

Joint Assessment for Syrian Refugees in Egypt



November 2013

“The everyday stress faced by my parents is passing on to me and I strongly feel the scarcity of income”

A Syrian Girl participating in discussions

“Egyptians used to be very welcoming and generously offer help; but now they are a bit suspicious and impatient”

A Syrian man participating in discussions

Joint Assessment for Syrian Refugees in Egypt

November 2013

Table of Contents

Participating Agencies	5
Executive Summary.....	6
Introduction	8
Methodology.....	9
Population Figures and Assistance Programmes in 2013	12
Key Findings and Recommendations	
Protection	16
Livelihoods and Food Security	20
Health	28
Education.....	30
Annexes	
Terms of Reference	33
Focus Group Discussion Report	36
Quantitative Survey Team	36

Table of Figures

Figure 1: Number of families by location	11
Figure 2: Number of families by family size	11
Figure 3: Number of families by gender of principal applicant	11
Figure 4: Number of families by age of principal applicant	12
Figure 5: Number of cases by case size	13
Figure 6: Place of residence in Egypt	13
Figure 7: Place of origin in Syria.....	13
Figure 8: Registration trends	14
Figure 9: Transit country	14
Figure 10: Arrival trends for registered individuals.....	14
Figure 11: Closure trends.....	16
Figure 12: Safety perception	16
Figure 13: Perceived identity of perpetrators.....	17
Figure 14: Threats	18
Figure 15: Perception of children safety	19
Figure 16: Main sources of income	20
Figure 17: Household income per month.....	21
Figure 18: Ability to pay rent	22
Figure 19: WFP voucher value per household	22
Figure 20: Persons with income in the household	23
Figure 21: Barriers to employment.....	23
Figure 22: Main occupations in the country of origin	24
Figure 23: Number of meals per day.....	25
Figure 24: Sufficiency of food intake by household.....	25
Figure 25: Sufficiency of food intake by household and by governorate	26
Figure 26: Number of meals per day (WFP monitoring results).....	26
Figure 27: Food consumption	27

Figure 28: Most common chronic diseases among Syrian refugees.....	28
Figure 29: Health care service providers.....	28
Figure 30: Contributions in health service costs.....	29
Figure 31: Challenges faced while seeking health services.....	29
Figure 32: Adult educational levels	31
Figure 33: Challenges in accessing public schools	31
Figure 34: Main source of financial resources to cover school fees.....	32
Figure 35: Satisfaction degree (education)	32

Table of Tables

Table 1: Gender and age breakdown of individuals	12
Table 2: Gender of heads of households	12
Table 3: Main assistance programmes in 2013	15
Table 4: Household income and expenditures (sample of 100 households).....	21

Participating Organizations

UN organizations

United Nations High Commissioner for Refugees (UNHCR)

United Nations Children's Fund (UNICEF)

World Food Programme (WFP)

United Nations Fund for Population (UNFPA)

World Health Organization (WHO)

International organizations and non-government organizations

International Organization for Migration (IOM)

Save the Children

Islamic Relief Worldwide (IRW)

Catholic Relief Services (CRS)

Africa and Middle East Refugee Assistance (AMERA)

Egyptian Foundation for Refugee Rights (EFRR)

Catholic Relief Services (CRS)

National organizations and non-government organizations

Caritas Egypt

Arab Council for Supporting Fair Trials (ACSFT)

Resala Association

Executive Summary

Refugee arrivals in Egypt from the Syrian Arab Republic rose dramatically during the first half of 2013. As of end of October 2013, UNHCR had registered 125,499 Syrian refugees (46,173 cases) in Egypt.

The political situation in Egypt raised concerns for the protection of Syrian refugees and in early July the Government announced that Syrians would need to obtain a visa and security clearance prior to entering the country. The procedure was put in place as a temporary security measure in response to concerns that some Syrians had participated in protests and violence after the removal of former President Mohammed Morsi. Authorities have placed Syrians under greater security and there have been incidents of Syrians being arrested, detained, and deported for not having a valid residency.

The objective of this joint assessment is to assess the situation of Syrian refugees in Egypt and to establish programmatic recommendations for 2014.

Protection recommendations:

- Conduct a wider profiling exercise to better understand access to basic rights and protection gaps among Syrian refugees in Egypt.
- Continue advocacy with the Government on access to the territory and asylum, particularly in view of family unity, as well as access to basic rights.
- Increase awareness on sexual gender based violence (SGBV) in larger urban settings and elsewhere, and strengthen referral mechanisms to services.
- Expand protective spaces for children and strengthen existing structures for the protection of children.
- Expand psychosocial services, in particular for survivors of SGBV, children and their families in larger urban settings and elsewhere.
- Expand counselling on protection issues and access to legal aid.
- Strengthen coordination among the various sectors and build on inter-linkages.

Livelihoods and food security recommendations:

- Continue food voucher assistance in Greater Cairo, Damietta and Alexandria, and extend assistance to additional vulnerable and food-insecure households identified through household vulnerability assessments with the assistance of UNHCR's partners.
- Conduct a joint rapid needs assessment in Assiut to assess needs including food security of Syrian refugees residing in the area.
- Conduct a rapid nutrition assessment with health sector partners to determine the current status of nutrition among Syrian refugees.
- Diversify cash and voucher based interventions to respond to different types and levels of vulnerabilities. This could include the establishment of targeted housing support, one-off payments, monthly and regular payments, and winterization.

- Support the dialogue between Syrian investors and the Government of Egypt in order to reach a win-win solution to generate income for Syrians without creating any distortions in the Egyptian labour market.
- Expand self-reliance initiatives to target a larger number of job seekers and include youth and women in training programmes, which will assist in improving food security.
- Expand the protection pillar of self-reliance programmes in order to improve working conditions of wage employed individuals.

Health recommendations:

- Support the capacity of the Ministry of Health to provide services to Syrian refugees through their Primary Health Care facilities; thus to ensure geographical coverage of health services.
- Raise awareness among Syrian refugees about available health services and UNHCR's medical assistance criteria.
- Focus on health and nutrition education to improve knowledge, attitude and health related behaviour among Syrian refugees.
- Focus on antenatal care and infant and young children feeding services and food supplementation for prevention and early detection of nutritional deficits.
- Support community health worker outreach activities.
- Explore alternative support and funding mechanisms and sources for expensive interventions.
- Monitor the cost of prescriptions at clinics UNHCR supports.

Education recommendations:

- Increase the capacity of public schools to absorb more Syrian children and provide equipment, computers, and conduct renovations to schools with highest density of Syrian children.
- Support access to public schools and provide remedial classes for students preparing for placement tests, assessments and exams.
- Increase awareness of UNHCR funded education grants.
- Improve the process of distribution of education grants and pay first instalments upon registering with UNHCR to enable families to buy the necessary items such as books, uniform and bus passes to avoid any delays in parents sending their children to school.
- Support free of charge community schools (rent, equipment, salaries, etc.) and encourage them to employ Syrian teachers to overcome the dialect barrier.
- Support Ministry of Education training institutes in order to improve the quality of education and ensure that child protection aspects are respected in public schools.
- Support CRS in assigning social workers to follow up with community based schools in order to ensure child protection.

Introduction

Egypt has an important history of close ties and shared influences with the Syrian Arab Republic, and it traditionally has opened its doors to Syrians. Even prior to the conflict, there was an established and sizeable Syrian community residing in Egypt. At the beginning of the crisis, the first wave of Syrians fleeing to Egypt in 2011 was primarily composed of persons with family ties, business connections or personal networks in Egypt. These first arrivals generally relied on personal savings, found work or opened businesses, and they maintained a moderate degree of self-reliance.

Refugee arrivals in Egypt from the Syrian Arab Republic rose dramatically during the first half of 2013. As of end of October 2013, UNHCR had registered 125,499 Syrian refugees (46,173 cases) in Egypt. This significantly exceeded the projection in the fifth regional response plan released in June 2013 (RRP5), which projected 100,000 people would seek refuge in Egypt by the end of 2013. Many of the new arrivals first resided in another country in the region and relocated to Egypt due to the lower cost of living.

According to the Government of Egypt, the number of registered refugees significantly understates the scale of the influx. It estimates that the actual number of Syrian refugees in Egypt may be as high as 300,000, since many Syrians in Egypt have opted not to register.

The political situation in Egypt raised concerns for the protection of Syrian refugees and in early July the Government announced that Syrians would need to obtain a visa and security clearance prior to entering the country. The procedure was put in place as a temporary security measure in response to concerns that some Syrians had participated in protests and violence after the removal of former President Mohammed Morsi. Authorities have placed Syrians under greater security and there have been incidents of Syrians being arrested, detained, and deported for not having a valid residency.

This restrictive environment has also been accompanied by anti-Syrian sentiment among some Egyptians. Some Syrians have been subjected to verbal threats or abuse and various media outlets have exacerbated negative sentiment against the Syrian community as a whole. These restrictions and hostilities have led to an increasing number of Syrians registering with UNHCR. At the same time, there has also been an increase in requests among Syrians registered with UNHCR to close their files as they seek to leave Egypt. Many Syrians have also taken to attempting irregular departure from Egypt in an effort to reach Europe.

UNHCR and its partners are providing assistance to Syrian refugees. This includes educational grants, financial and housing assistance, training programmes, legal assistance, primary and secondary healthcare and psychosocial services. WFP provides monthly food voucher assistance, and reached 70,000 individuals in October 2013. UNHCR and partners have also been conducting awareness sessions to inform refugees about laws and regulations and necessary procedures to ensure their legal residence in the country.

Methodology

The objective of this joint assessment is to assess the situation of Syrian refugees in Egypt and to establish programmatic recommendations for 2014. Participating agencies kicked off the implementation of the joint assessment in a planning session conducted on 3 September 2013. The data was gathered between 22 and 30 September 2013 and the first draft of the consolidated report was circulated for revision in November 2013.

Main sources of information for this joint assessment were the quantitative survey, qualitative focus group discussions and data from UNHCR's population database. In order to ensure the high quality and consistency of information, training and orientation sessions were organized for participants in the joint assessment.

Quantitative survey:

The joint assessment surveyed 600 families spread out over seven locations: Greater Cairo (6th of October, Cairo, Giza, Qalyubia), Alexandria, Damietta, and Sharkia; a catchment which represents where 93% of the Syrian population in Egypt reside.

UNHCR generated a sample of six hundreds cases from the registration database based on 1) residence with one of the seven locations, 2) gender representation, and 3) varying dates of arrival into Egypt. Since 30% of registered households are female-headed households, the same proportion was applied in the sampling.

An online platform (web application) was used in this joint assessment for data collection and generation of statistical results. UNHCR established a call centre with sixteen volunteers from different participating organizations to call the 600 households in the sampling; the response rate was 62%. Accordingly, statistics reflect answers of 367 respondents. The questionnaire included thirty seven questions divided into the five different areas of focus (protection, food security, basic needs and livelihood, education and health).

Focus groups:

UNHCR and its partners organized nineteen focus group discussions (FGD) with 233 participants in five different locations (Giza, Cairo, Alexandria, Damietta, and Assiut). In each location, the joint assessment convened four FGDs for men, women, children and adolescents. The FGDs reviewed 1) protection, including SGBV and child protection; 2) basic needs and self-reliance, 3) food security, 4) education, and 5) health. Sixteen facilitators, composed of colleagues from UNHCR and its partners, used a consistent list of questions that reflected the five areas of focus. However, participants were allowed to express their ideas and for which facilitators took note. Drawing pencils and refreshments were provided during focus group meetings in order to break the ice between participants and facilitators.

Expenditure survey:

Separate from the initial sample, the joint assessment surveyed a further one hundred Syrian refugees registered with Islamic Relief for cash assistance in Greater Cairo, which is Islamic Relief's area of operation. 50% of the selected applications represented households who had been approved for assistance and 50% represented those who had been rejected. Participants responded to a questionnaire marking the ratio of expenses to income for food, rent, education, health and medicines, gas, water, and electricity. The results were used to identify which items exhaust the spending of the Syrian families surveyed.

Limitations:

- The sample representation: the sample of 600 households was selected carefully to represent the different characteristics of the population (geographic, date of arrival, age, gender of head of household). However, the number of households studied represented only 1.5% of the population. In order to compensate for the limited representation, the number of FGDs was relatively high (20 FGDs), which played an important role in enriching the qualitative results.
- The web-based data collection: although the web-based data collection tool was useful in generating quick results, it added complications in the preparatory phase. The time spent on training the surveyors on the use of the tool took longer than expected. Additionally, the team faced technical constraints in adapting some of the questions to the online system.
- Phone interviews: the use of phone interviews generated many constraints throughout the data collection phase. Getting detailed answers on some specific questions like income and expenditures was challenging for surveyors who spent between 30 and 45 minutes on each phone interview. Additionally, the use of the phone interviews led to a lower response rate since 38% of the households could not be reached over the phone.
- Focus group discussions: the organization of FGDs was difficult due to the wide geographic span of the assessment. The number of attendees in some groups was half than expected. Additionally, refugees who participated in the FGDs were sometimes confused about the role of some service providers, so the assessment team had to clarify from time to time some operational information before moving forward in the discussion.
- Household-level analysis: the data analysis of the assessment was done at a governorate level as survey results were not available at the household level except for food sufficiency. As such, it was not possible to correlate households receiving food vouchers with those who are not in terms of income, dependency ratio, food expenditure, and negative coping strategies. The information could also not be disaggregated based upon male and female-headed households. To overcome this challenge, WFP monthly programme monitoring results for 2013 have been included to provide additional data on food consumption and negative coping strategies.

Sample specifications of the quantitative survey

Figure 1: Number of families by location

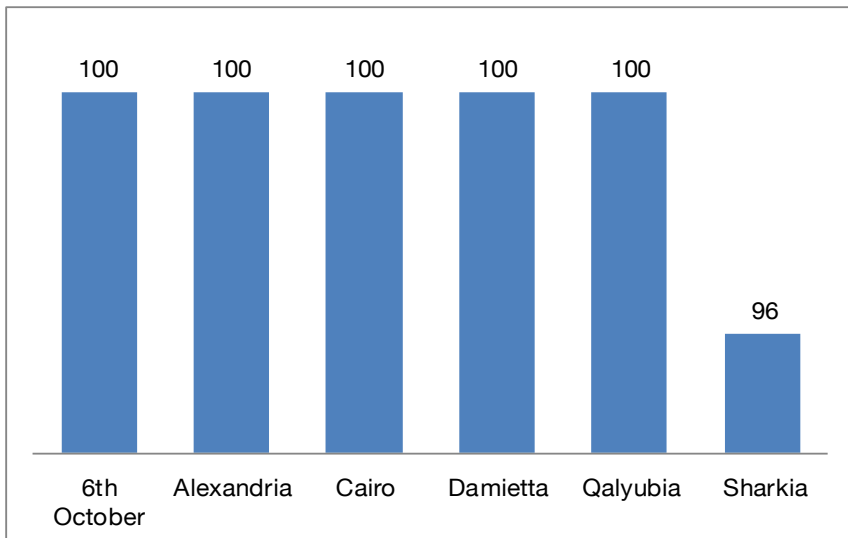


Figure 2: Number of families by family size

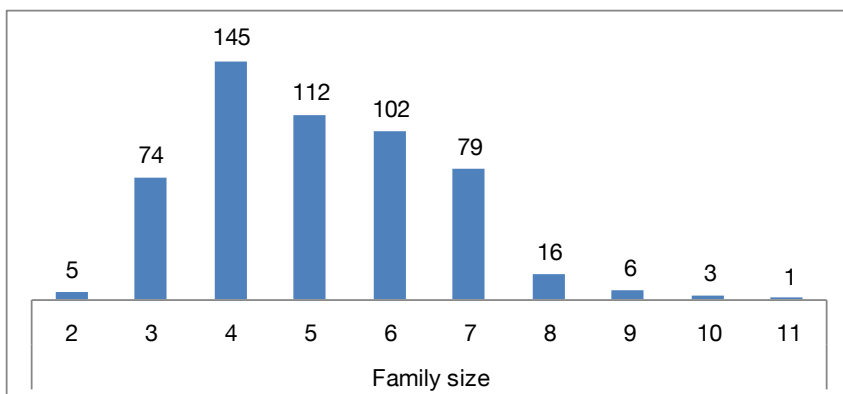


Figure 3: Number of families by gender of principal applicant

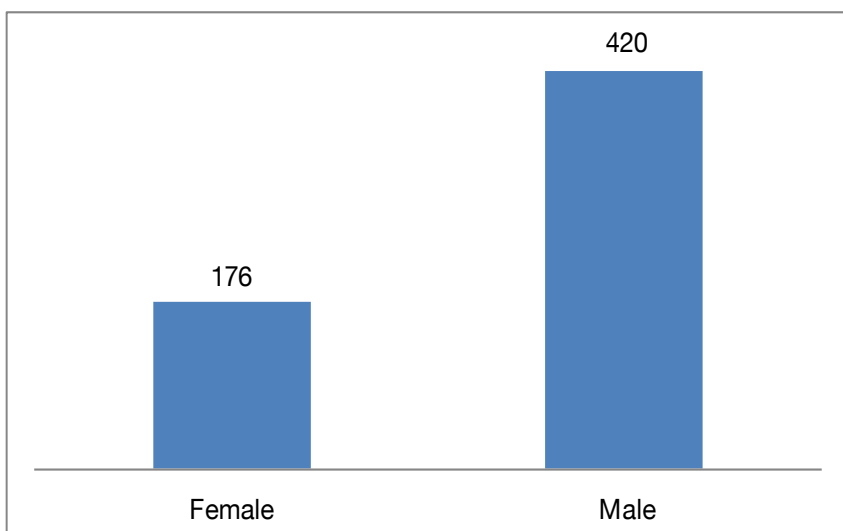
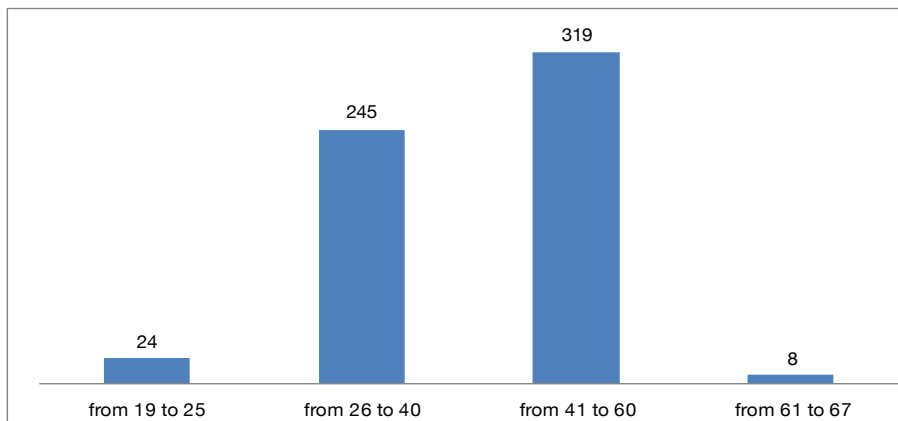


Figure 4: Number of families by age of principal applicant



Population Figures and Assistance Programmes in 2013 (as of 31 October 2013)

Summary

- 125,499 individuals equivalent to 46,173 cases registered in Egypt.
- 44.68% of population is under 18 years old.
- 50.02% of registered individuals came through a transit country (77.21% from Lebanon, 12.30% from Jordan, and 10.49% from other countries).

Table 1: Gender and age breakdown of individuals

Age Group	Female		Male		Total	
	Number	%	Number	%	Number	%
0 - 4	8,962	7%	9,397	7%	18,359	14%
5 - 11	10,822	9%	11,498	10%	22,320	19%
12 - 17	7,123	6%	8,265	7%	15,388	13%
18 - 39	22,768	18%	23,189	18%	45,957	36%
40 - 59	9,196	7%	9,143	7%	18,339	14%
60+	2,546	2%	2,590	2%	5,136	4%
Total	61,417	49%	64,082	51%	125,499	100%

Table 2: Gender of heads of households

Head of household	Number	%
Female	12,584	27%
Male	33,589	73%
Grand Total	46,173	100%

UNHCR registers individuals above 18 years old on a separate file even if they are dependents of a household. This explains why in figure 5 there are 19,658 cases that are comprised of only one person, which is equivalent to 42% of the total registered cases. This number does not reflect the real household composition of the Syrian refugee population in Egypt.

Figure 5: Number of cases by case size

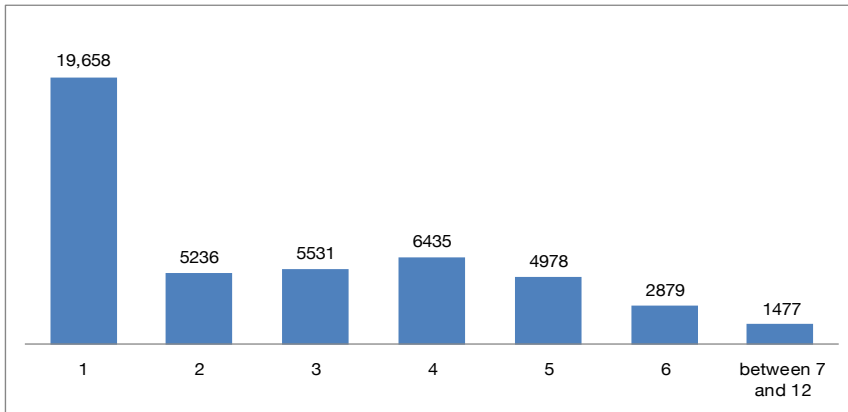


Figure 6: Place of residence in Egypt

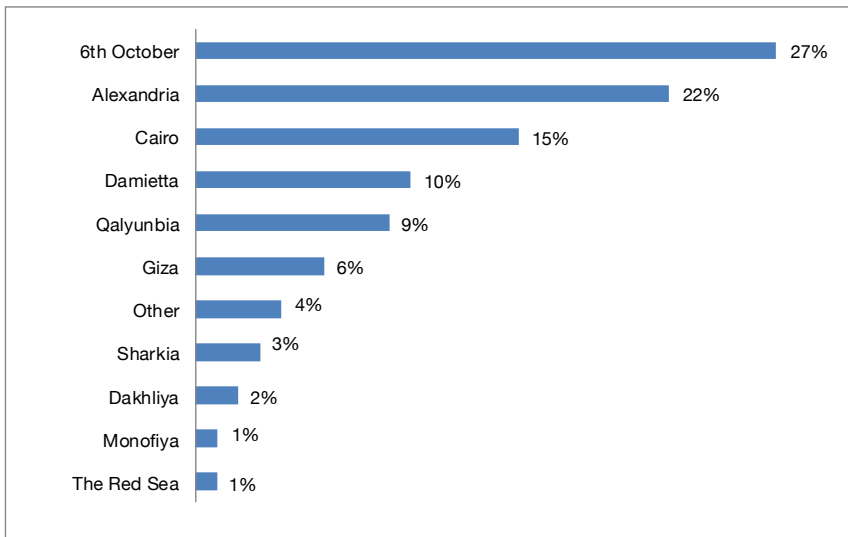


Figure 7: Place of origin in Syria

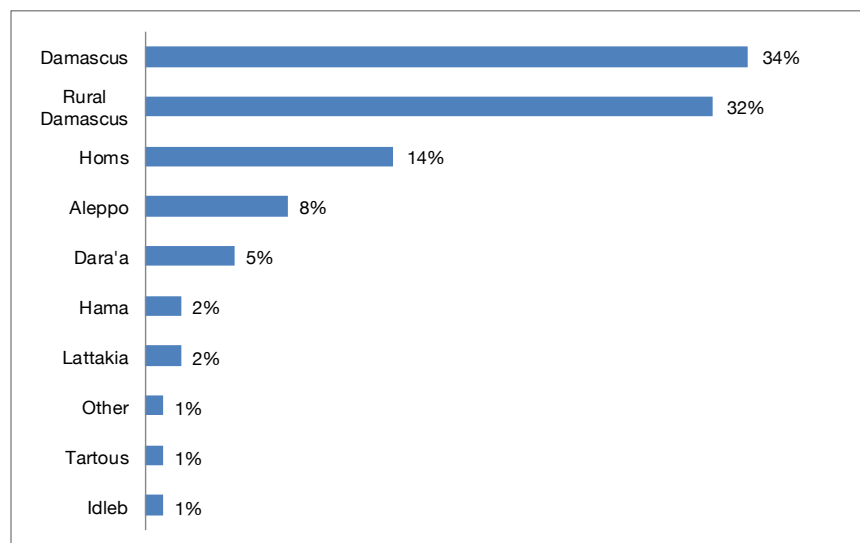


Figure 8: Registration trends

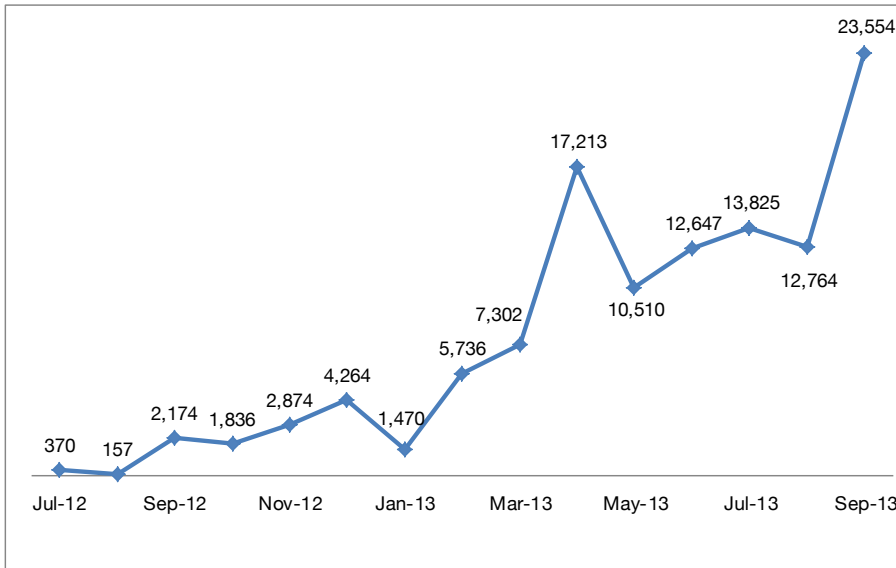


Figure 9: Transit country

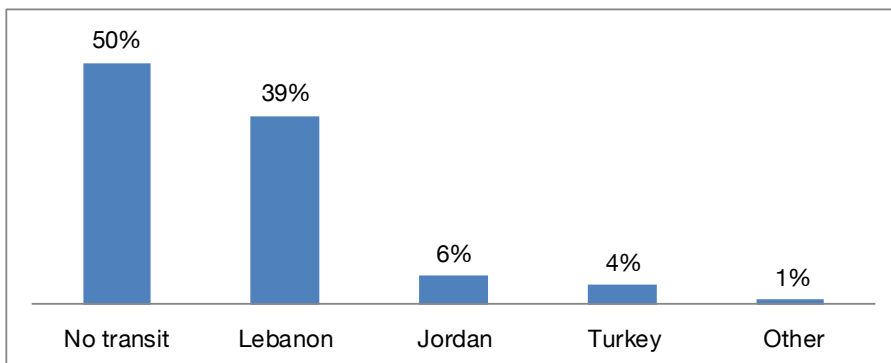


Figure 10: Arrival trends for registered individuals

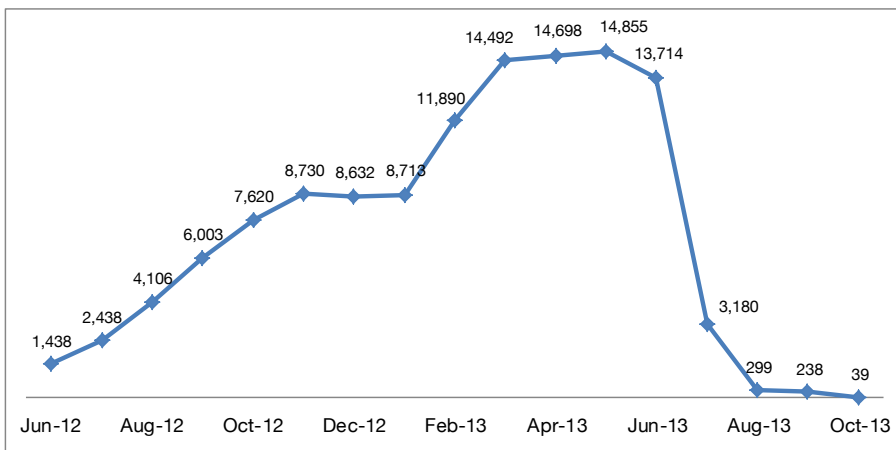


Table 3: Main assistance programmes in 2013

Programme	Services	Implementing agencies	Number of beneficiaries in 2013	Geographic coverage
Legal assistance	Protection/legal counselling/legal aid/representation of detainees	UNHCR / UNICEF	3,940 (222 children that were in detention)	Greater Cairo, Alexandria, Damietta
Unconditional cash assistance	Cash grants to destitute and vulnerable cases	Islamic Relief Worldwide, Caritas, and Resala	56,220 Syrian refugees ¹	Greater Cairo, Alexandria, Damietta
Food assistance	Food Vouchers	World Food Programme	76,000 (monthly assistance) ²	Damietta (New Damietta, Ras Al bar, Gamssa), Alexandria (Alexandria, Kafr El Sheikh, Beheira, Matrouh), Cairo (Ain Shams, Shubra, Gisir Suez, 10th of Ramadan, Mareg, Obour), Giza (Sadat City, Haram, Faysal, 6 of October City)
Health care	Primary, secondary and tertiary care	Mostafa Mahmoud association, Refuge Egypt, Caritas, and Resala	55,972 Syrian refugees ³	Greater Cairo, Alexandria, Damietta
Mental health	Referral to inpatient and outpatient treatment	Psychosocial Services and Training Institute in Cairo (PSTIC)	240 Syrian refugees	Greater Cairo
Capacity building for the Ministry of Health	Training MOH staff on early warning systems and non-communicable diseases diagnosis and treatment; maternal and child health care; and on family planning and gender based violence referral, and the strengthening of public health units	WHO / UNICEF / UNFPA	700 Ministry of Health staff	Greater Cairo, Alexandria, Damietta, Fayoum
Community-based psychosocial support	Emergency response, group and individual awareness raising sessions, and visits to detention centres	PSTIC	6,443 Syrian refugees	Greater Cairo
SGVB psychosocial support services	outreach to women to raise their awareness on SGBV and available services	UNFPA (in partnership with Resala, YPeer and FARD)	400 Syrian refugee women	Greater Cairo
Housing	Negotiation with landlords and payment of rent for two months	PSTIC	401 Syrian refugees	Greater Cairo
Capacity building for Child Protection/ Mental Health	Training of emergency responders	UNICEF / PSTIC	19 emergency responders	Greater Cairo, Alexandria, Damietta
Child protection programme	Establishment and management of 6 child friendly spaces	Save the Children / UNICEF	2,215 Syrian refugee children	Greater Cairo, Alexandria
Outreach and community empowerment	Establishment and management of community centres/capacity building for community based organizations and helpline management	Tadamon	15,156 Syrian refugees	Greater Cairo
Education	Support to the Ministry of Education with furniture, equipment and education materials	UNHCR / UNICEF	23,000 Syrian refugee children	Greater Cairo, Alexandria, Damietta
Education grants	Conditional cash grants for education;	Catholic Relief Services	12,948 Syrian refugee children ⁴	Greater Cairo, Alexandria, Damietta
Early childhood education	Establishment of KG in community schools		1,000 Syrian refugee children	Greater Cairo
Self-reliance	Wage and self-employment	Catholic Relief Services, Caritas	2,364 Syrian refugees	Greater Cairo, Alexandria
Winterization	Unconditional cash grants	Islamic Relief Worldwide	22,341 Syrian refugees	Damietta, Greater Cairo, Alexandria

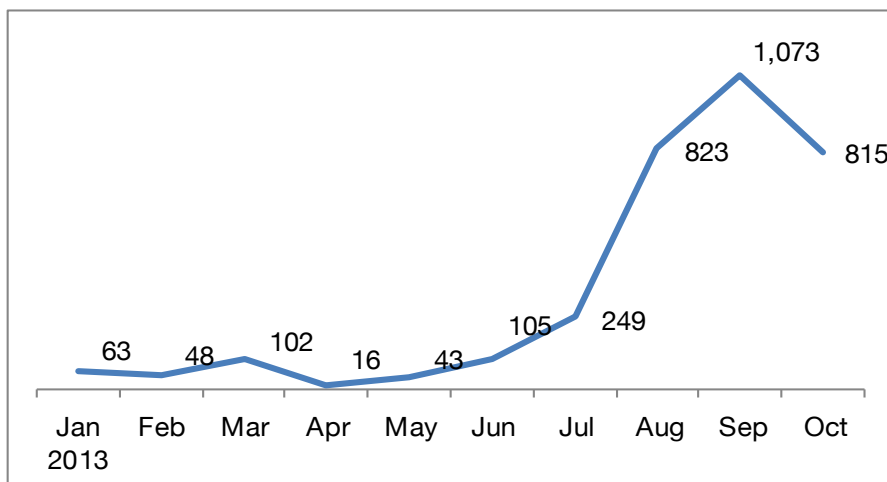
¹ The unconditional cash assistance is targeted and paid on a monthly basis (approved duration ranges between 3 and 12 months). 9,656 are members of female-headed households.

² The food vouchers assistance is provided every month. In addition to Syrians, WFP assists 2,000 Palestine refugees who fled from Syria. This is equivalent to 330,000 food vouchers from the start of the assistance in February to the end of November.

³ This figure includes beneficiaries of primary, secondary and tertiary health care services in addition to children under five and motherhood care. Laboratory and radiology beneficiaries are also included.

⁴ Out of this number 6,375 are girls.

Figure 11: Closure trends



Key Findings and Recommendations

1. Protection

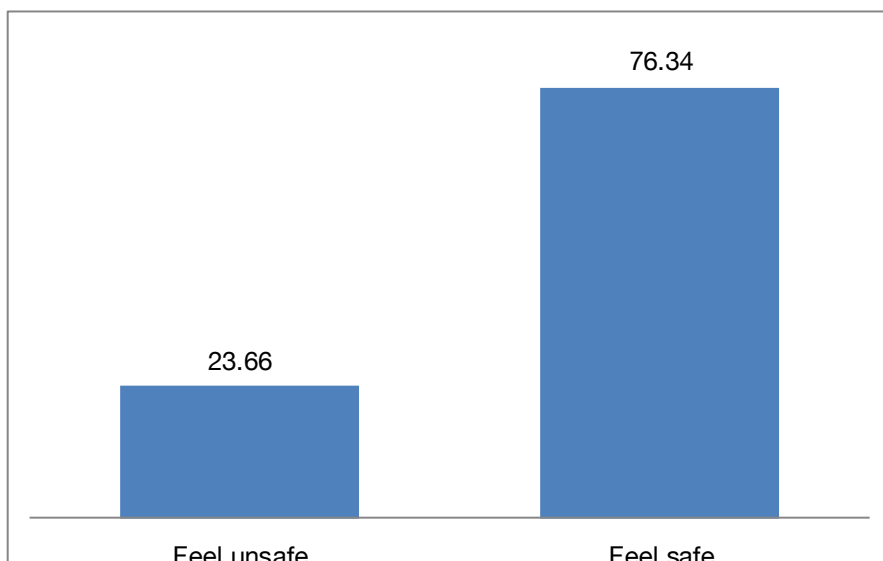
Data from the joint assessment highlights a number of protection concerns facing Syrian women, men and young people. This first section will describe the overall protection concerns and as well as the challenges faced predominantly by women and girls in the form of sexual and gender based violence. A separate section will examine the risks faced specifically by Syrian children.

General protection concerns:

Participants in the FGDs and respondents to the surveys highlighted the main protection concerns as:

- Access/entry into the country
- Residency status
- Security of families

Figure 12: Safety perception



Whilst in the survey 76.5% of respondents said that they felt safe living in Egypt, of those that said they did not feel safe the most pressing concerns were; issues with their residency (14%), physical assault (10.8%), verbal harassment (17.2%) as well as robbery (17.2%) and threats (12.9%). Participants' security concerns were better articulated in the focus group discussions (FGDs). In each of the five locations where they were held, participants stated the above concerns had increased considerably since 30 June 2013.

Entry and Residency

During FGDs in Alexandria, women and men stated that the visa requirements for Syrians to enter Egypt the Government enacted on 8 July 2013 had separated families and made reunification more difficult. This sentiment was reiterated during FGDs in a number of the other locations. As well, a number of participants in Damietta and Assuit stated that renewal of their residency visas was taking longer, and as a consequence putting their families at risk of detention and deportation.

Syrian participants in participants in Greater Cairo, as well as Damietta and Assuit where UNHCR has less of a presence, stated that they were afraid to take residency on their yellow cards and passports as it could increase the risk of being detained or cause other problems upon return to Syria. Participants in Assuit and Damietta were also less aware of UNHCR, its services and the protection that it provides to refugees.

Security

Participants in all FGDs felt that the security situation for Syrians in Egypt had changed since 30 June 2013 when large protests where held calling for the removal of President Morsi, and was becoming worse and more dangerous. Women in Alexandria felt that Syrians have become targets for crime and abuse and that the increase in the level of crime had a direct impact on them. In Damietta one participant stated that, "Egyptians used to be very welcoming and generously offer help; but now they are a bit suspicious and impatient."

Insecurity has manifested in a number of ways: in two FGDs participants stated they believed that the media had exaggerated the role of Syrians in Egypt's political affairs, increasing the feeling of ill will towards them. FGD participants in Damietta said they felt that anyone could face "refoulement" at any moment, especially after the police arrested several Syrians in the town. Participants also believed police were not interested in listening to their concerns and had even been targeting them directly – such as shutting down their businesses – as the authorities may have assumed the Syrian businessmen were supporting the Muslim Brotherhood. The survey, however, demonstrated that overwhelmingly participants identified the Egyptian public as the perpetrators of harm towards Syrians (58.7%).

Whilst 56.7% of respondents to the survey identified UNHCR as the first port of call for protection assistance, a number of participants in the FGDs were still unable to identify the UNHCR logo and were not aware of any of the services that UNHCR offers. This suggested that UNHCR presence is not visible enough in some areas, especially Damietta and Assiut.

Figure 13: Perceived identity of perpetrators

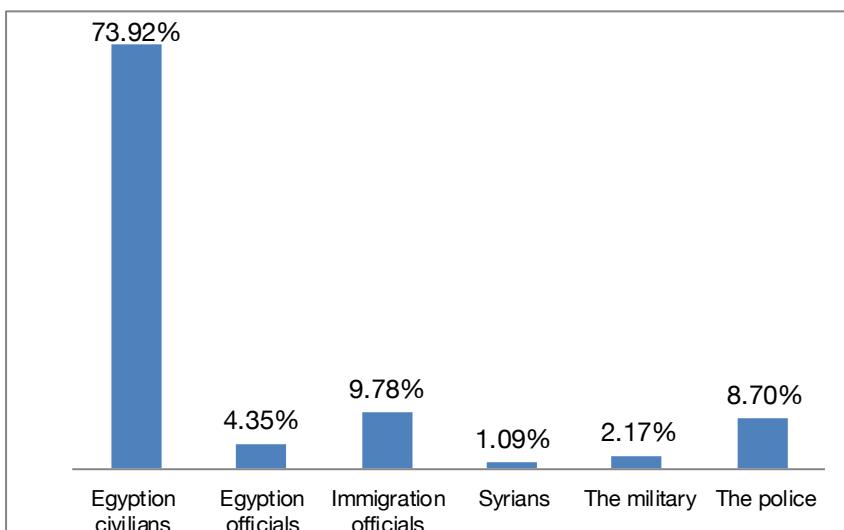
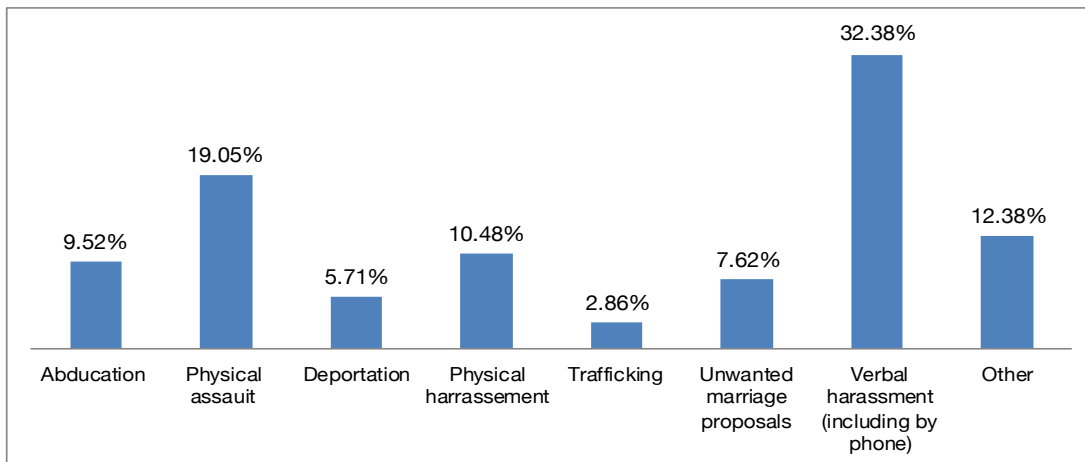


Figure 14: Threats



Detention and deportation, two issues that have been of grave concern to UNHCR and partners since 30 June 2013 were acknowledged as issues by participants and respondents alike. However, in neither the surveys nor the FGDs did these topics shine through as the biggest concerns.

Sexual and gender based violence (SGBV)

Overwhelmingly, 76% of surveyed respondents – predominantly male heads of households – felt that Syrian women and girls felt safe in Egypt. However, a number of the women and girls who participated in the FGDs in Alexandria stated that they have taken to wearing Egyptian clothes to try and blend in to feel safe. In the same FGDs they also stated that most women and girls are also too afraid to take public transport because of the threat of detention or being ambushed, with many stating they had experienced theft. In the survey, women and girls stated they had experience verbal harassment (32.4%), physical assault (19.1%) or physical harassment and harm (10.5%). The alleged perpetrators were generally Egyptian civilians. From the FGDs it was evident that girls feel threatened as a mere consequence of being female in Egypt. They fear sexual harassment and in FGDs in Assiut girls stated they were subject to frequent harassment from Egyptian boys and young men, often resulting in fights between Syrian and Egyptian males, sometimes resulting in injuries and police involvement. As a consequence many girls are restricted to home and miss out on school and other external activities, and women reported becoming depressed about their situation.

Child Protection

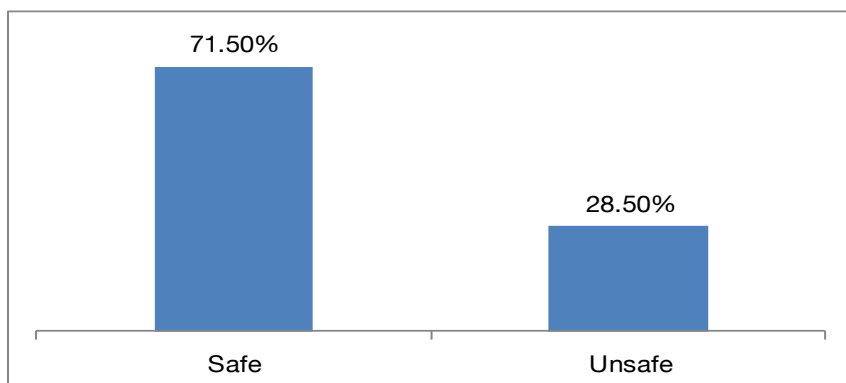
The joint assessment found that child protection challenges spanned all sectors from health and basic needs to education and food security. Whilst at the most basic level the survey indicated that 72% of respondents felt their children were safe in Egypt, of those that felt their children were not safe, 42% said this was due to harassment on the streets, with the threat of abduction (12.5%) and verbal harassment (11.6%) being the next largest factors.

During the FGDs a number of protection risks for children were consistently identified. These risks were:

- Discrimination and harassment
- Lack of safe spaces to gather and play
- Child labour/exploitation
- Education related protection risks
- Food, nutrition and health related risks

A common challenge for Syrian children across the FGDs was exposure to discrimination and harassment in the streets and schools. The harassment was generally described in the form of verbal insults. However, one FGD with children highlighted incidents of robbery.

Figure 15: Perception of children safety



All FGDs involving children and young people reported that parents restricted their children from playing in the communities because of concerns over safety. Children in Damietta stated that they were not allowed to play with Egyptian children in the street and that neighbours treated them badly if they tried to interact. Despite this they said that they were willing to integrate and get along with Egyptian children in school. A minority of boys in Alexandria stated that they play football in the street. However, most children stayed in their homes watching television, playing in the house, studying or helping their parents (especially the girls).

As a result of these factors the education of the Syrian children is suffering. According to the survey 43.3% of children are currently not attending school. For those that do attend school, attitudes of teachers and other children, distance to schools and cost are all serious issues and contribute towards their exclusion and protection concerns. In Giza the low rate of enrolment in schools has resulted in psychological problems for children because they are confined to home.

Children in Alexandria noted that families were begging in the streets, with some children having to quit school and search for work to support their families. Furthermore, many of the children interviewed work part-time to supplement the family income, with some children under the age of fifteen having to contribute because parents could not find suitable employment. Work included shop assistants, restaurant staff as well as one child working for a hairdresser.

Adolescent females in Nasr City (Cairo) reported that while assisting to support their families they suffered from harsh employment conditions, with many working 12 hours a day for low salaries. In Giza, many adolescents reported that education is no longer a priority as they need to provide an income so their family can eat.

Programmatic recommendations:

- Conduct a wider profiling exercise to better understand access to basic rights and protection gaps among refugees in Egypt.
- Continue advocacy with the Government on access to the territory and asylum, particularly in view of family unity, as well as access to basic rights.
- Increase awareness on SGBV in larger urban settings and elsewhere, and strengthen referral mechanisms to services.
- Expand protective spaces for children and strengthen existing structures for the protection of children.
- Expand psychosocial services, in particular for survivors of SGBV, children and their families in larger urban settings and elsewhere.
- Expand counselling on protection issues and access to legal aid.
- Strengthen coordination among the various sectors and build on inter-linkages.

2. Livelihoods and Food Security

The majority of Syrian refugees in Egypt have been facing challenges in responding to their basic household needs. Limited financial capacity, increases in prices and rent costs, and the drop in the level of sympathy of the host community towards Syrian refugees have led to deteriorating living conditions of Syrian households. As a result, they are facing homelessness, evictions, food insecurity, school dropout, and security threats.

Participants in the FGDs in 6th of October City mentioned that cash assistance, housing support and income generation support are high priorities to counteract the loss of support of charity organizations that used to provide them with assistance.

The food security assessment focused on access, namely a households' ability to acquire adequate and preferred food in sufficient quantity and diversity. Key questions included household income and expenditure, frequency of meals, sufficiency of food and negative coping strategies for a thirty-day recall period. Other key aspects of food security, food availability and utilisation, were not considered as previous assessments have concluded food is widely available in the local markets and the relatively small population of Syrians in Egypt is not expected to have an impact on food availability or food price. In terms of utilization, concerns with nutrition and drinking water quality surfaced in the FGDs and may need further investigation in collaboration with health sector partners.

Syrian refugees have been searching for jobs in Egypt and a good number of them were able to enrol in the local labour market. In this framework, 42.93% of interviewees noted that salary is their main source of income. However, 22.65% of respondents perceived that Syrians suffer from difficult working conditions, such as long working hours combined with low salaries and they considered the bad working conditions and exploitation the main barriers to employment in Egypt.

Household Income and Expenditure

According to the last joint assessment conducted in November 2012, savings were considered the main financial resource for Syrian refugees arriving to Egypt. These savings have significantly depleted and Syrians who arrived in Egypt in 2013 had already exhausted their savings after prior periods of displacement either inside Syria or in Lebanon.

Of the participants interviewed, 42.93% have a salary as their main income. On the other hand, 33.69% are increasingly moving towards negative coping mechanisms such as selling of assets, borrowing and NGO support. Very few households (2.5%) earned income from private businesses as a main source of income. Secondary sources of income included borrowing (28%), using savings (22%) and NGO support (21%). The most prevalent third source of income was using savings (38%).

Figure 16: Main source of income

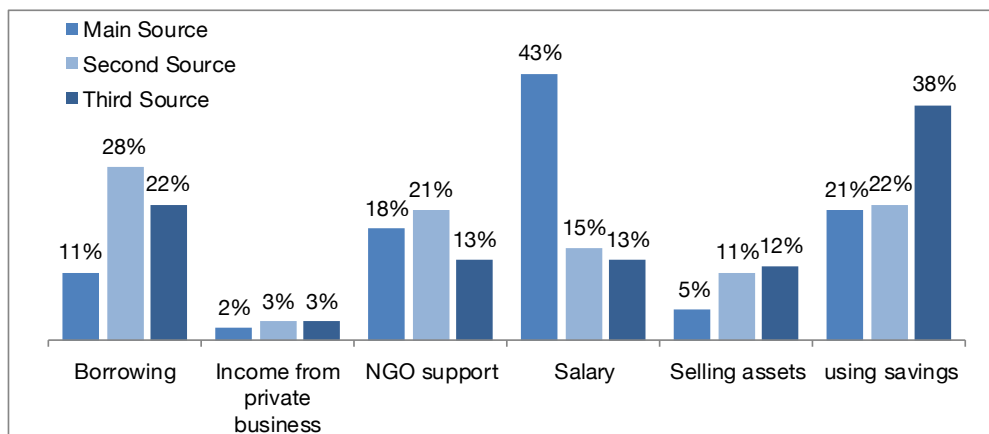
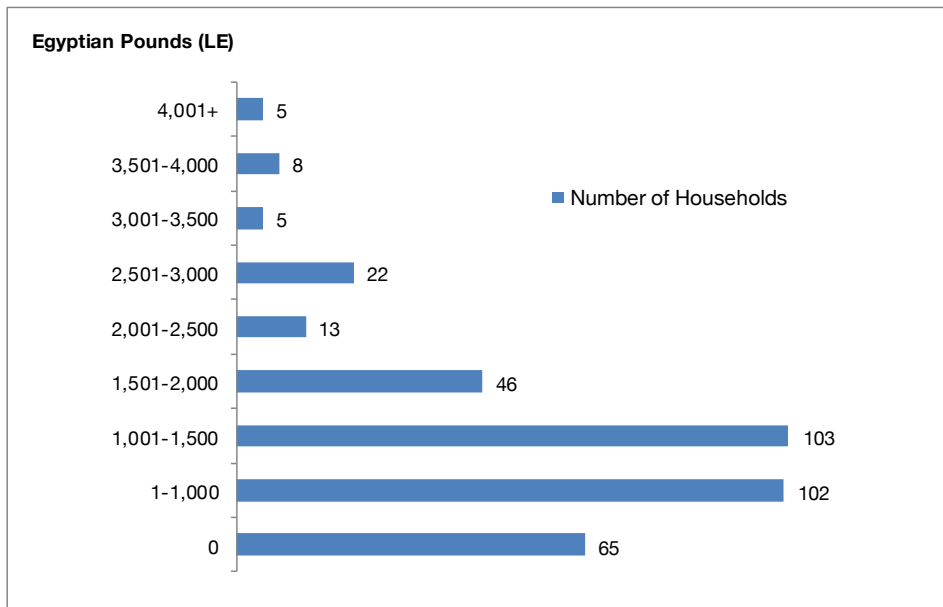


Figure 17: Household income per month (LE)



The weighted average of household income was 1,150 LE per month with most households (86%) earning less than 2,000 LE per month.

Table 4: Household income and expenditures (sample of 100 households)

	Item	Average value for households rejected for cash assistance (income 1500 LE)	Ratio to expenditures	Ratio to income	Average value for households approved for cash assistance (income 800 LE)	Ratio to expenditures	Ratio to income
E x p e n d i t u r e s	Food	1200	47.5%	80%	1200	48.2%	150%
	Rent	980	38.8%	65%	800	32.1%	100%
	Education	200	7.9%	13%	127	5.1%	16%
	Health	35	1.4%	2%	270	10.8%	34%
	Gas	20	0.8%	1%	20	0.9%	2.5%
	Water	20	0.8%	1%	20	0.9%	2.5%
	Electricity	70	2.8%	5%	50	2%	6%
	Total	2,525	100%	167%	2,487	100%	311%

The average household income of the Syrians sampled is between 800 – 1,500 LE but their spending is about 2,500 LE on average. Food is the highest portion of expenditures for families and rent fees comes in second (1,200 LE on food and around 850 LE on rent). The November 2012 assessment reported that the minimum household expenditure for a family of 4-5 persons is 3,000 LE per month including a minimum 1,000 LE on food and 1,500 on rent. In one year, the average expenditure of Syrian decreased by 500 LE, which indicates a reduction in the quality of housing where the spending came down from 1,500 to 1,000 LE.

Figure 18: Ability to pay rent

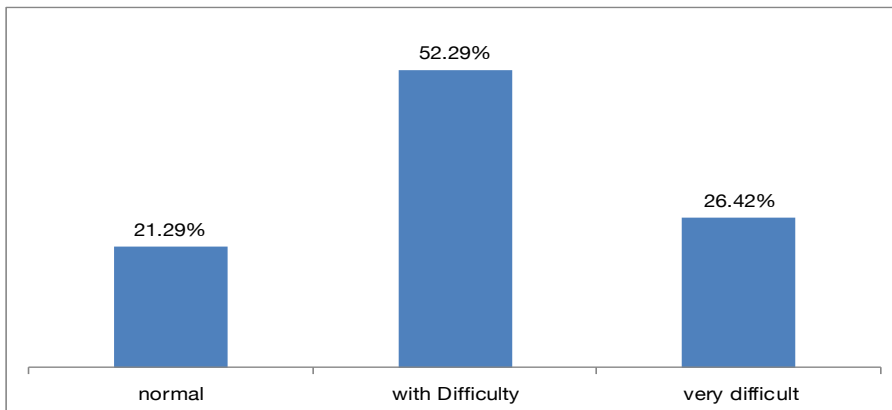
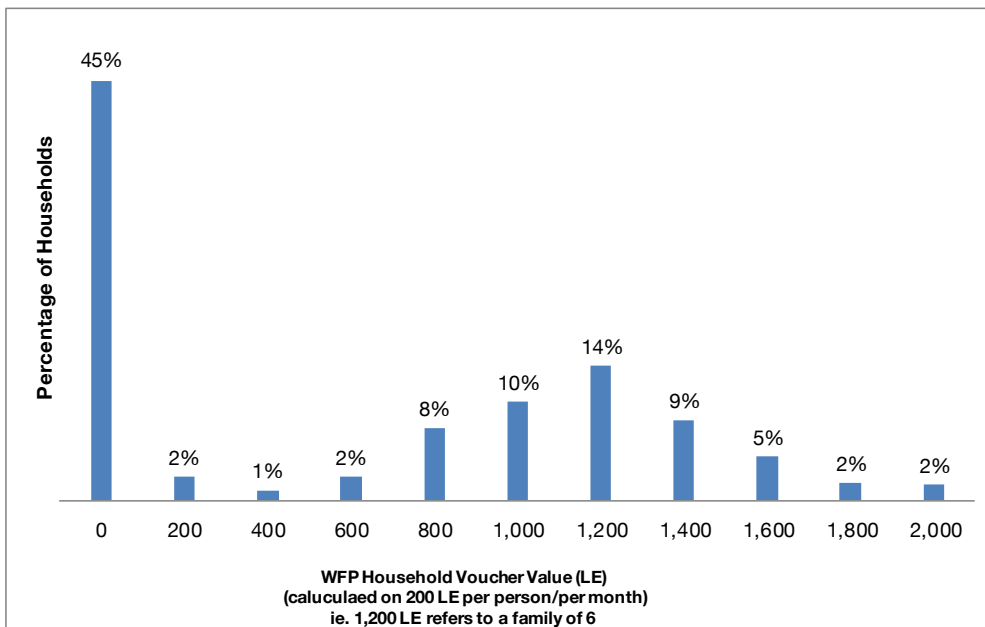


Figure 19: WFP household voucher value



Of those surveyed, 78.71% indicated that they are facing difficulties in paying their housing rent. In addition, Syrian families reported in the FGDs that they are sharing apartments in order to reduce the cost of rent.

In FGDs participants reported that they had adopted negative coping mechanisms due to high food and rental costs. Respondents in Giza and Damietta reported that food and rent were the main household expenses; men in Giza reported that they spent 35% of their income on food. Respondents in Assiut noted that they had to cut spending on other items such as non-essential health, clothing and education in order to cover food and rental costs.

In addition, inflation in domestic food prices increased in 2013 with a 20.1% increase in food prices between January and October 2013.⁵ This means that households are facing critical challenges to meet their basic needs.

As the joint assessment included Syrian refugees in governorates outside of WFP’s coverage area for food voucher distributions, 55% of the respondents reported they were receiving WFP food vouchers.⁶ Food vouchers are equivalent to 200 LE per person per month with the weighted average showing that most

⁵ Calculated using data from the central agency for public mobilization and statistics. www.capmas.gov.eg

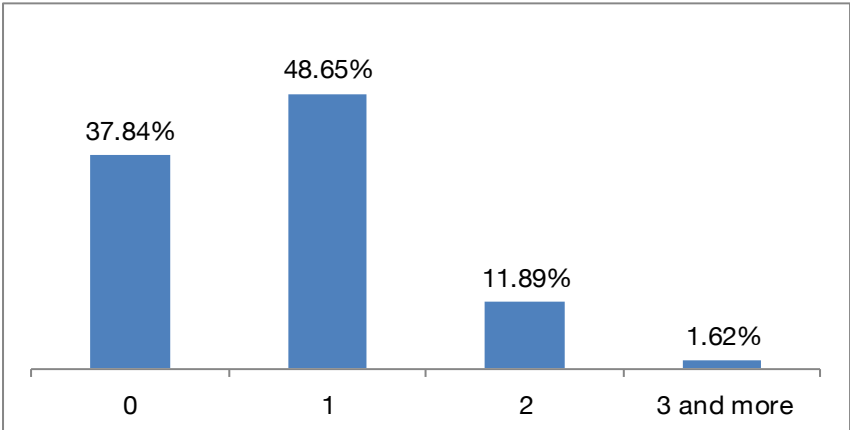
⁶ The food assistance programme is following a geographic targeting methodology pending a transition to vulnerability household targeting.

families receive either a 1,000 or 1,200 LE through vouchers per month, corresponding to a family of five or six. The average WFP voucher is equivalent to the average total household income. In addition to that, UNHCR’s cash assistance programme consists of monthly payments between 400 LE and 1,200 LE, calculated according to the family size. These two programmes (cash and food assistance) play a significant role in covering the income deficit (ratio of income to expenditures is 239%) for more than 70% of registered Syrian households (76,000 beneficiaries for food assistance which includes a target of 6,000 Palestine refugees from Syria with UNRWA and 56,220 beneficiaries for cash assistance).

Employability in Egypt

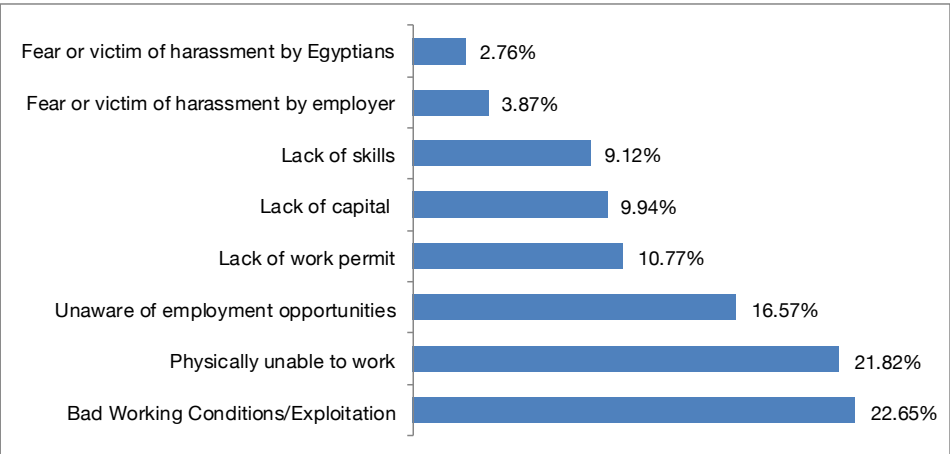
Syrians are relatively integrated into the labour market as 48.65% of the respondents mentioned that one of their family members is working and contributing to the household income.

Figure 20: Persons having income in the household



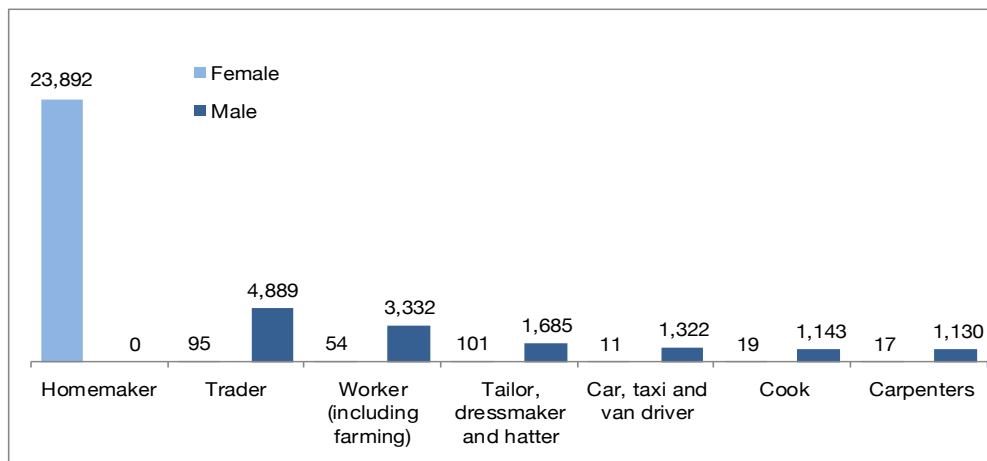
However, 22.65% of respondents consider that bad working conditions and exploitation prohibit them from finding jobs. As well, 3.87% and 2.76% have concerns over forms of harassment. As a result, 29.28% of respondents were willing to work but feared or have experienced difficult working conditions.

Figure 21: Barriers to employment



The majority of Syrian men surveyed have a commercial background; 34% of respondents come from Damascus where commercial and trading activities are one of the main economic activities.

Figure 22: Main occupations in the country of origin



The majority of Syrian men registered with UNHCR in Egypt (3,332) used to be workers in their country of origin; the majority of the Syrian women registered (23,892) were homemakers in Syria. Only 297 women and 13,501 men out of the Syrian population registered in Egypt were working in Syria.

Food Security

Food is a main household expenditure – particularly for households not receiving WFP vouchers. As of November 2013, of the Syrian refugees registered in Egypt, 60% receive WFP’s monthly food vouchers.

- Although the average household income is 1,150 LE per month, UNHCR cash assistance applicants reported monthly household expenditures of 2,500 LE with 1,200 LE, or nearly 50%, spent on food. The November 2012 assessment reported similar figures with a minimum household expenditure for a family of 4-5 persons of 3,000 LE per month including a minimum 1,000 LE on food.
- The average WFP food voucher value of 1,000 to 1,200 LE a month per household is equivalent to the average total household income. 55% of all households surveyed were receiving a WFP food voucher.
- FGDs reported high food and rental costs. Respondents in Assiut Governorate reported they had reduced spending on non-essential health, clothing and education to cover food and rent.

Sufficiency of household food intake has decreased since the November 2012 assessment, particularly for households not receiving a WFP food voucher:

- 27 % of respondents have insufficient food intake and 46 % barely sufficient compared to only 27 % with sufficient food intake. Sufficient food intake had decreased from 40 to 27% since November 2012. However, households receiving WFP food vouchers reported higher rates of sufficient food intake at 31% compared to 23% and lower rates of insufficient food intake (23% compared to 32%).
- The needs assessment found that across the governorates, Cairo and 6th of October had the highest rates of insufficient food intake at 32% and 31% (excluding Bani Souwaif and Gharbeya who only had 2 and 1 respondents respectively). Damietta and Giza had the highest rates of sufficient food intake at 39% and 32% (excluding Dakahliya which only had 3 respondents).
- WFP monitoring shows that acceptable food consumption increased from 70% to 80 % and the Food Consumption Score (FCS) increased from 53.4 to 61 after receiving food voucher assistance.⁷

Households (men, women and children) are reducing the quality and quantity of food consumed as a coping strategy, although this is less prevalent in households receiving a WFP food voucher:

- 68% of households are eating 2 meals per day with 4% eating only one meal per day. Reducing consumption to two meals per day was reported in FGDs in 6th of October, Assiut and Alexandria. Some families in Assiut (women) and Damietta (women and children) reported eating one meal per day.

⁷ Calculated using data from the WFP Syria EMOP monthly monitoring system between June and November 2013. The Food Consumption Score (FCS) is a standard WFP proxy indicator of household access to food measuring dietary diversity, frequency of consumption and relative nutritional importance of different food groups. For the Syrian population, an FCS greater than 42 is considered as acceptable.

- WFP monitoring found that after receiving a WFP food voucher, the number of households eating three meals per day increased from 19% to 41% and those eating one meal a day decreased from 24% to 9%.⁸
- Cairo, Giza and Damietta Governorates had the highest reliance on negative coping strategies (excluding Bani Souwaif, Gharbeya and Dakahliya with only two or three respondents). The most prevalent strategies were spending savings (39%), purchasing food on credit (27%) and selling household assets (21%). Very few responded said that they needed to pull children out of school (3%) or send household members to beg (1%).
- WFP monitoring found a significant decrease in the Coping Strategy Index (CSI) in refugees receiving a voucher in Cairo (CSI of 14.1 to a CSI of 8.13) and a decrease overall from 13.8 to 11.28.⁹ After receiving a food voucher there was a 29% decrease in reducing the number of meals eaten, 11% drop in limiting portion size, 8% fewer were spending savings and 6% less were borrowing or buying food on credit.¹⁰

Figure 23: Sufficiency of food intake by household

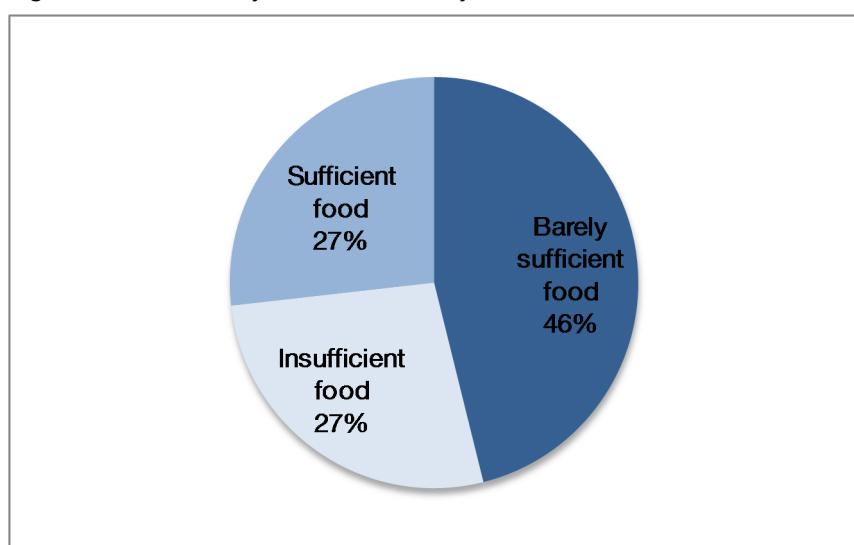
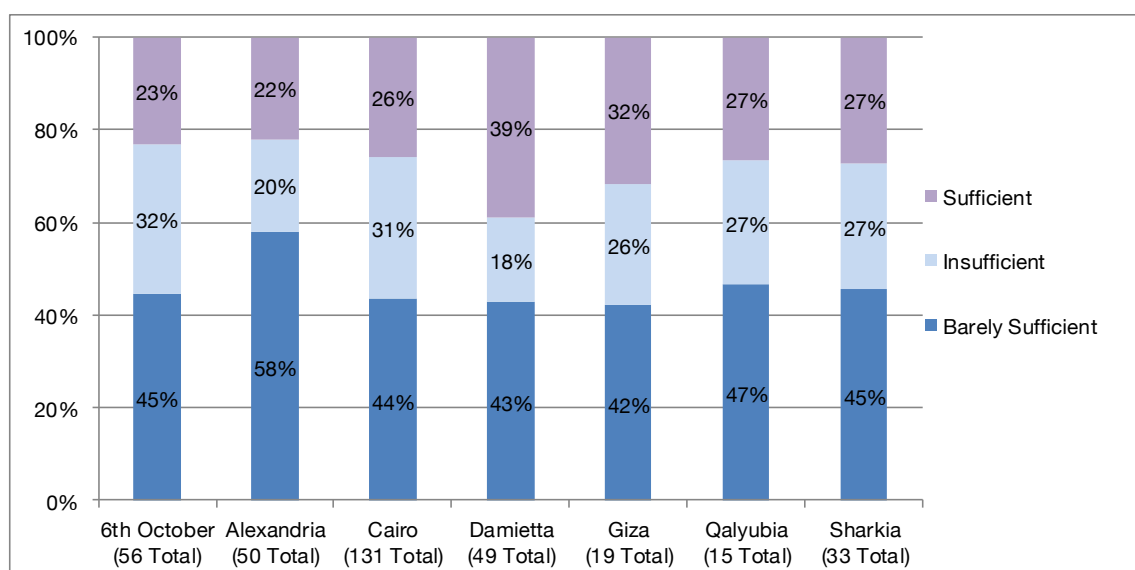


Figure 24: Sufficiency of food intake by household and by Governorate



⁸ Calculated using data from the WFP Syria EMOP monthly monitoring system between June and November 2013.

⁹ The Coping Strategy Index is an indicator of household food insecurity. The higher the score, the more frequent use of coping strategies and/or the more severe coping strategies are being used.

¹⁰ Calculated using data from the WFP Syria Emergency Operations (EMOP) monthly monitoring system between June and November 2013.

Figure 25: Food Consumption (WFP Monitoring Results)

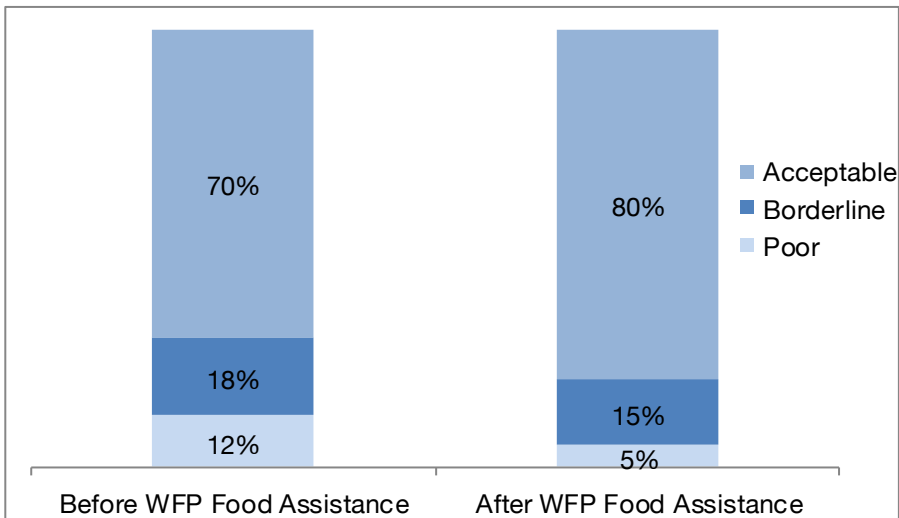
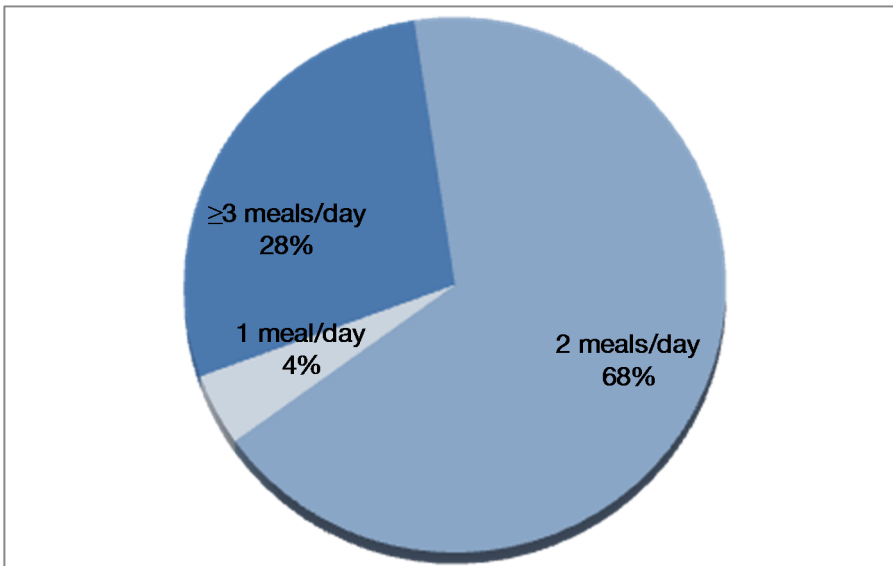


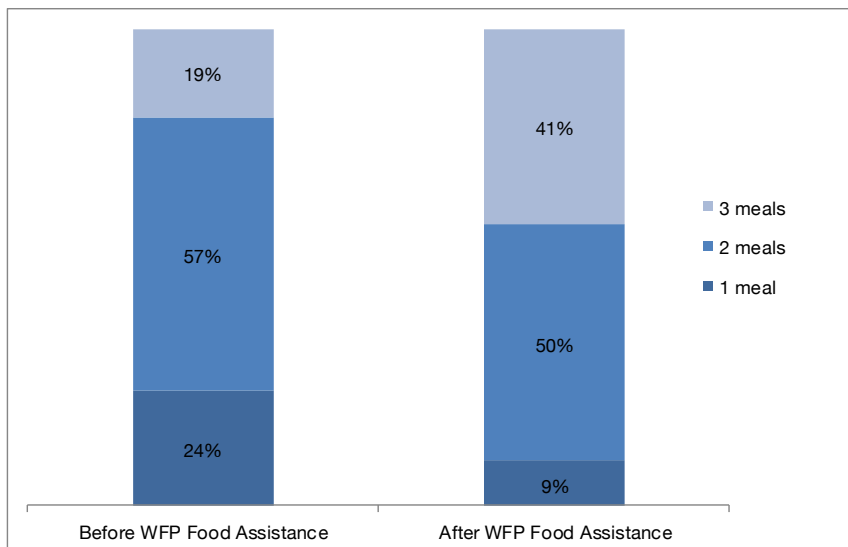
Figure 26: Number of meals per day



In November 2012, of the households surveyed, 64% were adopting negative coping strategies with nearly half reducing the quantity of food and consuming less diverse foods. While the percentage using negative coping strategies appears to have decreased significantly from 64% to 18% in the current assessment, FGDs in all locations reported purchasing less expensive and lower quality food (e.g. no meat, chicken or fish and less fruit). Women in Assiut, Nasr City and Damietta emphasised a reliance on a vegetarian diet. Adolescents and children reported receiving less pocket money (Damietta and Alexandria), a lack of preferred Syrian food (6th of October) and a reduction in meals with lower quality foods due to reduced family income (all locations). Children in Alexandria also reported drinking less milk.

In the FGDs in 6th of October, Nasr City, Giza and Damietta, women and children respondents expressed nutritional concerns. In addition, health concerns related to drinking tap water due to the inability to afford bottled water or filters was reported in Giza and Alexandria, which may impact on food utilization. Further assessment may be required to investigate household dietary diversity and nutritional risks facing Syrian refugees in Egypt.

Figure 27: Number of Meals per Day (WFP Monitoring Results)



The FGDs also identified the preferred types of assistance. In 6th of October and Alexandria, cash assistance was requested in addition to the current food assistance in order to purchase non-food items. Livelihood assistance was requested in Assiut, Alexandria (women) and Giza. Giza and Nasr City (men) requested to be added to the food voucher assistance. In Damietta, rental assistance was requested in order to have more money to purchase food and other essential items.

In November 2012, food assistance and livelihood support (with the expectation of improving food security) were recommended. The November assessment context is still relevant with rising food prices, inflation and the likelihood that the refugees will become more food insecure and increasingly resort to negative coping strategies due to a lack of livelihood opportunities. Refugees are still not eligible for the government food subsidized ration system. The Damietta assessment in February 2013 recommended livelihood interventions and food voucher assistance.

Programmatic Recommendations:

- Continue food voucher assistance in the current locations including Greater Cairo, Damietta and Alexandria.
- Extend food voucher assistance to additional vulnerable and food-insecure households identified through household vulnerability assessments with the assistance of UNHCR's partners.
- Conduct a joint rapid needs assessment in Assiut to assess needs including food security of Syrian refugees residing in the area.
- Conduct a rapid nutrition assessment with health sector partners to determine the current status of nutrition among the Syrian refugees.
- Diversify cash and voucher based interventions to respond to different types and levels of vulnerabilities. This could include the establishment of targeted housing support, one-off payments, monthly and regular payments, and winterization.
- Support the dialogue between Syrian investors and the Government of Egypt in order to reach a win-win solution to generate income for Syrians without creating any distortions in the Egyptian labour market.
- Expand self-reliance initiatives to target a larger number of job seekers and include youth and women in training programmes, which will assist in improving food security.
- Expand the protection pillar of self-reliance programmes in order to improve working conditions of wage employed individuals.

3. Health

This joint assessment shows that Syrian refugees use public health facilities. However, according to the results of quantitative and qualitative surveys, quality of health service provision is unsatisfactory for them. Despite UNHCR's support for the expansion of geographical coverage of health services, particularly in Alexandria and surrounding areas, Syrian refugees still have difficulties in accessing health services. Discussions showed that most Syrian refugees seek medical care from nearby public health facilities due to cost and distance.

During FGDs, Syrian refugees raised concerns and inquiries about availability and accessibility of health services and facilities. Most households reported having one or more persons in their family with health needs, with a high prevalence of cardiovascular diseases among chronically ill Syrian refugees.

The most common chronic diseases Syrian refugees suffer from are cardiovascular diseases (27.12%), followed by diabetes mellitus (12.42%). In FGDs, some participants mentioned that the drinking water is of a low quality and is affecting the health of their family members negatively, particularly those suffering from renal problems.

Figure 28: Most common chronic diseases among Syrian refugees

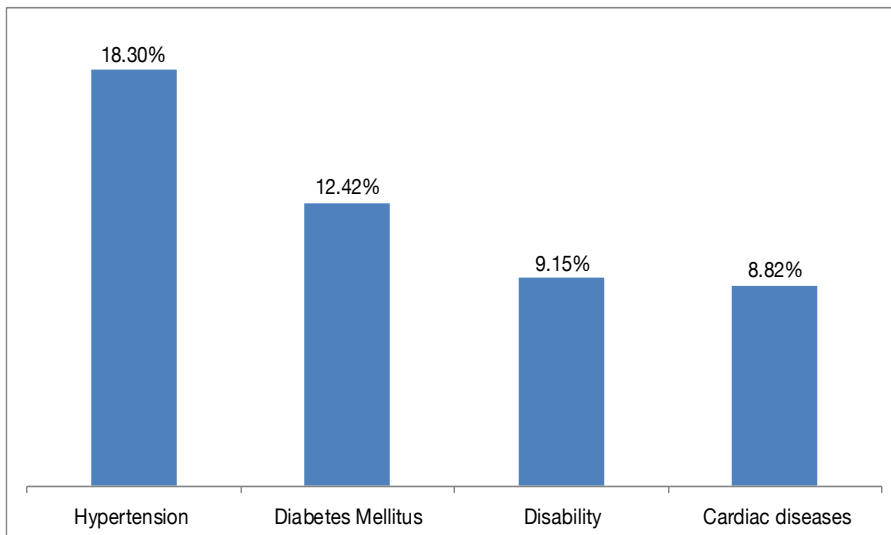
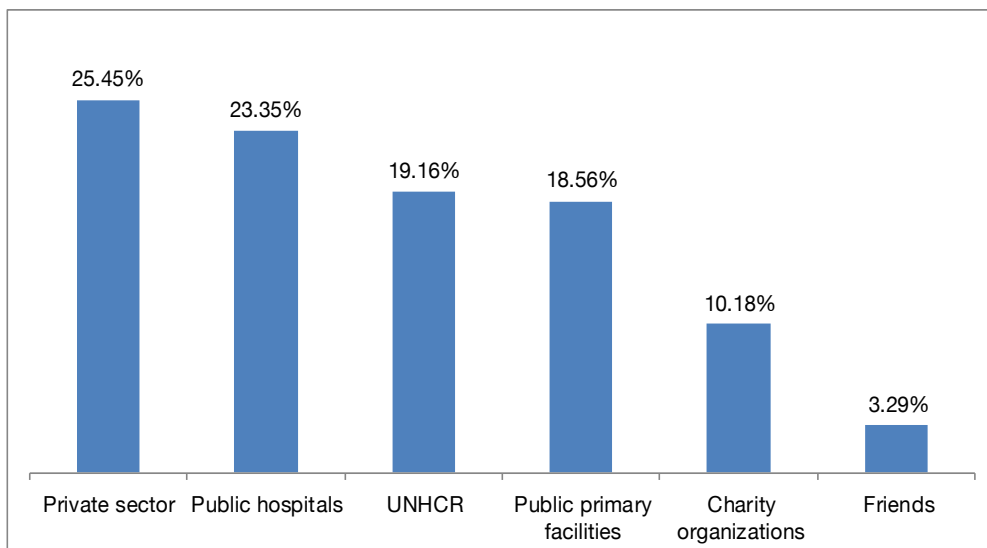


Figure 29: Health care service providers



Of the respondents, 42% use public health facilities, 25.5% use private sector facilities, 13.5% depend on charity and friends support and 19% use UNHCR's supported health services. The joint assessment in November 2012 found that 20% of Syrians use public health facilities.

As well, 42.56% of respondents noted that they need to completely settle their medical bills and 41.92% said that they partially pay for medical services and only 15.92% of them get free services. 6.1% of the household expenditures are on health. Since 2,500 LE is the average expenditure of Syrian households, the average spending on health is 150 LE per month.

Figure 30: Contributions in health service costs

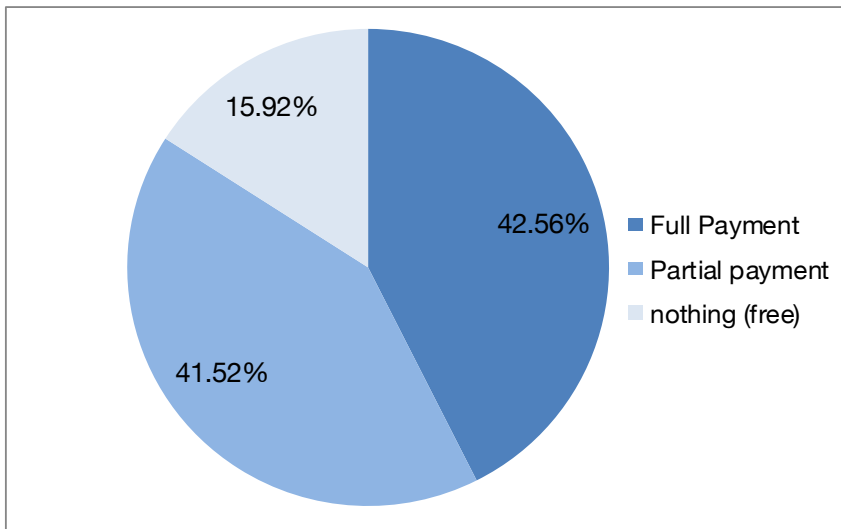
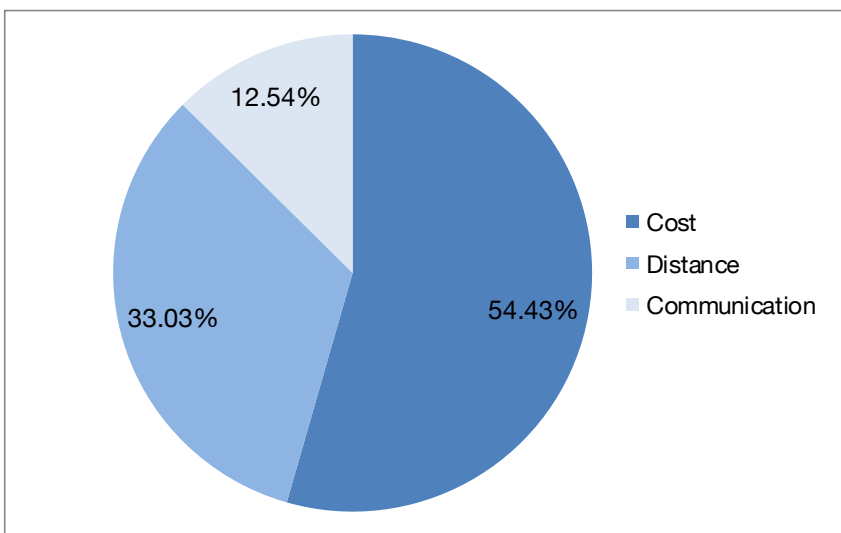


Figure 31: Challenges faced while seeking health services



According to the respondents surveyed, the most challenging issues in accessing health services are 1) lack of financial ability to afford health services, 2) inaccessibility of health facilities due to distances, and 3) communication with health facility staff.

Programmatic recommendations:

- Support the capacity of the Ministry of Health to provide services to Syrian refugees through their Primary Health Care facilities; thus to ensure geographical coverage of health services.

- Raise awareness among Syrian refugees about available health services and UNHCR's medical assistance criteria.
- Focus on health and nutrition education to improve knowledge, attitude and health related behaviour among Syrian refugees.
- Focus on antenatal care and infant and young children feeding services and food supplementation for prevention and early detection of nutritional deficits.
- Support community health worker outreach activities.
- Explore alternative support and funding mechanisms and sources for expensive interventions.
- Monitor the cost of prescriptions at clinics UNHCR supports.

4. Education

In this joint assessment the views of the refugee parents, guardian and their children were taken into account and tabulated. Despite the prevailing political climate and diminished protection space for Syrians in Egypt, the findings indicate that public schools are the favoured option among Syrians. 76.67% of all Syrian students enrolled in primary and secondary education attend public schools, as opposed to 19.63% that attend private schools, 2.69% that attend community schools, and 0.37% that attend special needs schools.¹¹

Of the 69,432 Syrian refugees above 18 registered with UNHCR in Egypt, 71% did not reach the last year of secondary school and 12% did not enter school at all (7.5% women and 4.5% men); 3% reached secondary school. Some 11% have a university degree (4.5% women and 6.5% men); 1% reached the post-university level; 3% have had technical and vocational education.

On 3 September 2013, the Minister of Education announced that Syrian children would continue to have same access to public schools as Egyptian students. Nevertheless, the majority of Syrian parents in Egypt have been facing challenges in responding to the educational needs of their children.

Overcrowded classroom, insufficient infrastructure and education resources, and other deficiencies in the Egyptian education system which create challenges for Egyptian students also affect Syrian students. As well, many Syrians have difficulties in providing required documentation such as residence permits, birth certificates, valid passports or national identity documents, original school certificates from the country of origin, and a letter from UNHCR Egypt, which make access impossible.

The FGD respondents noted that many children also live a far distance from the schools they attend, which creates protection risks and affects attendance. Respondents also noted that the difference between the Syrian and Egyptian dialect creates some adaptation challenges as the language of instructions in the classrooms is Egyptian colloquial Arabic. Syrian students who do not have school certificates also have had difficulties passing placement tests, particularly for Syrian students who are not familiar with the Egyptian curriculum.

Low salaries and high absenteeism among teachers further contributed to inequities in the quality of education in the public school system, and Syrian parents surveyed noted that they could not afford private lessons, a common parallel system in Egypt. Children also experienced violence and discrimination inside and outside of school. Participants also exhibited a lack of awareness about the education services for refugees.

In FGDs, student respondents mentioned that some children stay out of school on a regular basis because of high student density in classrooms. They also noted that many students have particular difficulties in foreign languages classes, and that there is a need for remedial classes in English and French in order to catch up with their class level. Children also miss school because they are involved in livelihood; working in restaurants and small clothes factories to help their family survive.

¹¹ Statistics generated from the educational programme of CRS.

Figure 32: Adult educational level

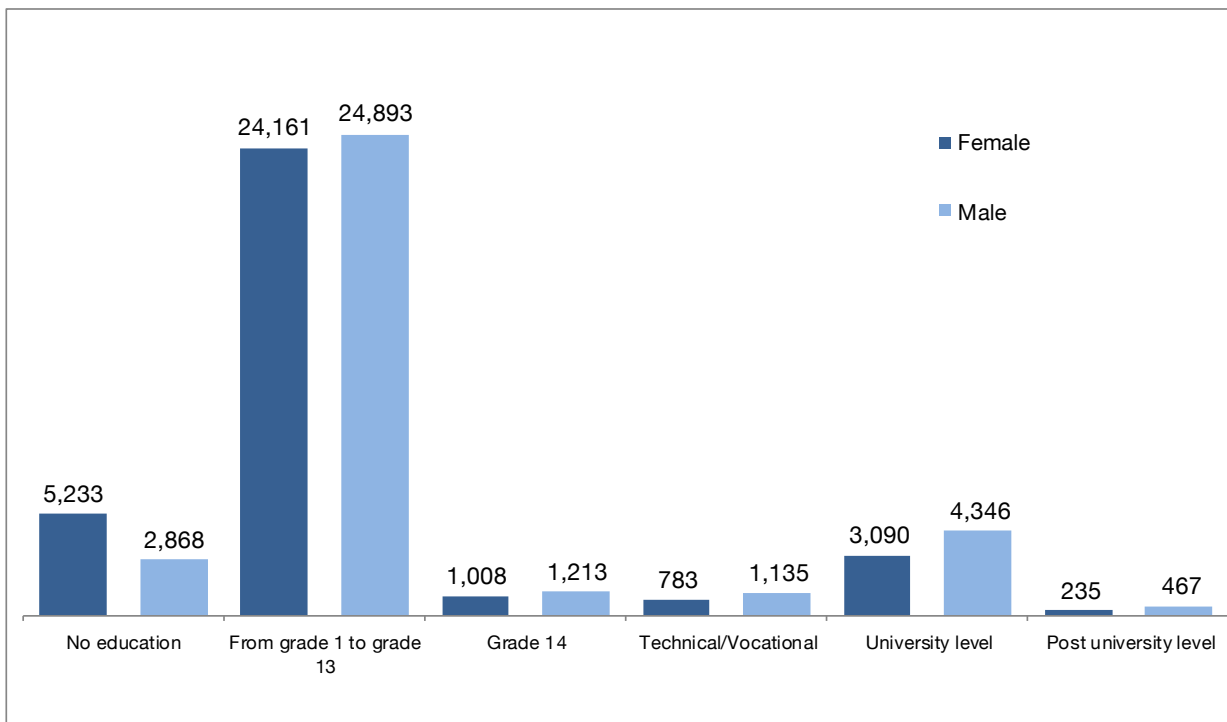


Figure 33: Challenges in accessing public schools

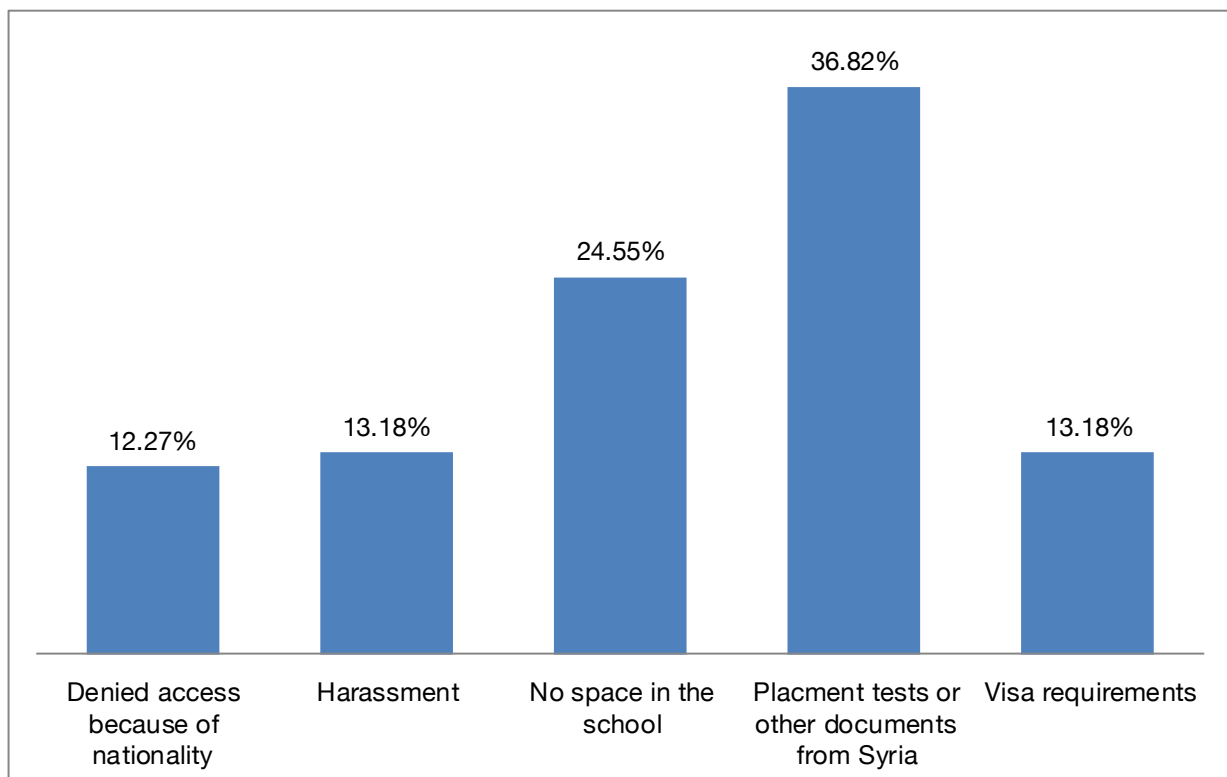


Figure 34: Main source of financial resources to cover school fees

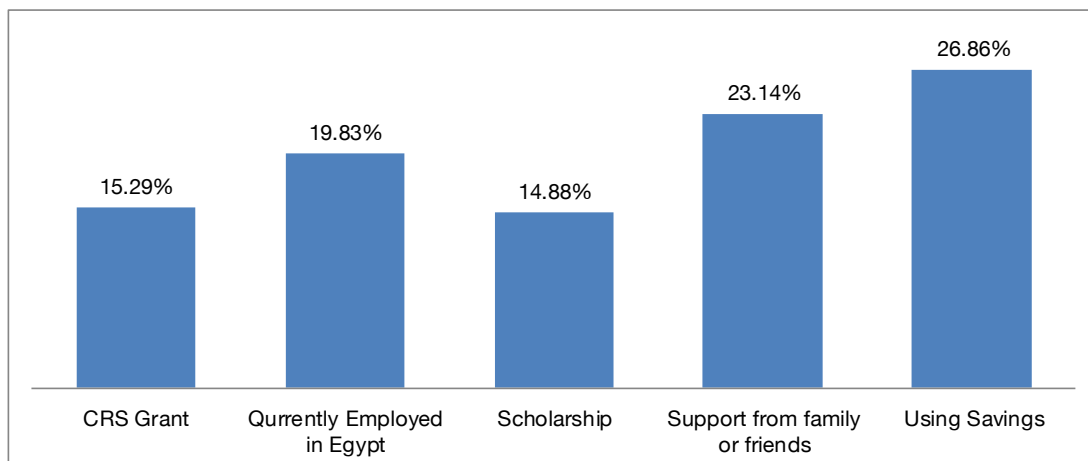
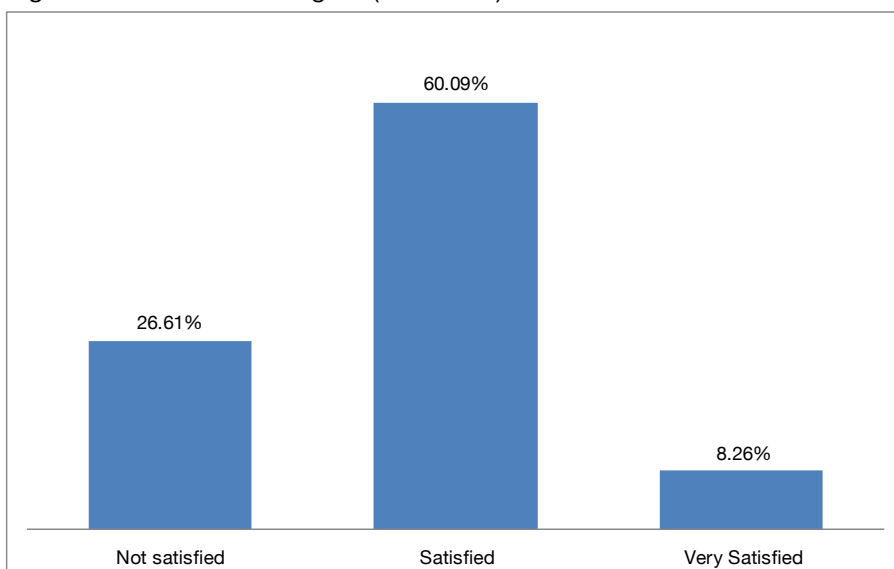


Figure 35: Satisfaction degree (education)



Of the Syrian parents surveyed, 60.09% stated that they were satisfied with the quality of education provided to their children in public schools, 8.26% said that they were very satisfied, while 26.61% stated that they were not satisfied.

Programmatic recommendations:

- Increase the capacity of public schools to absorb more Syrian children and provide equipment, computers, and conduct renovations to schools with highest density of Syrian children.
- Support access to public schools and provide remedial classes for students preparing for placement tests, assessments and exams.
- Increase awareness of UNHCR funded education grants.
- Improve the process of distribution of education grants and pay first instalments upon registering with UNHCR to enable families to buy the necessary items such as books, uniform and bus passes to avoid any delays in parents sending their children to school.
- Support free of charge community schools (rent, equipment, salaries, etc.) and encourage them to employ Syrian teachers to overcome the dialect barrier.
- Support Ministry of Education training institutes in order to improve the quality of education and ensure that child protection aspects are respected in public schools.
- Support CRS in assigning social workers to follow up with community based schools in order to ensure child protection.

**Joint Assessment targeting Syrians in Egypt-September 2013
Terms of Reference**

Outcomes

- The situation of Syrian refugees in Egypt assessed.
- Assistance Plan of Action for 2014 compiled.
- Comprehensive context analysis for the regional response plan (RRP6) drafted.

Objectives

- Assess the demographic profile of Syrians in Egypt.
- Assess the protection situation for Syrians in Egypt and identify protection risks.
- Assess the food security and nutritional situation of Syrian refugees in Egypt.
- Review the quality and appropriateness of ongoing interventions.
- Identify interventions with emphasis on protection, health, food security, basic needs, self-reliance and education.

Methodology and data collection

- The assessment will include **demographic figures** from ProGres.
- The assessment will include a **desk review** to make use of available documents.
- **Quantitative questionnaire** will be presented to 600 respondents. UNHCR's data management team will handle data entry and analysis. The sample of 600 respondents will be generated from ProGres based on the criteria below:
 - Representation of 5 locations: Giza, Cairo, Alexandria, Damietta, and Assiut;
 - 30% female and 70% male headed-households; and
 - Reflecting different ranges of dates of arrivals (ranges of 6 months).
- **Focus group discussions (FGDs)** composed of 10 to 15 persons will discuss the need for assistance in the following fields:
 - Protection including SGBV and child protection (UNHCR and UNICEF to prepare list of questions)
 - Food security (WFP to prepare list of questions)
 - Basic needs and self-reliance (UNHCR to prepare list of questions)
 - Education (UNHCR and UNICEF to prepare list of questions)
 - Health (UNHCR to prepare list of questions)

Participating agencies will agree on the list of main questions (five to 10 questions only). In addition to the list of questions, prioritization of assistance will be conducted during the FGDs. Field teams will meet after FGDs in order to discuss findings and share notes with the rapporteur who will prepare the FGD template (annex 2).

Focus group discussions

Team	Location	Focus groups dates	Team composition	Reporter	Organizer
FG1	Giza (6 th of October)	25 and 29 September	Manar Mohammed Hafez (SC) Souzan Ashraf Mansour (IRW) Nermeen Abdel Aziz (UNHCR)	Nermeen Abdel Aziz	Nermeen Abdel Aziz
FG2	Cairo (Nasr city)	25 and 26 September	Hala Nour (UNHCR) Shaimaa Yehia (SC) Omer El Khawas (IRW) Amira Zarif (WFP)	Hala Nour	Hala Nour
FG3	Alexandria	24 and 25 September	Ayman Mohareb (UNICEF) Rahma Al-Turky (IOM) Yasmine William (UNHCR)	Yasmine William	Ayman Mohareb
FG4	Damietta	25 and 26 September	Ahmad Serhan (UNHCR) Sara sadek (IOM) Wael Awad (Resala) Zainab AbdeLkawi (SC)	Ahmad Serhan	Wael Awad
FG5	Assiut	25 and 26 September	Gehad Emad (IOM) Sherif Arafa (SC)	Sherif Arafa	Gehad Emad Sherif Arafa

Teams

- Five focus group teams to be formed (FG1, FG2, FG3, FG4, and FG5).
- Each team will conduct four focus group meetings:
 - Men
 - Women
 - Children
 - Adolescents (males and/or females)
- Each team will assign one rapporteur.
- A report writer will work closely with all rapporteurs and compile all sections.
- A team of surveyors will be formed to fill 600 questionnaires over the phone.

Timeline

Activity	Participants	Timeframe
Conduct planning meeting to finalize TOR, formulate teams and agree on methodologies	Focal points from UN agencies and NGOs	3 September
Send names and contact details of assigned field staff and list of proposed key informants to be interviewed	Focal points from UN agencies and NGOs	Before 5 September
Provide inputs for the 1) FGD lists of questions and 2) questionnaire	Sector leads	5 September
Circulate the first draft of questionnaire and list of FGD questions	Coordinator	9 September
Conduct orientation session to field teams on focus groups methodologies	Field work teams	19 September
Conduct orientation session to field teams on questionnaire	Field work teams	22 September
Fill questionnaire over the phone with 600 respondents	Field work teams	From 23 to 26 September
Implement focus group discussions	Field work teams	From 22 to 26 September
Consolidate focus group reports and send reports to sector leads	Field work teams	1 October
Finalize data entry and analysis of questionnaire and send statistics to sector leads	UNHCR data management	1 October
Send sectorial chapters to report writer	Sector leads	6 October
Submit the first draft	Report writer	10 October
Revise first draft	Focal points from UN agencies and NGOs	14 October
Endorse final draft	HOAs	15 October

Report content

Executive summary: key background information, needs identified and recommendations.

Methodology:

- The different phases of the assessment, locations, timeframe, methods and tools.
- Limitations and challenges.

Basic facts:

- Demographic data
- Political, humanitarian and socio-economic context

Key finding: this section will elaborate on needs, how current assistance answer the needs and assistance that should be provided in the areas below:

- Protection
- Livelihoods and Food security
- Health
- Education

Recommendations

Annexes

Annex 2

Focus Group Discussion Report

Facilitators:

Date:

Group Location:

Group profile:

Priority/ importance	Protection Risks/ Incidents	Causes	Capacities within community or current available opportunities	Solutions proposed by the participants

Age group	# of participant per Sex		Total
	Male	Female	
10-13			
14-17			
18-39			
40-64			
65+			
Total			

Comments/narrative of rapporteur

Annex 3

Team of quantitative survey

Name	Organization
Mohamed Eid	IRW
Nehal Nabil	IRW
Amin Kazkaz	AMERA
Al Hassan Elziény	CRS
Doha khaled Badr	student
Hend Ahmed	student
Rana Atteya	student
Amana Atif	student
Waleed Wagdy	student
Mahmoud Gamal	student
Ahmed Mahmoud	student
Saleh Khaled	student
Anas Mahmoud	student
Ahmed Awadalla	UNFPA (y- peer)
Reem Ali	UNFPA (y- peer)
Omnia Elsayed	UNFPA (y- peer)

Coordinator:

Ziad Ayoubi / UNHCR Livelihood Officer

Graphic Design:

Teddy Leposky / UNHCR Associate Reporting Officer

Cover photo:

Masaken Osman in 6th of October City outside of Cairo is an impoverished neighbourhood with a mix of lower income Egyptian families and hundreds of newly arrived Syrian refugees.

Shawn Baldwin / May 2013



United Nations
World Food Programme



UNHCR
The UN Refugee Agency
مفوضية الأمم المتحدة للاجئين

