

Assessment on the Situation of Iraqi Refugees in Syria



March 2006



Table of Contents

Abbreviations and Acronyms	3
Forward by MR. Abdelhamid El Ouali, UNHCR Representative	4
Executive Summary	7
Background & Methodology	10
Demographic Profile of Iraqi Refugees in Syria	12
Legal Status of Iraqi Refugees in Syria	19
Employment Status	21
Food, income and expenditure	22
Health Status of Iraqi Refugees in Syria	30
Education	35
Population Most at Risk	37
Recommendations	39
Annexes	

Abbreviations and Acronyms

CBO	Community Based Organisation
CBS	Central Bureau of Statistics
MOE	Ministry of Education
MOH	Ministry of Health
NGO	Non-Governmental Organisation
PL	Protection Letter
TP	Temporary Protection
UNHCR	United Nations Higher Commission for Refugees
UNICEF	United Nations Children's Fund
WFP	World Food Programme

This report has been prepared by the UNHCR, UNICEF and the WFP. For more information please contact:

UNHCR

The United Nation Higher
Commission for Refugees
Syria Country Office
Malki 14, Al-ezm St.
Nabelsi Building
P.O. Box: 30891
Damascus, Syria
Tel: (+963-11) 373 59 40
373 84 51
Fax: (+963-11) 373 61 08

UNICEF

The United Nations Children's
Development Fund
Syria Country Office
E. Mazzeh, Al Shafiee Str., Bldg. 2
P.O. Box 9413 Damascus S.A.R.
Tel: (+963-11) 612 2592 / 3 / 4
E-mail: damascus@unicef.org

WFP Representation

P.O. Box: 33090
Damascus, Syria
Tel: (+963- 11) 333 5018/50
Fax:(+963- 11) 333 1521
E-mail: wfp.damascus@wfp.org

Forward

Most of the Iraqis who left Iraq since the last Iraqi war have been attracted by Syria's open door policy, its tolerance and generosity towards refugees. Hence in less than three years, a silent and steady exodus has made of Syria the host of the largest number (about 450.000) of Iraqis in the region. The good conditions offered to Iraqis in Syria were most likely the reason for the lack of international interest in regard to the refugee-like situation in Syria.

In the beginning, Syria was the only country in the region which implemented without any kind of restrictions the Temporary Protection Regime (TP) as recommended by UNHCR. The TP regime, which has been initiated in anticipation of the March 2003 Iraq war, was meant to prevent the deportation of Iraqis. Obviously, the unrestricted acceptance of TP along with free access to public hospitals and schools have encouraged many Iraqis to come to Syria. However, the past year has witnessed a change in Syria's policy towards Iraqis. Hence, the TP regime has been replaced by the implementation of increasingly restrictive national immigration rules. Access to public hospitals has also become more restrictive. This has created difficulties for an increasing number of Iraqis some of whom have started to leave the region seeking asylum elsewhere.

There is no doubt that the recent change in the Syrian traditional generosity towards refugees is, first, due to the significant impact of the Iraqi presence on Syria's social services, economic infrastructures and the daily lives of many Syrian citizens. It is also due to the deteriorating situation in the region.

It is within this context that it has been decided with my colleagues from UNICEF and WFP to jointly carry out a comprehensive assessment of the situation of Iraqis in Syria, in order to adjust and develop our plans for the future. The present report reflects the findings and conclusions of that assessment.

Among the key findings of the assessment there are four which are of crucial importance.

The first one is that the Iraqis in Syria reflect a large spectrum of the Iraqi population in Iraq (in terms of ethnicity, religious affiliations, etc.).

The second one is that many of the Iraqis belong to the middle class (independent professionals, academics, businessmen, etc.).

The third one is that most of the Iraqis are not yet facing serious socio-economic problems in Syria as they are still living off-of their savings which are, however, dwindling.

The fourth one is that most of the Iraqis are interested in resettlement in a third-country of asylum.

While the third conclusion shows that most of the Iraqis are not presently facing any particular hardship, the fourth one is extremely worrying. It indicates that hundreds of thousands of Iraqis are no longer interested in an eventual return to Iraq. Consequently, a huge secondary movement of Iraqis may take place from Syria towards Western countries and particularly Europe, being the closest and traditional region to which the Iraqis have fled since the 1991 Iraq war. This is a tremendous challenge which needs urgent attention, proper planning and action from the international community in order to avoid a new exodus. We do believe, however, that there is room to temporarily stabilise the Iraqi population in Syria pending the improvement of overall situation in Iraq. This can be done only through more substantial international responsibility and burden-sharing, as Syria by itself does not have the means to continue to face the situation which is detrimental to its own national interests. This can also be done by stabilising the political situation in the whole region through a concerted regional approach.

UNICEF, WFP and UNHCR in Syria will certainly continue to do their utmost to stabilize the situation of Iraqis in Syria pending conducive situation in Iraq which may allow a safe and dignified return to Iraq. However, more support is needed from traditional donors and external actors. The three offices are planning to join their efforts in order to enhance the capacities of the local institutions. This was also one of the main objectives behind the assessment of the overall situation of the Iraqi population in Syria.

On this occasion, I would like to express my gratitude to all those who have made this very comprehensive and extensive assessment possible. First, I wish to particularly thank the following for their generous support:

- His Excellency Mr. Jacques de Watteville, Ambassador Extraordinary and Plenipotentiary of the Swiss Confederation, whose encouragement and effective support were extremely important to us;
- The UNICEF Representative, Mr. Kiari Liman-Tinguiri, whose contribution was crucial thanks to his extremely valuable advice and his success in mobilising the needed funds;
- The WFP Representative, Ms. Philippa Jill Bradford who offered the expertise of her organization and in particular the WFP Iraq Office and Regional Office in Cairo Ms. Romina Woldemariam, VAM Officer and Dr. Hazem Almahdy, VAM Officer;

Also, I wish to warmly thank the Syrian team composed of Mr. Mamdouh Al Mobayed, Ms. Amira Ahmed and Dr. Haydar Dek Elbab who organized and monitored the whole assessment process with a very high degree of professionalism.

I would like to express my deepest gratitude to the UN team comprised of:

Mr. Marc Lucet, Programme Officer - UNICEF
Mr. Adham Musallam, Programme Officer – WFP
Ms. Deitrun Gunther, Senior Protection officer – UNHCR
Ms. Mai Barazi, Community Service Officer – UNHCR
Mr. Haysam Aswad, Eligibility Assistant- UNHCR
Mr. Bashar Aqqad, Programme Assistant – WFP
Ms. Marie Wikstrom, Monitoring and Evaluation Officer- UNICEF

Who did an extremely valuable job and worked very hard to let this assessment materialize.

Abdelhamid El Ouali
UNHCR Representative
Damascus/Syria

EXECUTIVE SUMMARY

Syria has been hosting a large Iraqi population for years. This population is increasing and is facing aggravated difficulties related to their legal status and unsustainable income situation. It was to place this humanitarian situation on the monitor of the international community that the UNHCR office in Syria engaged alongside with both the UNICEF and the WFP in a survey to assess and study the situation of Iraqis in Syria. The themes covered in this survey are:

- i. Compositions of Iraqi profiles
- ii. Reasons for Departure from Iraq
- iii. Situation in Syria
- iv. Durable Solutions: "TP", Repatriation and Resettlement
- v. Recommendations
- vi. Follow-Up by concerned UN Agencies
- vii. Responsibility of the International Community

The study was conducted in the last quarter of 2005 by two teams, the Coordination/Technical Committee and the Joint Field Assessment Committee. The first team was jointly established with members from each sponsoring agency and was responsible for the quality control of the survey and to provide access to partners and ministries. The second was multi-disciplinary team which collected and analysed the data. The data were collected in the Iraqi concentrations areas in Syria. Health centres, schools and members of local communities were also visited and interviewed to obtain relevant information.

Findings

Legal status

- The estimated number of Iraqis refugees in Syria is around 450,000 individuals, including 48 % children under the age of 18. More than 90% of them left Iraq due to the general insecurity in the country. The majority of Iraqi refugees originate from the province of Baghdad. Nearly 80% of refugees are of Arab origin while 57% are Shiite Muslims. Primarily reasons for choosing Syria as a place of residence are security, hospitality and convenient living conditions. More than 90% of Iraqi families have described their relations with local communities as amicable.
- Most of the Iraqis have fled to Syria due to open door policy and tolerance with regard of refugees. The Syrian government has continued to implement the TP Regime notwithstanding the fact that with time the accommodation of the great number of Iraqi refugees started to significantly affect the already poor and limited social services and economic infrastructures in the country. In the meantime, the Syrian authorities recently started to implement its immigration rules stirring an increasing number of Iraqis to request UNHCR intervention to stop their deportation.

However, as the TP is no longer acknowledged by the government, it is very likely that many Iraqis would consider seeking asylum elsewhere (Europe in particular).

- 81% (360,000 persons) of the total number of Iraqis have stressed that they will apply for refugee status once UNHCR will start carrying out refugee status determination. However, about 4.8% of Iraqis would opt for repatriation in case they were provided with financial assistance.

Socio-economic conditions

- Generally, Iraqis do not have work permits in Syria and therefore their employment remains illegal. The average unemployment rate among Iraqi refugees is 56.3%. The average among women is much higher 80.7% in comparison to men's unemployment 52.9%. Men over 50 years of age make up only 11% of the work force. At the same time there is a high ratio of children and adolescents between the ages of 13 and 22 who make up 18% of the work force
- The basic state of health of most Iraqi refugees is satisfactory thanks to the medical assistance provided by UNHCR through its implementing partners. The most common chronic illnesses registered among Iraqi refugees included diabetes, arterial hypo-pressure, thyroid gland problems, arthritis, hernia, skin allergies, brain vessel problems, tumours, and epilepsy. However there are an increasing number of medical cases (specialised surgeries) whose treatment requires funding beyond UNHCR's financial capacities. The average rate of handicapped persons amounted to 4%.
- A large majority, 82% of the surveyed households, have adequate food consumption. Approximately 17% have marginally adequate diet while the remaining 1.3% have poor dietary intake, with insufficient food and diversity at the time of interview.
- Monthly per capita expenditure is SP 3,792. This significantly exceeds the 2004 lower poverty lines¹ reported by UNDP of SP 668 and the upper poverty line of SP 1,459 SP monthly. WFP beneficiaries in Syria, albeit residing in rural areas, have monthly expenditures equivalent to SP 935 per capita. This demonstrates that most of the sampled Iraqi refugee households lie far above the poverty thresholds in Syria.
- One quarter of the surveyed households reported experiencing a shortage of cash or food to meet their basic requirements. Apart from this self-perceived need (impossible to identify if the shortage is cash or food), there is justification in the data for only a very small amount of targeted assistance (1.3% of households). While most households are currently food secure, the dependence of over a quarter of the households on unsustainable income is of concern

¹ Poverty in Syria: 1996 to 2004; Diagnosis and Pro-Poor Policy, UNDP, June 2005.

It is estimated that at least 1,500 families are facing very difficult conditions created by a combination of factors including poverty, expired legal documents and trauma situations. Higher level of mal-nutrition, low enrolment levels, child labour and child prostitution are more likely to be higher among these families. Efforts need to be sustained and increased to support them that are in need of direct humanitarian support. More information needs to be gathered to detect and support these cases.

Health

Iraqi families have access to health facilities, through public, private and charity sectors. The charity sector consists of local NGOs and CBOs, such as the Red Crescent and Caritas supported by UNHCR. Prevalence of acute diseases among the Iraqi population are within normal rates however there are areas of concern regarding children's health such as low coverage of vaccination (Measles 65% and Polio/OPV3 75%) and rather high prevalence of diarrhoea (19% during the previous two weeks) for children under five.

Maternal health is also an area of concern with around 15% of pregnant Iraqi women not receiving antenatal care and more importantly 40 % are not being vaccinated against Tetanus; a high risk to new born.

Education

Access to school is granted to Iraqi children however there are as many as 30 % of Iraqi children between the age of 6 – 11 years not enrolled in schools.

Poverty and the insecure legal status are the main causes for families not enrolling their children in schools. Complex registration procedures and administrative requirements are also contributing factors for low enrolment as well as cases of children being downgraded to lower levels.

Iraqi children also face difficulties to adapt to the new school environment and a different curriculum. These difficulties increase with the age of the child.

Population most at risk

Even though prostitution is not a widespread phenomenon, information from the qualitative assessment indicates that girls as young as 12 years old are involved in sex work. Evidence was collected that girls and women were trafficked by organised networks or family members.

Iraqi children, both girls and boys, from poor families are prone to get involved in labour to supplement family income. They typically work long hours for little pay as little as 50 SYP (app. 1 USD) a day with boys working in market places and girls as house maids.

Clear cases of traumatised families and children were identified that receive very little or no care at all. Causes range from exposure to war and insecurity situations in Iraq while to long lasting feeling of material and social insecurity since departing Iraq.

I. BACKGROUND & METHODOLOGY

With the registration of indicators of degrading living conditions amongst Iraqi refugees in Syria, a decision to take-on this assessment was made. The present report attempts to document and assess the situation Iraqi refugees in Syria. UNHCR working in areas of concentration of Iraqi population since the early time of the influx of refugees in 2003, particularly in Damascus, was joined by WFP and UNICEF to assess the need for provision of humanitarian support.

The assessment was designed by an interagency Technical Committee that took into account the experience gained by UNHCR working with Iraqi communities.

Objectives set for the assessment were:

- Estimate the size and nature of the Iraqi refugee population in Syria.
- Determine the situation and the needs of Iraqi refugee population (health, education, nutrition, protection and access to food).
- Identify capacities and needs of existing partners as well as potential partners.
- Provide recommendations for future interventions by the involved agencies.

Methodology

The study was conducted in the last quarter of 2005 by two teams, the Coordination/Technical Committee and the Joint Field Assessment Committee. The first team was jointly established with members from each sponsoring agency and was responsible for the quality control of the survey and to provide access to partners and ministries. The second was multi-disciplinary team which collected and analysed the data. To ensure accurate analysis, both quantitative and qualitative data were collected using the following methods:

Household Survey

The field team conducted a household survey in areas most populated by Iraqi refugees: the Governorates of Damascus (Masaken Barzeh) and Damascus Rural (Sayyeda Zaynab, Jaramana), and the Hassakeh and Deir-Ezzor Governorates. The sampling was determined by an estimation of the ratio of Iraqi families residing in the selected area. The selection of the areas and samples was based on collection of information from the Syrian Central Bureau of Statistics CBS (Census 2004), NGOs working in these areas and involved UN agencies.

Focus Group Discussions

In addition, a qualitative assessment was performed through focus groups reflecting different categories. The refugees were categorised in respect to their places of residence and were divided and analysed according to their protection, health and nutritional situations.

Interviews

Health centres, schools and members of local communities were also visited and interviewed to provide relevant information.

For more information on the methodology please see Annex (I)

II. DEMOGRAPHIC PROFILE

The present survey includes estimations of the numbers of Iraqi refugees in Syria, in surveyed areas, their background and their housing circumstances.

Estimation of the number of Iraqis in Syria

The number of Iraqis residing in Syria is estimated to be within the range of 401,000 and 472,000 with an estimated average of 450,000.

This estimation was obtained from cross-analysis from demographic data collected from the survey and official figures from the Ministry of Interior on immigration. Detailed calculation is available in annex I.

Estimation of the number of Iraqi refugees in the areas included in the survey

Sayyeda Zaynab

The total number of families in Sayyeda Zaynab amounted to 24,863. The total number of inhabitants amounted to 133,206 according to the results of the population census of the year 2004.

The total number of families in the sample amounted to 1,224 families, out of which there were 375 Iraqi families representing 30.6% of the total number of families in the sample. The number of individuals in the sample amounted to 7,075 individuals, out of which there were 1,614 Iraqis constituting 22.8% of the total number of individuals. Thereafter the estimated number of Iraqi families in Sayyeda Zaynab is 7,608 and the one of Iraqi individuals is 30,371.

Jaramana (Al-Baath Quarter)



The number of families in this quarter amounted to 4,545 families. The total number of its inhabitants was of 20,000 persons according to the results of the census of the year 2004.

The total number of families in the sample amounted to 71 families containing 59 Iraqi families which constitute 83.1% of the total number of families. The total number of individuals in the sample amounted to 311

individual, out of which there were 253 Iraqis constituting 81.4 % of the total number of individuals. Thereafter the estimation of the number of Iraqi families in the Baath Quarter is 3,777 and the one of Iraqi individuals is 16,280.

Masaken Barzeh (south the main street)

The number of families in that quarter amounted to 2,410, and the total number of its inhabitants amounted to 13,250 persons according to the results of the census of the year 2004.

The total number of families in the sample in that area amounted to 198 families, out of which there were 65 Iraqi families constituting 32.8% of the total number of families. The total number of individuals in the sample amounted to 806 individuals, out of which there were 206 Iraqis constituting 25.6% of the total number of individuals. Thereafter the estimated number of Iraqi families in Masaken Barzeh is 790 families and the one of Iraqi individuals is 3.392.

The size of the family and its structure

The average size of the Iraqi family amounts to five members.

Table 1: Size of Iraqi families

Size Category	%
Families containing less than 3 individuals	19.8%
Families containing between 3-4 individuals, or 5-6 individuals	31.6%
Families containing between 7-9 individuals	14.6%
Families containing 10 individuals or more	2.5%
Total	100

51.4% of families have fewer individuals than the general average.

Composition according to Ethnicity and Religion

Ethnicity

Table 2: Ethnicity category of Iraqi refugees

Ethnicity category	%
Iraqi families of Arab origins	78.8%
Iraqi families of Chaldean origins	5.8%
Iraqi families of Assyrian origins	2.9%
Iraqi families of Kurdish origins	1.5%
Others	0.4%
Total	100

Religion

Table 3: Religion category of Iraqi refugees

Religion category	%
Shiite Muslim families	57.2%
Sunni Muslim families	21.2%
Catholic Christian families	15.4%
Orthodox Christian families	2.4%
Sabian families	1.5%
Total	100

Composition by age and marital status

Iraqi families headed by women do not exceed 12.3% of the total number of families. This percentage is similar to standards in most Arab countries.

Composition by age and gender

Males form 52.3% out of the total number of Iraqi refugees. The rest are females who constitute 47.7%.

Table 4: Iraqi Refugees Population, Structure by Age

Age group	%
Child less than 1 year old	1.8
1 – 5	9.0
6-14	24.5
15-18	11.9
>18	52.7
Don't Know	0.1
Total	100

The average of breadwinning by age amounts to 59.7%, i.e. every 100 of the refugees in the age of work support in average nearly 60 individuals of children and elders in addition to themselves.

Composition by marital status

The percentage of celibacy has reached 38% of the total number of Iraqis, as opposite to 58% of married people, 3% widowers and 1% divorced. Celibacy was more common amongst men 45.4% as it is in women 29.7%. The percentage of widowed was much higher amongst women 6.8% than it is amongst men.

Housing circumstances and property of long-term commodities

Housing Circumstances

The percentage of Iraqi families owning their houses in full amounted to 6.5% of the total number of families, as opposed to 1% who own part of the house

shared with others. The rest of families are equally distributed between normal rent, and furnished rent.

The ownership of Iraqis to houses in different Syrian neighbourhoods led the local inhabitants to assume that Iraqi refugees caused the rise in the prices of houses, especially in the areas most congested with Iraqi refugees.

Table 5: Type of housing of Iraqi refugee families

Type of housing	%
Full ownership	6.5
Shared ownership	0.8
Rental	46.5
Furnished rental	45.8
Other	0.4
Total	100

Most families pay the rent of their houses from their own resources or savings. As for the rest of families, the rent is paid by relatives or friends due to poverty and inability to pay. The average of monthly rent ranged between SP 5,703 for the unfurnished house, and SP 7,556 for the furnished house.

Most families, nearly 88.7%, occupy their houses fully. 11.1% of the houses are composed of one room, 46.9% composed of two rooms, 39.7% of 3-4 rooms, and 2.3% of five rooms or more.

Movement of Iraqi families, Registration with UNHCR and the Protection System

Movement of Iraqi families

No noticeable changes have occurred to the order of Iraqi provinces in terms of place of origin and place of habitual residence for Iraqi refugees in Syria. The province of Baghdad had the lead on other provinces in terms of population-attraction. Whereas the provinces of Basra, Suleimania, and Missan were on top of population-repelling provinces (the percentages of Iraqi refugees in terms of place of origin and place of habitual residence are indicated in annex II, table 1-II).

War, lack of security, and persecution are considered by Iraqi refugees as main reasons for fleeing Iraq. A limited ratio of Iraqi refugees estimated by 10% have mentioned other reasons for leaving Iraq such as economic, personal, tourism, family visits, illness, handicap, and treatment (the percentages of families according to the reason for leaving Iraq are indicated in annex II, table 2-II).

A percentage of 69.6% of families reported the non-availability of any properties for them in Iraq currently; whereas 29.2% own a house and 5% own a commercial, or industrial, or service-providing enterprise, and 3.1% own farmland.

22% of Iraqi families have left Iraq for the last time before the recent war. Whereas 30.9% of families have left Iraq for the last time after the recent war between 2003 and 2004, and 47.1% left in 2005.

92.1% of families have resided in Syria after their last departure from Iraq, out of which 69.6% resided in the Governorate of Damascus Rural, and 29.1% in Damascus city, and 1.3% in the province of Hassakeh. Some 4% came to Syria after having resided in Jordan, Iran 2.3% and 1.6% in other countries.

The most important reasons for choosing Syria as a place of residence are by order of priority, security, hospitality, cheap livelihood in Syria, resettlement to a third country, the presence of holy shrines, the education of children, and finally, family reunification.

On the other hand, 47% of the total families or one of their members has returned to Iraq after the first refuge to Syria in the wake of the recent war. Among these families 46.9% have returned only once, while 22.6% returned twice, and 11.1% three times, and 19.5% four times or more.

36% of the Iraqi families have relatives in Syria; nearly 97.1% reside in the provinces of Damascus and its suburbs, whereas the remaining families reside in other provinces.

21.6% of the total of Iraqi families intends to return to Iraq, whereas 69.9% have expressed their unwillingness to return. 8.55% do not know whether they will return to Iraq or not. Most of the participants in focus groups discussions have agreed on their unwillingness to return to Iraq even if there is stability because they don't believe there would be political and religious reform.

Most Iraqi families, nearly 82.7%, have mentioned that there are many obstacles and problems that prevent them from returning to Iraq. These obstacles are categorised by order of priority, the lack of security, exposure to persecution, the non-availability of a house, the non-availability of transportation expenses, and finally medical reasons (the obstacles and problems that prevent the return of families to Iraq are indicated in annex II, table 3-II).

90.9% of families have described their relations with local community where they do reside as good, whereas 6.0% said it was medium, while 3.1% said it is weak.

Registration in UNHCR and the Protection System

The number of Iraqi families registered with UNHCR has amounted to 44.4% of the total number of the families in the sample. The most important reason for not registering is the lack of knowledge of the UNHCR (the percentages of Iraqi families unregistered with UNHCR according to the reason for non-registration are indicated in annex III, table 4-II).

58.4% of the total number of Iraqi families registered in UNHCR deems the TP Regime as useful to them. The most important use for them by order of priority was the facilitation of their residence in Syria, the prevention of deportation, the improvement of the family livelihood, school registration, medical treatment (the percentages of families finding usefulness in temporary protection according to the type of this usefulness are indicated in annex II, table 5-II).

80.1% of the total number of families have stressed that they will apply for refugee status once UNHCR starts granting it.

A high percentage of husbands possess several types of identification documents, followed by wives, children and other family members. Passports, travel documents, personal IDs and nationality certificates were the most common papers held by Iraqis (percentages of family members who hold personal ID papers according to the type of document are indicated in annex II, table 6-II).

The discussions conducted in the focus groups revealed the following:

- Most Iraqis have exceeded their residence permits. The concerned authorities have tolerated such violations in most cases. However, the authorities often conduct random inspections. Most Iraqi refugees believed that the TP Regime is useless since cases of bribery and coercive deportation were reported despite the submission of the TP letter.
- Most Iraqis have agreed on their unwillingness to return to Iraq even if the situation settles down because they are not convinced of the possibility of political and religious reform.
- Widespread of psychological illnesses was noticed.
- Widespread of extreme poverty and the inability to pay the rent was noticed.
- Widespread of child labour was noticed. Child labour is conceived as a mean to increase the family income.
- The presence of single women heading household was noticed.
- Most Shiites entered Syria before the fall of the former Iraqi regime.
- Some families receive assistance from NGOs and from family relatives in Iraq as well.
- Most cases suffer from lack of work opportunities in Syria, or inability to work due the irregularity in the residence permits resulting in widespread of unemployment amongst the youth and heads of households.

- The inability of adolescents to adapt to the educational curricula in schools because of the differences in the Syrian curricula and the difference in the accent. All that combined with discrimination especially in the cases of the Sabians.
- Most cases were of the opinion that resettlement is the ultimate solution of the problems of Iraqi refugees.

III. LEGAL STATUS

Temporary Protection

Syria was one of the few governments in the region to accept, at the request of UNHCR, the implementation of the TP Regime. Today, some 24,000 Iraqi refugees are registered under TP Regime at the UNHCR. The UNHCR is being approached by some 400 Iraqis a month for registration and it is clear that the current situation in Iraq, with violence in Baghdad and unrest in the south, is affecting the amount of people approaching UNHCR.

The TP Regime was initially conceived to prevent the deportation of any Iraqis to Iraq whether they do qualify for refugee status or not. Meanwhile, and whereas the TP proved so far to be effective in avoiding deportation of refugees to Iraq, it has prevented many Iraqis from presenting their claims for asylum. This has in particular reflected on the situation of those Iraqis who could not regularise their residence in Syria in accordance with the local immigration rules.

Showing a growing impatience, due to the increase in the number of Iraqi refugees and its impact on the Syrian economy, the local services and the socio-economic infrastructures, the Government has started to implement immigration rules and regulations. These regulations stipulate a Six



months residence authorisation. Residence authorisations are renewed if the residence holder, at the end of each period, would leave the country and come back again. While many Iraqis managed to go to Iraq and come back, those who have serious protection problems are condemned to live clandestinely in Syria.

Residence

Residence (or expired residence permits) is considered to be a serious problem for all Iraqis. All irregularities in the residence permits render the Iraqi refugees vulnerable to exploitation by the local authorities. Any possibly occurred problem involving an Iraqi refugee could lead to deportation. The random inspections for residence permits conducted by the police could often expose the refugees to extortion and requests of bribes.

Protection Letter

Many Iraqi refugees are unaware of the UNHCR and of the purpose of the Protection Letter PL. Some of these refugees believed that PL is only granted to confirm their presence in Syria and thereafter to be deported. In reality, the PL did not offer the refugees needed protection. The PL, however, proved to be useful in limited cases by assisting Iraqis to have access to health care. As for issues related to residence permits in Syria, the PL is no longer acknowledged by the Syrian authorities since it is only a Temporary Protection letter and does not guarantee permanent protection. During the interviews Iraqi refugees insisted on the limited benefit of the PL. (some even exclaimed: “you are making fun of us with this paper”). In fact the PL stipulates that the holder should abide by the laws and regulations of the country. As soon as the residence permit is expired, the holder is considered in violation of these laws and regulations. This stipulation is specifically being abused by some police elements that try to bargain with Iraqis against deportation.

IV. EMPLOYMENT AND HOUSING STATUS

Housing

The vulnerability of Iraqis due to their legal status in the country, has led to some exploitation by the local community, particularly in issues related to housing.

Iraqi refugees are often required to pay a higher rent compared to Syrian families. With rents ranging between SP 4,000 to SP 8,000 in Sayyeda Zaynab, SP 6,000 and SP 12,000 in Jaramana and SP 8,000 up to 15,000 in Masaken Barzeh, a large amount of the family income spent for rent. In addition to these costs, there have been many cases of Iraqi families

being asked to pay compensation to officials in order not to get deported. These cases are common when there is a dispute between the tenants and landlords and the police are called in to solve it. The amount of bribes ranges between 1,000 and 1,500 Syrian pounds for the individual.

Employment

Iraqi Refugees are not allowed to work in Syria and around 55% of men and 80% of women are unemployed. The working force is working in the informal sector.

Many families are not provided with a sustainable income. Employed Iraqi refugees are extremely vulnerable due to the limited legal protection and to the widespread of business of informal nature in the country. All that combined make Iraqi refugees highly susceptible to exploitation.

The incomes of the workforce range between SP 3,000 to SP 10,000 a month. 50% of the workforce earns an average of SP 7,000 and 16% of the workers earn SP 3,000 to SP 4,000. While these levels of income are not particularly low in comparison with Syrian wages, they need to be looked at in relation with (i) the high level of unemployment among total Iraqi refugee population and, (ii) the higher cost of living that Iraqi families are facing.

The average of raw economic activity, i.e. the ratio of the work force out of the total number of Iraqi refugees has reached 32.9%. This average ranged between 8.5% for women, and 55.3% for men. Whereas the average of reviewed economic activity, i.e. the ratio of the work force out of the total number of manpower for Iraqi refugees who are 15 year old or more has reached 51%. This average ranged between 13.3% for women, and 84.5% for men.

While many refugees occupied managerial and professional positions in Iraq, nearly two thirds of these refugees now work in service-providing occupations. Almost the same ratio works in selling and buying occupations. The rest are distributed to other professions with a ratio ranging between 3.5% and 10.5% (see annex II, tables 1 and 2-IV).

V. FOOD, INCOME AND EXPENDITURE

Food Consumption

Surveyed households are classified as having poor, borderline, or adequate food consumption. These food consumption classifications are derived using the dietary diversity² methodology which measures the frequency, quantity, and number of food groups consumed by a household over a given period of time.

Food consumption is adequate in the majority of households surveyed in all surveyed locations, with very few households having poor food consumption. Households consuming a maximum of two food groups for seven or less days a week are considered as having poor consumption in that their diet does not consist of adequate variety of food groups nor sufficient in terms of quantity. Those consuming at least two to three food groups seven days a week are considered as having marginally sufficient food; these account for about 17% of the sampled households. Households consuming 4 and more food groups on a daily basis are considered as having adequate food consumption.

The data reveals that at the present time, an overwhelming majority, 82% of the surveyed households, have adequate food consumption. Approximately 17% have marginally adequate diet, while the remaining 1% have poor dietary intake, with insufficient food and diversity at the time of interview.

Despite the general picture there are still around 800 families receiving food aid through UNHCR and NGOs today. These families are impoverished and vulnerable who suffer from their situation as refugees because of lack of regular income and lack of social inclusion.

In total, 1.3% of the households have poor food consumption (with 3.5% of households in Jaramana, 1% in Sayyeda Zaynab having poor food consumption), while 17% have 'borderline' consumption, and the overwhelming majority of households 82% having good and adequate food consumption. (See table 6). At the time of the interview, there are no households in Damascus with poor food consumption.

² Methodology adopted by USAID, IFPRI etc. Source: 'Dietary Diversity as a household Food Security Indicator', John Hoddinot, Yisac Yohannes, FANTA, May 2002.

Table 6: Food Consumption Adequacy (% households)

	Sayyeda Zaynab	Jaramana	Damascus	All
Poor	1.13	3.51	0	1.3
Borderline	11.83	59.65	7.94	17.1
Adequate	87.04	36.84	92.06	81.7

Overall consumption for all households in all locations is illustrated in figure 1 below (see tables 1 and 2-V in annex II for detailed breakdown). While the majority of the households in Damascus 92% and Sayyeda Zaynab 87% have adequate food intake, the number of those with adequate food intake drops to 37% in Jaramana, with the remaining majority, almost 60% marginally consuming sufficient or diversified food.

Families in the 'poor' food consumption group, represent about 1.3% of the households surveyed. They rely predominantly on a diet of bread, and consume an average of 6 kg of wheat flour/bread per week. Proteins and fresh fruits and vegetables are rarely consumed. Milk, yogurt and cheese are never consumed, while eggs are consumed rarely; on average twice a week. About one and a half kg of cooking oil, butter and fat are consumed once a week, and canned food items, are consumed 3.5 times weekly.



Households in the 'borderline' consumption group represent about 17% of the households surveyed. They have a more diversified diet, and consume more quantities, more frequently than those in the 'poor' consumption category.

Figure 1: Consumption Patterns by Consumption Groups

5-7days/week	Food Group	Poor Consumption (1.3% of HH)	Borderline Consumption (17 % of HH)	Adequate Consumption (82% of HH)
3-4 days/week				
0-2days/week				
Carbohydrates & Cereals	Bread/Wheat Flour			
	Rice			
	Barely/Pasta/Noodles			
	Potatoes			
	Other Seeds			
Meat and Beans/Proteins	Beans			
	Red Meat			
	White Meat			
Dairy Products	Eggs			
	Milk			
	Yogurt/Cheese			
Oils and Fats	Butter, Oil, Margarine			
Vegetables and Fruits	Tomatoes and Veg.			
	Green leaved Veg.			
	Fruits			
	Dates			
Sweets	Biscuits, Patisserie, Kligha			
	Baklava, Zalabia			
Other	Peanuts			
	Canned Food			
	Pop drinks			
	Mineral Water			
	Other			

Kilo calories

Approximations on average kilocalorie intake, based on three food items (wheat, oil and rice) amounts to 2,380 kilocalories per person per day, with households in the poor food consumption category (1.3% of the households) consuming less. However, as 92% of the households consume sugar¹ and other sweets as well as potatoes and pastas, in addition to many other food items, it is safe to assume that the average kilocalories consumed well exceeds the recommended 2.200 kilocalories.

Quantity of foods was transformed into kilo calories for selected items (wheat/bread, rice and oil). These are rough estimates due to data limitations. The data collection method aggregated food items. For example,

wheat/bread was aggregated making it impossible to separate out wheat flour from bread. Thus wheat flour was used for calculations. The same applies for oil where vegetable oil, ghee and butter were categorised together. This was therefore calculated to obtain an approximate idea and to somehow triangulate food-based findings. Table 7 below summarises kilocalories consumed by food consumption group.

Table 7: Kilo Calories selected items by Consumption Group

Food Item	Poor Consumption	Borderline Consumption	Adequate Consumption	All
Wheat	1,806	1,383	1,360	1,355
Rice	43	242	443	399
Oil	316	595	645	626
Total	2,164	2,220	2,449	2,380

On average, for these three food items, the kilo calorie intake exceeds the accepted 2.200 threshold. In addition to other food items, it is safe to say that the average total kilocalories consumed by these households well exceed the required kilocalorie intake. It's interesting to note however, that households with poor consumption, with an average of 2,164 kilo calories for the three food items, consume significantly more wheat (1,806 kilocalories worth) compared to those households with borderline or adequate food consumption (who consume 1,383 kilo calories and 1.306 kilo calories respectively), and significantly less of the more expensive food item of rice (43 kilocalories compared to 242 kilocalories for borderline and 443 kilocalories for households consuming adequate diversity and frequency of foods).

Approximately 9 kg of wheat and bread are consumed 5 to 7 times a week. Rice, pasta and noodles as well as fresh fruits and vegetables are consumed 3 to 4 times weekly. However, this group also consumes proteins rarely; about one kg of beans and meat are consumed less than twice a week.

Households who consume a well balanced diet in sufficient quantities account for the majority 82% of the refugee households surveyed. Rice and flour/bread are eaten practically every day (average of 3 and 11 kg per household a week respectively) and so are dairy products. Meats (average of 2 kg of white and 2 kg of red meat weekly per household) are consumed 3 to 4 times a week and tomatoes and other fresh vegetables also are consumed almost everyday (see detailed data results in annex II, section V).

Food Assistance provided to Iraqi families by UNHCR and its partners

UNHCR has been providing different kinds of assistance to the most vulnerable Iraqi families that have been registered under TP since the beginning of 2005. Vulnerable cases are first identified, and then an individual assessment of the needy families is conducted through UNHCR. A total of 800 families have been provided with food items through our implementing partners Caritas & Ibrahim Alkhalil Church in Damascus, and the Governorate of Hassakeh in the provinces of Hassakeh, and Deir-Ezzor

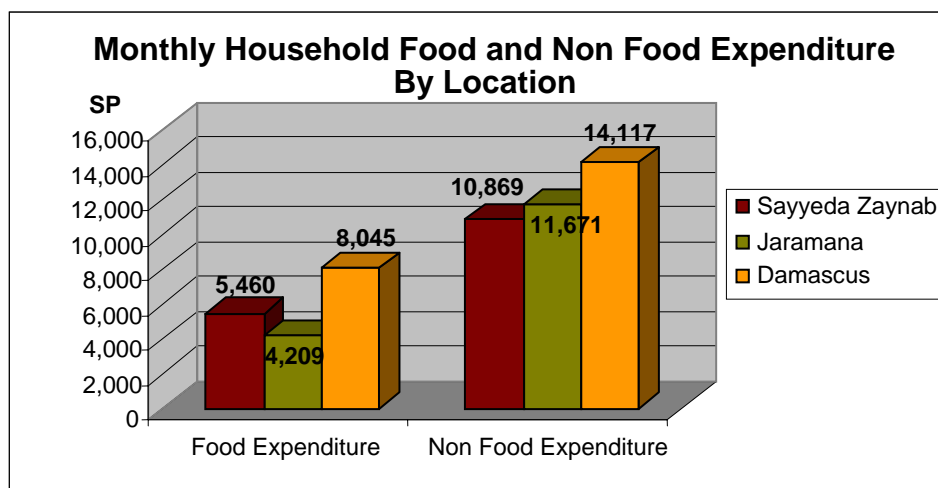
UNHCR implementing partners, who are in direct contact with the respective families, have stressed that this exercise has proven to be greatly essential and vital for the survival of the beneficiaries. They have reiterated on several occasions the need to maintain food assistance, as the number of families in need of such assistance is increasing constantly due to their deteriorating socio-economic conditions.

Expenditure

Monthly per capita expenditure is SP 4,932 Syrian Pounds. This significantly exceeds the 2004 poverty lines reported by UNDP of SP 668 and poverty line of SP 1,459 SP monthly. WFP beneficiaries in Syria, albeit residing in rural areas, have monthly per capita expenditures equivalent to SP 935 per capita. This demonstrates that the sampled Iraqi refugee households lie far above the poverty thresholds in Syria. The mean reported monthly household expenditure is SP 17,585 (USD 338)³, with non UNHCR registered households spending almost 10% more than the registered households. Monthly household expenditures on food and non food expenditures are SP 5,654 and SP 11,399 respectively (USD108 and USD 219 respectively).

Expenditures vary by location; refugees households residing in Damascus have average monthly expenditures approaching SP 22,195 (mostly due to high rent costs) while in Jaramana and Sayyeda Zaynab, total expenditures average SP 17,024 and SP 15,967 respectively.

Figure 2: Average Monthly Food and Non Food Expenditures



³WFP beneficiaries in Syria, albeit residing in rural areas, have monthly household expenditures half that, at USD147.

Food Expenditures

Average household monthly expenditure on food amounts to SP 5,654 (USD 108). Most commonly consumed products are samoun bread (98% of the households), sugar (92%) and potatoes (92%). Average expenditures on these commonly consumed items are SP 580, SP 337 and SP 397 for bread, potatoes and sugar respectively. Households in Jaramana spend significantly less on food compared to those in the other locations (see figure 2 above). This is consistent and corroborates the findings of the dietary diversity. Their relative inadequate food consumption (based on reported frequency and diversity of food items consumed) is likely a consequence of their lower expenditure resulting in less quantity, frequency and diversity of foods (see annex II, section V for detailed expenditure breakdown).

Non Food Expenditures

Overall monthly expenditures on non food items average SP 11,339 (USD 219). Rent represents a large proportion, almost a quarter of monthly expenditure, averaging for all households SP 6,600 (USD 127) monthly; with households in Damascus paying the highest rent (SP 10,053: USD 193) and households in Sayyeda Zaynab are paying almost half that (SP 5,690). Virtually all households, over 90% reported paying rent on a monthly basis. Although only 15% reported making debt repayments, this accounted for an average of SP 3,845 (USD 74) monthly. In addition, almost one third of the households reported expenditures on jewellery, perfumes, makeup and furniture which together account for SP 4,063. Approximately SP 2,560 monthly is spent on medical and related expenses, and school fees and other educational related expenditures amount to SP 1,409 monthly (see annex II, section V for non food expenditures and figure 2 above for comparison on food and non food expenditures).

Poverty Considerations

The Iraqi refugee's have per capita monthly expenditures of SP 4,932. UNDP, in 2004 estimated the **upper** monthly per capita poverty line to be SP 2,052. Thus, Iraqi refugees have expenditures more than double that of the upper poverty line, and 70% more than the lower poverty line of SP 1,439. Table 3 below summarises these figures. This puts into perspective the improved situation of Iraqi refugee households relative to 'poor' households in Syria.

Table 8: Poverty Comparisons⁴: (in monthly SP)

Iraqi Refugees Expenditure (per capita monthly)	4,932
WFP Beneficiaries in Syria expenditure (per capita monthly)	935
2004 Upper Poverty Line UNDP (per capita monthly)	2,052
2004 Lower Poverty Line (pre capita monthly)	1,459
2004 World Bank 1 USD at ppp (per capita monthly)	668

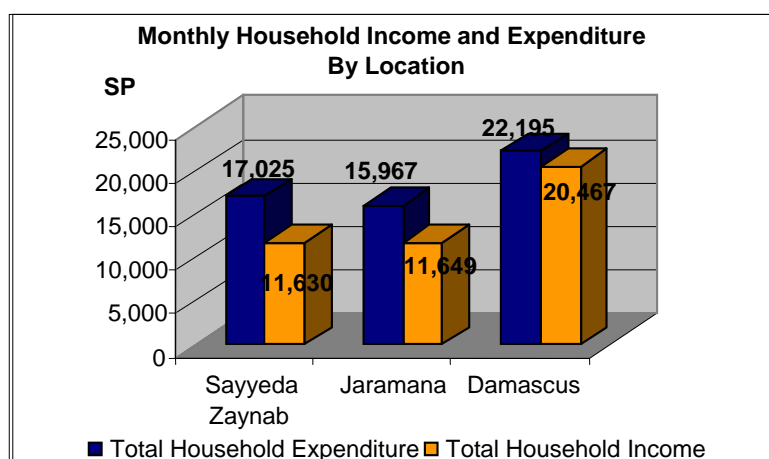
⁴ Source of all poverty lines: Poverty in Syria: 1996 to 2004; Diagnosis and Pro-Poor Policy, UNDP, June 2005. In addition to the alternative poverty lines calculated, UNDP also calculated World Banks one dollar a day Syrian equivalent at purchasing power parity.

Income and Income Sources

Average monthly income amounts to almost SP 12,913 (US 248).

With significant variations across the three different surveyed locations, average monthly income for households in Damascus is significantly higher at SP 22,195. Households in Sayyeda Zaynab earn on average SP 11,630 and those in Jaramana average SP 11,649 per month. This is the equivalent to USD 427, USD 224, and USD 224 for Damascus, Sayyeda Zaynab and Jaramana respectively. Figure 3 below illustrates average expenditures and incomes by location. Households in both Sayyeda Zaynab and Jaramana have expenditures that exceed their incomes. There are two possible reasons for the discrepancy between reported incomes and expenditures. It is commonly accepted in household income and expenditure surveys that respondents tend to over estimate expenditure⁵ and under estimate income.

Figure 3: Average Income and Expenditure by Location



Another possible explanation for the discrepancy is the use of credit lines. This is captured, in this survey, as expenditure (debt repayment) and although only 37% of the households reported making a debt repayment the month of the interview, this amounted to a significant amount (SP 3,845 monthly). It is likely, that the respondents do not consider this as income, and therefore do not include the amount of credit as income.

In terms of income sources, almost all households (96%) reported earning at least one income, while 38% reported earning income from two sources and a further 5% reported earning income from multiple sources.

Overall, approximately 36 percent of the households are earning salaries and wages, most likely from the informal sector. 23% reported living off remittances; while 17% are reportedly living off of family savings (see annex II, section V figure1 and tables 9 and 10 for share of income sources).

⁵ Another possible reason for overestimates of expenditure is that respondents were asked for monthly estimates on 'once-off' expenditures which though were averaged out over the year, might nonetheless have raised the expenditure figures somewhat.

Coping Strategies

Coping strategies are generally defined as short term responses to help mitigate or manage a difficult situation. These coping mechanisms can either be negative, such as selling off jewellery and furniture, depleting life savings, or they can be characterised as modifying their consumption behaviour (substituting more expensive food with cheaper ones). In this sample, significant proportion of households reported that they resort to coping. One quarter (26%) of the households surveyed reported experiencing shortages in cash or food to meet their requirements; and fewer still, (20%) resorted to a strategy to cope (see figure 2 in annex II, section V).

Although most households are currently food secure, their dependence on harmful coping strategies is of concern. 27% of households are depending on unsustainable forms of income such as saming, sale of assets and gift.

Of the 26% of the households who reportedly encountered difficulties in meeting their basic needs, strategies commonly adopted involved modifying food intake habits, such as limiting portions, reducing the number of meals and buying cheaper quality foods as a way of reducing their food expenditures. Though this does not represent the majority of households, these food related strategies, have direct impact on the food security and nutritional status of household members

VI. HEALTH & NUTRITION

Access to Health Services

In the three surveyed areas, public primary health care services are accessible for Iraqi refugees. However, low quality of services and scarce availability of drugs, as well as lack of knowledge of available free of charge services lead 55% of all Iraqi refugees to refer to private health facilities. 73% of all families are paying for their health care. NGO and religion based (charitable) dispensaries partnering with UNHCR are operating in all three areas⁶ to provide free services to refugees. The coverage of this service is limited due to lack of resources.

When surgeries are required, cases are referred to specialised hospitals (Al-Sadder or Khomeini hospitals) which charge the normal rates. Some cases are referred to private hospitals at the expense of the patient. UNHCR is providing financial support up to 20-25% of expenses for people registered under the TP Regime. Due to financial constraints this support is reserved to most serious cases. Little other avenue for direct support is available leading to individual difficult situations.

Child Health

Information collected from the assessment indicates that there are areas of concern regarding children health such as low coverage of vaccination and high prevalence of diarrhoea.

Immunisation

Only 65% of children under five were vaccinated against measles and only 75% were adequately protected from polio.⁷

The low coverage for the 3rd OPV dose and Measles vaccine makes the Iraqi children more susceptible to polio and measles. Immediate and sustained interventions are required to avoid the risks of an outbreak.

Table 9: Percentage coverage with vaccines for U5 children and who have a vaccination card

Type of vaccine	%
BCG Tuberculosis	91.3
OPV2 Oral Polio Vaccine	92.5
OPV3	75.0
Measles	65.0
HB3 (Hepatitis B Vaccine)	62.5
MMR (Measles, Mumps, Rubella)	42.5

⁶ These services are provided by the following centres:

- 1-The Syrian Red Crescent Health Centre in Sayyeda Zaynab
- 2-The Health Centre in the Monastery of Ibrahim Al-Khalil in Jaramana
- 3-As for Masaken Barzeh there is no voluntary dispensary. Some Iraqis registered with UNHCR report to the health centre in the monastery of Ibrahim Al-Khalil in Jaramana.

⁷ It should be noted that after the survey campaigns by MOH were conducted in the areas.

Type of vaccine	%
OPV booster dose	40.0
Meningitis	15.0
Other vaccines	3.8

The public health facilities played the most important role in vaccinating Iraqi children (more than 82% of cases)

Table 10: Place of Vaccination

Place of Vaccination	%
Health centres	72.6
Mobile vaccination teams	10.1
Hospitals	8.4
Private doctors	5.9
Charity health centres	4.2
Syrian Red Crescent	4.2

Nutrition

Nutrition status for Iraqi children is satisfactory.

About 2% are malnourished, 3.5% have the potential to become malnourished. The family survey included a measurement of upper arm circumference for 247 children less than five years old. Some 2% are malnourished, 3.5% fall in the critical range (have the potential to become malnourished) confirming the results obtained from the food expenditure survey (please see section above).

Diarrhea and ARI

Prevalence rate of diarrhea cases among children during the previous two weeks prior to the survey was of 19%. This is considered to be a high rate, especially that the survey did not take place in summer time.

More than 10% of diarrhea cases were dehydrated. One third of the cases did not report to any health facility. More than 60% of those who had seek medical care reported to a private health facility as shown in the table below:

Table 11: Place of reporting diarrhea

Place of reporting for diarrhea	%
Private clinics	30.3
Hospitals	18.2
Pharmacies	15.2
Charity health centres	12.1
Syrian Red Crescent	12.1
Governmental health centres	12.1

The cost for treating each case ranged between SP 50 and SP 1000 with an average of 472 Syrian pounds. They were paid by family members or relatives in most cases. 3% of the cases were paid by other agencies.

Prevalence of ARI during the previous two weeks prior to the survey is about 25%, which is considered to be a normal ratio in this season

More than one third of the cases did not report to any health facility. Some 73% of those reporting for medical care referred to private health facilities as shown in the table below:

Table 12: Place of reporting coughing

Place of reporting for coughing	%
Private clinics	45.5
Hospitals	15.9
Charity health centres	13.6
Pharmacies	11.4
Governmental health centres	4.5
Syrian Red Crescent	2.3
Houses	6.8

The cost for the individual case ranged between SP 50 and SP 997 with an average of 491 Syrian pounds which were paid by family members and relatives in all cases.

Breastfeeding

Breastfeeding rate is low for Iraqi infants (about 52%), and only 41% are being exclusive breastfeed during the first 6 months.

The lack of awareness among mothers is the main cause for this low percentage of BF for infants less than 24 months old. This can also justify the high prevalence of diarrhea cases among children as mentioned above.

Maternal Health

Around 70% of the women delivered in hospitals and as many as 93% of all deliveries that took place in Syria were attended by a medical doctor. However, maternal health is a matter of concern due to deficient antenatal care.

More than 15% of Iraqi pregnant women do not receive antenatal care during pregnancy with poverty as one of the main reasons. 40% of pregnant Iraqi females have not being vaccinated against Tetanus representing high risk to newborn infants

More than 88% of mothers who received antenatal care have got it from private health facility (clinics or hospitals).

Table 13: Places of antenatal care

Place of antenatal care	%
Private clinics	58.1
Private hospitals	30.1
Public hospitals	7.5
Health centres	7.5
Syrian Red Crescent Centres	2.2

About 60% of pregnant women were vaccinated against tetanus; this level is not satisfactory and would not provide needed protection for mothers and newborns. More than 22% of CBAW (child bearing age women) gave birth in Syria, and more than 70% of them delivered in private hospitals. Doctors attended the delivery in about 93% of cases. 95.1% births resulted in a living newborn. 96.2% of newborns were weighed, and their weight was normal (more than 2,500 g.)

Table 14: Place of delivery

Place of birth	%
Private hospitals	72.0
Public hospitals	14.6
Private clinics	9.8
Homes	3.6

Morbidity

Acute diseases among Iraqi refugees are within normal and acceptable rates. No epidemic occurred

The acute diseases that were mentioned during focus group discussions were common diseases such as cold and diarrhea.

Table 15: Prevalence of acute diseases during the previous month by age and gender

Gender	Less than 5 years	5-14 years	15-59 years	60 years or more	Total
Male	7.6	4.0	7.2	22.2	7.0
Female	3.4	4.2	8.0	20.0	7.0
Total	5.5	4.1	7.6	21.2	7.0

There were also acute and chronic cases of Brucellosis due to eating non-boiled cheese as the Iraqis are used to eating pasteurized cheese.

People with special needs

People affected by chronic diseases

Iraqi refugees affected by chronic diseases are faced with economic burdens. Most of affected refugees have no longer access to needed medications or periodical medical checkups to control the chronic illness.

The most common chronic illnesses that were mentioned during focus group discussions were: diabetes, hypotension, thyroid disorders, arthritis, asthma, stroke, tumours and epilepsy.

Elderly people

Elderly people are among the most vulnerable groups of Iraqi refugees requiring specialised attention or assistance such as eyeglasses, eye surgeries (to treat the cataracts or replace the lens), hearing aid, walking aid such as walking sticks.

Disability

Disability among Iraqi refugees is of 4% with higher rates among males. About one third of disabled Iraqis are children less than one year of age, and more than one third of disabled Iraqis are 20-29 years old. More than 37% of cases of disability were reported to have occurred during the war.

Table 16: The prevalence of disabilities by age and gender

Gender	Less than five years	5-14 years	15-59 years	60 years and more	Total
Male	5.9	3.3	4.6	20.0	5.0
Female	0.8	2.7	2.7	10.0	2.8
Total	3.4	3.0	3.7	15.3	4.0

The registered high percentage of infants disability is justified by congenital malformations and genetic causes resulted from inter-family marriages. Other causes are related to the war where higher rates were registered in the age group of 20-29 years. The rate of male disability is higher than the one of females.

VII. EDUCATION

Access to school is granted to Iraqi children however there are as many as 30 % of Iraqi children between the age of 6 – 11 years not enrolled in schools. Poverty and the insecure legal status are the main causes for families not enrolling their children in schools.

Overall the enrolment is low from early ages and enrolment rates in earlier grades among boys are lower than it is for girls. However, more drop-out occurs among girls after the fifth grade (for girls older than 11 years).

Table 17: Enrolment in schools (%)

Age groups	Female	Male	Total
6-11	69	65	67
12-15	61	67	64
15+	35	40	37

It is difficult to analyse the causes of non-enrolment and drop-out due to the absence of comparison figures of education enrolment in Iraq before the war. The education level of family members above 15 years of age is varied but gives some information on the relative low level of education amongst the women. Around 50% of the women left school after the elementary level or did not go to school at all. The same applies to one third of the men.

Table 18: The level of education of Iraqis (15 years and more) in percentage by gender

Level of Education	Male	Female	Total
Illiterate	4.0	12.4	8.0
Reads and writes but has no schooling	6.1	6.2	6.1
Elementary	23.3	30.3	26.6
Preparatory	27.9	24.5	26.3
Secondary	17.2	13.3	15.4
Institute	9.4	6.1	7.8
University of higher	12.1	7.1	9.8
Total	100.0	100.0	100.0

During focus groups discussions the following issues were brought up in regards to the situation in Syria:

Poverty

There is a clear link between poorer families and high drop-out levels. This is evident in the area of Sayyeda Zaynab where poorer families reside and the level of drop-out is higher. Families are finding it difficult to afford school expenses: uniforms and stationary. Moreover, children are more involved in

house chores: looking after their siblings or working to generate additional income.

The Legal Status

No difficulties during enrolment process in primary education for student holding identification documents. However, a few families without a valid residence permits are required to withdraw their children from school. They believe that the risk is higher to get deported if their children are in schools since the families become more visible to government officials.

Enrolled students in the secondary education are faced with problems during registration process due to the fact that some arrive without necessary education history certificates. These students are usually accepted conditionally for a period of two months waiting for the submission of such certificates. Some cases of expulsion are registered where students have had to move to lower grade levels and then reached an age that exceeds the legal age allowed in Syria.

Difficulties of adapting to a new school environment

There is a difference in the curricula in Syria and Iraq, mainly with regard of foreign languages and modules starting at different levels/ages. This becomes a problem especially in higher grade levels. Some students considered these differences as substantial reason for drop-out. In one of the schools more than a third of the Iraqi students left because they felt that they were not able to follow the classes.

Some adolescents in FDGs were repeatedly mentioning difficulties to integrate in schools. Issues of languages and low economic status resulting in discrimination particularly from peers were mentioned. The older the children the more likely they were to experience this situation.

Overcrowded schools

Schools located in the areas where most Iraqis live registered a 20% increase of enrolled students resulting in additional pressure on teachers as well as on the already poorly equipped school facilities. This has naturally a negative affect especially on the children who may require more support from teachers.

VIII. POPULATION MOST AT RISK

Prostitution and sexual exploitation of children

Prostitution is a sensitive issue for which information is difficult to be obtained. Focus If the household survey did not allow to collect accurate figures, focus group discussions as well as meetings with local NGOs and individuals was revealing of the extent of the phenomenon. The increased visibility of the issue with particularly the summer influx of customers from neighbouring Arab countries, partially covered by the media, placed the topic at the centre of attention of the local community which facilitated the collection of information. Staff working in prisons and juvenile centres, as well as local authorities and religious leaders, were also consulted to obtain reliable information..

War and relocation often provide an adequate environment for such phenomenon. Younger women in vulnerable situations are particularly affected and this may become a more widespread problem since the economic situation of Iraqi families is increasingly deteriorating.

According to the information collected, sex work is divided into three types: prostitution on individual level, on family level, and on the level of organised networks.

Sex work at the individual level implies the practicing of prostitution by a girl or woman without the knowledge of the parents or the siblings due to severe needs. Sex work at the family level is usually organised with the knowledge of some if not all family members involving some or all the women in the family (the mother and her daughters). Sex work of this nature may be highly exploitative and coercive. Both main and secondary sources which have been consulted have confirmed the presence of many cases whereby the head of the family brings clients to the house.

Organised networks dealing with sex trade were reported. These networks provide girls to people in the local community, tourists and night clubs. It is hard to assess to what extent the girls involved have been trafficked but discussions with girls and employers in prisons indicates that sophisticated networks functioning at several instances to find girls to work for them do exist. These networks developed systems involving doctors and other medical staff to perform abortions, if needed, and to take care of the girls when the have been abused. This makes it very difficult to reach these women since they have little contact with any official centres.

Even though prostitution is not a widespread phenomenon, information from the assessment and NGOs indicates that girls as young as 12 years old are involved in sex work. Evidence was collected that girls and women were trafficked by organised networks or family members.

Child Labour

Iraqi children, both girls and boys, from poor families are prone to get involved in labour to supplement family income. They typically work long hours for little pay as little as 50 SYP a day with boys working in market places and girls as house maids. This correlates with the high proportions of children out of schools.

Little quantitative information has been gathered about child labour. However, it is known from focus group discussions and discussions with NGOs that children are increasingly getting involved in work. Also, the low enrolment rates in schools indicate that child labour is appearing. Children and adolescents are being exploited by employers to perform jobs that do not require a particular skills or an educational certificate. Children work for long hours and accept a lower pay than an adult and is involved in hazardous work. Some instances of illnesses and injuries have been noticed as a result of the hard works that they perform.

Age group	% Boys	% Girls	% Children
6-14	3.4	2.1	2.8
15-18	11.4	1.5	7.1
Children 6-18	5.6	2	3.9

Fearing from deportation, due violation of laws forbidding child labour, and the need for the additional source of income, generated by the working child, heads of refugee families did not easily confirm their children labour. Thereafter, no concrete figures could have been obtained.

Traumatized children and families

While evidence was collected on trauma cases amongst children and families, there is no systematic approach to support these families.

Focus group discussions show obvious signs of trauma situations that affect families and children. Some are caused by exposure to war and insecurity situations in Iraq. Cases of torture, kidnapping and rapes were repeatedly collected. Other cases are caused by difficult living conditions and the long lasting feeling of material and social insecurity since departing Iraq. This was reflected in clearly observed symptoms ranging from physical (hair loss, skin rashes, speech difficulties, ...) to disorders in the social behaviour and psychological reactions to the environment (fear to go out,

children kept at home, fear of night, nightmares and anxiety). Children are also directly affected and very little if any care at all is being provided.

IX. RECOMMENDATIONS

Ensure improved Legal Protection

It is necessary to maintain and reinforce the TP Regime as it has proved its efficiency in offering minimum protection to a large number of Iraqis.

The reinforcement of the TP Regime requires the strengthening of local institutional capacities (education, health, etc.) in order to release the pressure on Syria's social services and economic infrastructures.

International Community's burden sharing will positively impact on the overall protection conditions of Iraqis and stabilise the Iraqi population in Syria pending the improvement of security in Iraq and the creation of conducive conditions for a safe and dignify return.

The improvement and reinforcement of the local protection conditions should prevent any secondary movement of Iraqis.

The possibility of carrying out refugee status determination which may reveal to be very difficult to undertake due to (i) the large number of Iraqis in Syria willing to be resettled and (ii) the likelihood of the creation of a pull factor.

Assisting families desirous to return to Iraq but who are incapable of affording the transportation expenses. These families represent 4.8% of the total number of Iraqi families. However, none of these families have approached UNHCR office at the time of finalising this report.

Intensifying UNHCR activity in areas that are most congested with Iraqi refugees raising awareness of Iraqis, promoting and the introducing the UNHCR and its objectives. (Nearly 56% of Iraqi families are unregistered with UNHCR, and 73% of those families have attributed that to the lack of knowledge of UNHCR.

UNHCR should continue mediating with the concerned authorities in Syria to tackle the situation of refugees whose residence permits expired and to legalise their stay in the country.

Sustain Food Security

At present the large majority of the Iraqi refugee population are not in need of food aid. Several thousand (1.3% of population), however, live in abject poverty and require assistance with basic food items to ensure adequate nutrition.

The non sustainable sources of income and the depletion of assets by 27% of refugee households is an issue of major concern. Long term solutions and interventions should be investigated including, possibly, employment or income generating opportunities for select household. This will allow households to continue meeting their basic needs, and to mitigate depletion of their resources.

Improve child and maternal health and sustain access to health services by the most vulnerable

To improve child and maternal health UNICEF will work closely with ministry of health focusing both on improving conditions of health facilities and mobilising families through community work.

Assistance will be provided to health centres both public and NGO centres with focus on child immunization and other preventive care for children. This support may involve provision of supplies or contributing to vaccination campaigns if needed.

UNICEF will reach the unreached through the volunteer networks run by NGOs and CBOs in underprivileged areas. Awareness will be raised through health education on topics such as breast feeding, hygiene and child immunisation as well as availability of public health facilities and their services. Mothers will also be educated on the importance of regular antenatal visits & TT vaccine. Community Based Rehabilitation services may be considered as way to assist families with disabled children.

UNHCR and its network of NGO partners will continue support individual cases facing poverty having access to health services, particularly elderly people, people with disabilities and chronic diseases. UNHCR will improve conditions and increase resources to support surgery interventions, with particular attention to poor families.

Ensure that all children are enrolled in school.

UNICEF will support MOE and NGOs initiatives to assist Iraqi children to adapting to Syria curricula. Assist students with difficulties in preparatory stage especially in mathematics, physics, languages NGOs can play a role in supporting both students and families.

Work with the MOE to support schools under pressure of increased number of students with basic requirements and necessary equipments for education.

Work through NGOs and CBOs to reach out to families with children out of schools. Design and implement projects to overcome this problem involving the families.

Advocate for adequate and effective administration process for integration of Iraqi children in Syrian Schools taking into account the best interest of the child (relaying less on official papers and more on the actual ability of children).

Support local efforts geared toward preventing child labour as well as sexual exploitation of children and women. Provide counselling to traumatized children and families.

UNICEF will support to CBOs, NGOS and charities engaged in prevention and rehabilitation of child prostitution as well as child labour by supporting families and children at risk. This may include support to income generating activities for families.

UNICEF will also facilitate the establishment of effective networks connecting these actors in the field with concerned government actors including ministries (MoInt, MOSA and SCFA) and institutions (juvenile centres).

UNICEF will support NGOs and CBOs with building counselling skills of staff and volunteers to reach out to traumatised families and children.

UN agencies and partners need to sustain and increase efforts to support the estimated 1,500 families that are facing very difficult conditions created by a combination of factors including poverty, expired legal documents and trauma situations. This will be done through comprehensive measures aiming at providing them with a safer environment where food security is granted and access to services is ensured.

All the listed recommendations in support of Iraqi refugees in Syria will be tackled through a coordinated programmatic approach by partners aiming at building the condition for a comprehensive and sustainable response to pressing humanitarian needs.