

# Adolescent well-being in Jordan: exploring gendered capabilities, contexts and change strategies

An executive summary of GAGE  
Jordan baseline findings

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# Executive summary

Jordan has a long history of hosting the region's refugees given its location at the crossroads of the Middle East and North Africa (MENA). Of Jordan's approximately 10 million inhabitants, an estimated 1 in 3 is a refugee. While the country is ranked 'high' in terms of human development (UNDP, 2019), Jordan has faced significant economic and social challenges in seeking to absorb its large refugee population. Approximately 85% of the country's registered 660,000 Syrian refugees live below the Jordanian poverty line (UNHCR, 2018), as do about one-third of the 370,000 Palestine refugees who live in refugee camps in Jordan.

The Government of Jordan and the international community are agreed that the country must capitalise on the demographic dividend that this generation of adolescents – the largest the country has yet seen – represents. However, relatively little is known about the disparate groups of young people living in Jordan and how to support their well-being, not just in the short term but so that they can make successful transitions to adulthood. That the experiences of girls and boys differ is well-recognised, due to social norms and laws positioning girls (and adult women) as second-class citizens (OECD, 2019b). However, there has been little exploration of how adolescents' trajectories are shaped by nationality, location, and age. Similarly, while some aspects of adolescents' lives, such as the patterning of school enrolment, are well-documented, other areas, such as psychosocial well-being, have attracted barely any attention at all.

The research findings<sup>1</sup> synthesised here draw on baseline evidence from the Gender and Adolescence: Global Evidence (GAGE) programme – a unique longitudinal mixed-methods research and impact evaluation study of what works to support the development of adolescents' capabilities during the second decade of life (10–19 years) in diverse contexts across the Global South (see Jones et al., 2018). Here, we synthesise our country-level findings from Jordan, highlighting what we have learnt about adolescent girls' and boys' capabilities

across six key domains, before concluding with policy and programming recommendations.

## GAGE framing and methods

GAGE's conceptual framework takes a holistic approach that pays careful attention to the interconnectedness of what we call 'the 3 Cs' – Capabilities, Change strategies and Contexts – to understand what works to support adolescent girls' and boys' development and empowerment, now and in the future. We focus on six capability domains: (1) education and learning; (2) health, nutrition, and sexual and reproductive health; (3) bodily integrity and freedom from violence; (4) psychosocial well-being; (5) voice and agency; and (6) economic empowerment. We recognise that adolescents' capability outcomes are highly dependent on family/household, community, state and global contexts, and that change strategies must work with all actors across each level to create sustainable change.

In Jordan, GAGE's quantitative sample consisted of nearly 4,000 adolescents, equally split between girls and boys, and younger (age 10–12) and older (age 15–17) adolescents. Our sample is spread across three very different contexts – host communities, United Nations (UN) refugee camps, and informal tented settlements (ITSs) – and spans the five governorates which host the largest proportion of Jordan's refugees. We also deliberately over-sampled some groups of especially marginalised young people, including those with disabilities and girls who were married (or had been married). Our qualitative sample, which consisted of 240 adolescents, was purposively selected out of the larger sample, to explore adolescent experiences and perspectives in more depth.

## GAGE findings

GAGE findings highlight diversity in adolescent capability outcomes, driven by nationality and gender. Refugee adolescents tend to be the most vulnerable, though the risks that girls and boys face can be quite different.

<sup>1</sup> Please see the accompanying full report for the reference list at: <https://www.gage.odi.org/publication/adolescent-well-being-in-Jordan-exploring-gendered-capabilities-contexts-and-change-strategies/>.





## Education and learning

Our research found that adolescents' educational aspirations are overall quite high. Approximately 82% of younger survey respondents indicated that they wished to complete at least some secondary school and 70% reported wanting to attend university. Across age groups and genders, Jordanians' aspirations are the highest (93% want secondary, 80% want university) and Palestinians' the lowest (81% want secondary, 69% want university); across all nationalities, girls have higher aspirations than boys (84% versus 80% want secondary, 74% versus 66% want university). Our qualitative work found that many adolescents – even out-of-school girls – aspire to professional careers, though few appear to understand the steps required to reach those goals. It also highlighted that boys, particularly refugee boys, have more limited aspirations, largely because of labour market constraints (e.g. high unemployment) and legal restrictions on the types of occupations they can pursue. A 12-year-old Syrian boy living in an ITS, when asked how he might achieve his goals, explained, *'We won't be able to achieve anything. If we were in Syria, then a person could study, and they would find a job there.'*

Parents' educational aspirations for their adolescent children are also high and largely mirror those of adolescents themselves, though parents are more circumspect given that they better understand the financial and other barriers to secondary and tertiary education. Parental aspirations are also more clearly gendered, with aspirations generally higher for boys than for girls – and poorly linked to pragmatic support. As a mother in an ITS explained, *'I wish them the best education, but I can't help them. Education is expensive in Jordan.'*

Our survey found that adolescents' enrolment in school varies by age, gender, nationality, location and marital status. Younger adolescents are advantaged over their older peers (94% versus 54%), older unmarried girls are advantaged over similarly aged boys (65% versus 54%), Jordanians are advantaged over Palestinians and Syrians (89% versus 86% and 71% respectively), and those in host communities and camps are advantaged over those in ITSs (78% versus 44%). Our qualitative work found that barriers to education – especially at the secondary level – are deeply gendered. For girls, barriers derive from their parents' limited commitment to formal education, concerns about safety, and gender norms on child marriage (only 9% of married girls are enrolled in

school). A mother from Zaatari Camp explained, *'I swear to God, her father married her, made her leave 8th grade ... because of the verbal harassment of her peers.'* For boys, the two biggest barriers to education are the need to find paid work to contribute to family outgoings, and endemic school violence. A 15-year-old Syrian boy living in a host community noted that his parents *'even wanted me to pay rent for the whole house'*. Our qualitative work also highlighted the many physical and social barriers that often prevent adolescents with disabilities accessing and continuing in school, especially those with more severe impairments.

Critically, we found that even where young people are enrolled in school, they are not necessarily learning, largely due to overcrowded classrooms and non-child-centred pedagogies. Across age groups and genders, 55% of Jordanians were able to read a simple story (written at the second-grade level) – compared with 45% of Syrians and only 39% of Palestinians. Similarly, while 52% of Jordanians could perform simple subtraction exercises, only 39% of Palestinians and 37% of Syrians could do so. Across nationalities and age groups, girls outscore boys.

The Government of Jordan, donors and NGOs are heavily invested in scaling up formal education and expanding parallel non-formal learning pathways. Progress has been significant although not uniform, and is at risk due to funding cuts.



## Bodily integrity and freedom from violence

GAGE baseline research found that despite increasing recognition that *'screaming and shouting at the child is not a good solution'* (mother, Azraq camp), age-based violence – at home, at school and in the community – is common in Jordan. Of the adolescents who completed our survey, 49% admitted to having experienced violence at home. We found boys more at risk than girls (52% versus 47%), because *'you must hit boys in order for them to obey'* (Syrian mother, host community). Gender differentials were even more pronounced at school, where 58% of boys and 25% of girls reported having experienced violent discipline in the past year. Reasons given included not knowing *'how to write on the board'* (younger boy, ITS), *'if the uniform was ripped'* (Syrian mother in a host community), and for being late or absent from school when they had to undertake domestic and care-related tasks for their parents. Peer violence is also common, again especially for boys, who

often feel they must demonstrate their masculinity through fighting (46% of boys reported experiencing peer violence compared with 38% of girls). That said, the figure is also high amongst girls, and our qualitative research suggests that high levels of frustration and limited opportunities to access support to discuss their complex psychosocial concerns are important drivers of this behaviour.

Our qualitative work found that most adolescent girls experience sexual harassment. Boys and young men follow girls on the street and lurk outside school buildings waiting for girls to be released from class. As a result of this harassment, girls are not only faced with increasing restrictions on their mobility, to the point that they *'can't even visit our friends during the day'* (older Syrian girl living in Amman), they also reported considerable fear, particularly because they know that they could be blamed for *'inviting'* the abuse. A 15-year-old Syrian girl living in Zarqa reported, *'Our community is unmerciful... If anyone violates any girls, the community thinks that the girl likes to do that, and she wanted this action.'*

Of the 1,010 older adolescent girls (age 15–17) in our sample, 18% – almost exclusively Syrian – were already married, generally to a cousin and rarely through choice. For Syrian girls, child marriage is not only customary (nearly half of Syrian mothers were married as children), but is seen as a way to control girls, and keep them from becoming too *'open-minded'* due to the *'influence of their friends'* (Syrian refugee mother in a host community). For Palestinian and Syrian girls alike, marriage is considered a form of protection. Our qualitative work highlighted that many child marriages entail emotional, physical and sexual abuse (for *'infractions'*, including failure to conceive) and that divorce is an increasingly common outcome. A father in Azraq Camp observed, *'Some Syrians now get married and then get divorced a month or two later. Why? Because they're not mature, he can't handle the responsibility and neither can she.'* Separated and divorced girls confessed to almost total social isolation, due to the stigma of divorce. Child marriage in refugee communities is also powerfully shaped by economic drivers, given that marriage payments are often significantly higher than the income-generating opportunities open to refugees would allow, given tight restrictions on work permits.

Although many actors are involved in supporting adolescents' right to bodily integrity, impacts are generally limited because violence against children is normalised and seen as a private concern, and because NGO-led programming is rarely at scale or sustained.



## Health, nutrition, and sexual and reproductive health

Our baseline research found that most adolescents without disabilities (84%) reported that their health is (very) good (versus only 64% for those with disabilities), although a similar proportion noted that they had experienced a common health symptom – often due to overcrowding and poor sanitation – in the month prior to the survey. In addition, a significant number of adolescents – especially those with disabilities (23%) and boys, given their greater physical mobility – had experienced a serious illness or accident in the past year (17% versus 11% for girls). Boys also emerged as being at significant risk of substance use. Among older adolescents, across nationalities, 34% of boys had ever smoked cigarettes (versus 5% of girls) and 45% had ever smoked a water pipe (20% for girls). Our qualitative work highlighted that peer pressure – and pocket money dispensed by fathers – is driving boys' tobacco use. For girls, we found that culturally driven mobility restrictions almost totally preclude physical exercise. A 16-year-old Syrian girl living in Zaatari camp explained, *'I used to play football... Then they started convincing my mum to change her mind... She made me stop playing.'*

Across nationalities, food insecurity remains a concern – with the average adolescent living in a moderately food insecure household according to the FAO Food Insecurity Experiences Scale (FIES). A full fifth of adolescents living in ITSs and host communities report having been hungry at least once (compared with one-tenth of adolescents in camps, which receive free bread distribution and school feeding). Our qualitative work found diet quality to be especially problematic, with many refugee families subsisting primarily on starches, despite assistance from the international community. A Syrian mother in an ITS explained, *'If there is a coupon [World Food Programme food vouchers], there will be food. If the coupon is finished, there is no food at all. My children eat only boiled potatoes... We only taste the fruit from the coupon and also the meat.'*

For adolescents, household food insecurity is amplified by age-related food preferences – that is, a preference for unhealthy snacks. Due to cultural norms that consider sexuality a taboo topic, we found that while a large majority of older adolescents (85%), especially girls and Jordanians, have a current source of information about puberty, few adolescents had information that was timely. Girls were often not taught about menstruation until after menarche, which many experienced with fear. While mothers (and older sisters

and aunts) do discuss puberty with girls after menarche, we found that boys typically know nothing about puberty other than what they are taught at school or can glean on their own. Fathers regularly refuse to discuss puberty with their sons and mothers are too shy. Adolescents' knowledge of contraception is even more limited. Of our older participants, only 22% – and only 43% of married girls – could identify at least one form of contraception.

The Government of Jordan, international donors and NGOs are working together to meet the healthcare and nutrition needs of Jordan's host and refugee populations. Shifting fiscal space and policy priorities, combined with adolescent developmental priorities and cultural taboos, mean that impacts are highly variable.



## Psychosocial well-being

Our findings regarding adolescents' psychosocial well-being are mixed. On the one hand, mean resilience scores are high (mean of 74.2/84 on the Child and Youth Resilience Measure-28), the average adolescent in our sample does not report emotional distress (mean of 1.99/12 on the General Health Questionnaire-12), and some young people express a high degree of confidence in their ability to *'always resolve my problems'* (16-year-old Syrian girl living in an ITS). On the other hand, nearly one-third of respondents (32%) meet the threshold for experiencing psychological distress on the GHQ-12, suggesting that they have minor psychiatric disorders and may need intervention. Adolescents living in ITSs – where poverty is both more common and deeper, and where gender norms are more rigidly enforced – are especially likely to exhibit distress (40% versus 33% in host communities and 29% in camps), as are older girls compared to older boys (35% versus 32%) and those with disabilities compared to those without (51% versus 30%). Girls in our research noted that married girls *'no longer have relationships with her friends'* (18-year-old Palestinian).

Our survey found that adolescents feel moderately able to discuss life choices (e.g. education, work, marriage, etc.) with their parents, with mothers generally preferred over fathers, younger adolescents more comfortable discussing life choices with their parents than older adolescents, and older girls more so than older boys. Across nationalities, Syrians had less close relationships with both mothers and fathers than did Jordanians and Palestinians, with those living in ITSs having the most constrained relationships. This was highlighted by a 16-year-old out-of-school girl living in an ITS who explained why her relationship with her father

is exceptional: *'My father trusts me, unlike other families ... He advises me, but he has never beaten me or prevented me from doing anything.'* Syrian parents observed that their own higher levels of trauma had left them with fewer emotional resources with which to help their children.

Most adolescents (71%) in our sample have a trusted friend. Some groups, however, stand out as being isolated. These include: married girls, who are 17% less likely than their unmarried peers to have a friend (due to their confinement to home and high levels of surveillance by husbands and in-laws); Palestinians, who are 16% less likely to have a friend than Jordanians and Syrians; and adolescents with disabilities, who are 10% less likely to have a friend than those without disabilities (due to their exclusion from school and from child-focused programming). Fathers in a focus group discussion in Gaza Camp, where participants repeatedly highlighted the absence of adolescent-friendly recreational facilities, noted that adolescents are *'lonely... because of depression and frustration'*. Adolescents' access to team sports, which build social connections as well as confidence and healthy bodies, also varies. Older adolescents (29% compared with 46% for younger adolescents), and most especially older girls (17% versus 43% for older boys), are most likely to be excluded. Our qualitative work highlighted that the downside of boys' greater engagement with peers is peer pressure. Whereas parents worry about what girls might do, the greater freedoms allowed to boys often leave them more prone to engaging in harmful pursuits such as substance use. As one 14-year-old boy from Zaatari camp said, *'friends taught me how to smoke'*.

NGO programming around psychosocial well-being is diverse and widespread, but we found limited evidence of sustained, at-scale change strategies specifically aimed at enhancing adolescent psychosocial well-being, with the important exception of UNICEF's Makani programme.



## Voice and agency

Our baseline research found that girls have less physical mobility than boys and that this gender gap grows over the course of adolescence, as boys are steadily granted more freedom and girls see it taken away. Of older adolescents, girls are 38% less likely to leave home daily than older boys (55% versus 88%). The gender gap is especially pronounced for refugees, and skyrockets when girls marry: only 28% of married girls leave home daily. Our qualitative work found that for some older girls, isolation is nearly complete. A Palestinian mother reported, *'I don't*

*allow my daughters to leave the home. They may look from the door for 5 minutes and then I ask them to close it.'*

Adolescents living in Jordan have relatively good digital connectivity. Overall, 35% reported having a mobile phone for their own use and 51% reported having ever used the internet. Differential access was primarily shaped by age and by gender, with younger adolescents disadvantaged compared to their older peers and girls disadvantaged compared to boys (43% less likely to have a phone and 17% less likely to have been online). Our qualitative work highlighted that phone ownership, while considered by adolescents to be highly desirable, can be risky for girls. A now divorced 18-year-old Syrian girl living in a host community explained, *'Once my husband's nephew was showing me some photos on his phone ... My husband ... thought I used the mobile phone to call guys. So he beat me.'*

Despite the region's strong generational hierarchies, adolescents who completed our survey reported a medium level of decision-making within the household (a mean of 5 on a scale that ranged 0–8). Our qualitative work explored this somewhat surprising finding. It highlighted that adolescents, particularly Syrian adolescents, generally accept parental controls – with even older boys admitting, *'I only befriend people that my parents know'* (15-year-old Syrian boy). Moreover, it found that the decisions that adolescents are least likely to have a say in are not those related to day-to-day life, but to more potentially life-changing decisions that surround school-leaving for work (for boys) and child marriage (for girls). A Palestinian refugee mother of an 11-year-old girl living in Gaza camp explained that her husband will determine her daughter's husband: *'If he likes the person, he will agree to marry her ... Even if she doesn't agree, he will not listen to her opinion.'* Similarly, adolescents' access to meaningful voice and agency in school and the broader community was negligible.

More than two-thirds (70%) of adolescents in our sample were able to identify a role model who inspires them, though older adolescents (especially older boys) were less likely to be able to do so than younger adolescents. Adolescent role models, while gendered, were often chosen not for social status, but because they are 'good' people. Notably, our qualitative work suggests that one reason why older girls are more likely to have a role model than older boys may be because they are more likely to identify their own relatives as role models.

We found no evidence of sustained, at-scale efforts to support adolescents' access to voice and agency outside UNICEF's Makani programme and Social Innovation Labs.



## Economic empowerment

As was the case with adolescents' educational aspirations, we found that occupational aspirations are high but often poorly tethered to reality. Nearly three-quarters of a sub-sample of adolescent participants indicated that they aspired to have professional careers. Girls' aspirations were particularly high (and likely unrealistic), given that Jordan's female labour force participation rate is among the lowest in the world. Older boys – many of whom were already contributing to household income and well understood the forces shaping the labour market – were more guarded. While some aspired to become doctors or teachers, others, most often refugees, expressed interest in car mechanics or reported that whole career pathways were closed to them due to legal restrictions and costs.

Of the young people in our sample, only a few – all refugee girls – had ever participated in a skills-training course. Where previous research has found that Jordanian adolescents are simply not interested in such programmes, our research suggests that refugee adolescents are unable to access them due to high real and opportunity costs. A Makani facilitator in an ITS (Mateen) noted, *'If there will be training in carpentry or a craft, you will find more than half of people in the camp come to you because of that'.*

Driven by high poverty rates and social norms that position boys as economic providers, nearly two-thirds of the older boys in our research had worked for pay in the past year. Their work was piecemeal – occupying an average of 21 hours over the past week – and very poorly paid. Syrian boys (66%) were unsurprisingly more likely to have worked than their Jordanian (53%) and Palestinian (54%) peers. They also tended to occupy the lowest occupational rungs (e.g. picking vegetables) and *'face all kinds of harassment'* (Makani facilitator) from those who believe that Syrians are responsible for driving up Jordan's unemployment rate. While girls in host communities (9%) and camps (7%) are very unlikely to have worked for pay in the past year, nearly half (46%) of those in ITSs had done so. Our qualitative work highlighted that this is due to deeper poverty in ITSs, and the fact that girls can work alongside their parents, which protects their reputation.

There is a wide array of social protection programming being implemented in Jordan. However, while food vouchers and cash transfers are improving food security, they are not sufficiently age- and gender-tailored to meet adolescents' broader needs. Gaps have become acute as budgets, especially for UNICEF's cash transfer (Hajati), have been slashed. Adolescents with disabilities are left



particularly vulnerable, given that programmes take no account of their different needs and the often higher costs incurred by their families in caring for them.

We found no evidence of effective, at-scale change strategies aimed specifically at economically empowering adolescents.

## Policy and programming recommendations

The transition from adolescence to adulthood involves opportunities as well as risks. Our research suggests that the international community, in cooperation with the Government of Jordan, could take advantage of the opportunities by investing in the following age- and gender-sensitive policies and programmes to support adolescents' well-being now and in the future.

### Expand access to quality education by:

- increasing the number of resourced, adapted classrooms and committed teachers trained in child-friendly pedagogies;
- providing transportation (especially for adolescents living in ITSs), flexible hours, and catch-up programmes;
- establishing schools as no-violence zones;
- working with families to help them overcome barriers (cultural, financial, health, etc.) to schooling; and
- stepping up efforts to provide skills training to out-of-school adolescents.

### Tackle age- and gender-based violence by:

- working with schools to adopt child-friendly pedagogies, positive disciplinary approaches (especially in boys' schools), and security measures outside of school buildings (especially girls' schools);
- working with parents to build parenting skills and raise awareness about the costs of child marriage and consanguineous marriage;
- working with young couples to shift gender norms and improve communication;
- working with boys to develop positive masculinities to reduce bullying and sexual and gender-based violence and working with girls to grow independent voices; and
- investing in support services for survivors of violence.

### Improve adolescent health and nutrition by:

- providing free healthcare to those with disabilities;
- targeting adolescents and parents with school- and community-based health and nutrition education

classes that cover adolescent development (including menstruation and puberty) as well as healthy life choices (including around substance use);

- expanding access to physical recreation (especially for girls); and
- educating parents and young couples about the risks of child marriage and consanguineous marriage.

### Support adolescents' psychosocial well-being by:

- expanding school- and community-based opportunities for them to spend time with one another, and develop confidence in themselves, in age-tailored spaces that are run by caring adults (especially for girls, ITSs and adolescents with disabilities);
- scaling up parenting classes and parent support groups;
- providing tailored continuing education classes to teachers and other adolescent service providers; and
- promoting national efforts to expand psychosocial support services.

### Develop adolescents' voice and agency by:

- providing young people (especially girls, those with disabilities and those in ITSs) with more and improved opportunities to meaningfully participate in classrooms, through the adoption of child-friendly pedagogies;
- scaling up safe spaces and volunteer initiatives in the community;
- providing parenting classes that encourage parents to critically examine the age- and gender-related norms that disempower young people; and
- exposing adolescents to role models and mentors who can help them understand how to identify – and maximise – opportunities.

### Support adolescents' economic empowerment by:

- ensuring that social protection programmes take account of adolescents' differing needs according to age, gender and disability, and incentivising parents to eschew child labour and child marriage;
- providing adolescents with opportunities to develop hard and soft skills they need for decent employment; and
- guiding adolescents, to reach their educational and occupational aspirations – including through accessing financial education and savings opportunities, so that they can build resources to invest in their futures.



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## **About GAGE**

Gender and Adolescence: Global Evidence (GAGE) is a nine-year longitudinal research programme generating evidence on what works to transform the lives of adolescent girls in the Global South. Visit [www.gage.odi.org.uk](http://www.gage.odi.org.uk) for more information.

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