



## **2016 Jordan Refugee Response**

### **Protection Sector Operational Strategy**

# Refugee Protection Sector Overview & Contacts

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# Protection Sector Operational Strategy for 2016

## A. Context

In 2015, continued border restrictions and management policies introduced since 2013 meant that fewer refugees have been able to access Jordan. For those who live in Jordan, the overall situation has become more difficult as a result of: (i) difficulties for Syrian refugees in formalizing their residence in non-camp settings<sup>1</sup>; (ii) challenges in meeting the requirements to obtain formal work permits, complicating the ability of refugees and asylum-seekers to provide for their own basic needs, compounded by (iii) a gradual decline of humanitarian assistance notably in the areas of health and food<sup>2</sup>. With 86% of Syrian refugees living below the poverty line (and similar proportions among other refugee population)<sup>3</sup>, refugees are resorting to a range of coping strategies to survive, some of which increase their protection vulnerability<sup>4</sup>.

The number of Syrians entering Jordan in 2015 continued to be very low, including through Jordan's eastern border crossing points. In addition to the increased distances and insecurity that Syrians face inside Syria, many new arrivals also report waiting lengthy periods in border and transit areas with minimal access to assistance and protection services. Since November 2015, the number of Syrians at the north-eastern bordering points has risen sharply following the intensification of the conflict inside Syria. From 4,000 individuals at the start of November 2015 has grown up to some 20,000 individuals waiting admission at the border at the beginning of February 2016. The majority of them are women and children. This situation exposed them to serious protection risks such as exploitation, or human trafficking. The Government of Jordan has cited national security concerns as the reason for the increased restrictions. Refugees who are admitted to Jordan bring fewer items with them, increasing their vulnerability upon arrival in Jordan.<sup>5</sup> Family separation has also increased due to stricter border controls, increasingly difficult movement within Syria and forced relocations to the refugee camps in Jordan, negatively impacting the resilience of refugees due to the absence of protective family and community structures.

**Key protection risks** include the following:

- Access to the territory and asylum for Syrian refugees in light of the Government's policy of tightly managed borders;
- Increased rates of family separation resulting in unaccompanied and separated children, and other child protection risks, such as violence against children, in the community, home and in schools;
- Sexual and gender-based violence (SGBV) within households and in communities, particularly for women and girls, while affecting men and boys as well, including domestic violence and early marriage. Affecting also WGBM with disabilities, especially children
- Restrictions on freedom of movement for Syrian refugees following the replacement of the bailout system by a leave permit system that allows only temporary formal stay outside of the

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<sup>1</sup> For Syrians who have entered through informal border crossings, they must obtain an official bail-out from the refugee camps in order to formalize their residence outside of the camps in line with Government of Jordan policy. The lack of bailouts from the camps resulted in a stricter encampment policy for the camps resulting in separation of family members, limited freedom of movements for camp residents coupled with risks of detention faced by those who remained outside the camp and limited livelihood opportunities;

<sup>2</sup> The camps have been a last resort for some refugee families who were unable to support themselves financially in the urban areas as assistance has remained available in the camps. It should also be noted that assistance levels for Syrians remain better than those for Iraqi and other Non-Syrian populations.

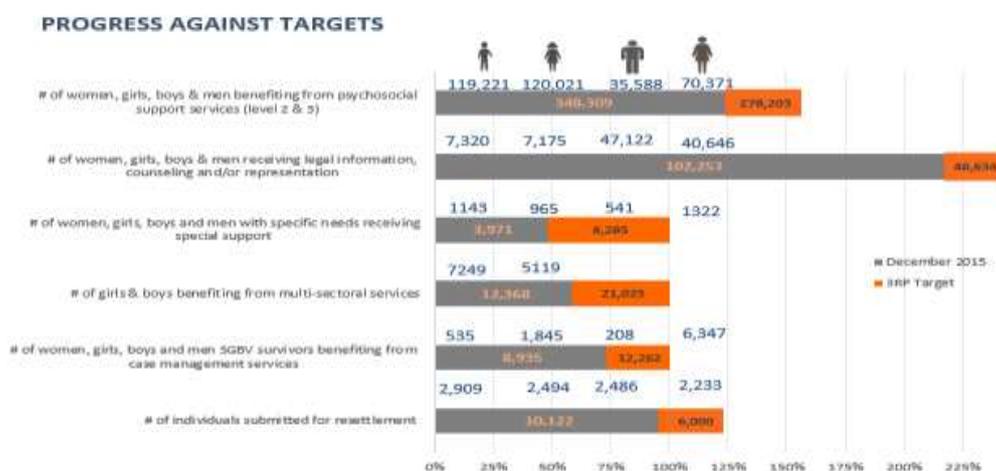
<sup>3</sup> UNHCR Vulnerability Assessment Framework Baseline Report, 2015. The Jordanian poverty line is 68 JOD per capita per month. In addition, a recent report indicates that levels of poverty are higher amongst female than amongst male-headed households. Most families need to spend more than they earn in order to meet their household needs, with average expenditure being 1.6 times greater than income. Source: UNHCR Home Visit Report (2014), available at: <http://www.unhcr.org/54b685079.pdf> Refugees appear to become more economically vulnerable as their displacement is prolonged, with vital support networks eroding over time. Source: UNHCR Baseline Report.

<sup>4</sup> SNAP, Regional Analysis Syria, Part II – Host Countries, 2014.

camps, an increase in involuntary relocations to Azraq and Zaatari refugee camps as well as fears linked to an increase in deportation and detention, particularly for men and adolescent boys;

- Registration issues for Syrians, in particular access to Ministry of Interior (MoI) Service Cards impacting the ability of Syrian refugees to access public and humanitarian services.
- Ability of Syrian refugees to access and update civil documentation despite advances in accelerating the return of Syrian personal identity documents and some flexibility and accommodation of Syrian refugees in civil documentation processes. In particular the risk of statelessness for children who are not registered at birth or who are not registered at birth as having a Syrian father, because Syrian law only permits males to confer nationality to children. Similarly, legal provisions also create risks for children born out of wedlock.
- Limited legal income earning opportunities and restricted access to livelihoods and education resulting in negative household coping mechanisms including increasing rates of working children and exploitation of men, women, girls and boys.
- On-going tensions between refugees and host communities over the use of resources including shelter, access to, services and competition for employment; Heightened risk of Sexual Exploitation and Abuse and Trafficking due to challenges in accessing the Jordanian territory, the prolonged displacement and the limited access to livelihoods opportunities.
- High levels of stress and isolation of most vulnerable individual, including persons with disabilities and reduced mobility<sup>6</sup>, is affecting gender roles and community and family support structures, and impacting women, girls, boys and men, <sup>7</sup>who often have a limited access to mental health and psychosocial support.<sup>8</sup>

### Key achievements by Refugee Protection Sector partners in 2015 include:



SNAP, Regional Analysis Syria, Part II – Host Countries, 2014.

in Jordan have specific physical or intellectual needs, with one in five refugees affected by physical, sensory or intellectual impairment, and one in seven refugees affected by chronic illnesses that could potentially lead to disabilities. Refugees with disabilities face significant challenges accessing services, and may be more vulnerable to exploitation and abuse. Source: HelpAge International and Handicap International, Hidden Victims of the Syria crisis: disabled, injured and older refugees, May 2014.

<sup>7</sup> Assessments highlight the lack of psychosocial support and risk of recruitment by armed groups for youth in Jordan, and the absence of targeted protection and support programmes that address the distinct needs of Syrian youth. Source: IMC and UNICEF. 2014. Mental Health/Psychosocial and Child Protection for Syrian Adolescent Refugees in Jordan.

As of 15 January 2016, the number of Syrian refugees registered with UNHCR in Jordan is 635,324<sup>9</sup>. The number of Iraqis registered with UNHCR is 53,334, of whom 22,500 arrived in 2014 following the increasingly volatile security situation after June 2014. In 2015, 6,780 Iraqi new arrivals were registered in Jordan. There are also 3,800 Sudanese, and 800 Somalis and a smaller but increasing number of Yemenis registered by UNHCR in Jordan. The majority of registered Syrian refugees live outside camps (82.1%), but there are also others (over 112,368 individuals) living in the formal refugee camps of Zaatari, Azraq, Emirati Jordan Camp (EJC), King Abdullah Park (KAP) and Cyber City, and in informal tented settlements (ITS). Half of the Syrian refugees registered in Jordan are female (50.7%), and 52 % are children. All Non-Syrian refugees and asylum-seekers of concern to UNHCR in Jordan live outside of camps. The majority live in Amman Governorate (89.7%), followed by Zarqa and other governorates.

In 2015, over 25,532<sup>10</sup> refugees fleeing Syria crossed into Jordan seeking safety and international protection, which constitutes a considerable decrease compared to previous years. The Government of Jordan continues to control access to Jordan through a managed border policy. The rate of refugee arrivals in Jordan has also been affected by the evolving situation in Syria, which has made it more difficult to travel within Syria and to cross into Jordan. On the contrary, since June 2014, the number of Iraqi individuals seeking asylum in Jordan increased. In 2015, 6,780 Iraqi refugees arrived to Jordan.

From late December to early January 2016, UNHCR, WFP, ICRC and IOM conducted a census of Syrians refugees waiting at bordering areas to be admitted to the Jordanian territory. Over 13,000 persons were individually interviewed, with the majority being women and children. In 2016 UNHCR continues to register Syrians at the border to support life-saving assistance, and to support advocacy for access to the territory, including prioritized access for certain categories of vulnerable individuals.<sup>11</sup> While traditional or community protection structures at the border appear to provide some protection for individual with specific needs, the vulnerability of this population places them at high risk of exploitation and other risks.

Despite the increased outreach of Mental Health and Psychosocial Support (MHPSS) services in 2014 and 2015, agencies' planning and programming will need to ensure the provision of more comprehensive MHPSS services to meet the needs of individuals under high distress and trauma while supporting natural coping strategies and family and community resiliency. National capacities remain limited, including insufficient specialised MHPSS staff such as trained psychologists, psychiatrists and mental health nurses and limited interventions for developmental disorders and intellectual disabilities.

On the occasion of the global awareness campaign 16 Days of Activism, the SGBV SWG launched a country-wide initiative to enhance the engagement of men and boys in SGBV prevention and response. Discussions on masculinities, gender inequality and violence took place in a variety of settings, including schools, community centres, refugee camps and work places. Building upon the previous awareness-raising campaign, "Amani", posters and facilitators' guides were designed to disseminate key messages violence amongst the refugee and host communities. The materials were distributed to 30 organizations for display and distribution in humanitarian and Government facilities. These materials gave guidance for service providers on how to better address the topic of SGBV with men and boys.

76 women and girls' safe spaces are functioning, through which multi-sectoral services are available.<sup>12</sup> SGBV services tailored to the needs of male survivors remain limited, although expertise and capacity is currently being expanded. An increased number of survivors (8,935) accessed specialized SGBV case management services. Measures are being taken to strengthen survivors' access to justice and health services. The provision of legal aid to SGBV survivors was scaled up through the deployment of specialized lawyers in women and girl's safe spaces in refugee camps, which contributed to an increased

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<sup>9</sup> Syria Refugee Response, UNHCR Web portal <http://data.unhcr.org/syrianrefugees/country.php?id=107>

<sup>10</sup> UNHCR proGres data.

<sup>11</sup> Serious medical cases, pregnant women in their third trimester, women with children under 6 months of age, unaccompanied and separated children, and other particularly vulnerable cases.

<sup>12</sup> SGBV SWG, Position Paper on Women and Girls Safe Spaces, 2014 and Activity Info data 2015.

access to legal services in the geographical areas where this project was piloted as shown in the GBVIMS Mid-Year Report 2015<sup>13</sup>.

Alternative Care Guidelines and Procedures for Unaccompanied and Separated Children (UASC) were formalized in July 2014 between the Ministry of Social Development (MoSD) and child protection agencies. Through the year, UNICEF, UNHCR and partners continued to work with Sharia and Juvenile Courts for the implementation of these procedures. In 2015, the progress of the formalization of alternative care arrangements for UASC was limited, but it is hoped that increased training on the procedures and on-going discussions with the Juvenile and Sharia Courts in 16 will produce improved results. Officials from the MoSD, Sharia and Juvenile Courts were trained on the alternative care guidelines. Other key achievements of 2015 include finalisation of SOPs for UASC and update of BID SOPs. In Jordan, the monitoring and reporting mechanism (MRM) on grave violations against children has collected information through interviews with Syrian refugees and contributed to the Report of the Secretary General on children affected by armed conflict in Syria.

Programing around four areas was strengthened further during 2015 including child labour, violence against children, children with disabilities and children affected by armed forces and armed groups. A special joint session was organised by the CPSWG on disability and violence against children. Child Protection and Education actors took stock of the services being provided to children with disabilities through safe spaces, and committed to improve accessibility to services. A national awareness-raising campaign has been launched to reach out to Syrian adolescents, young people and their parents to prevent recruitment and use of children by armed forces and armed group inside Syria. New interventions have been introduced in Zaatari camp to reduce the risk of recruitment and other forms of exploitation of children, including the setting up of drop in centres for children who are engaged in labour. To address violence against children and the use of corporal punishment by teachers in schools, the Education Sector Working Group (ESWG) and CPSWG have created a joint task force to analyse risks and challenges and develop an operational plan to address these risks and challenges.

Several initiatives were continued in order to build the capacities of service providers to address protection issues. 1,839 staff from specialized CP and SGBV service providers, Government authorities and non-specialized humanitarian workers were trained in the inter-agency case management training materials and the Inter-Agency CP/SGBV SOPs. Training with the updated Inter-agency CP and SGBV case management training toolkit and SOPs continued, with 307 frontline workers trained on the innovative, Jordan-specific training materials. The toolkit will be further developed in 2016 to offer additional guidance on specific SGBV issues, such as early marriage and survivors with disabilities. In order to ensure safe access to justice and reduce impunity of SGBV, UNHCR provided training on interview techniques and psychological first aid for 380 government and non-government actors. This activity aims to facilitate gathering of judicial evidence in consideration with the health and psychological needs of survivors of SGBV and will continue throughout 2016.

Both CP and SGBV actors are collaborating to share information about children at risk and reported violence (the online CPIMS and GBVIMS linked to ProGres registration data) in order to improve inter-agency case management, plan evidence-based awareness campaigns and service provision. UNHCR provided trainings for legal practitioners and members of the judiciary on refugee law and protection of refugees targeting 14 Civil Court judges (13 men, 1 woman) and 26 Sharia Court judges (26 men). An office of the Sharia Court was established in Zaatari (with Azraq to follow in February 2016), and it, together with the presence of the Family Protection Department (FPD) and Juvenile Police Department (JPD) strengthens administrative institutions and practice in refugee camps. In order to enhance capacities to provide protection for lesbian, gay, bisexual, transgender and intersex (LGBTI) refugees,

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<sup>13</sup> GBVIMS Mid-Year Report 2015 (page 5)[data.unhcr.org/syrianrefugees/download.php?id=9889](http://data.unhcr.org/syrianrefugees/download.php?id=9889)

UNHCR provided sensitization briefings for UNHCR and partner staff, targeting 367 staff (201 women, 166 men) from 24 organizations.

The Network on Protection from Sexual Exploitation and Abuse (PSEA) was established within the Refugee Coordination Structure in February 2015 to enhance prevention and response to incidents of Sexual Exploitation and Abuse by humanitarian aid workers. The Network serves as the primary body for awareness, prevention, coordination and oversight on protection from sexual exploitation and abuse by international and national personnel of the entities providing humanitarian services to refugees. A PSEA self-audit check-list was developed. This self-auditing tool is aimed to better inform agencies as to where it stands in relation to preventing sexual exploitation and abuse. The process enabled agencies to identify gaps and to provide guidance on the next steps to take to strengthen the work in protecting those with whom we work.

Consultations with refugee women, men, girls and boys from diverse backgrounds (on Community-based complaint mechanisms) were completed in the Zaatari camp, Mafraq, Irbid, Amman and the South of Jordan by the Network. The consultations aimed at integrating SEA in the existing community-based and agency-based complaint mechanisms. The increased inter-agency cooperation on PSEA has facilitated confidential referrals amongst partners, timely investigation and provision of protection for survivors and witnesses.

Women, girls, boys and men have had a greater voice in the management of the camps. Women and girls were consulted in both Zaatari and Azraq, and consequently SGBV actors negotiated with the WASH, Shelter and NFI sectors so that their concerns were addressed. Protection actors from the Age & Disability Task Force worked closely with the WASH and Shelter actors in Azraq to provide infrastructure that is accessible to persons with functional limitations, such as the elderly and disabled. They also worked with Food and NFI actors to institute a system of Alternative Collectors to aid people with reduced mobility. The Zaatari Youth Task Force facilitated youth consultations giving male and female youth a voice and platform to express their views and ideas on programme design and camp activities. Consequently there is greater integration of the needs of male and female youth in strategic planning within the Protection and Education sectors. Community empowerment and further engagement of Syrian refugee communities in the planning, implementation and evaluation of services is needed to ensure that humanitarian programming is appropriate and meets the needs identified by Syrian refugee women, girls, boys and men.<sup>14</sup>

Within host communities, support has focused on expanding social protection services, through the provision of safe spaces for children, women, adolescents and youth. Through partnerships between the Government of Jordan, UN agencies and civil society organisations, community centres are being strengthened to offer multi-sectoral responses to children, women, men, adolescent and youth survivors of violence and those at risk. To strengthen national capacity, investments have also targeted national institutions providing services to survivors of violence, including the FPD, JPD, Ministry of Social Development, Ministry of Health and the NCFA. Support is also being provided to Jordan in its reporting and adherence to the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW).

## **Refugee Protection Needs and Capacities**

Just over half of the Syrian refugee population registered in Jordan are children (51.4%),<sup>[1]</sup> Youth aged 15-24 make up 19.2% of the registered Syrian refugee population in Jordan (3.3 per cent males aged 15-

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<sup>12</sup> GBVIMS Mid-Year Report 2015 (page 5)[data.unhcr.org/syrianrefugees/download.php?id=9889](http://data.unhcr.org/syrianrefugees/download.php?id=9889)  
teers alike was undertaken by UNHCR and IRD to enhance community-based activities in ZC in 2016. This aimed mainly to accelerate a shift from an individual assistance based approach provided mainly by agencies to a more community-based approach with increased community participation and engagement. Strengthening community initiatives which are not based on Cash for Work opportunities or other monetary outcomes will be one of the core areas of engagement of the PWG in Zaatari. Inputs from UNHCR Field- PWG chair

17, 3.1 per cent females aged 15-17, 6.3 per cent males aged 18-24, and 6.5 per cent females aged 18-24). Recent assessments indicate that up to 30% of Syrian refugees in Jordan have specific physical or intellectual needs, with one in five refugees affected by physical, sensory or intellectual impairment, and one in seven refugees affected by chronic illnesses that could potentially lead to disabilities.<sup>[2]</sup>

The enhanced enforcement of the Government's encampment policy for Syrian refugees has had an impact upon access to services in urban areas for refugees who have left the camp without following formal bail-out procedures, as they cannot obtain Ministry of Interior (MOI) service cards. While the number of Syrian refugees without valid MOI service cards is unknown, surveys suggest that this number is approximately 15-20 per cent of urban refugees.<sup>15</sup> Increased clarity and information dissemination on leave permit procedures, MOI and UNHCR registration procedures and criteria for accessing services, particularly in urban areas, will serve to increase refugees' freedom of movement and access to services, and reduce associated stress and family separation.

While UNHCR and other agencies have been granted more regular access to border and transit areas and Rabaa Al Sarhan, UNHCR has continued to receive reports of persons being denied entry into Jordan or being sent back to Syria. Humanitarian actors provide life-saving assistance to the individuals that are waiting at border areas to be formally admitted to the Jordanian territory. Advocacy interventions continue to be made with Government authorities to call for the respect of the right to seek protection and asylum and the importance of family unity, highlighting existing capacity in Azraq refugee camp and transit facilities at the Eastern border, as well as the capacity of security screening facilities at the Rabaa Al Sarhan Joint Processing Facility.

Restrictions on access to the formal labour market and to vocational training programmes for Syrian refugees create challenges for the development of programming that supports positive coping strategies and the resilience of refugee families. In coordination with the MOL and MOPIC, UNHCR has initiated the implementation of a pilot project to facilitate the issuance of work permits to Syrian refugees. Legal support will be provided to individuals who are part of the project on procedures to access to work permits and potential labour related conflicts. Increased tensions between Syrian refugees and host communities demonstrate the need to increase support to national institutions and communities hosting refugee populations. It also highlights the need to increase programmes aimed at supporting conflict transformation and improvements in social cohesion between Jordanians and Syrians, including male adolescents and youth, who are perceived to be engaging in conflict and risky behaviours in public spaces. Community empowerment and engagement of Syrian refugee communities in the planning, implementation and evaluation of services is needed to ensure that humanitarian programming is appropriate and meets the needs identified by Syrian refugee women, girls, boys and men.

Within refugee hosting communities there is a need for expanding the existing protection space through strengthening and expanding the capacity of Government and service providers to meet the needs of the most vulnerable groups, both within refugee and Jordanian communities. Given the increased demands upon national protection systems and service providers such as the FPD, the JPD and the MoSD, and gaps in terms of specialized services for older persons and persons with disabilities, significant investment will need to be made in national capacity, in particular expanding protection services in heavily populated areas and increasing the number of social workers. Mechanisms to track violence against children and domestic violence remain fragmented with gaps in coverage. Supporting legislative and policy reform to facilitate adherence to the CRC and CEDAW remain a priority in 2016.

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<sup>[2]</sup> HelpAge International and Handicap International, Hidden Victims of the Syria crisis: disabled, injured and older refugees, May 2014.

<sup>15</sup> Surveys conducted by UNHCR mobile registration teams, HelpDesks and the UNHCR InfoLine in August and September 2014 suggest that the number of Syrian refugees without MOI service cards is between 15-20 per cent.

Despite the increased outreach of MHPSS services in 2014 and 2015, agencies' planning and programming will need to continue improving comprehensive strategies to address the needs of individuals with high level of distress and trauma while fostering family/community resiliency. National capacities remain limited, including insufficient specialised MHPSS staff including occupational therapists, psychologists and psychiatrists and limited interventions for developmental disorders/intellectual disabilities.

Women, girls, boys and men survivors are often afraid to speak openly about SGBV due to stigmatization and fear of retaliation by family and community members. Mandatory reporting on certain types of violence may also make survivors less likely to disclose violence and/or seek assistance. This affects access to services, particularly medical services. Improving timely access to quality clinical management of rape is essential to ensure life-saving services are provided to survivors. Domestic violence, the most reported type of SGBV among Syrian refugees, is often justified as a culturally accepted practice. Many refugee women and girls are restricted in their movement out of the home, either for cultural reasons or for reasons related to security and harassment outside of the home. Jordanian women living outside camps report challenges in accessing public spaces for similar reasons. This makes it difficult for women and girls to access information and services. According to reports on access to services, it appears that refugee girls face particular challenges in accessing any kind of protection service. Strengthening the participation of youth in their communities, in camp management and other decisions that affect them, as well as in programme design, implementation and evaluation remains a challenge. Syrian youth have indicated that they want to participate in programmes that are meaningful and constructive such as mentoring, conflict prevention, technical training and higher education. There is currently no specialized programming adapted to the needs of children formerly associated with armed forces and armed groups. For children in conflict with the law, Jordan has yet to establish a specialized juvenile justice system which include laws, procedures and institutions, that ensure the protection and rights of the child, and promote his/her reintegration back into society.

The capacity of the national system to provide specialized child protection services remains limited and in need of additional support, particularly with regard to the provision of mental health and psychosocial support services. National institutions indicate challenges in dealing with increased caseloads and report a lack of capacity to provide services for all children, including Syrian refugee boys and girls. The identification of safe shelter for Syrian boys subjected to violence remains a challenge given the absence of shelters for boys above 12 years of age. UNHCR will support MOSD to implement a project on care and safe shelter for boys above 12 years who are survivors of violence. Access to specialized services and assistance, including education, is a challenge for children with disabilities.

Restrictions on access to the formal labour market for Syrian refugees has resulted in an increase of detention for illegal work and legal interventions for Syrian refugees, primarily men, boys and male adolescents. In 2015, over 90 Syrians were detained in Correction and Rehabilitation Centres or placed in protective custody in Juvenile Centres, although the majority have been released or bailed out. A pilot project to increase the number work permits issued to Syrian refugees has been approved by the Government Jordan, and there is significant optimism for additional opportunities following the Supporting Syria & the Region Conference, London (February 2016).

The justice system and Sharia courts continue to experience technical and operational capacity limitations which have a direct impact on the performance of the courts and their ability to ensure a fair trial. Following the endorsement of the Juvenile Law in 2014, there continues to be a need to operationalize specialized Juvenile Courts as provided for in the law, to provide efficient and child-friendly procedures. Obtaining free legal aid and counselling services is difficult for those who cannot afford legal support and representation, especially vulnerable groups, such as women and children.<sup>16</sup>

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<sup>16</sup> In 2011, a study found that 68% of defendants in Jordan lacked legal representation, while in pre-trial cases 83% of defendants did not have legal representation (Justice Center). Another study found that women are more likely than men – 26% versus 17% - to report avoiding

Despite significant awareness-raising activities and programmes to increase awareness of rights and duties amongst refugee and Jordanian communities, gaps in knowledge and familiarity with procedures continue to prevent individuals from claiming their rights, while also placing individuals in conflict with the law.

## **B. Inter-Agency Protection Response Strategy**

Based upon the needs identified above, and in line with the broad objectives of the Protection Sector, the following activities will be the core elements of the Refugee Protection response in Jordan:

### **Objective 1 - Refugees fleeing Syria are able to access the territory, to seek asylum and their rights are respected.**

UNHCR and protection partners will continue to advocate with the Government on access to the territory, the right to seek asylum and the principles of *non-refoulement* and family unity. This will include continued support to the Jordanian Armed Forces to provide support, assistance and transport to Syrian refugees arriving at the border, and to Government authorities in camps and outside camps to provide security screening, policing and security services in camp and non-camp settings in accordance with international refugee law principles. Particular emphasis will be placed on those individuals stranded at the border, and partners will focus on advocating with Government authorities for the admission of all refugees, with an emphasis on the most vulnerable, including pregnant women in their third trimester, women with children under six months of age, persons with serious physical medical conditions, unaccompanied and separated children, and other serious protection cases, such as women at risk and persons with limited mobility. UNHCR and partners will also work to improve counselling to refugees wishing to return to Syria, Iraq and other countries in order to ensure that spontaneous return movements are voluntary and that no UASC or other vulnerable individuals are permitted to return to their countries of origin without a full and effective Best Interest procedures and counselling, and to ensure that they are not left behind without family and/or community support by returning family members.

Continuous registration of Syrian refugees in camps, non-camp settings and at the border<sup>17</sup> will continue to be a priority for UNHCR and the Government in order to support evidence-based programming and so that Syrian refugees are able to access protection and assistance services, including protection from *refoulement*. Continuous registration will also enable partners to better target their protection and assistance programmes in line with the Vulnerability Assessment Framework (VAF). In 2016, UNHCR and the Government will continue the return of personal identity documents to Syrian refugees living outside camps through the urban verification exercise that began in 2015. The urban verification exercise will continue to improve access to civil status documentation for all refugee populations, in particular Syrians. Returns of documents for few refugees in camps is still on-going. Protection partners will also seek to improve analysis of data relating to population movement to support the development of programming and advocacy strategies with relevant actors.

Opportunities for non-penalization of undocumented marriages and births will continue to be pursued, as will alternative solutions to undocumented births for Syrian children born inside Syria. Additionally, the regular presence of the Civil Registrar and Sharia Courts in all refugee camps in 2016 will improve access to civil registration for Syrian refugees and reduce the risk of statelessness. Following the November 2014 and May 2015 Cabinet decisions to provide exemptions from fines for undocumented marriages, Government and humanitarian partners have enhanced their awareness-raising activities on registration of marriages and births, and the provision of legal counseling, information and representation, with this expected to continue into 2016.

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court due to customs and traditions (World Bank, 2013). Nearly 70% of requests for legal aid assistance come from women (Justice Center for Legal Aid).

UNHCR will continue to explore and advocate for resettlement or humanitarian admission options as a protection solution for the most vulnerable Syrian refugees in Jordan. Refugees whose vulnerabilities place them at risk in Jordan will be prioritized, including women and girls at risk, survivors of violence and/or torture, refugees with physical protection needs, refugees with medical needs or disabilities, children and adolescents at risk, LGBTI refugees and refugees in need of family reunification. In 2015, 10,122 individuals departed following their submission for resettlement or other forms of humanitarian admission. The Canadian Humanitarian Transfer Programme added to the initial resettlement target the departure of over 3,000 refugees, with more departures and submissions planned in 2016. UNHCR will continue to enhance its outreach to vulnerable populations and identification of persons in need of resettlement or other protection solutions, through the traditional resettlement processes and other innovative approaches.

**Objective 2 - Families and communities are strengthened, engaged and empowered in order to contribute to their own protection solutions, while the most vulnerable WGBM are identified and their needs addressed through appropriate services and interventions.**

Protection partners will continue to expand and strengthen information dissemination programmes, community-based networks and awareness campaigns, including on fraud and complaints mechanisms, documentation and legal entitlements, and services available in camps and host communities. This will include increased use of home visits, refugee volunteers and other outreach methodologies given freedom of movement challenges amongst the refugee population and specific challenges for women and girls, the elderly and persons with disabilities to access information. Protection partners will also continue to explore innovative approaches to information dissemination by continuing to expand web and media-based tools, telephone counselling, Help Desks and mobile inter-agency teams with a view to increasing effectiveness and cost-efficiency, while maintaining effective outreach programmes. In 2016, there will be a specific focus on enhancing referral systems and improving the quality and response for protection referrals and to support persons with specific needs access to specialised services, including assistive tools and devices and rehabilitation sessions for persons with disabilities and impairments, tailored psycho-social support services, access to legal information and counselling services, and emergency financial assistance to those experiencing immediate protection risks, while promoting their dignity and inclusion.

The Protection Sector will continue to prioritize interventions that support the empowerment and engagement of Syrian, Iraqi and refugee women, girls, boys and men from other nationalities and affected host communities in the planning, implementation and evaluation of programmes. In 2016 in urban settings, protection sector partners will promote community-based activities aimed at alleviating social tensions, supporting the economic empowerment and resilience of Syrian refugees and affected Jordanian host communities. Livelihoods and legal income earning opportunities will be enhanced within national legal frameworks for both Syrian refugee women and men. Community centred approaches will be supported including building new and expanding existing community spaces offering multi-sectoral services to both vulnerable Syrian refugees and Jordanian host communities. Protection actors will support the involvement of Jordanian authorities, civil society and partners in the planning and delivery of assistance through national services and systems, and to promote social cohesion through resilience-based initiatives that involve refugee and host communities. In camps, protection sector partners will support vulnerable Syrian refugees to be engaged in camp development and participate in livelihood opportunities in coordination with the Syrian Refugee Affairs Directorate and agencies present in the camp. Protection actors will continue to advocate and support strategies that facilitate access to the labour market for refugees. In particular, youth continue to be identified as a target group with specific protection needs and programmes will focus on activities such as mentoring, conflict prevention, technical training and tertiary education, tailored to the specific needs of male and

female youth including raising awareness on reproductive health, SGBV, Jordanian law and legal referral pathways, and civic engagement.

In 2016, MHPSS actors will continue to focus their efforts on (i) developing specialised programming for longer-term mental health problems; (ii) strengthening community-based interventions that promote adaptive coping strategies, stress reduction and effective management of anger and frustration; (iii) developing specialized interventions to address MHPSS concerns in children; and (iv) strengthening interventions for women, girls, boys and men with developmental disorders and intellectual disabilities to ensure their physical, psychosocial, educational and health needs are met in a way that promotes dignity and inclusion. Agencies supporting child and youth spaces and multi-activity centres will redesign their service activities in accordance with consultations with girls, boys, and male and female youth, and negotiate with parents in order to encourage greater equity in access to psycho-social services and activities.

**Objective 3 - The risks and consequences of SGBV experienced by women, girls, boys and men are reduced/mitigated, and the quality of response is improved, in accordance with the survivor centred approach and age, gender and diversity (AGD) principles.**

**Prevention:** Community-Based approach will be applied through the engagement of community committees, religious leaders, and CBOs that will act as main mobilizers while being supported with capacity development activities. Innovative approaches will be implemented to ensure engagement of refugees waiting for admission to the territory at the border given the limited access to humanitarian services. Women, girls, men and boys will be actively involved in prevention through a peer to peer approach, carrying out educational and awareness raising activities to support empowerment of women and girls as leaders and agents of change and engagement of men and boys as allies in SGBV prevention strategies. SWG will continue to coordinate inter-agency awareness campaigns that multiply the impact of messages on communities. Common materials and tools, media communications, theatre and other strategies will be developed in consultation with the community to reach the population affected by the Syrian refugee emergency living in camps and non-camps settings.

**Response:** Outreach strategies will be enhanced through mobile teams, maintaining and scaling-up safe spaces that facilitate access to confidential SGBV services and complaint mechanisms for survivors from different backgrounds. For the refugees waiting at the border community members will be engaged in the implementation of protection strategies and SGBV response in coordination with UNHCR and the agencies provided specialized case management at the border. Capacity building of government and non-government actors, religious leaders and other services providers on SGBV core principles, interview techniques, psychological first aid Code of Conduct, PSEA and referral mechanisms will foster new partnerships and create more opportunities for survivors to access information and services. Investing on the development of national systems in accordance with international standards will be instrumental to continue enhancing SGBV case management and multisectoral services, making them more accessible to all individuals (women, girls, men, boys, youth, people with disability, LGBTI, etc.). The evaluation of the existing services and tools (national and global) will make possible the identification of additional gaps in service provision, particularly legal counselling and representation services, health care (including Clinical Management of Rape-CMR), psychosocial support and safe shelter.

**Advocacy:** A fundamental tool in addressing prevention and response to SGBV related issues will be through advocacy on key SGBV issues, particularly advocacy surrounding admission to the territory of refugee survivors of SGBV stranded at the border, legal/legislative reforms, survivor centred approach, safe shelter and Clinical Management of Rape protocols. The SGBV SWG will closely coordinate with humanitarian actors and national institutions at country and regional levels to identify best practices and mainstream SGBV prevention and response in the development of policies and the provision of services for refugee and host community members.

**Information Management:** Maintaining and expanding inter-agency information management system (Inter-Agency UNHCR online GBVIMS) will support the identification of SGBV trends and service provision gaps.

#### **Objective 4 - Increased and more equitable access for boys and girls affected by the Syria crisis to quality child protection interventions.**

This will include continued work on alternative care procedures and strengthening the capacity of the MoSD and courts to identify and formalize alternative care arrangements. Community-based approaches will need to be applied in conjunction with specialized case management in the case of refugee children stranded at the border pending their admission to the territory. Priorities for Child Protection actors will include advocacy to accelerate and prioritize the admission to the territory of most vulnerable children, strengthening national child protection systems, provision of timely services, interventions and decisions in children's best interests, with a particular emphasis on providing quality multi-sector case management services to the following categories of child protection cases: unaccompanied and separated children (UASC), children associated with armed forces and armed groups, children with disabilities, child labour, child survivors of violence (domestic violence and violence in schools) and children in conflict with the law.

Child Protection actors will continue on-going efforts on strengthening national systems by focusing on integrating Syrian and other Non-Syrian refugees into national protection systems, including through increased support to national protection services such as MoI/SRAD, Family Protection Department, Juvenile Police Department, National Council for Family Affairs, Ministry of Health, Counter-Trafficking Unit and the Ministry of Social Development's social workers, and through enhanced linkages between humanitarian and national violence tracking, referral systems and the Inter-Agency Standard Operating Procedures. This will include continued work on alternative care procedures (including a reinforced effort on formalization of alternative care arrangements) and strengthening the capacity of the MoSD and Juvenile Courts to identify and formalize alternative care arrangements and enhance referral pathways to ensure juveniles have access to legal services.

Furthermore, there is a need for expansion of programmes focused on community-based child protection, multi-sector and case management services to survivors of violence, in particular survivors of SGBV and children at risk. Such programmes need to improve targeting of individuals with specific needs and vulnerabilities, including children with disabilities and with mental health and psycho-social support (MHPSS) problems, caregivers of those with learning difficulties and MHPSS problems, and people with neurodevelopment disorders. It will also be needed to increase peer support programmes, with a view to increasing community ownership of protection programmes. The community engagement will be particularly crucial in the case of refugee children stranded at the border pending admission to the territory.

### C. Detailed Budgetary Requirements by Protection Sector Objective

Output	Targeted population by type				Partners
	SYR	Members of impacted communities	Total targeted population	Total requirements	
<b>REF: Output 1.1.1</b> Refugees are received at the borders and transported to the camps in conditions of dignity and safety and community-based policing is provided in the camps	255,000	-	255,000	13,566,640	IOM, UNHCR
<b>REF: Output 1.1.2</b> Syrian refugees have registration (MoI/SRAD and UNHCR) and assessments and profiling exercises are undertaken	560,000	-	560,000	14,116,784	Caritas, UNHCR
<b>REF: Output 1.1.3</b> Syrian refugees are provided with information on the importance of civil status documentation and are able to obtain civil status documents (birth and death certificates)	68,200	-	68,200	663,317	NRC, UNHCR, UNICEF
<b>REF: Output 1.1.4</b> Syrian refugees are submitted for third country resettlement (as pledged by resettlement countries)	8000	-	8,000	6,170,234	DRC, UNHCR
<b>Total</b>	<b>891,200</b>	-	<b>891,200</b>	<b>34,516,975</b>	

Output	Targeted population				Partners
	SYR	Members of impacted communities	Total targeted population	Total requirements	
<b>REF: Output 1.2.1</b> Information dissemination, referral and outreach mechanisms are maintained and strengthened; feedback and participatory assessment mechanisms are strengthened to support communication between the refugee and host populations and the humanitarian community and to ensure that interventions are responsive to identified needs.	520,815	68,069	588,884	9,557,515	ACF, CARE, Caritas, DRC, FPSC, ICMC, Intersos, MercyCorps, NRC, Oxfam, PU-AMI, SC Jordan, TDH, UNFPA, UNHCR, UNICEF, UPP
<b>REF: Output 1.2.2</b> Community self-management, representation and leadership is supported and encouraged.	14,658	-	14,658	14,242,602	CARE, DRC, Intersos, IOM, NRC, SC Jordan, UNHCR, UNICEF, IMC
<b>REF: Output 1.2.3</b> Existing mechanisms for the identification of persons with special needs, including persons with disabilities and elderly persons, are further enhanced so that individuals are identified and referred to appropriate intervention/services.	37,659	1,246	38,923	6,925,557	ACF, AVSI, Caritas, DRC, FPSC, HI, Intersos, MercyCorps, MPDL, PU-AMI, TDH, UNHCR, IMC
<b>REF: Output 1.2.4</b> The psycho-social well-being of affected population is supported through structured Psychosocial interventions including creation of safe spaces and community centres.	431,585	74,135	505,720	18,106,212	ACF, CARE, Caritas, DRC, FPSC, ICMC, Intersos, IRC, MercyCorps, NICCOD, Oxfam, PU-AMI, RI, TDH, UNFPA, UNHCR, UNICEF, UPP, WarChild UK, World Relief Germany, IMC
<b>REF: Output 1.2.5</b> Mitigation measures are put in place to reduce social tensions in order to foster mutually beneficial relationships between refugee and host communities, including through initiatives that facilitate access to sustainable livelihoods for vulnerable Syrians and Jordanians.	26,803	19,233	46,036	5,925,204	ACF, AVSI, CARE, DRC, ILO, NEF, NRC, Oxfam, PU-AMI, UNHCR
<b>Total</b>	<b>1,031,520</b>	<b>162,683</b>	<b>1,194,221</b>	<b>54,757,090</b>	

Output	Targeted population				Partners
	SYR	Members of impacted communities	Total population targeted	Total requirements	
<b>REF: Output 1.3.1</b> Community members are engaged in SGBV prevention	274,818	49,690	324,508	4,966,541	APS, AVSI, Caritas, ICMC, Intersos, IRC, Medair, Oxfam, PU-AMI, SC Jordan, UNFPA, UNHCR, UNICEF, UPP, WarChild UK
<b>REF: Output 1.3.2</b> SGBV survivors have timely access to protection services, including case management and multisectoral services ( legal, health, safety and security, psychosocial)	24,928	1,501	26,429	8,524,381	APC, CARE, Caritas, IRC, UNFPA, UNHCR, UNICEF, UPP, IMC
<b>REF: Output 1.3.3</b> The capacity of service providers on SGBV core principles and referral pathways is strengthened	-	13,880	13,880	2,211,686	ACTED, APS, IRC, SC Jordan, UNFPA, UNHCR, UNICEF, UPP, IMC
<b>REF: Output 1.3.4</b> The risk of Sexual Exploitation and Abuse is reduced	-	46 Agencies		400,000	Intersos, UNHCR
<b>Total</b>	<b>299,746</b>	<b>65,071</b>	<b>364,817</b>	<b>14,102,608</b>	

Output	Targeted population				Partners
	SYR	Members of impacted communities	Total population targeted	Total requirements	
<b>REF: Output 1.4.1</b> Capacity of existing child protection systems is increased and child protection policy guidelines, standards and tools are strengthened	-	3,650	3,650	1,707,777	UNHCR, UNICEF, WVI, IRC, IMC, JRF, NHF
<b>REF: Output 1.4.2</b> Evidence-based advocacy and knowledge generation on key child protection issues are enhanced and coordinated.	-	-	-	231,910	UNHCR, UNICEF, IRC, IMC, JRF, NHF
<b>REF: Output 1.4.3</b> Child protection community-based mechanisms, processes and prevention initiatives are strengthened	215,204	34,796	250,000	3,169,116	Caritas, ICMC, Intersos, PU-AMI, SC Jordan, SCI, TDH, UNHCR, UNICEF, IMC, Care International
<b>REF: Output 1.4.4</b> Access to quality specialized child protection case management and multi-sectoral services for girls, boys and their families are improved in accordance with Age Gender and Diversity principles (addressing cases of: UASC, child labour, children in conflict with the law, children experiencing violence at home and at school, children associated with armed forces and armed groups).	19,500	-	19,500	12,928,052	ILO, TDH, UNHCR, IRC, IMC, JRF, NHF, FPD, UNICEF
<b>Total</b>	<b>234,704</b>	<b>38.446</b>	<b>273,150</b>	<b>18,036,855</b>	

