

REFUGEE CHILDREN IN CRISIS: THE CHALLENGES FACING SYRIAN REFUGEE CHILDREN RESIDING OUTSIDE REFUGEE CAMPS IN JORDAN

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Abstract: This study aimed to identify the kinds of challenge encountered by Syrian refugee children who are living in Jordan but not in refugee camps. A sample of 120 Syrian refugee children residing in Amman provided the data for this study, which is based on a descriptive approach. The Statistical Package for the Social Sciences (SPSS) was used to analyze the data. We found that the main economic challenges faced by these children were low wages, labor exploitation, difficulties with paying back debts for their families, ongoing poverty, and the high cost of living in Jordan. Educational challenges were also largely economic and were mainly due to the high cost of education and the priority of work over school attendance. Health challenges too were economic and centered on the high cost of health care and the obstacles to obtaining medical insurance. Social challenges included lack of interpersonal bonds, an inability to form new friendships, and the absence of entertainment. This study suggests that providing financial support for Syrian refugee families consistent with the increasing cost of living in the hosting country would result in better lives for the Syrian children, as would creating job opportunities for heads of families in line with memoranda of agreement that Jordan has with international organizations. Further, public education for Syrian refugee children should be made free of charge, particularly in the elementary stages.

Keywords: Syrian children, refugees, Jordanian refugee camps

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This study aims to shed light on the kinds of challenge encountered by Syrian refugee children in Jordan who are not living in refugee camps. Sarayrah (2018) stated that, according to the United Nations Children’s Fund (UNICEF), there are more than 655,000 Syrian refugees in Jordan, with 86% of them living below the poverty line, and 10% below the extreme poverty line. According to Culbertson and Constant (2015), “The number of child refugees is recorded at 287,556 which constitute 51% of the overall number.” The vast majority (78%) of Syrian refugees who are living in Jordan but not in refugee camps are located in the northern and central areas of the country; half (about 330,000) are younger than 18 years old, while 16% (about 103,000) are younger than 5 years old (Valenza & Al Fayez, 2016). It was found in 2015 that the number of Syrian child refugees in Jordan without their parents had risen to 4,395 and that most of these had arrived in Jordan accompanied by second-degree relatives, but 17% of them had come alone (“A study on the sufferings”, 2015).

Background

Omoush (2016) found that 84% of Syrian refugees were living in host communities, not in refugee camps. Omoush also showed that the challenges these refugees faced included severe poverty, lack of food, lack of health care, the need to beg in order to survive, exploitation, lack of job opportunities, accumulation of debt, and the desire to escape reality. Additionally, Omoush noted that the core problem, in many cases, is the absence of the primary breadwinner (husband, father, or eldest brother) due to disease, death, or detention; beyond this, most Syrian refugees are in financial debt to the homeowners of their rented residences. With average rents of about 350 JOD (Jordanian dollars), equivalent to about 500 USD (U.S. dollars), per month, “extended families [are] having to share cramped rooms for prolonged periods of time” (Norwegian Refugee Council, 2015, p. 9). The Norwegian Refugee Council (2015) also noted that, “according to official government statistics, rental prices in Jordan are estimated to have risen by an average of 14 per cent since January 2013” (p. 7). In Mafraq and Ramtha (cities in northern Jordan), rents went up sixfold because of massive demand by Syrian refugees (Francis, 2015). Moreover, “Amman (capital of Jordan) is ranked as the most expensive city in the Middle East and Africa according to the Economist magazine in its annual report of the Economist Intelligence Unit (EIU) 2015” (Syrian Network for Human Rights & Euro-Mediterranean Human Rights Monitor, 2016, p. 7).

According to a UNICEF (2018) report:

94 per cent of Syrian children under 5 living in host communities are multidimensionally poor, meaning that they are deprived of a minimum of two out of the following five basic needs — education, health, water and sanitation, child protection and child safety. (para. 2)

The report also states that 40% of Syrian refugees in hosting communities do not have enough food, and 45% of children 5 years old and under do not have convenient access to health

services, including vaccinations and services for the disabled. For reasons that include the high cost of education and lack of room at schools, 38% of these children go to school intermittently or have abandoned schooling (UNICEF, 2018). In addition, 16% of those 5 years old and under do not have birth certificates, which may result in challenges and obstacles in the future (UNICEF, 2018). Meanwhile, the safety of the 6 to 17 age group is threatened by participation in child labor and exposure to violence (Valenza & Al Fayez, 2016).

Child Labor

A study conducted by the Euro-Mediterranean Human Rights Monitor (2016) showed that reasons for Syrian refugee families in Jordan putting their children out to work or to beg included the burden of debt, the family's inability to meet basic human needs, and the risk of adults being detained when working without permits. These researchers stated that "for these refugees, obtaining food must take priority over education, so children are often required to uphold responsibilities that exceed their age and ability" (pp. 11–19). Also, more than 70% of Syrian refugee families in Jordan are without fathers ("The situation of Syrian refugee children", 2013), which means that the role of family head often falls on children. When asked the reasons that force them to work, Syrian refugee children answered, "I work to feed my family" ("Jordanian concern", 2014).

As well, we have learned from Van Esveld, Martínez and Human Rights Watch, and Bochenek (2016) that "60% of Syrian families in hosting communities depend on money earned by their children" (para. 14). We have also learned from Stave and Hillesund (2015) that, rather than attending school, these children are "working in quarries, bakeries, shoemaking, construction, or cleaning to support their families, often at physical risk to themselves" (p. 60). Additionally, we know that the terms of employment for such children are typically 6 to 7 days per week, without vacations, and that one third of them work more than eight hours a day for a daily income of 4 to 7 USD (International Labour Organization, 2014, p. 31).

An International Labor Organization report authored by Stave and Hillesund (2015) stated that 37% of Syrian refugee children are forced to work in construction and 48% between the ages of 15 and 17 work in factories. These authors also found that the probability these children will encounter hazardous work circumstances is high and that their working conditions produce exhaustion in the children, which in the long term may result in other negative health and physical effects. Overall, Stave and Hillesund found that unsafe working conditions have endangered the lives of hundreds of Syrian refugee children and led to permanent disabilities. An International Labour Organization (2014) report stated that "368 working children were subject to injuries that required medical intervention and became unable to return to work due to the injury" (Euro-Mediterranean Human Rights Monitor, 2016, p. 19).

Educational Challenges

Van Esveld et al. (2016) concluded that 97% of Syrian refugee children are at risk of abandoning schooling due to the financial difficulties faced by their families. Their report also showed that a substantial number of Syrian parents cannot afford such education-related expenses as transportation, fees, and uniforms; as well, there is low accessibility to education due to banning, restrictions, and unfavorable locations. In combination, these challenges create a desperate educational reality and an insecure future.

Although poverty is the overriding problem that keeps Syrian refugee children out of school, it is not the only one. The poor infrastructure for education in Jordan is a major challenge even for Jordanian students; moreover, some parents regard the modest level of education that is available to be inadequate.

As well, some refugee children abandon their schooling because of the violence experienced at school (Valenza & Alfayez, 2016). Van Esveld et al. (2016) stated that:

Syrian children described how teachers beat them with sticks, books, and rubber hoses. In other cases, the children faced severe harassment by Jordanian students in school or while walking to school; UNICEF reported that 1,600 Syrian students dropped out in 2016 due to peer bullying. (para. 23)

The policies in effect in Jordan make it difficult for Syrian children to attend school because these policies “require school-aged children to obtain identification documents or ‘service cards’ in order to enrol in public schools” (Van Esveld et al., 2016, para. 8). For the many thousands of Syrians who have chosen to leave the refugee camps without having a sponsor, the required documents are difficult to acquire (UNHCR, WFP, & UNICEF, 2014, p. 8). According to the Jordanian government’s policies, the required sponsor must be a Jordanian citizen or a first-degree relative older than 35 (Van Esveld et al., 2016, para. 8). Moreover:

Since February 2015, Jordan has also required that all Syrians obtain new service cards, although schools have allowed children to enrol with older cards. As of April 2016, about 200,000 Syrians outside refugee camps still did not have the new cards, and humanitarian agencies estimate tens of thousands of them may be ineligible to apply. (Van Esveld et al., 2016, para. 8)

Other policies also make it very difficult for refugee children to attend school:

Requirements of some school directors that children show official Syrian school certificates proving they completed the previous grade are impossible for many families that fled fighting in Syria without bringing originals. Up to 40% of Syrian refugee children in Jordan lack birth certificates, which are required to obtain service cards. Lack of birth certificates will pose a barrier to enrolment to increasing numbers of children as they reach school age. (Van Esveld et al., 2016, para. 9)

According to Salem (2018), even when Syrian refugee children do manage to enrol in school, they often do not stay there: “Syrian refugee students leave school due to financial pressure, harassment and discrimination, and lack of normalcy” (p. 4).

Health Care

The government in Jordan has introduced new systems aimed at ensuring all Syrian refugees outside the refugee camps receive identity documentation to help them receive benefits. According to a report by the World Bank’s Jordan Poverty Reduction and Economic Management Team (2013), refugees who have received health certificates can access health care, but anyone over the age of 12 years must pay a health care cost of 42 USD. The report also notes that Jordan has witnessed outbreaks of a number of contagious diseases such as tuberculosis, polio, and measles (p. 15). Providing vaccinations for Syrians has been one of the most significant tasks pertaining to health care, and the most expensive introduced for refugees outside the refugee camps (World Bank’s Jordan Poverty Reduction and Economic Management Team, 2013).

Literature Review

A number of studies have examined the lives of Syrian refugees on international, regional, and local levels, but have not focused on the issue of the suffering of refugee children living in Jordan but not in refugee camps. Some of these studies, such as that of Hassan (2018), have shed light on social and economic hardships. Hassan’s study, which used a purposive sample of 487 Syrian refugees living in the city of Zarqa, showed that the social issues experienced by the refugees revolved around their fear of leaving Jordan, the difficulty of using recreational facilities, and their fear of returning to refugee camps, while their economic problems revolved around the high cost of commodities and rent.

Using a sample of 100 Syrian refugee children and their parents who were living in Jordan, Abu Tarboush (2014) showed that the severity of social and psychological impacts diminishes with age. This researcher also found no gender differences in impacts. At the same time, Abu Tarboush showed that the longer a child had been in Jordan, the fewer social and psychological impacts were seen; but the more problems a child faced, the more severe were the social and psychological impacts.

Zughool (2016) investigated a sample of 120 Syrian refugee families in the Za’atari camp to identify family and economic problems and concluded that the most significant problems pertaining to the family were the inability to meet basic needs and the desire to escape the difficult circumstances in which these families were forced to live. Zughool also found that, where the economic dimension was concerned, the main problems were low income, unemployment, child labor, and the need to leave school to provide for the family.

Saleh, Aydin, and Kocak (2018) revealed that Syrian refugees in Turkey, Lebanon, and Jordan have difficulty accessing much-needed health services and “access to health care services

varies significantly, depending on the country of asylum.... In Jordan, 79% of the 654,582 refugees are living in urban areas or informal settlements with the access to the public health care services” (p. 448).

Karanja (2010) discussed the educational difficulties experienced by Sudanese refugees in Nairobi, Kenya, where children from Sudan “face xenophobia and discriminative urban refugee policies, which preclude their admission into public elementary schools” (p. 147); for these children, private schools are not an option because of their families’ socioeconomic challenges.

A 2007 study of Iraqi refugees in Syria conducted by Al-Miqdad identified difficult circumstances among the refugees including the prevalence of unemployment, dependence on child labor to help provide for their families, overcrowded housing, and a lack of health care services. Similarly, a study published by Faraj (2008) drew on a sample of 100 beneficiaries of the Refugee Organization Services in Africa and showed that the economic problems faced by refugee families lie in the absence of job opportunities, the inability to meet essential needs, and unmanageable debt. The social problems were represented by the inability to educate children due to high cost as well as the absence of health care (Faraj, 2008).

Valenza and Al Fayez (2016) conducted a study for UNICEF on the circumstances of Syrian children in hosting communities in Jordan using a random sample of 1,201 individuals in the Al Mafraq, Amman, Irbid, and Zarqa governorates. The study concluded that financial hardship plays the most significant role in discouraging children from entering school and encouraging those who have enrolled to leave, with adolescent children being the most likely to give up their schooling to help support their families. The authors also found that many refugees seek health care services in unofficial ways due to financial and bureaucratic obstacles and that only 45% of families who require medical services can benefit from official health care. These researchers also found that most children who live in unofficial camps lack identification cards and refugee documentation, engage in child labor, and do not attend school.

According to Sha’ban (2014), a study undertaken by Care International revealed that half a million Syrian refugees who live in urban areas in Jordan were increasingly struggling to adapt to the challenges of inadequate accommodation, substantial debt, and the increasing cost of living in addition to their children’s education costs. A CARE survey of over 2,200 Syrian refugees found that 90% suffered from substantial indebtedness to relatives, landlords, store owners, and neighbors; also, their financial circumstances were worsening due to the depletion of their savings (Sha’ban, 2014). Syrian refugees do not have tenancy agreements and this exposes them to the risk of evacuation at any point (Norwegian Refugee Council, 2015, p. 11).

In 2014, Jabbar and Zaza identified the types of anxiety and depression symptoms experienced by Syrian refugee children. They compared these symptoms to those in children in non-conflict areas near where the refugees had resettled. The study concluded that the Za’atari children had the highest scores for depression, being the only group that expressed suicidal

ideation. Jabbar and Zaza stated the need for more research and action among psychologists and therapists to address the mental health of refugee families and children, and recommended further research into therapeutic interventions among refugees to better understand how therapy can potentially have a healing influence. These researchers also concluded that camp children face more difficult living circumstances than their peers outside the camps.

Given the findings of the above studies and the reports and studies outlined in the “Background” section, we sought to examine the current situation faced by Syrian child refugees not living in camps. Our goals were twofold: first, to investigate the current forms of challenge encountered by Syrian refugee children; and second, to focus on the circumstances of refugee children who live outside refugee camps rather than inside them, noting that official local and international statistics indicate that more than 516,000 Syrian refugees live outside the camps (Culbertson & Constant, 2015). We also sought to gain relevant current information that would assist us with proposing solutions that could alleviate the sufferings of Syrian refugee children. Overall, our intention was that the findings and recommendations of our study should be utilized alongside other recommendations to end this suffering, particularly in Jordan. We therefore aimed to attract the attention of governmental and non-governmental organizations and alert them to the suffering experienced by these children in order to guide and encourage assistance efforts, particularly with regard to funding.

Method

Research Questions

This study addresses five main questions about Syrian refugee children in Jordan who are not living in refugee camps:

1. What forms of economic challenge do these children encounter?
2. What forms of educational challenge do they encounter?
3. What forms of social challenge do they encounter?
4. What forms of health challenge do they encounter?
5. Are there statistical differences in the economic, social, and health challenges encountered by these children that can be attributed to variables of interest, including social category, age, family income, number of family members, work, health status, years of education, and educational level?

The Tool

To collect the data to answer the five research questions of the study, we developed a questionnaire in two parts. The first part included primary data that reflected the sample of the study. It encompassed gender, age, and family income, number of family members, work, and health issues. The second part included the forms of suffering — the economic, social, educational,

and health challenges — encountered by Syrian refugee children living in Jordan but not in refugee camps. The Statistical Package for the Social Sciences (SPSS) was used to analyze the sample.

The population from which we drew our sample consisted of all Syrian refugee children in Jordan not living in a refugee camp. According to estimates, children under 18 comprise more than 51.4% of the total Syrian refugee population outside refugee camps — about 330,000 children; females constitute 48.6% of this number and males 51.4% (Valenza & Al Fayez, 2016). Our sample was collected only from Amman (Jordan’s capital), for which statistics about child refugees are not available. The sample for this study consisted of 120 children ranging in age from 10 to 17 years. The data were collected from the children at their work places after receiving permission from parents via telephone.

Results

The results of the study are given here in 12 tables. Table 1 covers the reliability of the questionnaire, Table 2 lists the demographics of the participants, Tables 3 to 6 detail the forms of challenge — economic, educational, health, and social — the participants faced, and Tables 7 to 12 show the statistical differences in the forms of challenge faced according to each of six variables: gender, number of family members, whether living with family or relatives, whether attending school, job income, and age.

Table 1. *Reliability of Questionnaire Variables*

Form of challenge	Cronbach’s alpha
Economic	0.83
Educational	0.81
Health	0.86
Social	0.89
Overall	0.88

The Cronbach’s alpha values in Table 1 show that the variables listed are all valid for the purposes of the current study.

Table 2 shows that about two thirds (67.5%) of the participants were male, and one third (32.5%) female. The largest age group by percentage (47.5%) was 17 years old, while 34.2% were 16 years old. Nearly the entire sample (95%) lived with their families; most families (80.8%) had eight members or fewer. All participants were employed, with 51.7% reporting an income of 100 JOD per month or less, and the rest (48.3%) earning more. Most (95.8%) of the sample only sometimes had enough funds to provide the basic needs of the family. Most (80.8%) did not attend school; all had lost study years after the war. None had chronic diseases.

Table 2. *Participant Characteristics*

Characteristic	<i>f</i>	%
Gender		
Male	81	67.5
Female	39	32.5
Age		
14	12	10.0
15	10	8.3
16	41	34.2
17	57	47.5
Living with		
My family	114	95.0
My relatives	6	5.0
Enough funds for basic family needs?		
Sometimes	115	95.8
Rarely	5	4.2
Do you work?		
Yes	120	100.0
No	0	0.0
Wage (JOD/month)		
≤ 100	62	51.7
> 100	58	48.3
Do you go to school?		
Yes	23	19.2
No	97	80.8
Did you lose study years after the war?		
Yes	120	100.0
No	0	0.0
Number of family members		
≤ 8	97	80.8
> 8	23	19.2
Do you have a chronic disease?		
Yes	0	0.0
No	120	100.0

In Table 3, the economic challenges represented by “I usually receive reduced wages for the job I do”, “I take part in paying back debts for my family”, “The poverty of my family led me to look for a job”, and, “The high cost of living forces me to work” were reported at high degrees ranging from 3.72 to 3.78. The other three challenges were reported at medium degrees from 3.24 to 3.52. The degree of overall economic challenge was 3.60, which is in the medium range.

Table 3. *Economic Challenges*

Challenge	<i>M</i>	<i>SD</i>	%	Degree ^a
I usually receive reduced wages for the job I do	3.78	0.927	75.6	High
I take part in paying back debts for my family	3.77	0.526	75.4	High
The poverty of my family led me to look for a job	3.73	0.707	74.6	High
The high cost of living forces me to work	3.72	0.71	74.4	High
The job I do is hazardous	3.52	0.744	70.4	Medium
I work for long hours at a low wage	3.38	0.972	67.6	Medium
I work to meet the basic needs of my family	3.24	1.085	64.8	Medium
Overall economic challenge	3.60	0.455	71.9	Medium

^a High: $M > 3.66$ ($\% > 73.2$), Medium: $2.34 \leq M \leq 3.66$ ($46.8 \leq \% \leq 73.2$), Low: $M < 2.34$ ($\% < 46.8$).

As shown in Table 4, all the educational challenges considered were reported at high degrees, ranging from 3.78 to 4.53, except one, which had a medium degree of 3.48. The degree of overall educational challenge was 4.02, a high value.

Table 4. *Educational Challenges*

Challenge	<i>M</i>	<i>SD</i>	%	Degree ^a
My family seeks to reduce expenses, and thus I had to leave school despite my desire to resume my education	4.53	0.501	90.6	High
Looking for a job is a priority over education	4.43	0.658	88.6	High
I was not able to resume my education due to the high cost	3.88	1.542	77.6	High
Education is not a priority for me currently	3.78	1.111	75.6	High
I was not able to resume my education due to lack of registration documents	3.48	1.461	69.6	Medium
Overall educational challenge	4.02	0.631	80.4	High

^a High: $M > 3.66$ ($\% > 73.2$), Medium: $2.34 \leq M \leq 3.66$ ($46.8 \leq \% \leq 73.2$), Low: $M < 2.34$ ($\% < 46.8$).

Table 5 shows that three of the four health challenges were reported at medium degrees ranging from 2.58 to 2.72. The degree of overall health challenge was 2.53, a medium value.

Table 5. *Health Challenges*

Challenge	<i>M</i>	<i>SD</i>	%	Degree ^a
I was not able to go to the hospital for treatment due to the high cost	2.72	1.396	54.4	Medium
The travel distance prevents me from receiving treatment	2.72	1.561	54.4	Medium
Lack of health documents prevents me from receiving treatment	2.58	1.406	51.6	Medium
I am sick and no one helps me	2.10	1.253	42	Low
Overall health challenge	2.53	1.074	50.7	Medium

^a High: $M > 3.66$ ($\% > 73.2$), Medium: $2.34 \leq M \leq 3.66$ ($46.8 \leq \% \leq 73.2$), Low: $M < 2.34$ ($\% < 46.8$).

The social challenges in Table 6 were all reported at high degrees, from 3.91 to 4.21. The degree of overall social challenge was 4.05, a very high value.

Table 6. *Social Challenges*

Challenge	<i>M</i>	<i>SD</i>	%	Degree ^a
I rarely visit my relatives who live close by	4.21	1.129	84.2	High
It is extremely difficult for me to go to recreational places	4.18	0.673	83.6	High
I cannot hang out with my friends because I work	4.03	1.065	80.6	High
I am not able to make new friendships due to family problems	4.01	1.233	80.2	High
I cannot play with my friends because I live alone	3.98	1.181	79.6	High
I cannot visit my friends due to my health situation	3.91	1.309	78.2	High
Overall social challenge	4.05	0.669	81.1	High

^a High: $M > 3.66$ ($\% > 73.2$), Medium: $2.34 \leq M \leq 3.66$ ($46.8 \leq \% \leq 73.2$), Low: $M < 2.34$ ($\% < 46.8$).

The tabulated *t*-tests shown in Table 7 yielded a statistical significance below .05 for all challenges except the educational one. This indicates significant statistical differences by gender in the economic, social, and health sufferings faced by the participants; more sufferings were reported by females in every case.

Table 7. *Statistical Differences in Challenges Faced, by Gender*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>p</i>
Economic						
Male	81	3.49	0.473			
Female	39	3.82	0.310	-4.071	118	< .001
Educational						
Male	81	3.96	0.563			
Female	39	4.14	0.746	-1.454	118	.149
Health						
Male	81	2.30	1.044			
Female	39	3.01	0.983	-3.556	118	< .001
Social						
Male	81	3.86	0.674			
Female	39	4.45	0.451	-4.981	118	< .001
Overall						
Male	81	3.48	0.425			
Female	39	3.92	0.310	-5.749	118	< .001

In Table 8, the tabulated *t*-tests show a statistical significance below .05 for both the economic and educational forms of challenge. This indicates that statistical significance in these challenges is attributable to the number of family members' variable. For each form of challenge, the degree of suffering was lower in families of more than eight members.

Table 8. *Statistical Differences in Challenges Faced, by Number of Family Members*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>p</i>
Economic						
≤ 8	97	3.66	0.459			
> 8	23	3.34	0.333	3.163	118	.002
Educational						
≤ 8	97	4.12	0.635			
> 8	23	3.57	0.368	3.986	118	.001
Health						
≤ 8	97	2.58	1.037			
> 8	23	2.35	1.224	0.921	118	.359
Social						
≤ 8	97	4.10	0.700			
> 8	23	3.87	0.490	1.468	118	.145
Overall						
≤ 8	97	3.69	0.459			
> 8	23	3.36	0.210	3.367	118	.001

The tabulated *t*-tests in Table 9 yielded a statistical significance below .05 for both the health and social challenges. This indicates that the health and social sufferings of the participants can be attributed to the variable of with whom the child is living. It should also be noted that the degree of suffering appeared to be greater for children who live with their relatives.

Table 9. *Statistical Differences in Challenges Faced, by with whom the Child is Living*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>p</i>
Economic						
My family	114	3.59	0.466			
My relatives	6	3.71	0.000	-0.657	118	.513
Educational						
My family	114	4.01	0.646			
My relatives	6	4.20	0.000	-0.722	118	.472
Health						
My family	114	2.46	1.046			
My relatives	6	4.00	0.000	-3.601	118	< .001
Social						
My family	114	4.00	0.649			
My relatives	6	5.00	0.000	-3.748	118	< .001
Overall						
My family	114	3.59	0.430			
My relatives	6	4.23	0.000	-3.608	118	< .001

The tabulated *t*-tests in Table 10 did not yield a statistical significance below .05 for the economic, educational, and social challenges, but for health, the statistical significance was less than .001. This indicates that statistical differences in the health challenges faced by the refugee children can be attributed to the school attendance variable.

Table 10. *Statistical Differences in Challenges Faced, by School Attendance*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>p</i>
Economic						
Attends	23	3.59	0.580	-0.060	118	.952
Does not attend	97	3.60	0.423			
Educational						
Attends	23	3.92	0.478	-0.816	118	.416
Does not attend	97	4.04	0.662			
Health						
Attends	23	1.71	0.786	-4.414	118	< .001
Does not attend	97	2.73	1.042			
Social						
Attends	23	4.09	0.150	0.271	118	.787
Does not attend	97	4.04	0.741			
Overall						
Attends	23	3.46	0.340	-2.014	118	.046
Does not attend	97	3.66	0.455			

The tabulated *t*-tests in Table 11 show a statistical significance below .05 for all challenges, indicating that statistical differences in these challenges can be attributed to the job income variable. Those with a job income of 100 JOD/month or less experienced greater challenges.

Table 11. *Statistical Differences in Challenges Faced, by Job Income*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>p</i>
Economic						
≤ 100	62	3.85	0.380	7.678	118	< .001
> 100	58	3.33	0.365			
Educational						
≤ 100	62	4.31	0.701	5.935	118	< .001
> 100	58	3.71	0.338			
Health						
≤ 100	62	2.84	0.978	3.405	118	< .001
> 100	58	2.20	1.081			
Social						
≤ 100	62	4.19	0.585	2.334	118	< .001
> 100	58	3.91	0.726			
Overall						
≤ 100	62	3.86	0.387	7.415	118	< .001
> 100	58	3.37	0.342			

Note: Job income is reported in JOD/month.

The tabulated *F*-ratio in Table 12 yielded a statistical significance below .05 for all challenges. This indicates that statistical differences in the health, social, educational, and economic challenges faced by the children can be attributed to the age variable. The challenges were greater for those over 14 years of age in all dimensions except the social, where the suffering was marginally higher in the 15-year-old group.

Table 12. *Statistical Differences in Challenges Faced, by Age*

Form of challenge	<i>n</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>F</i>	<i>p</i>
Economic						
14	12	4.14	0.298			
15	10	3.36	0.376			
16	41	3.69	0.392	3	11.43	< .001
17	57	3.46	0.435			
Total	120	3.60	0.455			
Educational						
14	12	5.00	0.000			
15	10	4.20	0.211			
16	41	3.98	0.645	3	17.059	< .001
17	57	3.81	0.532			
Total	120	4.02	0.631			
Health						
14	12	3.75	0.261			
15	10	2.63	1.449			
16	41	2.44	1.099	3	6.826	< .001
17	57	2.33	0.932			
Total	120	2.53	1.074			
Social						
14	12	4.58	0.261			
15	10	4.67	0.351			
16	41	3.83	0.724	3	8.274	< .001
17	57	3.99	0.613			
Total	120	4.05	0.669			
Overall						
14	12	4.39	0.024			
15	10	3.77	0.527			
16	41	3.57	0.451	3	22.582	< .001
17	57	3.48	0.267			
Total	120	3.62	0.442			

Discussion

As shown in Table 2, the majority (67.5%) of the sample were male. As the data for this study were collected from participants in workplaces, this finding presumably reflects the fact that males seek jobs more than females do. All of the children worked to meet the needs of their

families, but about half (51.7%) earned low incomes (≤ 100 JOD/month) despite the high cost of living in Jordanian society. This reflects the scarcity of available job opportunities and the surplus of job seekers.

The responses collected in Table 3 illustrate the exploitation of the children. This was represented in the low pay they received while working long hours (67.6%) and in not receiving full payment for work performed (75.6%), amongst other violations of their rights.

The findings show that the reason most often given for putting children out to work was to pay back family debts (75.4%), which were related to the high cost of such necessities as rent and medical treatment. The second most common reason given for children being forced to work (74.6%) was the high cost of living. High prices affect every aspect of life even for Jordanians, not just for Syrian refugees in the host communities. Among the Syrian families, however, the struggle for survival has led to new adaptation strategies, such as pulling children out of school (80.8%) and forcing them to get jobs (100%). The findings presented here are in accord with Hassan's (2018) conclusion that the high cost of living, especially rent, was the leading economic challenge faced by families living in the Zarqa governorate. Several other studies noted in the Literature Review, such as those by Zughool (2016), and Faraj (2008), also agree that poverty is a main cause of children having to work. A study conducted by Care International (2014) revealed that the living circumstances of Syrian families were worsening because they had run out of savings.

The main reasons for participants not being in school were the high cost of education, and the perception that education is futile for them (Table 4). Looking for work had priority over education for children in the sample. The results here are in agreement with a study by Valenza and Al Fayed (2016), who concluded that "the largest obstacle which prevents children from going to school is a financial one" (p. 11).

One barrier preventing participants from receiving medical treatment was high cost (Table 5). Medical insurance could help decrease that cost, but lack of official documents makes insurance difficult to obtain. As many studies that have tackled the health situation of Syrian refugees have concluded, the main barrier to acquiring the needed documents is that the Jordanian government has put in place complicated procedures for applicants. In the present study, some participants stated that lack of documents prevented them from receiving health care. These findings are in agreement with Valenza and Al Fayed (2016), who concluded that financial and bureaucratic obstacles lead many refugees to seek health care by unofficial means.

The participants had difficulty maintaining social relations with their relatives and friends (see Table 6). As we have seen, many children are burdened with economic responsibilities within the family. This reduces their opportunities to form and maintain friendships with their peers, and to participate in social interactions with their families. Participants also reported difficulty in accessing recreational facilities. One reason might be the cost, which must be weighed against that

of necessities like food and rent. Hassan (2018) also concluded that social problems are represented by the difficulty of using recreational places.

In order to answer research question five, variance analyses were performed (see Tables 7–12) to show the statistical difference in each form of challenge — economic, educational, health, and social — attributable to each of six variables.

In regard to the gender variable, the reported sufferings of the female participants exceeded those of the males for all four forms of challenge, which might be due to the amount of responsibility Syrian girls are often required to uphold. The patterns of power have begun to change in Syrian refugee families; girls have responded to the pressures of asylum by taking on more responsibilities.

In regard to family size, economic and educational suffering were greater for families of eight members or fewer, perhaps because the fewer the members of the family, the more responsibility each must take on. Additionally, the data showed a statistically significant effect on the health and social challenges of participants living with relatives or acquaintances rather than their own families. These so-called “friendly children” often face exploitation or deprivation.

Participants who did not go to school faced significantly greater health challenges, presumably because those children may be exposed to safety hazards and other unhealthy conditions at work. Significantly higher suffering of all four forms was associated with lower job income (≤ 100 JOD/month). As noted by the researchers, Syrian children are often obliged to accept exploitative wages when their families are in severe poverty, particularly when burdened with debt payments. Job insecurity aggravates the suffering of the children.

With regard to the age variable, in the economic, educational, and health dimensions, the highest reported suffering occurred at 14 years of age. For the social dimension, the suffering was marginally higher in the 15-year-old group. This result is expected, as older teenagers (16 and 17 years) are more likely to work and have income. The findings are in agreement with those of Abu Tarboush (2014), who concluded that the social and psychological impacts on Syrian refugee children diminish with age.

Conclusion

This study aimed to identify the economic, educational, social, and health forms of suffering encountered by Syrian refugee children living in Jordan but not in a refugee camp. The findings reveal that the children’s economic sufferings included low income, their need to accept whatever work was available, and long working hours. Educational challenges included the high cost of schooling, which led most families to push their children to seek paying work rather than an education. In these families, education was no longer a priority. Health challenges included lack of official documents, which made it difficult for the refugees to obtain health insurance, and therefore appropriate medical care, since the families could not bear the high cost of treatment

unaided. The social challenges faced by the children included a lack of opportunities to create friendships and an inability to maintain connections with friends and relatives due to spending most of their time at work.

The economic, educational, social, and health sufferings endured by the Syrian refugee children were obstacles to their ambitions and future. Years spent outside their own homeland had often led to the deterioration of the families' livelihood. The income many families obtained through their children's labor contributed to meeting their commitments, particularly their outstanding debts, whilst in Jordan. Despite following a number of adaptation strategies aimed at decreasing costs, the longer the refugees stayed, the more burdens they were required to bear. The forms of suffering faced by children reflected those of the families, and their suffering would not end until the families received financial support. This was particularly true for families that lacked food security, and those that had mounting debt.

Recommendations

In light of the findings concerning the forms of suffering faced by Syrian refugee children in Jordan who are not living in refugee camps, we present a set of recommendations to alleviate these sufferings:

1. Provide financial support for Syrian refugee families consistent with the increasing cost of living in the hosting country. Such support will be reflected in better lives for the Syrian children.
2. Create job opportunities for heads of families by implementing existing memoranda of agreement with international organizations.
3. Make public education for Syrian refugee children free of charge, particularly in the elementary stages.
4. Provide health insurance for Syrian refugee children, combined with measures to reduce its cost.
5. Put low-cost recreational facilities in locations where Syrians living outside refugee camps congregate.

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