink tea together and eat some sweets with it. My daughter and I have a strong relationship. We discuss everything together.’

Another mother, benefiting from all three UN cash assistance, also stressed the importance of the cash assistance to her family’s food security and especially to her children’s broader well-being: ‘At times we can now buy food and snacks for our children. This we could not do before. It makes us happy to see a smile on their faces … Before, we had debts from different people and our son had to work to help us get food. We received some food items from local charities – for example, spaghetti and other food items. And we used the WFP food coupons, but it was never enough.’

Effects of the additional UNICEF cash in particular are again evident on households’ food consumption scores (see Figure 39). UNICEF beneficiary households, which tend to be the largest and most vulnerable because they have children, are more likely to have ‘acceptable’ food scores than households receiving only WFP vouchers or those receiving WFP vouchers and UNHCR cash.

Cash assistance is also helping families meet their needs for drinking water. Figure 40 shows that those receiving cash were more likely to be able to afford drinking water, and findings were statistically significant.

Effects of cash are also evident in the fact that many beneficiary families are not having to resort to negative coping strategies. Figure 41 highlights that over the course of the past week, those receiving UNICEF cash in particular were less likely to have relied on borrowed or

![Figure 38: Percentage of households not eating specific food item at all in past week (by fine-grained UN benefit package)](image1)

![Figure 39: Percentage of households with an ‘acceptable’ score on the food consumption index (by fine-grained UN benefit package)](image2)
Figure 40: Percentage of households who had difficulty paying for drinking water (by broad UN benefit package)

Figure 41: Number of times in past week strategy deployed to meet food needs (by fine-grained UN benefit package)
cheaper food or to have reduced meal frequency or portion size. As a grandmother who used to receive UNICEF cash assistance (before her husband, who was the nominated beneficiary, died) explained, ‘There is a big difference with cash assistance – between now and then. With the cash we could buy whatever we wanted. We could cover any food needs. But now it is very difficult for us.’

Cash assistance also has an effect on families’ economic well-being (see Figure 42). Over the past month, households receiving cash were less likely to have reduced non-food expenditure, borrowed or spent savings. For example, only 19% of those receiving all three UN cash assistance (UNICEF and UNHCR cash and full-value WFP vouchers) had been forced to reduce non-food expenditures, compared to 25% of those receiving no cash and half-value WFP vouchers. Overall, refugee households’ preferred option for coping with food insecurity is to borrow money to cover additional food purchases.

Figure 42: Percentage of households deploying strategy in last month to meet food needs (by fine-grained UN benefit package)

Figure 43: Percentage of households experiencing a food shortage in the past month (by fine-grained UN benefit package)
7.4. Remaining challenges for cash assistance programming in addressing Syrian refugees’ food and nutrition-related vulnerabilities

Although the cash assistance is vital to help refugee households meet their food security and nutrition needs, the level of payments is far below what is needed and thus we found that vouchers were an important supplement to the cash assistance for refugee households. As one female beneficiary explained: ‘The amount of cash assistance doesn’t cover all our needs, as we also have … clothing and housing rent expenses’. As a result, most families are still unable to meet all of their food needs. For example, 53% said they could not pay in full for their drinking water and 46% reported not being able to purchase all the food they wanted to.

Families in our qualitative research admitted that because cash is short, they sometimes resorted to selling food they bought with the vouchers, or selling the vouchers themselves, to meet other more pressing needs (e.g. cleaning products or diapers).28 This reduces the utility of vouchers as a means of improving food security and nutrition. Another challenge is that prices are often higher in the shops where vouchers can be exchanged, further highlighting the value of cash over vouchers. Finally, none of the beneficiaries to whom we spoke had received any information about family and child nutrition – information that might help them optimise their food budgets.

28 The Boston Consulting Group did a cash vs food voucher study in Lebanon and Jordan and concluded that cash showed similar or better outcomes on most measures (http://documents.wfp.org/stellent/groups/public/documents/communications/wfp291346.pdf)
Chapter summary

Syrian refugees are highly food insecure and are increasingly forced to rely on cheaper, less-nutritious calories. Both UNHCR and UNICEF cash assistance and WFP vouchers are important to improving nutrition.

Key nutrition-related vulnerabilities:

- Over half of respondents experienced a food shortage in the past month alone.
- Nearly three-quarters of respondents said that they ate only two meals a day – and almost 10% said they ate only one.
- Families are eating foods that are calorie-dense rather than nutrient-dense (e.g. carbohydrates rather than proteins), because they are less expensive.

Effects of cash assistance:

- Households that receive UNHCR and UNICEF cash are less likely to experience food shortages than those that do not receive cash.
- Households that receive cash tend to eat more nutrient-dense foods than those that do not receive cash.
- Households that receive cash are better able to purchase drinking water than those that do not receive cash.
- Households that receive cash are less likely to resort to negative coping strategies to meet their food needs (e.g. purchasing cheaper food or reducing the number of meals) than those that do not receive cash.

Full-value WFP vouchers are also important to food security. Those receiving only half-value vouchers are more nutritionally vulnerable than those receiving full-value vouchers – on every metric – regardless of whether they also receive cash. The combination of cash and full-value vouchers is particularly effective.
8. The effects of cash assistance programming on Syrian refugees’ education vulnerabilities

8.1. Chapter aims
Existent evidence indicates that social protection programming generally, and cash assistance specifically, can have a positive effect on children’s school enrolment (Bastagli et al., 2016; Saavedra and Garcia, 2012) as it helps families pay for school uniforms, supplies and transport, and partially offsets the opportunity costs of children’s forgone labour. This has been found to be true regardless of whether cash assistance targets children or families (Sanfilippo et al., 2012) and even in conflict-affected contexts (e.g. Perezniesto et al., 2014).

This chapter explores the education vulnerabilities of Syrian refugee children living in Jordan and the factors that keep children out of school. It describes the effects of the cash assistance, highlighting what it has achieved and the remaining challenges to addressing refugee children’s education-related vulnerabilities.

8.2. Syrian refugees’ vulnerabilities related to education
Our quantitative survey found that despite the commitment of the Jordanian government, UN bodies and NGO partners, school-aged Syrian refugees still face considerable barriers to education, with 13% of children aged 5-18 never having been enrolled in school in Jordan (see Figure 44). Differences between groups were minimal – outside of governorate differences. For example, current enrolment rates across the six fine-grained cash assistance packages were 80% (3 UN-full), 80% (2 UN-half), 83% (2 UN), 77% (2 UN half), 77% (WFP-full only), and 78% (WFP-half only). Similarly, the rural never-enrolled rate was 13.4%, compared to 13.7% for urban children.

Figure 44: Percentage of school-aged Syrian refugee children enrolled in school in Jordan at baseline and at time of ODI sample

<table>
<thead>
<tr>
<th>Ever enrolled in school – ODI sample</th>
<th>Currently enrolled – ODI sample</th>
<th>Currently enrolled – baseline UNHCR</th>
</tr>
</thead>
<tbody>
<tr>
<td>87%</td>
<td>80%</td>
<td>75%</td>
</tr>
</tbody>
</table>

In line with two recent studies by UNICEF (2016b) and the Norwegian Refugee Council (NRC) (2016), we found current enrolment rates to be lower (80%) than ever-enrolled rates (87%) – though they were higher than at baseline (75%), probably due to the expansion of double-shift schools. Our survey found that girls are slightly more likely to be enrolled than boys (81% vs 78%), at all ages, and that younger children are more likely to be enrolled than older adolescents (see Figure 45).

Children living in Ma’afra governorate were far less likely to be enrolled than their peers in other governorates (70% vs 80% or higher) (see Figure 46). Interestingly, children living in smaller households were less likely to be enrolled than children in larger households – possibly because smaller households have fewer adult wage earners.
or because there is a threshold effect for household income. While smaller households are better-off than large households on a per capita basis, it is possible that the baseline costs of running a household disproportionately disadvantage smaller households (see Figure 47). Our qualitative research suggests that this is because few boys living in female-headed households attend school after the age of 10; they are sent to work. We also found that almost all Syrian refugee children (95%) who are enrolled in school are enrolled in a public school; fewer than 5% attend an informal education programme.

Of enrolled children, we found that 16% had missed 10 or more school days the previous semester, with children in Mafraq and Zarqa (both 20%) the most likely to be chronically absent, and children in Irbid (14%) and Amman (15%) the least likely. Urban children were more likely to have poor attendance records than rural children (17% vs 14% missed more than 10 days) and boys’ attendance was more irregular than girls’ (17% vs 15%), probably because of their work schedules. Older boys were particularly likely to be truant (see Figure 48).

Echoing the interagency Vulnerability Assessment Framework (UNHCR, 2015a), our survey found various reasons why children were out of school, including lack of spaces (38%), transportation costs (33%), and other costs (30%) (see Figure 49). Boys were more likely than girls to be out of school because they were not motivated to attend (23% vs 19%) and because their families needed them to earn money (11% vs 4%). Girls were more likely to be out of school than boys because parents perceived they would not be safe (7% vs 3%) (see also Annex 4).²⁹

Our qualitative findings highlighted that lack of spaces in public schools has been compounded by delays in the registration process, which kept many Syrian refugee children out of school.

²⁹ The number of children in our sample who went back to school after cash assistance was very small and thus we were unable to do any further analysis on this point.
children out of school for years, and means that many are now over-aged. Parents reported that registration delays were common, initially because many believed their stay in Jordan would be short so did not foresee the need to enrol children, but often because the family lacked official registration papers. While many children were ultimately able to secure places in Jordanian schools (albeit at the cost of a year or two out of school), others – especially older

30 For example, current enrolment rates across the six fine-grained cash assistance packages were 80% (3 UN-full), 80% (2 UN-half), 83% (2 UN), 77% (2 UN half), 77% (WFP-full only), and 78% (WFP-half only). Similarly, the rural never-enrolled rate was 13.4%, compared to 13.7% for urban children.
adolescents and children who missed years of school while still in Syria – have been forced to rely solely on informal education programming (some of which helps children catch up in order to prepare them for reintegration to public school) or have no schooling at all because they are unwilling ('feel shy') to attend class with much younger children. A female beneficiary of the UNHCR / UNICEF cash assistance, whose 18-year-old son had been out of school working full-time since he was 15, explained, ‘We have been trying to convince him to go back to school now we have the money from the cash assistance. His father and I see that it is better for him. But he does not want to anymore – because if he has to start now, then the others are a lot younger than him.’

Furthermore, while the Jordanian government has worked hard to generate school spaces, opening double-shift schools that enrol Jordanian students in the morning and Syrian students in the afternoon, our qualitative research found that this approach leaves Syrian students at a considerable disadvantage. Respondents commented that it appears to be reinforcing differences between Jordanian and Syrian students and may well be contributing to growing tensions between the two groups, with Syrians reporting experiencing hostility. While boys are more likely to be bullied than girls, the double-shift approach also disadvantages girls, who are more vulnerable to sexual harassment in the darker hours of late afternoon and early evening and risk being pulled out of school if their parents perceive such harassment as a threat to family honour.

Indeed, our qualitative work, which allowed the time needed to explore sensitive issues with respondents, found that security and safety concerns were considerably greater than the quantitative survey suggested. While that survey found that only 5% of Syrian children were out of school because of safety issues, in face-to-face interviews, parents and children expressed considerable anxiety about violence at school and on the way to and from school. One family, for example, reported that all three of their children had dropped out of school because of security-related concerns. The son, now 18 and trying to return to school, left four years ago because he was being relentlessly bullied by Jordanian students and could not muster teacher support to end his daily beatings. "The [Jordanian] students say “we don’t want Syrians in our class”, they keep beating me,” he
said. He continued, ‘The teachers support the Jordanian boys … so most Syrian boys drop out of school’ (interview with grandmother, also a mother of a 4-month-old baby, with two children living in the house). The family’s two daughters were also forced out of school by the behaviour of Jordanian boys, who sexually harassed them as they walked to and from school. ‘You don’t imagine how the boys bother her?’ exclaimed the brother about the older of his two younger sisters, who also left school four years ago, when she was only in sixth grade. He went on to explain that while his parents had tried to keep his youngest sister in school, by paying for her to take the bus, she too had recently left sixth grade. Despite her pleas to stay on in school, their parents could no longer afford the 15 JOD/month bus fare.

An adolescent girl echoed these views about sexual harassment as a barrier to girls’ schooling: ‘It is not safe here – my family was not planning [for me] to drop out of school. But the environment is not safe. You don’t imagine, in the girls’ schools lots of Jordanian boys wait for the girls and sometimes there is fighting. One day the police came. The Jordanian boys throw sexual words at them [and the] girls must fight [their way] through … [they] take off their shoes and throw them at [the boys]. The [police] arrested the Syrian parents [who tried] to protect [us] from this situation and most girls left the school.’ Another girl added: ‘Sometimes if you ignore [them] they follow you to your home. Some girls can’t tolerate it and are not sure how to react. All of us are exposed to this type of violence. The Jordanian boys think the Syrian girls are easy like a doll and [they] can play with [them] – they think that we are easy that we can sell ourselves. The teachers don’t do anything about it.’

Discrimination against refugees within the school system was also a widespread complaint: ‘In schools we put up our artwork like this – and then in the morning shift they come and tear the posters we made and throw them down like that … There is much discrimination between Jordanian and Syrian students’ (adolescent boy from Mafraq). A teenage girl, also from Mafraq, agreed: ‘There is a lot of violence between children from different nationalities. I feel uncomfortable when I am at school. They always bully us because we are from Syria.’

Syrian parents who participated in our research were also very worried about the quality of education their children were receiving, both in terms of the learning itself and the broader school environment, with some worried about the future prospects of this ‘generation of illiterates’. They felt that teachers were unable or unwilling to give Syrian children sufficient attention, particularly when children struggled after being out of school for a protracted period. Some parents told us that their children could still not read after a year or more in Jordanian schools. One interviewee had smuggled his family out of Zaateri camp, hoping to find better schools in the host community in which he now resides; but most parents felt they had little recourse.

Syrian adolescents were also concerned about the school environment. Only 64% reported getting on well with their teacher and KIDSCREEN scores indicate that only 50.6% were happy at school overall. One girl described her school experience as ‘very humiliating’, especially when juxtaposed against the ‘kind’ treatment that Jordanian students receive (woman in male-headed household, UNHCR and UNICEF beneficiary). Another reported that her teacher shouted, ‘If you don’t understand – I don’t care – I am not your private tutor … It is enough if 10 students out of 30 understand!’ (female beneficiary from Daraa). Other students reported teachers behaving violently, with one ‘spontaneously hitting students with a hose’ (female beneficiary from Damascus, now living in Zarqa). Very young adolescent boys in Mafraq also complained of systemic violence: ‘I am afraid of my teacher because he beats us with a stick on the hand. It gives marks – if we don’t do our homework we get hit. We also get slapped by the teacher in the face. All of us [pointing to his fellow students] have taken a beating by the teacher. Students also can be violent to the teachers. People, for example, throw stones at our principal. Sometimes the police even come to school.’

Key informant interviews also highlighted that some teachers working the afternoon shift felt that there was inadequate investment in resources for teaching Syrian students. Not only were support services like school counsellors reportedly not available to cover the afternoon shift in some schools, but non-core subjects such as physical education and extra-curricular activities were often either cancelled or undertaken in a lacklustre manner.

There was also a sense emerging from some respondents in our qualitative survey that education was no solution to their problems, since they were seeing many highly qualified people with university degrees out of work, while others with less education were in work.

8.3. Positive effects of cash assistance in addressing education-related vulnerabilities facing Syrian refugees

Our quantitative research identified mixed effects of cash on children’s education. On the one hand, those receiving cash assistance were no more likely to be enrolled in school or to attend regularly. This was true regardless of children’s sex or age; actual enrolment levels did not vary much by receipt of cash. On the other hand, as noted in chapter 3, households receiving the UNICEF CCG were

31 KIDSCREEN is a measure of child and adolescent quality of life. It is available in child-report and parent-report in 38 languages and has excellent psychometric properties.
more likely to spend on children’s education, households receiving cash assistance and full-value vouchers were also more likely to spend more on children’s education, and parents were less likely to report that they could not afford to meet their children’s educational needs. Median expenditure on education for households receiving all 3 UN cash assistance is 34 JOD/month, compared to only 19 JOD/month for those receiving no cash and only half-value vouchers (see Figure 50).

The value of WFP vouchers also matters to educational spending. Households receiving cash spend more on children’s education when they also receive full-value rather than half-value WFP vouchers. The effect of cash on children’s education is also apparent in the reasons that parents gave for their children being out of school. While questions used in the baseline and follow-up data are not directly comparable, it is clear that household financial constraints ease where the family receives cash support. Real costs and opportunity costs both show effects. Parents were less likely to say their children were out of school because they could not afford school-related costs, supplies or transport, or because they needed their children to work or provide childcare for younger siblings.

The effects of UN cash assistance on median educational spending are even larger when one looks only at households that have children who are currently enrolled in school (see Figure 51). Households with enrolled students who are receiving the full package of cash assistance – the UNICEF CCG, the UNHCR cash assistance, and full-value WFP vouchers – spend a median of 58 JOD/month. This can be compared to only 37 JOD/month for households receiving both cash transfers but only half-value vouchers, and 39 JOD/month for households receiving full-value vouchers but no cash.

While actual enrolment rates do not appear to vary depending on benefit package, parents reported that cash
was improving children’s access to school. Just over 12% reported sending their children back to school as a result of receiving cash assistance. It was even more common for families to report improved attendance. (These questions were asked at the household level and we do not know if there were effects on children of different age or girls versus boys.)

In some cases, children’s access to school improved because the cash meant they could afford public transport. As one boy explained, ‘Our house is far away from school so one can’t go to school on foot, we must go by bus, but we couldn’t [afford the] bus. I couldn’t go to school on foot, so I left it. But I have returned back to school … when we started receiving vouchers [and] winter cash assistance’ (younger school-going boys, aged 11-13). Another explained that because of the cash, his family could afford to send him to school rather than find work. He said: ‘[Without the cash assistance] we would need to work … I would have to leave school in order to work … because there’s no other way’ (boys aged 12-14, Mafraq). In addition, most respondents told us that the extra cash had enabled parents to provide school clothes and supplies. One boy reported, ‘The [UNICEF] aid enables my mother to bring us school stuff like notebooks, bags, and so on … For example, we need crayons and notebooks for school. I used to be unable to buy these things, but now I can, thank God’ (young boys aged 7-12, Irbid) (see also Box 12).

Parents reported that cash assistance improves not just children’s access to education but also their outcomes – regardless of whether the household receives cash from UNHCR only or UNHCR and UNICEF (see Figure 52). Nearly 60% of parents felt that the cash had improved their children’s academic performance. While we lack the kind of data that would illustrate children’s actual academic outcomes, we note that the Jordanian school system is struggling to maintain standards given the huge influx of new students – and that parents’ reports notwithstanding, the need to improve educational quality is of paramount importance moving forward.

8.4. Remaining challenges for cash assistance programming in addressing Syrian refugees’ education-related vulnerabilities

Our research on the effect of cash assistance on education confirms findings from the broader literature – that cash is no panacea for the problems refugee households face. Cash assistance are insufficient to create sustainable change, particularly for the poorest families, and the limited amounts paid to Syrian refugees tend to mute their effects. For example, of all surveyed families, about half of whom were receiving cash, over 46% reported that in the past year they had been unable to pay all of their children’s educational costs. Furthermore, nearly 40% had been unable to buy school supplies and 35% were not able to pay for transport. Unsurprisingly, only 17% reported that their children had a space at home to do homework and less than 10% said they had toys or books at home.

Indeed, many of our findings speak not to the failure of cash assistance but to the overwhelming vulnerability of families who receive cash support. For example, 78% of children whose families have received cash for more than two years are enrolled in school, compared to 82% of children from families that have received cash for less than two years. This likely speaks to the fact that children who have been receiving cash longer are now older – and that over time, families’ coping strategies are all but exhausted. Similarly, families receiving cash from UNHCR and UNICEF are slightly less likely to be able to afford their children’s educational needs than families receiving only UNHCR cash. This, and the fact that children from smaller households are less likely to be in school than children from larger households, speaks well to the targeting of UNICEF grants as it suggests that those households are especially vulnerable. It also provides a compelling argument for more funding (and more prolonged funding), rather than less funding for shorter periods.

Figure 52: Percentage of parents describing their child’s academic performance as improved after receiving cash assistance
Box 12: How cash assistance is giving children and young people a better future

While our quantitative research found that it was not common for cash assistance to help older children return to school after lengthy absences, our qualitative work found that for a few children, access to cash was an educational life-saver and helped improve their psychosocial well-being (see chapter 11).

Amra’s story

When Amra was 14 her family fled Damascus for the Jordanian border. She remembers the trip with horror. ‘My father rented a car, and we came with my mother, father, a neighbour, my brother and a sick child. The car was not comfortable and I still remember when we came close to the border, we saw a plane that went to bomb the other side. They dropped it… I still remember, when I dropped from the car - the fire, shock, silence. I did not know what to do… I was crying but not for myself – but because I thought I lost my brother.’

After only a month in Zaatari, Amra’s family moved to Amman and applied for assistance from UNHCR. Amra’s mother, Zara, told us that a key reason they registered was ‘to get education for the children and to get other support’. She went on to emphasise just how important education is to her family: ‘Syrian people in general are highly educated and most of them end up going to Europe to get education. This is why some take such high risks to get smuggled to Europe.’

The cash that Amra’s family receives from UNHCR and UNICEF means she can return to school after two years of absence, because they can now afford to pay for her transport. This has given Amra at least one element of the childhood she was forced to abandon when they fled Syria. Amra, who attends the afternoon shift at public school, told us:

‘I always have the highest mark in school, I am a smart and well-known girl. When I was not in school I did not show my tears to anyone. I stayed strong but I was really waiting for school.’

Mohammed’s story

Mohammed is 17 years old and for the past five years, since his family fled Syria for Jordan, has been out of school and working to support his family. His father is chronically ill so cannot work but also needs expensive health care, so Mohammed has had to shoulder this burden alone, caring for both his parents and his younger brother.

Mohammed works in the construction industry doing long hours (from 7.30am until 8pm) six days a week. His wages have risen with age and experience, and he now makes 9 JOD/day (about $12.70).

His family have received 50 JOD/month in WFP food vouchers for some years now, but recently they also began to receive UNHCR and UNICEF cash assistance. While the amount is not sufficient to allow Mohammed to give up work entirely, it has allowed him to think about returning to school part-time so that he can secure a better future for himself and his family. His mother recently heard about an evening school for adolescents that allows students to study part-time for two years to get a 10th grade certificate, and then eventually sit the Tajji national exam, which would allow for university entrance. Mohammed is signed up and will begin his studies soon. He is negotiating with his employer to allow him to leave work early to attend the evening classes.

He is thrilled to have this opportunity: ‘I lost lots of opportunities since leaving Syria and I don’t want to lose any more! I loved school in Syria but I’ve had to prioritise other things here because of my family’s situation and my responsibility for the household’, he explained.

Mohammed knows that the next few years will be difficult financially, as his salary will probably be cut because of working fewer hours. But, thanks to the cash assistance, he has begun to dream of a future that involves more than survival. ‘My dream is to be an accountant so that I can take care of my father’s business – he has a butcher’s shop in Syria … Our future is linked with our certificates – we need a very good education to realise our ambitions.’
Chapter summary

Children – and especially adolescents – in Syrian refugee households in Jordan face many educational vulnerabilities, irrespective of gender. Cash assistance plays an important (albeit limited) role in addressing these vulnerabilities.

Education-related vulnerabilities:

- More than one-fifth of Syrian refugee children in our sample were out of school.
- Adolescents are especially likely to be denied an education: while only 10% of children under the age of 12 were out of school, 24% of those aged 13-15 and 52% of those aged 16 and above were not enrolled.
- Chronic truancy rates also rise with age. Adolescents are more likely to miss school on a regular basis than younger children.
- Boys are less likely than girls to be enrolled in school at all ages. They are also more likely to be chronically truant.
- Reasons for non-enrolment are many and varied, including: costs (transport, uniforms, school supplies and lunch); poor educational quality (including indifferent and even violent teaching methods); bullying from other children; and a need for children’s labour at home (to care for family members or find paid work).
- Girls and boys leave school or are truant for different reasons. Boys are more likely to be out of school because they need to earn money to support their families and because of violence on the part of teachers and peers. Girls leave school because of concerns about their physical safety, their exposure to boys outside the school gates, and because of pressures to marry in mid-adolescence.

Effects of cash assistance:

- Cash assistance plays an important (albeit limited) role in addressing these vulnerabilities.
- Those receiving cash assistance spend more money on children’s schooling than those not receiving cash (e.g. for school supplies and transport).
- The majority of parents report that cash has improved their children’s academic performance.
- Cash assistance has helped some children return to school. However, this is most common for younger children and recent school-leavers. Once children have been out of school for a prolonged period, cash is rarely sufficient to encourage re-enrolment, especially for adolescents. Forgone opportunity costs in terms of potential income loss also arguably increase as adolescents become older and able to take on better-paying jobs.
- Full-value WFP vouchers also appear to support educational spending. Compared to those receiving half-value vouchers, households spend more on school when they are receiving full-value vouchers – probably because those vouchers free up other income.
9. The effects of cash assistance programming on Syrian refugees’ health and health care vulnerabilities

9.1. Chapter aims

Good health is not only central to human well-being, it is also important to economic progress, as healthier populations are less poor and more productive over time (Al Bayoumi, 2014). Ill-health has been widely found to be a major driver of poverty. It not only prevents caregivers finding paid work but the costs of medication and consultations often drain already stretched household resources (Lucas et al., 2008; CPRC, 2011).

This chapter first explores vulnerabilities related to health and access to health care for cash assistance beneficiaries. It then describes the positive effects of cash assistance and the remaining challenges. For a sub-sample of beneficiaries in our quantitative sample, we also looked at changes in health service uptake over time (between baseline and the ODI survey at the end of 2016/early 2017).

9.2. Syrian refugee households’ vulnerabilities related to health and health care

Our survey found that ill-health was very common among Syrian refugees: over one-third of households had at least one family member who had been ill for more than three months in the previous year (see Figure 53). Rates of illness were higher in the Zarqa governorate (55.2%), in urban areas, and among female respondents and respondents over the age of 45.

Unsurprisingly, given overcrowded conditions – and the fact that data were collected in the winter – rates of illness in children were also high. Nearly 18.5% of parents reported that their children had been ill in the past two weeks, most commonly with respiratory infections (6.2%) and chronic diseases (4%) (see Annex 4 for more details).

While this study was not designed to measure the prevalence of disability, we also found that households benefiting from cash assistance were more likely to have at least one member with a disability compared to households receiving only WFP cash assistance (see Box 13).

Registered refugees have de jure access to a range of medical services. They can, for example, access a limited set of health cash assistance through UNHCR and partners

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Figure 53: Incidence of illness and disability, by percentage

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Registered refugees have de jure access to a range of medical services. They can, for example, access a limited set of health cash assistance through UNHCR and partners

32 This question was left open to the interpretation of the respondent. We merely asked if any member of the household had a disability – and if so, who.
Box 13: Incidence of disability among refugee households and related vulnerabilities

Our survey found both expected and unexpected patterns of disability. For example, as one might expect (given that disability tends to cause poverty and poverty tends to cause disability), disability was more prominent among families receiving all three UN cash assistance (8.6%) compared to those receiving only the WFP package (4.6%). We also found higher rates of disability in larger families and in families receiving larger amounts of cash (because of household size and receipt of UNICEF CCG), which may suggest that targeting is working and that especially vulnerable households are receiving more cash assistance.

Unexpectedly, however, 62% of the families surveyed reported that their family member with a disability was a child (globally, incidence of disability is tightly linked to age, with older persons more likely to have a disability than children). Indeed, 10% of families who had at least one member with a disability reported that they had two children with disabilities, and 6% reported that they had three or more children with a disability. This may be linked to the high rate of consanguineous marriages in the Syrian population (35.4%) (Othman and Saadat, 2009) and/or war-related injuries.

such as the Jordan Health Aid Society (JHAS) for free. They can also use public services provided by the Ministry of Health, for a fee. Since 2014, those with service cards are required to pay the same rate for health services as uninsured Jordanians, while those without service cards must pay a ‘foreigners’ rate that is 35%-60% higher (Amnesty International, 2016). Recent research has found that despite the availability of relatively affordable care (at least for basic illnesses), long waits and concerns about care quality are increasingly driving refugees to seek care outside of the public system, which is in turn driving increased concerns about cost (UNICEF, 2016a). Concerns about the cost of medication were particularly common, across all beneficiary groups (see Figure 54). One respondent in our qualitative research reported, ‘I also have to take a medication … I went to [the JHAS] but they told me we don’t disburse it – it’s expensive, about 80 JOD per month…’ (female-headed household, Zarqa). Another added, ‘You don’t find what you need all the time, you may need a certain medicine and you wouldn’t find it and thus are forced to buy it, you see. Sometimes they do everything they can there and they give us the medication when it is available’ (UNHCR female beneficiary, Zarqa).

Certain groups of refugees appear more vulnerable to ill-health than others, particularly children, and those living in informal tented settlements (who live in unhygienic conditions and tend to be the furthest from medical care) (see Box 14). Almost 58% of respondents indicated that they had not been able to afford medication for a child’s respiratory illness. Highlighting the added costs of chronic illness, more than 75% were unable to afford medication for a chronically ill child. One mother in a focus group discussion explained, ‘Medical assistance is very limited … My older daughter has a skin disease and I look for treatment from the Red Crescent and UNHCR. They say they can’t provide – you need to provide from your own money.’

An interesting side effect of the high cost of illness is that households with a chronically ill member are more likely to report income from wages than households without a chronically ill person. Whereas 16% of households without an ill person report income from wages, 22% of those with a chronically ill person have a wage earner. Given that one might expect households with an ill person to have higher needs for care – and thus more limited capacity for employment – these higher odds of work speak volumes about the cost of health care.

Figure 54: Percentage of respondents saying medication was too expensive

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Our qualitative findings also highlighted that some refugees are turning to traditional healing practices, including exorcism. One respondent noted that her mother was a well-known exorcist and supported the family by performing exorcisms to heal people in poor health. Her clients were primarily Syrian refugees but over time she began taking on Jordanian clients.

9.3. Positive effects of cash assistance in addressing health-related vulnerabilities facing Syrian refugees

Other health-related challenges raised by respondents in the qualitative research included difficult hospital referral processes and the fact that because of early marriage, young women were facing pregnancy-related complications that were not being adequately addressed.33

Our qualitative findings also highlighted that some refugees are turning to traditional healing practices, including exorcism. One respondent noted that her mother was a well-known exorcist and supported the family by performing exorcisms to heal people in poor health. Her clients were primarily Syrian refugees but over time she began taking on Jordanian clients.

Box 14: Health care challenges in informal settlements

Families living in informal tented settlements often face overwhelming health challenges, especially women, who typically oversee family health issues. One mother of six living in a settlement just south of Amman reported that her family’s poor living conditions have led to many health problems:

‘Now we live like this in the desert, our children are sick all the time. This child [pointing to a 7-month-old infant] is sick with diarrhoea and vomiting. We got just two hours of medical attention and they charged 40 JOD! It took all four brothers, each contributing 10 JOD, to get the 40 JOD and the child is a bit better but she still has diarrhoea and I fear she is still sick. The child was hungry when breastfeeding – so I now give her a bottle. But it costs 30 JOD/ month for milk powder … If she or another child gets sick we make do with what we can get from the pharmacy – if they have a fever, we just use cold packs …

When I delivered the baby I just went to the midwife’s house. I was there for two hours and then came straight back here to start life again … And for us women, we have nothing for our menstrual cycle – don’t laugh – but all we can manage with is clothes that have been torn … but they are dirty. It is so embarrassing – having our menstrual cycle has become another type of suffering for the women here … The only good thing here is that we don’t have heavy bombing from planes and all the smoke clouds.’ (Mother, informal tented settlement south of Amman)

Sexual and reproductive health (SRH) vulnerabilities were also highlighted by other women in tented communities south of Amman:

‘I don’t want to have more children but we don’t have any family planning tools. I am so tired and besides that, we can’t afford to feed anymore mouths.’

‘I tried counting my cycle but it did not work – I got pregnant again. I cannot have any more children – I am so very tired, fatigued the whole time. Yesterday I could not even walk anymore. And there is no one that comes to talk to us about these women issues.’

‘I had my first baby here and then, within some months, I am pregnant again. It is horrible – I am so tired and when I am so tired I just hit my children and fight with the others – I am so stressed. If I had my relatives around me I would feel less stressed but my family is far away from me – some are still in Syria.’

33 Physical impairments are the most common, and rose 11% in 2016 compared to the previous year. While most of these impairments are due to ‘natural’ reasons, 20% were related to war violence (Adam Musa Khalifa, personal correspondence, 2017).
It's good to have a clinic close to our house...
cash beneficiaries believe that it has improved their ability to seek health care as they have more fungible income. This is particularly the case for households receiving the UNICEF CCG. While noting that the overwhelming majority of households in our sample said they could not afford to access health care, Figure 55 highlights that UNICEF households are more likely – especially when they also receive full-value WFP vouchers – to report that they can afford access (16% vs 6% for those receiving no cash and only half-value WFP vouchers).

Households receiving the UNICEF CCG are also less likely to report that they cannot afford health care transportation (see Figure 56) (66% for those also receiving full-value WFP vouchers vs 82% for those receiving no cash and only half-value vouchers).

In addition, in response to the question ‘what was the most significant change you have experienced as a result of receiving cash assistance’, nearly 25% said they were now able to access medical care. When asked what expenses the UNICEF CCG has covered, over half (53%) of respondents said ‘children’s medical needs’. We found some evidence of this in our qualitative research as well. One mother, for example, reported, ‘Before we started receiving it, I used to work to help my husband … cleaning houses … For us many things changed. Now, I am always taking my son to get treatment’ (female in male-headed household, Amman). In addition, 16% of survey respondents with children with disabilities reported an improvement in their general well-being after receiving cash assistance.

It is worth noting that although we did not encounter any respondents who had benefited from UNHCR’s new ‘cash for health support’ programme, which supports the secondary and tertiary health care costs of seriously ill Syrian refugees who have good longer-term prognoses if they receive high-quality, short-term care. UNHCR’s Cash for Health programme assists Syrian refugees to pay for

Figure 55: Percentage of respondents who report having enough resources to afford health care

![Figure 55](image)

Figure 56: Percentage of respondents reporting that they cannot afford transportation to health care

![Figure 56](image)
medical services, with over 50% focusing on emergency life threatening conditions. Other main areas of need were ante and neo natal issues including deliveries. Cash is used as part of a wider programme of referral services, and allows UNHCR to serve more people of concern with the same level of resources – Syrian refugees are eligible to pay the Jordanian uninsured rate in Ministry of Health facilities if they pay directly, while if UNHCR refers patients through the referral system, they pay foreigner rates which are three times as much. Since the project began in November 2015, almost 6,000 Syrians have benefitted from cash assistance to pay for healthcare.  

9.4. Remaining challenges facing cash assistance programming in addressing Syrian refugees’ health-related vulnerabilities

As was the case with educational effects (see chapter 8), the main health-related challenges concern the fact that the amount of cash assistance is far below the level of need. More than 66% of survey respondents, for example, said that even with cash support, they were unable to meet all of their family’s health needs (71% could not meet all of adults’ health needs and 66% could not meet all of

Box 15: The high costs of disability

Since 2016 the Washington Group definition of disability has been wide used and refers to someone having difficulty in performing basic universal activities: i.e. walking, seeing, hearing, cognition, self-care and communication. The relatively high proportion of cash beneficiary families with a disabled member indicates that the targeting of cash assistance exhibits some sensitivity to the vulnerabilities facing these households, which tend to be poorer (and unlike households with a chronically ill member, they are not more likely to report income from work). Targeting criteria recognise this by including additional weighting for disability. That said, we also found that households with disabled members are not automatically enrolled in cash assistance schemes, despite their higher medical costs. And because families with disabled members do not receive more cash than others, the cash has less of an effect on the household’s depth of poverty.

Participants in our qualitative research reported that they often rely on friends and family for support. One respondent explained that people with disabilities need more holistic and coordinated care: ‘My mother is disabled and she needs so many medicines as well as special food. Her medicines are very expensive – more than 20 or 30 JOD per medication. In Ramadan last year she got really sick – it cost 70 JOD per treatment. She used to have injections in her knees – each injection was 20 JOD. We don’t have medical insurance and suffer because of this. We have a paper that lists the medical centres she can visit but when we tried to go to one centre we were told they couldn’t accept her – and close to us there was only a children’s doctor. We couldn’t find anyone to treat my mother … Initially we tried to make do ourselves but then had to pay multiple times out of pocket and she is still in pain. There need to be specialised centres and doctors’ (focus group discussion with female-headed households).

Another participant – a mother who struggles to stand or walk due to a degenerative muscular condition – told us that her condition had worsened considerably since her family fled to Jordan. She, her husband and their two children were living in a crowded 3-room apartment with three of his siblings and their families, and his bed-ridden mother. For a while, she reported, she was relying on an acquaintance to help her buy medication and supplements from Syria, where they are far less expensive. With the border now closed and refugees now having to pay for health care services, she finds herself completely homebound due to a lack of mobility.

Another female beneficiary receiving UNHCR cash assistance in Amman told us she relies on expensive private care to treat her husband’s chronic disease. She reported that the last time she went to the clinic, the finance department refused to even let them enter. ‘They verbally abused us and said – “you can pay – you have a package” [cash assistance]. But even if so, if we have the cash assistance,’ she said, ‘the money is not enough! Even going to the hospital costs much money – around 5 JOD to just come.’

Many male refugees talked about severe war-inflicted injuries, and the lack of care available to them in Jordan. A father, receiving both UNHCR and UNICEF cash assistance, relayed his son’s experience: ‘My son, who is a university student, was shot at the campus. A gunshot perforated his head and exited. It caused bleeding in the arachnoid membrane’. Although his son was taken immediately for emergency care in Jordan, which saved his life, he has had limited access to ongoing rehabilitative care. ‘The injury impaired his speech. Until now his tongue is still. He stutters to spell a word. He stutters and it is difficult to connect words together. He is connecting words now. He is still suffering from convulsions. They told us that after one year he would need to have a reconstruction surgery for the skull base that was pierced [but funding for this would not be covered].’

34 Adam Musa Khalifa, personal correspondence, 2017
children’s health needs). This was especially the case for families with a person with a chronic illness, war injury or disability (see Box 15) – all of whom tend to have disproportionately high health care costs, exacerbated by the high costs of transportation.

We also found that lack of information prevents people accessing health care. Some beneficiaries were not aware of their entitlements or of complementary programming or service locations. For example, 17.6% of children who missed an immunisation appointment did so because their parents did not know where to go for the immunisations.

One grandmother, who had recently lost her husband to cancer, highlighted that while the cash assistance they received while he was alive had enabled them ‘not to worry about rent or food and to cover all the basics’, it had not been enough to cover the spiralling costs of his medical care. Even more importantly, because the assistance was registered in his name, they no longer receive the cash. She explained, ‘My husband’s cancer required a lot of treatment and money – the only way was to ask relatives to pay for the hospital bills and I still owe them a lot of money. I feel so very shy to ask for money and now at night I worry constantly about how I can ever repay these debts … But it is so much worse now just to make ends meet, as because the cash assistance was in my husband’s name, it was discontinued after his death’ (grandmother living in Amman).

Chapter summary

Syrian refugee households face considerable health-related vulnerabilities. Certain groups are especially vulnerable, including families with one or more members who are disabled, chronically ill or have war injuries. Given the level of user fees for health services and medications, the potential for cash assistance to alleviate refugees’ health vulnerabilities is limited.

Health-related vulnerabilities:

- Overall, the health status of refugee communities is poor; households with chronically ill or disabled members are particularly burdened by health care costs.
- The breadth of free medical care available to refugees is limited, and people have strong concerns about wait times and quality of care.
- Cost is a major barrier to care-seeking, with many households simply unable to afford doctors’ fees, medication and transport. This has been exacerbated by the Jordanian government’s decision in late 2014 to end free health care for Syrian refugees for all but basic primary services.
- Households in informal tented settlements are especially vulnerable due to long distances to health clinics and lack of money for transportation and medication. This is especially problematic for maternity and infant care.
- Children are particularly vulnerable to ill-health and families often cannot afford medication even for basic respiratory illnesses and especially for chronic illnesses.
- Women have little or no access to sexual and reproductive health (SRH) services, including family planning.

Effects of cash assistance:

- Given the level of user fees for health services and medications, the potential for cash assistance to alleviate refugees’ health vulnerabilities is limited.
- While median spending on health care has not been affected by cash assistance, respondents report that cash has improved access to health care, especially among children.
- Cash for health has been introduced to support tertiary health care in emergency situations where a patient’s prognosis is good. While the amount of funding is modest, it allows valuable support in the case of complicated deliveries and for households who would otherwise not be able to cover these emergency costs.
10. The effects of cash assistance programming on Syrian refugees’ participation and social capital-related vulnerabilities

10.1. Chapter aims

There is growing interest in how cash assistance programming can strengthen and broaden social networks (for adults and children alike), given the role of social capital not only as a financial buffer (with some Syrian refugees providing informal loans to others) but also its inexorable links to psychosocial well-being and quality of life (Keeley, 2012; Otter, T. et al., 2011). There is also considerable interest in how cash assistance can mitigate some of the protection concerns that impede social participation, which, for girls and women, include limited mobility and child marriage – both driven by discriminatory gendered norms centred on family honour and perceived sexual purity. For boys, the main protection concerns are rampant bullying and intrapersonal violence.

This chapter discusses how Syrian refugees (adults and children, male and female) participate in social life and build social capital. It explores the extent to which cash assistance enables them to do this, and highlights some remaining challenges.

10.2. Syrian refugees’ social capital and participation-related vulnerabilities

Our research found that many Syrian refugees in Jordan are not only highly isolated but that many reported feeling resentment from host communities, which have also been stretched thin by the protracted nature of the crisis. With the influx of new workers, unemployment among Jordanian workers has climbed and wages have dropped. Costs have also risen, especially for rent, while services and utilities, including health care, education and waste pick-up, have struggled to meet demand. The result for many Jordanians is that the quality of their day-to-day life has deteriorated as communities have struggled to absorb refugee flows.

Participants reported that while they were welcomed at the onset of the war, today they often face verbal abuse and even physical violence. Boys and young men face a growing risk of assault, while girls and women are subject to sexual harassment. Many Syrians in our research reported responding to this new reality by keeping their family at home as much as possible. On a more positive note, a number of respondents talked about the generosity of landlords in terms of flexibility with delays in rental payments, providing in-kind donations (e.g. furniture and other household items) and some Jordanian employers providing much-needed support in terms of the work permit process.

10.2.1. Adults

Adult research participants indicated that they rarely take part in social activities: only 17% were members of a religious organisation, 11% belonged to a women’s organisation, 5% were members of a self-help group and 3% were members of a youth association. Indeed, 75% of respondents said that within the past six months they had not partaken of a single religious or community event,
nor been invited for other social opportunities. When asked why they were not participating, most (59%) said they could not afford to (e.g. to buy the gifts required to demonstrate reciprocity or could not afford transport costs) (see Figure 57). Rural respondents were more likely than urban respondents to report not being able to afford to participate (65% vs 57%), as were those in Irbid compared to those in Amman (66% vs 54%). While only 5% of survey respondents cited active discrimination as a reason for their non-participation, those taking part in our qualitative research often told us they found it easier to connect with Palestinian refugees than other social groups because of shared refugee experiences.

The Quality of Life (QoL) tool also showed that adults have limited opportunities for socialisation and recreation. More than 80% said they had little or no time for recreation, particularly those in Amman (62%) compared to those in Irbid (22%). Women were more likely than men to say they had no time at all for recreation (51% vs 42%) (see Figure 58), due to their caretaking responsibilities. One mother explained, ‘I don’t have time to visit anyone. I don’t have friends. I don’t have time, I have chores. I get my family food, I check what we need and go to buy it. I cannot go on visits, and I have no one to visit’ (woman in male-headed household, extended family, Zarqa). Women caring for people with disabilities, or for older or ill family members, were especially unlikely to have time to socialise: ‘I am isolated. I don’t go out and my father is old and he lives here. I don’t exchange visits with anyone’ (woman in male-headed household, extended family, Zarqa).

While women focused on their lack of time for socialisation and participation, our research suggests that time itself is less of an issue than restrictive social norms that confine women to the home. When asked directly, for example, where women are allowed to go – either alone or with an escort – over half of respondents (51%) said that women are not even allowed to leave home alone (see Figure 59). Urban women have greater mobility than rural women in some regard: they more often report...
that they can go alone to the market (41% vs 31%) and the health centre (45% and 34%). There are also some notable differences between women who live in different governorates: women in Amman (45%) and Zarqa (44%) are more likely to be able to go alone to the market than women in Irbid (33%) and Mafraq (30%) – a basic pattern that is reflected across the other five locations as well.

Our qualitative research found that women’s access to Islamic centres – and participation in Makani-run parent education classes – was particularly important to them, because it gave them a rare chance to socialise and learn about one another’s coping strategies. One mother, whose four sons ‘take English, karate and painting there’, explained that while she can only attend sessions on Monday, because ‘good’ Syrian wives spend their time at home, she enjoys the classes because ‘this way we get to know our neighbours, from Jordan and other nationalities’ (woman, female-headed household). Another added, ‘when we see each other we feel safe, and we become optimistic’ (UNHCR beneficiary, Amman). For women without access to Islamic centres and Makanis, most ‘feel very lonely. We spend much time alone. We don’t really go out in the community here. In Syria we had a lot of relatives but here I don’t meet anyone’ (woman in her forties, receiving all three UN cash assistance, Amman).

One result of adults’ social isolation is that very few have friends on whom they can rely in times of need. Just under 60% of our survey respondents said that if they felt overwhelmed and distressed, there was no one they could ask for help. Of the 42% who said they did have someone to turn to, about half said family members and half said friends; formal sources of support were rarely mentioned. Gender differences were minimal. Women and men had the same basic access to support, but men were slightly more likely than women to say they could rely on friends rather than family members (56% vs 50% for women).

The types of support that women and men seek from friends and family are also the same, and largely indicate that they need practical and financial rather than emotional support. Two-thirds of those who said they did have someone to turn to if overwhelmed and distressed said they received financial support (61%) or support in-kind (6%). Only 30% of respondents mentioned psychological support. Indeed, our qualitative research also found that most of what Syrian refugees consider to be ‘social support’ is, in fact, practical support. One beneficiary woman told us, ‘We have a Palestinian neighbour [two sisters] and they are very kind. No [we never get in touch with our neighbours] but sometimes we have a cup of coffee. We haven’t visited her. But she helped us when we first came here; we didn’t have water so she offered us water … We really appreciate her kindness’ (mother of four, Zarqa).

Despite the difficulties in accessing leisure opportunities, attending cultural and religious events and finding a supportive shoulder to lean on, two-thirds of respondents were satisfied overall with their personal relationships. There were no differences between women and men or between urban and rural respondents, although those in Zarqa were more satisfied than those in Irbid (84% vs 58%).

There was also some evidence from our qualitative research of the growing acceptance of refugees in some host communities. While respondents told us they ‘have more Syrian friends, of course’ (mother, receiving all three UN cash assistance, Zarqa), they also told us that communities are increasingly intermingling and even beginning to inter-marry. One man reported, ‘The Jordanian society is not that different than the Syrian one … The customs and traditions are the same … When we arrived here, people were looking at us differently. They were eyeing Syrian people and feeling sickened by them. But now they have accepted us … actually, many marriages took place between Jordanians and Syrians.’ He went on to say, ‘it is more like a mix and it is not a problem because you deal with them as human beings. It is about you dealing with them as a human being regardless of whom they are’ (male head of household, WFP beneficiary, volunteers with a disabled persons’ organisation due to one of his adult sons having become disabled as the result of injuries suffered while travelling to Jordan). Jordanians we interviewed agreed that over time, mistrust is beginning to fade. One told us, ‘My husband goes to pray at the mosque with Syrians and he accepts them. We have a Syrian neighbour who is very respectable. They observe prayers … Even when they have weddings or funerals, we participate with them. Thank God there was no problems. I used to hear that there were problems between Syrians and Jordanians, but thank God I did not face any’ (female informal education teacher, Makani programme, Mafrak).

10.2.2. Children and adolescents

Our research suggests that opportunities for Syrian children in Jordan to play and socialise are limited, even for younger children, and they become even more limited with age, especially for girls.35 We repeatedly heard comments such as: ‘I am so bored I spend so much time in my room making lists but I never do anything’ (young girl, family receiving all three UN cash assistance, Amman). Key informants noted that adolescents face various restrictions that preclude their taking part in leisure opportunities. Girls face mobility restrictions, boys face bullying, and both sexes require money that their families simply cannot afford.

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35 While cultural norms make it difficult for adolescent girls more generally in Jordan to socialise outside the home, the restrictions on Syrian refugee adolescent girls appear to be heightened because parents are additionally protective following traumatic war-related experiences.
Adult caregivers indicated that even younger children (aged 5-12) rarely have the opportunity to play outside. Only 2% of children play for 1-5 hours a day and 28% are never allowed to play outside at all. Adolescents are even less likely to have outside recreation time, with caregivers reporting that 54% of them never play at all.

Our qualitative research found that children’s time out of school is largely consumed by TV, unless they are participating in activities at Islamic centres or Makanis. TV keeps them still, quiet and entertained, but denies them their right to engage in activities that keep their bodies healthy and their minds active. Key informants told us that the effects of this enforced passivity are manifest when children first join Makanis, with high levels of hyperactivity among new children, and particularly boys.

When asked about their children’s recreational activities, caregivers again indicated very limited opportunities. About 75% of children, regardless of age or sex, were reported to have not had a single recreational experience in the past week. Parents told us that their children were not allowed outside the home partly because of fears about their safety, which, with few exceptions (see Box 16), they were left to handle on their own. Mothers were more likely to worry about children’s safety than fathers (63% vs 54%) and caregivers in Amman were more likely to worry than those in Irbid (65% vs 54%).

Adolescent girls pay the highest price for their parents’ fears. Over half (54%) of caregivers admitted they restrict their daughters’ mobility in order to keep them safe. Mothers and other female caregivers were more likely to report restrictions than fathers and other male caregivers (57% vs 50%), and caregivers in Amman were more likely to report restrictions than those living in Irbid (61% vs 46%). As noted above, adolescents feel these restrictions keenly. While nearly 70% reported having fun at least quite often, 36% said they ‘never’ or ‘seldom’ had fun with their friends, and 15% said they never spent time with friends at all.

Set against this rather bleak background, children – and especially adolescent girls – spoke of adolescent clubs and informal classes as a ‘lifeline’, their only opportunity to make friends outside home. Two key networking opportunities emerged in our qualitative work as especially important to our respondents: the UNICEF-run Makani informal education programme and activities for young people at Islamic centres (see Box 17).

Adolescent classes at Islamic centres also proved popular among respondents in our qualitative research component – again, especially among girls, who tend to be homebound. Younger girls appreciated the snacks and the fact that there was transport to pick them up and take them home. Older girls emphasised the opportunity to meet with friends, to share difficult times and experiences together, and to escape the tedium of home. One explained, ‘The centre is like a life-saver – yes!! We wait day-by-day to come. We can only do one term per year as there is a waiting list. We can’t meet in cafes (definitely not!). But our families are happy to send us to this centre. We now have a group and we can chat with each other all the time’ (focus group discussion with four adolescent girls attending Islamic centre). Boys also appreciated spaces at Islamic centres. One enthusiastically told us, ‘The Islamic centre lets us play football in their yard every Saturday. They have educational and recreational activities. You play and they teach you new things’ (mother, family receiving all three UN cash assistance, Zarqa).

Box 16: Addressing child protection vulnerabilities

Mohamed, aged 13, has faced unending violence at school. He told us he has been beaten almost every day by other children and is ‘often beaten by the teachers’. He tried to complain to the headteacher, hopeful that the violence would stop, but was simply told to ‘complain to the teacher in charge of my class’. He did, but nothing changed. He was, said his mother, constantly ‘cut and bruised’.

Mohamed’s father, worried that his son’s ‘academic performance is very bad’ because of this relentless bullying, ‘complained to the Child Protection … at the UNHCR’ five months ago. ‘The day before yesterday’ he finally got a call back, and the unit intervened with the headteacher, who ‘warned the children not to do this again’.

Mohamed’s mother is hopeful. While she said that it took her ‘from morning til afternoon’ to go to the UNHCR office to show staff how badly bruised her son was, his last two days at school have been better. ‘… they do not beat him anymore. His morale is better. He used to skip school every other day, now he wants to go. He said no one talks to him or beats him. He used to say they beat him whenever he passes by them, and now he passes by them confidently’ (mother, family receiving all three UN cash assistance, Zarqa).

10.3. Positive effects of cash assistance in addressing Syrian refugees’ social capital and participation-related vulnerabilities

Our research suggests that UN cash assistance improve intra-household dynamics, largely through reducing financial stress rather than through improving broader social capital. We also found no evidence that cash
Box 17: Services supporting children’s social capital and participation: the role of the Makanis

Makani centres (My Space), which provide vulnerable children and adolescents with learning opportunities, life skills training and psychosocial support services under one roof, are popular with children (and even parents) who have either ‘aged out’ of the appropriate school grade (having been out of school for some time owing to upheaval and/or enrolment difficulties) or for whom going to school poses a safety risk (e.g. exposing them to bullying or street harassment). In theory, Makanis are open to all children – Jordanian, Palestinian, Syrian and other refugees (e.g. Iraqis) – although in practice most attendees are Syrian children.

Makani centres have been structured much like formal education (i.e. different courses culminating in examinations, two shifts each school day, school holidays, etc.), but with a stronger focus on psychosocial care and life/coping skills and greater emphasis on recreational activities. Academic courses (especially literacy and numeracy) are offered to students up to the age of 17 and life skills courses until the age of 24. The latter include classes on pursuing ambitions in a context of uncertainty, art therapy, vocational skills (sewing, tailoring), women’s rights, self-defence, and protection against early marriage and other forms of violence against women and girls. Girls were overwhelmingly positive about their experiences at Makanis, especially when compared with the alternatives open to them (mainly watching TV at home).

Adolescent girls in our focus group discussions often told us that the one genuine positive thing in their lives was their participation in a Makani. ‘I love everything here! I wish I could spend more time here!’ exclaimed one girl. ‘I don’t usually go outside home so this centre gives me the opportunity to meet new girls,’ explained another. A third girl added, ‘It is better than staying at home – much better. You find people who show you interest and care what you think and take care of you. The treatment is much better.’ She went on to say the centre is much better than school because ‘here, teachers pay attention to each student – if anyone has illness or mental problems they help them here,’ plus ‘the teachers try really hard to make the classes meaningful for us’. Makani helps girls to learn the message, ‘don’t despair, there is hope,’ ‘how to protect ourselves and how not to be discriminated against,’ teach them to be confident about ‘raising her hand and participating’ and ‘build our personality in a very good way’ (focus group discussion with female Makani members, Amman). One girl assured us that they also assuage mothers’ fears about their daughters’ safety by providing free transportation and having ‘alternative days – one for girls and one for boys’.

Makani teachers are particularly happy with the way the programme is fostering social cohesion and building bridges between Syrian and Jordanian adolescents. As one teacher noted, ‘We try to integrate Jordanian and Syrian students. That is the main goal. In the beginning there were problems, it was impossible for them to accept each other, but later on, with the psychosocial support, skills, and education, they got better and started accepting each other. Now they play together and so on. Before, they used to sit separately, but when we started integrating them together, they began to accept each other. They start talking and become friends when they get to know each other’ (interview with two Makani teachers). One teacher continued, ‘There was violent behaviour in the beginning but we worked on this target from the outset … Children’s attitudes have been changed completely and parents are extremely satisfied with the great impact on their children’s life and attitude.’ Boys agreed that the teachers’ efforts are paying off. One, living in Amman, told us, ‘The thing I like best about coming to the Makani centre is the life skills and psychosocial classes. We learn about a code of ethics, and how to communicate, not to beat each other, to respect each other and the teacher. To accept others’ opinions … The way they explain it here – it resonates with us and we are more committed to putting all these skills into practice’ (focus group discussion with boys in Amman).

Teachers are also pleased with the changes they see in girls’ confidence and voice. ‘When they first get here they never talked to anyone and couldn’t fit in, and they see that there are young men at the association like [name] and [name]. So they shy away. They don’t like to engage with anyone. But now, thank God, they engage in activities and contests, they changed a lot.’ Another teacher said that girls are even reaching out to support others now, rather than merely receiving support themselves. ‘Our students have become the tool to deliver what they learn to their other peers … they are now supporting others … and this is what really matters – that the student has to be the main point to focus on in such centres and programmes’ (Makani facilitator, Irbid).

Makani also target parents, holding monthly outreach meetings to help raise awareness about the importance of formal education (even for adolescents) and the risks of child marriage and child labour. Adolescent respondents thought these meetings were important as they exposed their parents to ‘new’ ideas. Parents’ views were more mixed: some (especially homebound mothers) said they appreciated the chance to connect with other parents, but others resented the didactic approach, which they perceived as focusing on how their culture and parenting should change.

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36 UNICEF’s existing network of more than 20 national and international NGO and CBO partners are mobilising to offer an integrated package of life skills training, psychosocial services and alternative education at more than 200 centres nationwide. As of October 2015, a total of 128 Makanis were operational across the country. UNICEF is also exploring innovative IT-enabled platform to scale up access to quality learning opportunities.
assistance is fomenting social discord between refugees and host communities, according to refugee respondents.

Adult survey respondents all agreed that UN cash assistance are not damaging household dynamics, and most agreed that they are improving family relationships by reducing tensions around meeting basic needs. About 60% of men and women said that family dynamics had improved after receiving cash assistance, while 40% said they were unchanged. There were no gender differences or differences between urban and rural areas, but those in Amman were more likely to report improvement than those in Irbid (64% vs 53%). Furthermore, those receiving cash plus vouchers, who are likely to have seen the greatest reductions in financial stress, were more likely to report improvement than those receiving only vouchers (62% of those receiving all three UN cash assistance reported improvement compared to 51% of those receiving only half-value WFP vouchers).

Cash assistance appears to be having a more muted effect on intrapersonal dynamics with non-household members. About two-thirds of women and men said that cash assistance were having no effect on their relationships with other people, and just under 20% said the cash was improving relationships – perhaps because it was allowing them to repay debt (the remainder said they did not know). Only a tiny handful (under 1%) said that cash assistance were making their relationships worse, and nearly all of those attributed the increased difficulty to envy on the part of other community members. About two-thirds of women and men said that socialisation needs remain underfunded – and indeed household expenditure data indicate that less than 2% of beneficiary households spend any amount on recreation – there is some evidence that adolescents feel differently. As noted above, most adolescents, when asked how cash was improving their lives, mentioned the pocket money that meant they could go to school or buy sweets at the market. Survey results also suggest that cash assistance may be improving adolescents’ participation in household decision-making. While adolescents were fairly evenly split with regard to whether their caregivers ever consulted them about expenditures (34% saying never, 36% saying sometimes, and 29% saying often), adolescents in households that received cash (compared to only WFP vouchers) reported more consultation. Older adolescents were also more likely to be consulted.

**Box 18: Limited knowledge of Community Support Committees**

Community Support Committees comprising six Jordanian and six refugee community representatives in each governorate have been set up by UNHCR with the aim of providing a platform through which community relationships between refugee and host communities could be strengthened and points of tension resolved. In terms of outreach, however, focus group discussions with CSC members suggested that this was quite minimal and limited to occasional community events such as picnics for children, rather than a systematic activity. Most members seemed to be local NGO volunteers and engaged primarily in that NGO’s activities rather than playing a more community-wide role. Moreover, among the individual interviews and the focus group discussion participants that we met, no respondents were aware of the CSCs, including Syrian refugee activists and local community leaders. Although our sample is small, it does suggest that greater investments in awareness raising about these committees, their roles as well as outreach to social excluded households is critical if they are to realise their potential.

10.4. Remaining challenges for cash assistance in addressing social capital and participation-related vulnerabilities

When asked what types of family needs were still unmet despite receiving cash assistance, 43% of adult respondents mentioned socialisation for household members, and half mentioned children’s needs for recreation and socialisation. Those living in urban areas and in Amman were especially likely to say that socialisation needs remain underfunded – perhaps because recreational opportunities in urban areas require a larger cash outlay (58% and 77% respectively), especially for transportation costs.

While UNHCR has set up Community Support Committees (CSCs) comprising 6 Jordanians and 6 Syrians in each governorate, in practice, our findings suggested that they have limited reach and tend to focus on the activities undertaken by the host community-based organisation, such as recreation days for children. Moreover, none of the cash assistance beneficiaries included in our qualitative sample were aware of these committees, indicating that they could be made more accessible.
**Chapter summary**

Syrian refugees not only face considerable economic vulnerabilities but also social vulnerabilities, especially with regard to social participation and especially for girls and women.

**Participation and social capital vulnerabilities:**

- Syrian refugees are rarely members of community organisations and do not participate in community events, mainly because they cannot afford the associated costs (e.g. transport, clothing, gifts).
- Adult women are also limited by social norms that dictate that they may not leave home without a chaperone. For example, only 22% of women are allowed to go to a community centre alone.
- Syrian children are rarely allowed active play time, largely because of fears for their safety.
- Girls’ mobility is particularly restricted in order to keep them ‘safe’ for marriage. Many are almost entirely confined to home and spend their days watching TV.

**Effects of cash assistance:**

- Cash assistance improves intra-household relationships by reducing poverty-related stress, but is generally too low in value to allow participation in social or recreational events and activities.
- Adolescents report more improvement in peer interactions than adults as a result of cash – largely because of improved access to pocket money.
- Cash does not have a negative effect on social relations with host communities or non-beneficiary refugees.

Many young participants described UNICEF’s one-stop Makani centres, and Islamic centres, as a ‘lifeline’, which gave them a rare opportunity to leave the house, see friends, and learn the practical and social skills needed for adulthood.
11. The effects of cash assistance programming on Syrian refugees’ quality of life and psychosocial well-being

11.1. Chapter aims

Development and humanitarian actors are increasingly recognising that improved psychosocial well-being is just as important as more traditional outcomes such as increased income, expenditure, access to services, etc. (Attah et al., 2016). Indeed, while few social protection programmes (including cash assistance) have explicit psychosocial objectives (Samuels and Stavropoulou, 2016), there is more and more evidence that they not only contribute to vulnerable people’s broader psychosocial well-being, but also that improved psychosocial well-being can be a powerful driver for the sustainable achievement of other programme outcomes.

This chapter discusses the psychosocial vulnerabilities facing Syrian refugees living in Jordan, teasing out what we know about adults’ quality of life from what we know about adolescents’ quality of life. We then discuss how the cash assistance programming is improving psychosocial well-being and the challenges that remain.

11.2. Syrian refugees’ psychosocial-related vulnerabilities

Our research found extreme levels of trauma and stress among Syrian refugees in Jordan. While our quantitative findings were somewhat mixed – with some adults probably seeking to play down the social and economic stressors affecting their lives – the stories that slowly unfolded in our qualitative work painted a picture of considerable psychosocial stress. Respondents’ war-related trauma and loss were compounded by day-to-day boredom and isolation (especially for homebound women and girls) and by lack of hope for the future. While some stressors (e.g. poverty) were common across groups of respondents, others related to not being able to fulfil traditional gendered roles or the unique pressures facing adolescents. All were exacerbated by lack of sources of support, whether informal or formal.

11.2.1. Adults’ psychosocial vulnerabilities

Almost three-quarters of adult respondents (72%) described the effect of conflict and displacement on their current psychosocial status as ‘bad’ (see Figure 61) and felt they were suffering because they were refugees (68%, see Figure 60).

We also used the World Health Organization (WHO) Quality of life (QoL) brief version (2004) tool to gauge adults’ overall quality of life. A total of 1,961 respondents, including 1,047 female caregivers and 914 men, completed the assessment. Scores were markedly lower (about 20%) than international benchmarking (Hawthorne et al., 2006) and those obtained in other conflict-affected settings (e.g. Gaza) (Al Bayoumi, 2014). For example, when asked to assess the overall quality of their own lives, 39% of adult respondents reported either ‘very bad’ or ‘bad’ and only 12% reported ‘good’ or ‘very good’. These negative findings were also apparent in the composite score (60) (see Figure 62) and each of the four sub-scores (see description below). Scores were particularly low across the environmental domain (53) and relatively higher for social relations (68). Interestingly, there were no substantial differences between the scores of women and men, rural and urban respondents, or different groups of UN beneficiaries. Composite differences between governorates were also minimal (ranging from 58 in Amman to 62 in Mafraq).
As we discuss further below, our qualitative findings suggest that one possible interpretation of these bunched scores is that psychosocial ill-being is so pervasive – and unmet need for services and programming so high – that it is difficult, using more generic numeric tools, to distinguish the needs of different subgroups.

The majority of respondents were not satisfied with their environments, given the extent of poverty and the rising threat of community-based violence they face. Nearly all (86%) did not have enough money for daily needs and about half (47%) lacked necessary information for daily living or felt unsafe in their daily life (44%). While there were no differences in this sub-score between men and women or between urban and rural residents, those in Amman scored markedly lower than those in Mafraq (50 vs 55). Furthermore, there were differences that specifically related to safety. Women were more likely than men to report ‘never’ feeling safe (6% vs 3%) and rural residents were more likely to feel safe than urban residents (47% vs 43%). Those living in Mafraq were twice as likely to feel safe as those living in Irbid (62% vs 33%). This is possibly because Mafrak is more rural than Irbid and closer to the living environment of many of the Syrian refugees living in Jordan (many of whom are from Daraa), and also because the presence of Zaatari refugee camp in Mafraq governorate led to improvements in the local economy by providing Jordanians with formal job opportunities. This was in contrast to the situation in Irbid, where refugees are more likely to compete with the host community for informal employment.

The QoL tool gauges psychological well-being through six questions that capture respondents’ body image, negative feelings, positive feelings, self-esteem, thinking and concentration, and spirituality. Unsurprisingly, given that refugees have seen their country torn apart and had their lives uprooted, this sub-scale had the second lowest

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37 The QoL tool assesses satisfaction with the environment through eight items, which capture the availability of services, opportunities for leisure, access to information, the sufficiency of monetary resources to meet daily needs, and safety.
average score (60), with 87% of respondents admitting to having negative feelings such as ‘blue mood, despair, anxiety and depression’ and 58% to not enjoying life at all or a little. More than 40% also reported problems with concentration. While there were no differences in this sub-score between men and women or between urban and rural residents, those in Irbid scored markedly lower than those in Mafraq (57 vs 62).

The physical health domain is assessed through seven questions, which ask about daily living activities, energy and fatigue, mobility, pain, sleep, work capacity and substance use. The lowest scored item in this domain was having energy for everyday life (54%), with 40% of respondents reporting low energy levels (either a little or not at all). Nearly one-third of respondents (31%) also felt unsatisfied with their capacity to work. While there were no differences in this sub-score between men and women or between urban and rural residents, those in Amman scored markedly lower than those in Mafraq (60% vs 65%).

The social relations sub-scale comprises three items that ask about personal relationships, social support and sexual activity. It received the highest average score (68%). More in-depth analysis, however, indicates considerable heterogeneity. First, women score considerably lower on this domain than men (66% vs 71%), which is not surprising given their confinement to the home and their isolation (socialising only with family members). Second, the average score for satisfaction with personal relations (72%) is much higher than the average score about support from friends (63%), which again highlights the limitations of even informal coping mechanisms available to Syrian refugees in Jordan.

While these QoL scores are low by international standards – and even in comparison to Gaza, another conflict-affected area in the MENA region – they are not as low as one might expect given our qualitative research. This is probably because it takes time to develop the trust needed to speak about emotionally and culturally sensitive psychosocial issues and experiences. Time and time again, our interviews began with relatively neutral stories clearly designed to maintain emotional distance and gauge interviewers’ reactions. As the interview wore on, and respondents became more comfortable, stories often became more personal. This was true of individual interviews and of focus group discussions. In many cases, respondents had never before shared their experiences with anyone other than a family member, and they found the opportunity to do so through the research process both highly emotional and cathartic. This was perhaps especially true for women in focus group discussions, where they were able to hear and share stories with other refugee women experiencing similar suffering but also perhaps using different coping repertoires.

Participants in our qualitative work reported that some of their family members were so traumatised by what they saw in Syria that they can no longer function. ‘My mother is traumatised – she forgets everything … We can’t send her alone out of the house for anything, even to the market – she doesn’t understand even very basic things. She has flashbacks,’ explained one 14-year-old girl (in a female-headed household, Zarqa). Others told us that even though their own lives were stable – and they were aware of the dangers of going back to Syria – they were consumed with constant worry about those they had left behind. ‘I am mostly worried about my family in Syria [that something may happen to them] … That’s it. Even if the war doesn’t end, I want to go back and see my brother. I miss him’ (man, WFP beneficiary, Irbid).

We heard many stories of how conventional gender relations had been called into question and even turned upside down – sometimes to the detriment of men and women’s mental health and other times to the detriment of men’s mental health. Some women, especially those who had no male family members, told us they had found new freedoms since coming to Jordan and felt that their coping skills and opportunities had expanded accordingly. One widow explained, ‘My husband didn’t like me to socialise. When I needed to buy something from the market, he didn’t let me go – or at a minimum he needed me to be accompanied by my mother. But now I go and buy everything by myself outside the home … I have coped well here … I go to classes at the Islamic centre two days a week … We have learned many things, communication skills, skills that I can use in my everyday life …’ (widow, female-headed household, receiving all three UN cash assistance, Amman). Other women reported that having to work was very stressful for them, because, ‘It is considered haram [forbidden in our culture]’ (WFP beneficiary). In addition, some women living with male family members also reported that gender norms had intensified and left them even more isolated (from people and from information) than they had been when they were living in Syria. One woman, living in an apartment with her husband and her two sisters and their husbands, told us, ‘My husband does the shopping. Sometimes we are allowed to go to visit our other sister. We are not permitted to visit the neighbours … We have no computer, no phone, no smartphone … Our source of information is via our brother and my husband only’ (woman, receiving all three UN cash assistance, Amman).

Men keenly felt their inability to provide for their families, effectively emasculating them. One man explained, ‘Every day is the same. I am not emotionally stable or comfortable … Being unemployed, staying at home [is the] hardest thing I have faced as a man … Here, women turned into men and men turned into women … Once, they called me saying we are the Islamic centre and told me to come at 12 to receive something. I went, but I wish I didn’t. It was my first time going, and I was the only man with 500 other women. Imagine being the only woman with 500 men! I felt so ashamed that I eventually left. I thought there would be men there, but there weren’t.’ He continued,
describing how he has come to rely on his wife, ‘My wife helped me so much. She works hard. If her neighbours tell her about a certain association she goes. She does things that a man would be too ashamed to do … Women [seek aid more actively and] can manage, unlike men’ (man, UNHCR beneficiary, Zarqa). A religious leader from the Syrian community in Irbid added that men’s shifting roles are contributing to depression – and violence: ‘It is the man’s job to take care of his family.’ Now that men cannot do this, ‘it makes men depressed and violent’.

Many refugees also recounted persistent fears (about deportation, for instance) that are taking a toll on their mental health: ‘They can send anyone they want back there … I worry if my uncle works without a permit that they would deport him’ (man, WFP beneficiary, Zarqa). Another added, ‘They would immediately tell the police on us to send us back to Syria’ (man, UNHCR beneficiary, Zarqa). Others are tired of the perceived resentment they face from many in the host community: ‘People in the community – they label them – “oh, you Syrian – and now the prices are higher and you took our jobs!”’, reported one (focus group discussion with boys aged 13-16). ‘They [Jordanians] believe that we replaced them in the labour market. May God be with them,’ (woman, Zarqa, receiving all three UN cash assistance). Indeed, although some interviewees reported having received help and having built good relationships with their Jordanian neighbours, most echoed this view: ‘We only socialise with Syrians, we don’t interact with Jordanians’ (man, UNHCR beneficiary, Zarqa). This was particularly the case for respondents with children, who had largely decided that the only way to keep their children safe from bullying and harassment was to isolate their family from the broader host community.

11.2.2. Children’s psychosocial vulnerabilities

We also assessed the well-being of a subset of adolescents using the KIDSCREEN QoL tool. As with the WHO QoL tool, it asks about several facets of life: physical health and activity, psychological well-being, friends, family and free time, and school and learning. The composite average, 63%, was notably lower than European norms for adolescents aged 12-18 (72%) (Ravens-Sieberer et al., 2014) but close to the level reported by Palestinian children living with a disability in Gaza (Jones et al., 2016). It is important, however, to caveat our sample for this particular measure. As noted in Annex 2, 60% of adolescents were not allowed by their parents to complete the KIDSCREEN tool. A further 20% refused to participate despite having received parental permission. It is thus possible that our sample, which included 194 boys and 208 girls (for a total of 402 children with a median age of 14), is not representative of the broader population of Syrian adolescents living in Jordan. Carefully comparing the households with KIDSCREEN participants to households without KIDSCREEN participants did not identify any substantial relevant differences, but care should be taken in extrapolating our results too far. For example, we do not know whether the children in the KIDSCREEN sample were more likely to be participating in extra-curricular classes – e.g. life skills or other activities run by Islamic centres or the Makani centres, which were often described as a ‘lifeline’.

Figure 63 shows our calculations for adolescents’ QoL with the sub-scale for ‘friends’ more than 15 points lower than that for ‘school and learning’ (53 and 69 respectively). Composite scores were not substantially different between girls and boys (62 vs 63), though there was some variability

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38 While households with KIDSCREEN participants were larger, they were more likely to be receiving UNICEF cash. As noted in chapter 3, this means that their consumption and expenditure was more evenly matched and that they were less likely to be ‘in the red’. On the other hand, school enrolment rates, recreational opportunities, living conditions and food consumption index scores were roughly similar between the two groups of households.
between younger adolescents and older adolescents (64 and 61) and a notable difference between adolescents living in Zarqa and those living in Mafraq (66 vs 60).

With the caveat that our sample may not be fully representative, adolescents in our research were most likely to be satisfied with school and learning – around 51% reported being overall happy at school and 64% got on well with their teachers, probably because despite the harassment and violence they regularly face, school normalised their lives. Those aged under 15 were more likely to be satisfied and were more likely to be enrolled in school than those over the age of 15 (72 vs 65), which is interesting in light of the realities of double-shift schools, under-resourcing and the rampant bullying discussed in chapter 8. As was the case with composite scores, adolescents in Mafraq were less likely to be satisfied with their educational experiences than those in Zarqa (64 vs 71). Those in households receiving cash assistance were more likely to be satisfied than those receiving only WFP vouchers. Perhaps most intriguingly – and potentially speaking to the fact that school represents one of the few ‘normal’ childhood experiences available to Syrian refugees (who are all too aware that the alternative to a bad school is no school at all) – the school sub-score for our sample was actually higher than the European average (66).

Regarding physical activities and health, our sample scored about 4 points lower than their European peers (64 vs 68). Only 45% of adolescents reported being very often or always full of energy and 50% said they were very or extremely physically active. Less than half (44%) reported that their health status was excellent or very good. Within our sample, there were no differences between girls and boys, younger and older adolescents, or across governorates. Adolescents living in Mafraq, for instance, were far less satisfied with their family and free time than those living in Zarqa (59 vs 68).

Syrian children’s social isolation emerges very strongly from our KIDSCREEN results. Our sample’s sub-score was only 53, compared to 76 for European adolescents. Indeed, for the adolescents in our survey, ‘friends’ is the lowest sub-score, whereas for their European peers it is the highest. Only 4.2% of the adolescents we interviewed said they could ‘always’ rely on their friends; more than half (56%) said they could seldom or never rely on them. These figures are not especially surprising given girls’ isolation and lack of mobility and boys’ (and sometimes girls’) near daily exposure to violence (see Box 20) (see also: IRC, 2015; Sirin and Sirin-Rogers, 2015; USAID 2015; WRC, 2014). Adolescents in Mafraq reported the lowest satisfaction with friendships (sub-score of 46 vs 55 in other governorates). Boys were more likely than girls to report that they very often or always have fun (31% vs 22%) and have more access to their friends. Over 40% of girls, but only 27% of boys, said they seldom or never saw their friends.

Box 19: Family pressure to marry

‘My uncles are pressuring to get my father and brothers to force me to leave school and get me married off. Only in families who don’t marry off their daughters can you be free of such pressures. The thinking is, if you get married you are safer. Especially when a girl is not in school and is 16 years – people think she has to get married. But I want to avoid this early marriage at all costs. My friends’ experiences with marriage have been very challenging. And I want to study!’ (female, Makani centre attendee)

‘I’m so worried now that I have left school. I’m afraid that I won’t be able to fulfil my ambitions – to be a policewoman. And even if I had been able to continue in school – to be in the police force here you need a work permit. But I don’t think they exist for the police.’ (Teenage girl, attending a Makani centre, family receive only WFP vouchers)
Box 20: Surrounded by violence

Adolescent boys told us that the violence they experience is so common that it has become normal:

‘[Jordanian children] assault us … they think they are superior … They hurt us with their words … They hit us and insult us and our honour … They broke his glasses twice … We face this every day … One of them raised a knife in my face … They are older than us, they stand there and send a little boy to hit us, he is a young boy, and they threaten us saying that if we touch that boy they will do something bad to us. So we can’t touch the boy because he is young … They manipulate. Because they don’t want to come and hit us, they are young men aged around 17-18 years old.’ (Focus group discussion with boys aged 13 to 16)

‘Boys that make trouble or don’t do their homework are hit by their teachers – with a stick on their hands or in their face. It gives a mark. It is not a big deal.’ (14-year-old boy, Irbid)

Adolescent girls told us they also face physical violence:

‘All the time I am fighting with Jordanian girls – they pick on me and beat me up. I complained about this to my mother but she also beat me and so I decided not to go to school. I did well in school – I got 82 [out of 100] but my mother urged me not to get into any fights and just to put up with it but I can’t tolerate this sort of treatment and bullying. If they bother me and hit me I will hit back. [laughing now] In fact, I cut their hair, I wanted blood – I wanted to kill and eat them! I just can’t stand them saying bad words to me anymore!’ (15-year-old out-of-school girl)

‘I had my bag in my hand and there were some Jordanian girls that wanted to have what I had in the bag. When I closed my bag, I said, “You play with the wrong person.” They hold me by my legs and my hands like spread – and all of them hit me.’ (14-year-old girl, Irbid)
Positive effects of cash assistance in addressing refugees’ psychosocial-related vulnerabilities

Almost all participants agreed (96%) that cash had improved their family’s overall well-being and two-thirds (66%) agreed that cash had improved children’s well-being. Among adults, 87% reported that cash had reduced their stress levels and 56% that it had improved their feelings of control. Parents were clear that this was translating into cash assistance for children. One father explained ‘Before [we began to receive the cash assistance] I used to lose my temper a lot, I used to pressure my children, we were feeling down’ (man, UNHCR beneficiary, Zarqa). Another added, ‘It supports us and helps us. That is the most important thing. We would be in low spirits [without it]’ (boy, 16 years old, taking care of his divorced mother, UNHCR beneficiary, Zarqa). That said, caregivers also clearly understood the limits of how cash could help improve their children’s well-being (and particularly adolescents’ well-being). About 70% of caregivers reported improvements in the well-being of children aged 5-12, compared to only 60% of caregivers of adolescents aged 13-18. According to caregivers, adolescent girls were especially unlikely to see improvements in their well-being due to cash: 57% of the parents of girls, compared to 62% of the parents of boys, had reported improvements. This presumably reflects the reality that threats to adolescent boys’ well-being, such as child labour, are more likely to be poverty driven than the more normative threats that face adolescent girls, such as social isolation and child marriage.

Adolescents also felt that cash was improving their lives. Nearly 80% reported that their lives in Jordan were at least somewhat better than their lives in Syria, with most (65%) attributing that difference (at least in part) to cash assistance. Unsurprisingly, given their greater capacity to think about the future, older adolescents were less positive than their younger peers. Just over 20% of older adolescents (compared to only 12% of younger adolescents) reported that their lives had not improved at all since leaving Syria. Older adolescents were also more likely than younger adolescents to believe that cash had no effect on their lives (25% vs 18%). Nearly all adolescents (90%) said that children in the household were benefiting from cash equally.

Adolescents and adults both believed that cash was improving children’s chances for the future. As Figure 64 shows, 42% of adolescents believed that cash made their chances ‘a lot’ better and 29% believed it made them ‘a little’ better. When asked the same question, adult responses were 31% and 32% respectively, indicating that teens are slightly more positive than adults. Notably, women – responsible for life’s daily expenses – were more likely to report that cash had made their children’s chances ‘a lot’ better and men to report that they were just ‘a little’ better. Adolescents were also less likely to report ‘no effect’ than adults (10% vs 20%), though there is a clear correlation based on age (older adolescents are more able than younger adolescents to understand the magnitude of the disadvantages they face so are more likely to see cash as having no effect).

Most adolescents said the cash meant they were now able to have pocket money, get more food, or buy school supplies and clothes (see Figure 65). Girls were more likely than boys to buy clothes (47% vs 41%) and boys were more likely than girls to buy school materials (48%
vs 44%). Older adolescents, most of whom were out of school, were much less likely than younger adolescents to mention school materials (38% vs 48%) or transport (7% vs 15%). They were, on the other hand, more likely to mention clothes (51% vs 44%).

11.4. Remaining challenges for cash assistance programming in addressing Syrian refugees’ psychosocial vulnerabilities

We repeatedly heard from our research participants that they wanted not just cash but actual psychosocial support. As one explained, ‘We would like some sort of psychosocial briefing – to empty what we have inside – this energy … We lost our country, our assets and all these things … We want to empty this out and talk about it – it would be helpful’ (grandmother, also a mother of a 4-month-old child, living in a house with 10 children, WFP and UNHCR beneficiary).

Indeed, several people noted that while they depend on cash assistance to meet their daily needs, accepting cash is actually quite difficult for them in terms of their self-esteem. As one beneficiary told us, ‘One starts thinking of [receiving cash assistance] as begging and it is difficult because we are not used to these things’ (older woman, on the waiting list for cash assistance, Zarqa).

Adolescents also told us that they need help. A 13-year-old boy, now living in Mafraq, explained that his father was part of the Syrian army. ‘The revolution started in my neighbourhood. All I remember is the air strikes.’ Knowing that they would have been killed had they stayed, his father fled to Jordan with his family. Even now, the boy explained that he is afraid of being kidnapped and is haunted by violence. ‘I don’t like being alone … I am always so aware of the area and the cars around.’ He has divulged his fears to no one, not even his parents. Not only does he understand that ‘they can’t help me anyway’, but he is afraid that they won’t let me go outside anymore. They are already afraid for discrimination of the police [against teenage Syrian boys].

Chapter summary

Among Syrian refugees in Jordan, adults and adolescents alike have experienced high levels of trauma and stress and report overall low quality of life. Cash is helping to reduce stress and improve life quality.

Psychosocial vulnerabilities:
- Nearly three-quarters of adults report their overall psychosocial status as ‘bad’ due to the war and only 12% said that their quality of life is good.
- Men who cannot provide for their families feel emasculated and all too often respond by further restricting the mobility and opportunities of their wives, daughters and other female relatives, who are increasingly isolated.
- Some women, especially those without male relatives, are enjoying newfound freedoms in Jordan.
- Adolescents (boys and girls) reported being exposed to verbal and physical violence on a regular basis.

Effects of cash assistance:
- Adults and adolescents both agree that cash has helped reduce their stress levels and improve their quality of life.
- Adults and adolescents reported that cash has improved children’s chances for the future.
- Respondents felt that cash is not enough; they need psychosocial support too.
12. Beneficiaries’ awareness of and perspectives on cash assistance modalities

12.1. Chapter aims
It is important to consider beneficiary perceptions of a programme’s functioning, significance and equity when assessing its effects on people’s lives and well-being. Globally, cash assistance programmes include a variety of feedback loops and accountability mechanisms. In the case of the UNHCR and UNICEF cash assistance programmes for Syrian refugees in Jordan, there are three key interfaces between programme implementers and beneficiaries: the hotline, the annual re-registration process of refugee status with UNHCR, and the home visit. This chapter synthesises our research findings about beneficiaries’ awareness of and perspectives on the effectiveness of the cash assistance programmes, including the delivery mechanism and the adequacy of accountability processes. We explore beneficiary perceptions of the experience of applying for cash assistance, their views on who is eligible (and the equity of the eligibility criteria), and their understanding of programme entitlements (including cash amount, access to health services, etc.). Our findings here are based only on the responses of beneficiaries who were receiving cash assistance; the views of those receiving only WFP vouchers are not included.

12.2. The process of applying for cash assistance
UNHCR registers Syrian refugees as asylum-seekers almost immediately upon entry into Jordan. Families are given a case number, an asylum-seeker certificate, and a MoI identification card that serves as their official documentation for living in Jordan. Each family member also enrolls their biometric (iris) data, which constitutes the basis for potential enrolment for a variety of assistance packages, including cash, non-food items (NFIs), WFP food vouchers and more. Most of our research participants reported that the process of applying for assistance was comparatively smooth and fast. Nearly 85% considered it ‘good’, with most of the rest reporting it as ‘neutral’ rather than bad. Satisfaction rates were higher among refugees living in urban areas, especially Amman. The average wait time between initial contact and receipt of the first benefit was 3.5 months (median of 3 months), although 20% of our respondents said they were on the waiting list for more than 200 days, and 10% reported long wait times and high transportation costs. These problems were more frequently reported by refugees living in Mafraq (20%).

Most UNHCR cash assistance beneficiaries learned about the programme from relatives, friends or neighbours (55%) or home visits by programme staff (31%). This is markedly different from UNICEF CCG beneficiaries, who represent a subset of the broader pool of UNHCR recipients and were likely to have learned about the programme through text messaging (43%) or from relatives, friends or neighbours (28%).

12.3. Refugee perceptions about targeting
Survey respondents often had incomplete information about the way cash assistance beneficiaries are selected. Just over 60% said that beneficiaries are selected ‘only because they are Syrian refugees’; just 21% understood that beneficiaries must also be very poor or vulnerable. About 12% mentioned they did not know how the selection process works (see Annex 4). Furthermore, most beneficiaries (61%) thought the selection process ‘fair’ but a sizeable minority (33%) considered it unfair. Our research participants were primarily concerned about families they felt should be receiving cash but were not. Many focus group participants, for example, reported that the most vulnerable people were not consistently selected, with smaller female-headed households – especially those supporting aged or disabled family members – likely to
believe they were passed over in favour of larger families, despite the high costs their care burden entailed.

The survey picked up only limited concerns about non-deserving households getting cash assistance. However, our qualitative work uncovered more concerns. In our focus groups, women who lived in male-headed households complained that some female-headed households were actually relatively better-off as they also received high remittance payments from spouses working in Gulf states. For example, one woman told us: ‘You can find a woman who has the iris scan and her husband is working in the Gulf countries. He does not have a UNHCR certificate because he is resident in the Gulf countries. They should investigate more because there are many people who are in need. They should link the forename to the surname and check it against the UNHCR records so that they can do justice to everyone … Most of [these women] say that their husbands are in Syria in order to be eligible for the iris scan … They would claim that her husband is in Syria while he is working in the Gulf countries going back and forth to visit them’ (male head of household, WFP beneficiary, Irbid). Another added, ‘There is a family who claims that the house-holder (their father) passed away in Syria, but they lied as their father works in Kuwait, and they are provided with UNHCR’s cash assistance and other types of assistance … This shouldn’t happen, it is unfair’ (focus group discussion with boys, 10-13 years old).

12.4. Beneficiaries’ awareness of programme entitlements

Beneficiaries had relatively little understanding of how the cash assistance is allocated. Only 60% of respondents in the quantitative survey were aware of their entitlements (i.e. the amount and frequency of payment) as a beneficiary of the cash programmes (see Figure 66). A higher proportion reported knowing their entitlement in Zarqa (92%) and Mafraq (69%) than in other governorates, especially Irbid (44%). Beneficiaries living in urban areas knew more than in rural areas (67% vs 47%). Moreover, males receiving all three UN cash assistance packages scored higher than their counterparts from other categories. Similarly, 64% of respondents were aware of the sources of the regular funds they were receiving.

When asked directly whether they had learned about the UNICEF CCG from UNICEF, 77% of survey respondents said yes. Of those, 75% learned about it via text message. Knowledge of the CCG was more frequently reported by beneficiaries living in Zarqa, in urban areas, by male respondents and among the recipients of all three UN cash assistance packages. More respondents heard about the CCG from families or friends (24%) than from UNHCR staff during visits (21%). Similarly, 78% believed that the CCG was dedicated to offer specific support for children and 21% believed it was for the entire household. While the vast majority (92%) of respondents correctly believed that the CCG was at 20 JOD/child/month (up to a cap of four children), 93% did not know the duration of the initial CCG.

12.5. Accessing cash payments

Our research participants had had very little trouble accessing their cash payments. Nearly all said they received the cash assistance on a monthly basis; 98% received a text message that told them their cash was available, and 97% reported they had never been unable to withdraw their cash and therefore never lost it as a consequence. The vast majority (95%) of survey respondents told us that they had never experienced any disruption with their cash payments — and only 1.5% had experienced frequent disruptions.

Nearly all (95%) beneficiaries reported withdrawing their cash from a bank following an iris verification. Just over 5% use an ATM card. On average, it takes...
beneficiaries around 30 minutes to get to a bank and costs 2 JOD (mostly for bus fare). Beneficiaries living in rural areas spend more time and money travelling to the bank than those in urban areas (38 minutes vs 25 minutes and 3 JOD vs 1.6 JOD), with time and costs higher in Mafraq than Amman. Beneficiaries prefer weekdays to weekends (95% vs 5%), largely because it is easier to get transport, and most access their cash either in the morning (43%) or as soon as they receive the text message telling them it is available (31%) (for further details see Annex 4).

Some 77% of survey respondents were satisfied with the method for receiving their cash assistance, with satisfaction higher in urban areas (80%) and Mafraq (86%) than in rural areas (71%) and Irbid (68%). Some 47% reported experiencing problems receiving the cash, mostly because of overcrowding at banks, problems with the iris scan itself, or machines not working (see Figure 67). Our qualitative research found that most beneficiaries had experienced challenges when using the iris scan technology, especially families with small children, elderly members and ill members (see Box 21).

But another participant added, ‘There are specific shops where you can use the coupons, including Sameh Mall, the Civil Service Consumer Corporation, and so on … You cannot go to any mall. There is [exploitation by merchants]. Items are sold at different prices outside. For example, you know a kilogram of tomatoes costs 20, but when you go there it is sold for 35. [The employees treat you] badly. They are prejudiced and act as if they are giving you money out of their own pockets. Of course that doesn’t include everyone, some people are kind, [But] they make us feel like we are a burden.’ (Male, UNHCR beneficiary)

12.6. Interactions with programme staff
Research participants were mostly satisfied with their interactions with programme staff; those living in urban areas (87%) and Amman (96%) were most likely to be satisfied. Respondents were particularly likely to report their interactions with Mindset (hired by UNHCR to carry out home visits) to be ‘very good’ or ‘good’ (96%), (beneficiaries are less likely to directly interact with UNICEF staff given
Box 21: Mixed views about payment modalities

Many participants in our qualitative research found the iris scan technology frustrating, but admitted that it does offer some protection against false claimants.

With the iris scan technology at ATMs, wait times are long and the technology often doesn’t work first time around. Beneficiaries reported that the technological ‘costs’ are especially high for mothers with young children and the elderly – who frequently cannot take the time, or do not understand how, to persevere with the technology until it works. They also noted that when the chosen beneficiary is ill and cannot make it to the bank, the whole family suffers:

‘Sometimes [withdrawing using the eye scan] is inconvenient. You have to try 3 or 4 times to get your eye scanned. This is the main problem – the fact that it takes too much time, and often it is malfunctioning. [So] we go home and return another day. Sometimes I am forced to go 4 or 5 times.’ (Mother of 4, UNHCR beneficiary)

‘[Receiving the assistance] through iris technology recognition … takes so long as usually, there are many refugees lining up there … Sometimes I have to go back 2 or 3 times to get it. Sometimes the service is not available or there is insufficient balance. I faced this problem many times. I had to go back 5 or 6 times. Sometimes I place my eye 10 times … I relax … then I re-try until it works.’ (Woman, WFP and former UNHCR beneficiary, Zarqa)

There were problems with iris scanner ATMs, you need a whole week to withdraw your allowance. Because only one bank offers the service, people stay overnight there. People started coming from Mafraq and other areas and staying overnight there.’ (Mother of pre-schoolers in focus group discussion in Mafraq)

‘It is overcrowded. For me the process is comfortable. However, the other day I saw an elderly woman standing and she was shivering. Elderly people are forced to wait, and sometimes the waiting time extends to an hour until your iris is properly scanned, and this is if it works at any rate.’ (Male beneficiary, Zarqa)

‘You usually only get an eye scan for the head of the household. No one else can collect it. [If people are ill there is] a medical report saying that the man has a stroke and his eyes aren’t functioning. [My wife and I] go together [to make the withdrawal] but we wait two days for the overcrowding to be less severe. When the eye print aid is deposited, all the Zarqa streets are clogged. It is very crowded. I wish you could talk to them to give us a card and go whenever it’s convenient for us. I once lost 120 JOD because I could not take it on time. You only have 10 days after which if you have not taken the money you lose it. I started going to get the eye print allowance so that I don’t lose it again – every time I go I struggle; I wait in line from morning until dusk. It is overwhelmingly crowded. People of Mafraq and Khalidiyah and all the villages come to Zarqa, they close all the ATMs. We don’t know why they close them – we try to complain but no one responds.’ (Female beneficiary with 5 children, Zarqa)

Participants acknowledged that WFP vouchers, while easier to use, are open to exploitation. One man told us, ‘Vouchers are easy to use ... they are available 24 hours a day ... every month I receive a message from WFP to inform me that my vouchers have been charged and can be used. To be honest, old refugees would prefer vouchers [to the iris scan] as they face difficulties while placing their eyes against the machine or have to walk long distances to get to the bank. For example, I would give my son the vouchers and their password and he could easily redeem them.’ (Male, UNHCR and UNICEF beneficiary)

But another participant added, ‘There are specific shops where you can use the coupons, including Sameh Mall, the Civil Service Consumer Corporation, and so on ... You cannot go to any mall. There is [exploitation by merchants]. Items are sold at different prices outside. For example, you know a kilogram of tomatoes costs 20, but when you go there it is sold for 35. [The employees treat you] badly. They are prejudiced and act as if they are giving you money out of their own pockets. Of course that doesn’t include everyone, some people are kind. [But] they make us feel like we are a burden.’ (Male, UNHCR beneficiary)
understood by a sizeable minority of beneficiaries. Over half of those visited by UNICEF staff and over a third of those visited by UNHCR staff reported that they were not told the purpose of staff visits (see also Annex 4).

The limited frequency and intensity of interactions with programme staff was also emphasised by participants in our qualitative research, who felt that Mindset employees were largely there to look for assets and wished that UN staff would visit and offer actual support. Some beneficiaries told us that they are afraid to invest in any purchases that might suggest that they were becoming less poor. As one participant said, ‘They came three times ... They come and say they are from so and so organisation and we want to help you, but nobody helps us. We tell them about our conditions but it seems that they don’t believe us’ (female beneficiary). Another added, ‘Mostly they [those conducting home visits] aren’t unfair with anyone, but around 5% of the employees are ill-intentioned and do not wish well for anyone ... We have been here for five years and are still afraid to get a set of chairs or a bed for our houses [in case it affects our eligibility for assistance]. This is among the major issues; we are afraid of furnishing our houses’ (focus group discussion with Syrian community leaders, primarily activists and those volunteering with CSOs).

These fears were compounded in cases where beneficiaries believed they had lost access to migration opportunities because of how they had answered UNHCR questions when they were called about possible immigration opportunities. Several respondents told us they had been approached by UN agencies to gauge their interest in international immigration (especially to North America or Germany). When individual refugees responded with questions and concerns about whether their whole family could migrate as a group they told us that contact often ended. One male participant in North Jordan said, ‘We got accepted for immigration but didn’t want to go. We got permits for Canada – but it was separate. So my brother first got the permission but didn’t want to leave me and my mother. And then when my mother and I got permission, my brother had been deported so we didn’t want to go without him.’ Another male participant added, ‘My uncle got immigration to Canada but he refused to go. Because he can’t leave me alone. One of the reasons is me.’

12.7. Refugee perceptions of communication and accountability mechanisms relating to cash assistance

We are aware that UNHCR and UNICEF have a range of mechanisms for communications and feedback. This section just reports on beneficiary awareness and views about the mechanisms with which they interact. Beneficiary respondents had mixed levels of awareness of communication and accountability mechanisms embedded within cash assistance programming. Only half of survey respondents reported knowing there was a complaint system and of those, only half said they knew the procedures required to lodge a complaint (see Annex 4). Those living in rural areas were especially unlikely to be aware of accountability mechanisms while those receiving all three UN cash assistance were most likely to be aware. There were no differences with respect to age, gender, family size, length of time receiving cash assistance, length of time in Jordan, or amount of assistance.

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While only 11% of survey respondents had filed a complaint, only 10% of those felt their complaint had been adequately addressed. Over 40% felt their complaint had been ignored and more than 50% said they did not know how their complaint had been addressed because programme staff had never given them feedback. Over 43% of respondents indicated that they would not file a complaint even if they believed they were treated unfairly – mostly because they did not know how (35%) or did not believe it would change anything (34%) (see Figure 68).  

Our qualitative research brought our survey results to life. Participants told us that the UNHCR helpline – which fields 1,400 calls a day despite that fact that 40% of all calls are abandoned due to wait times – was so flooded with calls that queues were long and comprehensive answers rare. One participant told us, ‘They are supposed to have a line that they answer. It is always busy, I dialled it 30 or 40 times and I can’t get through’ (female beneficiary, Irbid). Beneficiaries also reported that complaints often came to nothing, even across years, and that trying to visit UNHCR offices was as frustrating as trying to call their hotline. This example is typical of many others: ‘[After my house was robbed] I went to the UNHCR and told them everything that happened and they registered the information [and] they told me it is my right and that they would deal with it, and they are still dealing with it since three years. [But] they didn’t do anything’ (male-headed household, non-beneficiary, Irbid).  

Although relatively few survey respondents feared retaliation if they made a complaint, in our qualitative research, some stated a reluctance to express concerns or grievances to UNHCR for fear of losing access to the cash assistance. One research participant explained, ‘We wouldn’t contact UNHCR to recommend that they go back to cards instead of the eye print [because] we worry that they would take it away from us … let us just stay with the same. It is good. If they take it away they will never bring it back so [it is better to] leave it as it is’. He added, ‘We did not contact UNHCR to ask them about some people stopping receiving assistance [because] I fear they would stop giving [the CT] to me, I do not want to dig myself any holes’ (male head of household with large family, UNHCR and WFP beneficiary, Mafraq).  

Figure 68: Reasons for not making a warranted complaint  

![Figure 68: Reasons for not making a warranted complaint](image)
**Chapter summary**

Beneficiary perceptions of the cash assistance programming implementation provided by UNHCR and UNICEF are overall very positive. However, there is limited awareness of programme targeting and accountability mechanisms.

- Overall, refugees expressed satisfaction with the process for registering for assistance.
- Most had limited understanding of how the cash assistance is targeted. A sizeable minority (30%) thought targeting was unfair.
- Refugees had limited understanding about exact benefit amounts and while they knew the main sources of funding, there were gaps in understanding how these were allocated.
- Overall, the process of receiving the cash works well and most beneficiaries were satisfied with the process. There were some frustrations with the iris scan process but also a recognition that other mechanisms may be more open to fraud or exploitation.
- Beneficiaries were generally satisfied with the way they are treated by agency staff, although there was dissatisfaction with the level and scope of interaction, and especially the limited nature of home visits, which made it difficult for staff to really understand households’ struggles.
- Only half of all respondents were aware of complaints systems and many doubted that complaining would change anything. There were also repeated complaints about inability to get through to the telephone helpline in a timely fashion.
- The overall challenges in accountability mechanisms are noteworthy and require action – specifically, the fact that 40% of calls are abandoned, that research participants report that many complaints are left unresolved, and that at least half of beneficiaries do not know how to lodge a complaint.
13. Conclusions and recommendations

Along with a growing body of literature on the plight of Syrian refugees in different host countries, including in Jordan, findings from our study highlight that Syrian refugees, particularly children, suffer from a wide range of vulnerabilities. These vulnerabilities, which are often exacerbated by or layered over the trauma they faced when fleeing Syria, can have long-lasting effects on people’s physical and psychological well-being as well as their chances and aspirations for future economic and social development.

These vulnerabilities include: overcrowded housing conditions with limited access to water, sanitation and hygiene (the effects of which are exacerbated for women, adolescent girls and people with disabilities); limited access to sufficient and nutritious food; a relatively high disease burden with limited/reduced access to health services, owing to inability to meet the costs of doing so; and inadequate access to education – again, due to inability to pay costs but also inadequate space, poor quality education environments and bullying in schools, to name but a few reasons for low enrolment rates among Syrian refugee children. Many Syrian families struggle to meet their basic needs – particularly when they face an unexpected health crisis or when rent suddenly rises, or when a new child is born.

As a result of these vulnerabilities, refugees have resorted to a number of coping strategies that have either aggravated existing vulnerabilities or created new ones in the short and longer term. Thus our study found that while a relatively small proportion of Syrian refugees were able to draw on savings and assets accumulated when in Syria, or receive remittances from abroad, many others had had to resort to negative coping strategies that include reducing the type and amount of food consumed, avoiding seeking needed health care, sending their sons to work, marrying their under-age daughters, and even (in some cases) returning to the violence and insecurity of Syria.

The humanitarian and development actors have mounted a large-scale and laudable effort to meet the needs of Syrian refugees in Jordan. The UNHCR–UNICEF cash assistance programme is one such response. Adults and adolescents interviewed for this study told us that cash assistance was critical for them and their families as it contributed in important ways to meeting some of their most urgent basic needs. They explained that the cash assistance helped them pay for housing and utilities, allowed household members to eat better-quality food and to do so on a more regular basis, improved access to health care (especially for children), allowed families to spend more on education, and has helped reduce the need to rely on the most damaging and risky coping strategies such as sending their sons to work. They also told us that cash assistance was reducing their stress and anxiety and improving children’s chances for the future.

While this report has disaggregated findings by the different kinds of assistance received, overall our study shows that receiving the full UN cash assistance package – consisting of food vouchers from WFP and cash assistance from UNHCR and UNICEF – is necessary for refugee families to meet their basic needs. We consistently found that those receiving cash assistance were better off than those receiving WFP vouchers only and also that regardless of cash assistance, those receiving full-value WFP vouchers were better off than those receiving only half-value WFP vouchers. It is thus clear that families’ well-being depends on the absolute value of the assistance they receive – on a per capita basis, given that households receiving the UNICEF CCG have more than twice as many children, on average, as households not receiving the CCG.

However, a number of challenges remain, which were highlighted by our study respondents. Despite receiving cash assistance, many refugees were still not able to meet all of their needs, usually because the amount of cash was insufficient to do so. Some challenges were clearly beyond their control (i.e. supply-side constraints), including (for instance) the lack of affordable and good-quality housing, limited spaces in public schools, and lack of good-quality and regular food. Other challenges include a limited number of places where they can spend their food vouchers. These challenges have resulted in households having to continue to adopt some negative coping strategies (as already described).

Our findings highlight a number of ways in which UN cash assistance programming could be strengthened to more effectively tackle the multi-dimensionality of poverty and vulnerability. These both resonate and build on recommendations identified in the secondary literature. Table 5 proposes recommendations by sector/theme and by key stakeholder, though there are clearly overlaps across themes but particularly across stakeholders. In this case, we place the issue in the stakeholder category...
Box 22: Implications from our findings for the new UNICEF Hajati cash for education programme

UNICEF’s new cash transfer for education programme, Hajati, has the potential to address a number of the needs uncovered by our research. Aimed specifically at supporting children’s access to education, key areas to pay attention that are highlighted from our mixed findings include the following:

• **Target parents from the beginning**
  - The Hajati model calls for using behavior change communication to help parents understand the importance of education and what their responsibilities are to their children but it is critical that this is not limited to parents whose children have already dropped out of school but instead is targeted to all parents so as to better prevent problems rather than merely address them.
  - Intervene early and in a more personal way
  - Given the strong need for more support articulated by many mothers, we would suggest that outreach combine not only SMS messaging but also a voice call. A human voice that indicates concern is a powerful motivator. We also suggest intervening with a home visit within a week after dropout so that children do not miss too much school as to feel reluctant to return.

• **Develop a clear and streamlined home visit protocol**
  - Our understanding is that Hajati programme will work closely with Makani facilitators but it is critical that in addition to school-specific problems, economic need and child protection reasons, that ill-health is also included as a possible reason for school absenteeism given that poor access to healthcare is a major complaint by CT beneficiary households.

• **Work with schools to prevent bullying**
  - The Hajati programme model will involve Makani partners working with the MoE regarding children who are absent due to violence from teachers and with the school regarding children who are absent due to violence from peers. Problems with the Jordanian public school system pre-date the refugee crisis and require sustained efforts—already underway with the support of UNICEF—to improve teacher training (and pay), reduce classroom size, implement more modern pedagogies, etc. While such changes are beyond the remit of Hajati, improving student relationships is a tractable goal for Hajati and should become part of the programme from the ground up. We suggest, given the pervasiveness of bullying reported by our respondents, that Makani work with partner schools at the beginning of each school year, on a class by class basis, to use Makani methods to reduce tensions and foster student understanding. We also suggest that bullying incidents be tracked by classroom and by perpetrator and classrooms with high rates of violence (or recidivists) be offered more regular “refresher” training.

• **Support safe transport**
  - Hajati programme plans to provide children living in ITS with transportation to school if it is required. Children in host communities, however, do not appear to have access to transport. Given that research, ours included, consistently finds that bullying and harassment en route to school is a major reason for school leaving, as is parental concern about adolescent girls’ safety and family honour in particular, we suggest that more attention be paid to getting children to and from school safely. Hajati could consider offering older children, perhaps especially girls, a slightly larger stipend or bus tokens, particularly when they are attending the afternoon session and coming home after dark.

• **Work with working boys**
  - Our research found that the current CCG stipend of 20 JOD/month is not sufficient to help out-of-school children return to school. Given that stipend amounts will remain the same under Hajati programme, we suggest that UNICEF pair older working boys’ school shifts (whether formal or informal) with a shift of livelihood training that includes support to obtain a work permit. This would make it more immediately obvious to boys and their families that their longer-term earning potential is improved by participation. The Hajati programme should also consider offering out-of-school working boys a slightly higher stipend—to offset their lost wages—if they go back to school.
according to whom we think should lead the initiative/recommendation. It is also critical to highlight that while we have organised the recommendations in this table by theme, given the multi-dimensionality of vulnerabilities faced by Syrian families and their children in Jordan, it is essential that the support and services provided are done so in an integrated manner across sectors and providers (UN, NGO and government) if sustainable improvements in the well-being of refugee families are to be achieved.

In addition to these sector-specific recommendations, there are some overarching recommendations that cut across sectors and stakeholder roles and responsibilities. First, it is critical to work towards a cross-sectoral and joint stakeholder roadmap in implementing the more detailed recommendations below. While being clear about what the proposed theory of change is in terms of improving outcomes across different wellbeing domains, it is essential that the larger social protection framework ensure an integrated approach, with linkages to complementary programming if the services needed go beyond the specific remit of the implementing agency. Only with a coordinated response will the multiple vulnerabilities of refugees be sustainably addressed; indeed, one of the overarching recommendations from our research is to invest in a broader, longer-term social protection system, led by the government, with support from UN agencies, donors and NGOs/CSOs.

Second, as part of this roadmap, it will be important to identify a clear sequencing of recommendations, including quick wins. Among these we would include securing agreement that there is a need to develop a more realistic total amount that could satisfy the breadth of refugee expenditure needs as part of the ongoing revision process to the VAF rather than promoting a siloed approach. Clearly, all of these different vulnerabilities need to be factored in but it is also clear that those receiving the full package (and thus the larger amount of cash) are better able to meet their basic expenditure needs. In addition to these material needs, our study highlights one other area that requires much greater investment: tackling the psychosocial and social capital challenges that are unique to the refugee experience. And in this regard, it is urgent to invest in a cash-plus approach. One example highlighted in the report, which could serve as an important model for future investigation and investment, is UNICEF's integrated adolescent and youth Makani, skills building and social protection programme. This tackles educational, protection, skills-building and psychosocial and social cohesion objectives in an integrated package.

In the context of a multi-sectoral, multi-stakeholder cash-plus approach, robust accountability mechanisms are critical, as highlighted by the perceptions of beneficiaries in this study.
### Table 5: Recommendations to improve effectiveness of UN cash assistance programming for Syrian refugees in Jordan, by theme and stakeholder

<table>
<thead>
<tr>
<th>Theme</th>
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<th>UNICEF</th>
<th>Government</th>
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</table>
| Awareness of and perspectives on the UN cash assistance programming and implementation challenges / opportunities | - Invest in enhanced, two-way, face-to-face communication activities so that refugees can ask questions (including on eligibility criteria, appeals system and targeting approach) and consider setting up the enumerator cadre or introducing a social work cadre who can provide more direct support.  
- Improve availability of information in print, audio and web-based formats  
- Provide clear information on processing time and what potential beneficiaries can do if the stipulated time is exceeded  
- Strengthen the functioning and capacity of the UNHCR helpline to make it more accessible and effective in resolving beneficiary queries  
- Ensure that beneficiaries are aware of complaint mechanisms through the helpline and helpdesks | - Invest in enhanced, two-way, face-to-face communication activities so that refugees can ask questions (including on eligibility criteria, appeals system and targeting approach)  
- Improve availability of information in print, audio and web-based formats  
- Provide more communication for development (C4D) two-way messaging services through diverse channels to explain the purpose of the UNICEF CCG  
- Give proactive support to CCG beneficiary households to re-enrol children  
- Provide information on the UNHCR and UNICEF cash assistance programmes and targeting criteria when interacting with parents of children and young people attending Makani centres  
- Collaborate with UNHCR to provide helpline assistance that is accessible and effective in resolving beneficiary queries  
- Ensure that beneficiaries are aware of complaint mechanisms through the helpline and helpdesks | - Invest in capacity-building of social workers, volunteers and programme implementers on the multi-faceted aspects of vulnerability and accountability to affected populations.  
- Organise awareness and capacity-building sessions on gender equality, intra-family violence, and psychosocial service provision to beneficiaries and programme implementers alike | - Invest more in communication with community initiatives that aim to bridge the information gap on what forms of social assistance are available to refugee populations in Jordan  
- Increase the number of bank branches from which beneficiaries can access cash to reduce overcrowding and long queues, expand measures to address the unreliability of the iris scan technology and provide more timely support to those who face issues with the iris scanning approach | - Invest in referring particularly vulnerable families to UNHCR and UNICEF cash assistance programmes  
- Strengthen community involvement in programme decision-making, especially on programme governance and accountability  
- Facilitate regular beneficiary discussion forums to promote information exchange and to solicit beneficiary views and feedback about the programme |
| Shelter and living conditions                    | - Continue to provide winterisation cash supplement and winterisation kit prior to winter in addition to monthly cash assistance  
- Invest in better shelter provisions for refugees in ITS and migrating seasonal workers, particularly around WASH  
- Prioritize cash-for-shelter provisions for those living in ITS, focusing on WASH | - Invest in better shelter provisions (particularly around WASH) for refugees in ITS and migrating seasonal workers | - Set up minimum standards for landlords renting out houses and monitor the enforcement of housing arrangements | - Invest in WASH projects in ITS | - Facilitate negotiation between landlords and refugees and help provide legal aid support when discussing contracts  
- Continue to support programming in ITS |
Table 5: (continued)

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<tr>
<th>Theme</th>
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<tbody>
<tr>
<td><strong>Food consumption and nutrition</strong></td>
<td><em>Link the neediest households and individuals with WFP's emergency food programming (i.e. anaemic girls, malnourished children, etc.)</em></td>
<td><em>Provide cash-for-food services / and health referrals for children (particularly adolescent girls suffering from malnutrition)</em></td>
<td><em>Review whether food fortification or nutritional supplements can be provided to vulnerable refugee children in the second school shift</em></td>
<td><em>Ensure continued linkages with WFP food voucher programme and advocate for reinstatement of full food voucher amount through increased international donor support</em></td>
<td><em>Provide food assistance and nutritional supplements to particularly vulnerable refugee populations, especially those living in ITS</em></td>
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<td><em>Monitor all out-of-school refugees and provide recommendations on referrals</em></td>
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<td><em>Revisit the decision to exclude conditionalities that facilitate refugees from free health services</em></td>
<td><em>Develop linkages for dropouts among cash transfer (CT) beneficiaries and those on the waiting list to informal education services</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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<td><em>Tackle lack of access to services by unregistered refugees (e.g. through amnesty system) as also identified by UNICEF, 2016c</em></td>
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<td><em>Improve educational provisioning for children living in informal tented settlements (ITS), including possibility of bussing to regular educational establishments</em></td>
<td><em>Build teachers’ capacity to adopt non-discriminatory attitudes so that they can encourage inclusive behaviours among school pupils</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
<td><em>Conduct parenting skills and awareness-raising re. importance of educating children (particularly girls)</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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<td><em>Strengthen teacher training, including non-violent disciplinary approaches</em></td>
<td><em>Reduce costs so as to maximise value of the voucher</em></td>
<td><em>Invest in initiatives to bring together Syrian and Jordanian children (e.g. as per Generation of Peace initiative in Mafraq) through play, sport and other recreational activities in a gender-sensitive manner</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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<tr>
<td>Education and learning</td>
<td><em>Monitor all out-of-school refugees and provide recommendations on referrals</em></td>
<td><em>Monitor and enforce equal treatment and opportunities within double-shift school system</em></td>
<td><em>Increase investment in food vouchers for ITS dwellers</em></td>
<td><em>Provide more funding for psychosocial support services, including through the education sector</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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<td><em>Link cash to education attendance (soft conditionality through awareness raising and support) to deter families from resorting to negative coping strategies such as child labour (especially for boys in female-headed households where there are adult labour shortages) and child marriage (daughters). Ensure such programmes are offered to all parents rather than only those with out-of-school children as a preventative measure.</em></td>
<td><em>Invest in training counsellors to deal with extreme trauma/ vulnerable cases</em></td>
<td><em>Continue to support programming in ITS</em></td>
<td><em>Develop linkages for dropouts among cash transfer (CT) beneficiaries and those on the waiting list to informal education services</em></td>
<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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<td><em>Develop tools and guidance to raise awareness (especially among parents) of the importance of educating children, and particularly girls (given that our findings underscored that it is often social norms rather than simply lack of affordability that hinders adolescent girls’ sustained school attendance)</em></td>
<td><em>Tackle lack of access to services by unregistered refugees (e.g. through amnesty system)</em></td>
<td><em>Encourage informal groups to arrange transport to supermarkets to reduce costs so as to maximise value of the voucher</em></td>
<td><em>Conduct parenting skills and awareness-raising re. importance of educating children (particularly girls)</em></td>
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<td><em>Support training and referrals from school counselors to psychosocial health services</em></td>
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</table>

Note: The table continues with additional entries and strategies for each theme, including interventions related to education and learning, health and health care, and more. The strategies aim to address specific needs and challenges faced by refugees, particularly vulnerable groups, and those living in informal tented settlements (ITS).
Health and health care

- Expand use of cash-for-health services
- Invest in menstrual hygiene support and SRH counselling for girls and women in ITS
- Revisit the decision to exclude refugees from free health services (see also UNICEF 2016). Provide waivers for people with chronic and terminal illness, and people with disabilities
- Promote further training / build cadre of health workers able to provide psychosocial services, and where possible involve refugees in such training programmes given their direct experience and also opportunity to benefit from employment openings
- Remove user fees for refugees, especially for all paediatric visits (at a minimum for those under 6 years) psychosocial and mental health services
- Explore the links between private sector health services and charitable organisations to provide access to tertiary health care for vulnerable people / children in line with UNICEF 2016.
- Provide niche services to vulnerable refugee populations for conditions not covered by the Jordan Health Aid Society (JHAS) system
- Raise awareness about the importance of appropriate health-seeking behaviours
- Continue to support programming in ITS

- Scale up provision of free transportation to ensure girls’ school attendance as part of a conditional cash transfer (CCT) response
- Scale up case management as well as school counselling services to tackle school-based bullying and violence
- Support the government of Jordan (GoJ) to strengthen teacher training, including non-violent disciplinary approaches
- Improve educational provisioning for children living in ITS, including possibility of bussing to regular educational establishments
- See also Box 22 on how the design of the new UNICEF Hijazi programme could be enhanced

• Link the neediest households and
• Review whether food fortification
• Ensure continued linkages with WFP food voucher programme
• Provide food assistance and nutritional supplements to particularly vulnerable refugee children (including non-violent disciplinary approaches)
• Support training and referrals from school counsellors to psychosocial health services
• Conduct parenting skills and awareness-raising re. importance of educating children (particularly girls)
• Tackle lack of access to services for conditions not covered by the Jordan Health Aid Society (JHAS) system
• Encourage informal groups to arrange transport to supermarkets to reduce costs so as to maximise value of the voucher
• Improve educational provisioning for children living in ITS, including possibility of bussing to regular educational establishments
• See also Box 22 on how the design of the new UNICEF Hijazi programme could be enhanced
### Table 5: (continued)

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<tr>
<td><strong>Coping mechanisms</strong></td>
<td>• Communicate clearly to beneficiaries (through a two-way process) about when and for how long they should expect to receive support to allow them to plan ahead. Refugees should have the chance to ask questions about the services provided to them (see also Hagen-Zanker et al., 2017)</td>
<td>• Invest in social networking opportunities within refugee communities and with host communities. This could include working with the new UNICEF Hajati cash transfer facilitators to make phone calls and home visits for children who have dropped out of school and who will have a concrete entry point for engaging with vulnerable households.</td>
<td>• Link more clearly with the UNICEF Makani programme and set up a database with the most at-risk adolescents and their families so they can be referred to Makani activities</td>
<td>• Invest in social networking opportunities within their community and with host communities to foster social networks</td>
<td>• Monitor the enforcement of labour law (protection) regulations between Jordanian employers and Syrian refugees and set up referral mechanisms to report and address abuses in the workplace</td>
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<td>• Link more clearly with the UNICEF Makani programme and set up a database with the most at-risk adolescents and their families so they can be referred to Makani activities</td>
<td>• Explore setting up a referral process whereby Syrian community leaders can help identify those (whether working with a permit or without) in abusive labour relationships and link them to cash assistance support mechanisms</td>
<td>• Revisit the decision to link the work permit to a single employer and explore having a transferable and non-location/employer-specific permit for a certain profession in a specific sector</td>
<td>• Explore setting up a cash grant with soft conditionalities (e.g. counselling) to make school enrolment mandatory for children of beneficiaries</td>
<td>• Consider institutionalising labour force outreach and support for caregivers and adults, encouraging the government to gradually take on more of the management and referral mechanisms</td>
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<td>• Monitor the enforcement of labour law (protection) regulations between Jordanian employers and Syrian refugees and set up referral mechanisms to report and address abuses in the workplace</td>
<td>• Set up a referral pathway with Syrian community leaders, teachers, health workers and other local service providers linking families who have working children with partners offering cash assistance support</td>
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<td>• Scale up the Makani programme and raise awareness of it among cash assistance beneficiaries</td>
<td>• Monitor the enforcement of labour law protection mechanisms to deter abuse of the Syrian refugee labour force</td>
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<td><strong>Income and employment</strong></td>
<td>• Explore setting up a referral process whereby Syrian community leaders can help identify those (whether working with a permit or without) in abusive labour relationships and link them to cash assistance support mechanisms</td>
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<td>• Revisit the decision to restrict Syrian refugees to certain professions, and extend the types of work refugees can do, ideally increasing the validity of the permit to over a year. Where there are Syrian refugees who are medical or educational professionals, find ways to harness their skills so as to reduce overload on the system and promote inclusiveness and offer role models to children.</td>
<td>• Set up a referral pathway with Syrian community leaders, teachers, health workers and other local service providers linking families who have working children with partners offering cash assistance support</td>
<td>• Fund CT programmes for Syrian refugees as a way to disincentivise child labour, engaging with families who are receiving the grant but have out-of-school children, encouraging them to send their children to school</td>
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<td>• Scale up the Makani programme and raise awareness of it among cash assistance beneficiaries</td>
<td>• Work with the GoJ to establish a fair, well-functioning and transparent system for refugees to apply for a work permit</td>
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<td>• Explore setting up a referral process whereby Syrian community leaders can help identify those (whether working with a permit or without) in abusive labour relationships and link them to cash assistance support mechanisms</td>
<td>• Private sector to invest in awareness-raising initiatives against bonded labour, and unions to be proactive in enforcing labour law protection mechanisms to deter abuse of the Syrian refugee labour force</td>
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<td>Participation and social capital</td>
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<td>• Monitor the enforcement of labour law protection mechanisms between Jordanian employers and Syrian refugees and ensure the existence and functioning of referral mechanisms to report and address abuses</td>
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<td>• Invest in public campaigns to explain the work permit process and set up offices or centres where refugees can get practical help to apply</td>
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<td>• Scale up public campaigns to explain the work permit process and set up offices or centres where refugees can get practical help to apply</td>
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<td>• Invest in safe space approaches that aim to integrate refugee children with children from host communities</td>
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<tr>
<td>• Fund resilience programmes designed to increase integration and social cohesion among refugees and host communities</td>
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<td>• Scale up investment in the Makani model to include more systematic outreach and support for caregivers and adults, encouraging government to gradually take on more of the management and referrals between Makani centres and other public service providers</td>
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<td>• Set up women’s support groups (targeting Syrian and other refugee populations and Jordanian women) offering recreational and employment and saving opportunities, being mindful of the need to provide transport</td>
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<td>• Facilitate fora where male refugees can connect with men from other refugee populations and the host community – offering recreational, livelihoods and saving opportunities</td>
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<td>• Link vulnerable and isolated women and girls with UNICEF’s Makani programme and other safe space initiatives</td>
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<td>• Setup discussion fora for cash assistance beneficiaries, in a gender-sensitive manner</td>
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<td>• Consider institutionalising linkages between the formal education system and the Makani programme to promote greater opportunities for young people to participate and develop social capital</td>
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<td>• Invest in livelihood activities for Syrian refugees and set up referral pathways with other public service providers</td>
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<td>• Offer entrepreneurship and skills building training with a specific focus on youth and women.</td>
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<td>• Raise awareness of the importance of social integration and peaceful co-existence</td>
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<td>• Offer role models to children.</td>
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<td>• Raise awareness about abusive labour arrangements (including child labour, engaging with families and non-location/employer-specific permits for a certain profession in a single employer and non-location/employer-specific work permit to over a year. Where there are Syrian refugees who have out-of-school children, encouraging them to send their children to school) to make school enrolment mandatory for children</td>
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<td>• Privatise and trade child labour, engaging with families and non-location/employer-specific permits for a certain profession in a single employer and non-location/employer-specific work permit to over a year. Where there are Syrian refugees who have out-of-school children, encouraging them to send their children to school) to make school enrolment mandatory for children</td>
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<td>• Revisit the decision to link the work permit to a single employer between Jordanian employers and Syrian refugees and set up referral pathways with other public service providers</td>
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<td>• Monitor the enforcement of labour law protection mechanisms between Jordanian employers and Syrian refugees and ensure the existence and functioning of referral mechanisms to report and address abuses</td>
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<td>• Invest in public campaigns to explain the work permit process and set up offices or centres where refugees can get practical help to apply</td>
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Quality of life and psychosocial well-being

- Develop a set of indicators to measure psychosocial well-being of cash assistance beneficiaries and the wider refugee population, linking this to the VAF score
- Evaluate and enhance the rapid referral pathway for particularly vulnerable cases to partners providing psychosocial and mental health services
- Scale up the Makani programme to improve psychosocial well-being of children and their parents
- Scale up investment in cash assistance to relieve stresses on the most vulnerable households, focusing on those with people with disabilities, female-headed households and children living in households with large families
- Provide linkages to accessible and affordable psychosocial support services for children and caregivers (see also UNICEF, 2016a)
- Exempt Syrian refugees from fees for accessing mental health and psychosocial support services
- Revisit decision to exclude refugees from free health services and provide waivers for people suffering from post-traumatic stress disorder (PTSD) and other mental health conditions
- Explore the links between private sector health services and charitable organisations to provide access to mental health and psychosocial services for vulnerable adults and children
- Invest in psychosocial support services for Syrian refugees
- Invest in safe spaces programming for women and girls that aims to integrate Syrian refugees with host community and other refugee populations
- Offer combined recreational services for host communities and refugee communities to foster social cohesion and psychosocial well-being
- Offer income-generating opportunities in a gender-sensitive manner, especially for women
- Invest in transport to and from facilities to women's houses
- Set up safe spaces programming for women and girls from refugee populations and from host communities
- Set up separate activities for men and boys that are open to men from refugee and host communities
- Enhance the identification of particularly vulnerable cases – i.e., people with PTSD and young children – and refer them to psychosocial / mental health services
- Link adolescent girls and boys to Makani centres and other safe spaces / education initiatives
- Evaluate and strengthen the CSCs so as to more effectively bring together (through community events, dialogues, fun/leisure events, etc.) members of host communities and refugee populations to foster integration, understanding and social cohesion
References


WFP (2014) *Economic Impact Study: Direct and Indirect Effects of the WFP Value-Based Food Voucher Programme in Lebanon*. Beirut: WFP.


