
Health access and utilization survey among refugees in Egypt



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➤ Introduction

UNHCR conducts HAUS to assess and monitor refugee access to various healthcare services and to identify barriers encountered.

This cross sectional survey was conducted to monitor access to and utilization of key health services among refugees living in Egypt.

➤ Methodology

14 surveyors and 1 supervisors underwent 1 day of training, including role play to familiarize on using the survey tool. The survey was carried out over the period between 3rd of December until the 13th of December.

Survey households were selected using stratified systematic random sampling from a register of refugee households that had a listed telephone number.

The head of household, or an adult above 18 who could respond on his or her behalf, was interviewed by telephone regarding key indicators of interest.

Survey Households nationalities selected for this survey

Syria/ Eritrea/ Ethiopia / Iraq / Somalia /South Sudan / Yemen / Sudan / Afghanistan & Others.

Data were entered using computers and analyzed using Microsoft Excel.

The extracted data were segregated into 4 sections, All Nationalities, Syrian, Sudanese and Other Nationalities for the below categories included in the survey.

1- Sample characteristics.

2- Child health.

2.1 Child Immunizations (Measles or MMR injection)

2.2 Child Immunizations (Polio vaccine)

2.3 Nutrition Module - Children under 5 years old + IYCF - Children under 23 months old.

3- Antenatal Care & Reproductive Health.

4- Chronic Diseases & Impairment:

4.1 Chronic Diseases.

4.2 Impairment.

5- Access and Knowledge of Health Services:

5.1 Access to Health Services.

5.2 Access to Health Services and Health Seeking Behavior.

5.3 Hospitalizations during the last year.

6- Knowledge of Health Services.

Limitations

All the results gathered during the survey, are based on self-reporting from the survey participants.

Validation of the responses such as checking health facilities' records is not within the scope of this survey.

This survey is made by phone, questions and concepts might be misunderstood by the respondents.

Response rates

➤ Overall

99% (3,542) of the 3,581 sample size received were contacted to participate in the study.

38% (1,354) of the contacted households answered, while **62%** did not answer or did not fulfil criteria.

97% (1,316) of the households who answered accepted to participate, while **2%** (26) refused, and **1%** (12) were under 18 years old.

Out of the **2%** who refused to participate, **81%** were not Interested, **15%** was due to trust issues, **4%** mentioned that the survey is too long.

➤ Per country of origin

- **Iraqi**: **100%** contacted, **33%** answered, **67%** No answer + Wrong number, out of the answered **95%** Completed survey, **5%** Rejected and **0%** were under 18 years old.
- **Syrian**: **97%** contacted, **39%** answered, **61%** No answer + Wrong number, out of the answered **96%** Completed survey, **4%** Rejected and **0%** were under 18 years old.
- **Yemeni**: **100%** contacted, **43%** answered, **57%** No answer + Wrong number, out of the answered **92%** Completed survey, **4%** Rejected and **3%** were under 18 years old.
- **Sudanese**: **100%** contacted, **36%** answered, **64%** No answer + Wrong number, out of the answered **100%** Completed survey, **0%** Rejected and **0%** were under 18 years old.
- **South Sudanese** : **100%** contacted, **37%** answered, **63%** No answer + Wrong number, out of the answered **95%** Completed survey, **4%** Rejected and **1%** were under 18 years old.
- **Eritrean**: **100%** contacted, **46%** answered, **54%** No answer + Wrong number, out of the answered **94%** Completed survey, **0%** Rejected and **6%** were under 18 years old.
- **Ethiopian**: **100%** contacted, **37%** answered, **63%** No answer + Wrong number, out of the answered **98%** Completed survey, **0%** Rejected and **2%** were under 18 years old.
- **Somali**: **100%** contacted, **44%** answered, **56%** No answer + Wrong number, out of the answered **100%** Completed survey, **0%** Rejected and **0%** were under 18 years old.
- **Other nationalities**: **100%** contacted, **35%** answered, **65%** No answer + Wrong number, out of the answered **82%** Completed survey, **9%** Rejected and **9%** were under 18 years old.

Context

In 2023, the refugee population underwent a radical demographic change due to the large influx of persons seeking international protection from the conflict in Sudan that erupted in mid-April. At the end of December 2022, the number of persons registered with UNHCR was 288,524.

At the end of December 2023, the corresponding figure had risen to 472,800.

Most of the increase were new arrivals from Sudan and the country overtook Syria as the most common country of origin among registered refugees and asylum seekers.

In this report both the Syrian and Sudanese populations are analyzed separately. However, the sample size did not allow for separate analysis between newly arrived Sudanese and those who arrived before the onset of the conflict.

Demographics

At the time of the survey Syrians and Sudanese each constituted 37% percent of the population which is reflected in the sample.

Among the Sudanese 58% of respondents reported that they had arrived during the year preceding the survey reflecting the large influx after the onset of conflict in the country.

In the overall population, unemployment of heads of households had risen from 58% in 2022 to 62% in 2023, Sudanese being the group reporting the highest unemployment of 74% (compared with 47% among Syrians).

Child health

There is a worrying reduction in vaccine coverage. In 2022, 88% and 89% of all children between 9 months and 5 years of age reported having received measles and polio vaccinations respectively. In 2023 the figures had fallen to 80% and 86%.

The influx of new refugees from Sudan is believed to have largely contributed to this overall deterioration in vaccination coverage; in the Sudanese population the figures for 2023 were 72% and 80% respectively. However, a reduction could also be seen in the Syrian population in which the figures fell from 89% and 93% to 84% and 91% respectively. In both the Sudanese and Syrian groups, the most commonly reported reason for not vaccinating their children was lack of information, even though in the Sudanese group an almost equally reported reason was lack of time.

The proportion of children under five for which it was reported growth- and/or feeding difficulties during the month preceding the survey, was 15% in 2023 compared with 19% in 2022. The indicator growth/feeding difficulties does not equal malnutrition, but in a situation in which food security is decreasing this is an indicator to follow closely and it gives some reassurance that the proportion is not increasing.

Reproductive health

In 2023 66% of women with a child 2 years or younger reported getting ante-natal care (ANC) during their pregnancy. This is a reduction from the 73% that was reported in 2022. The increase in the proportion of Sudanese compared to Syrians has probably contributed to the reduction since only 58% of Syrians reported getting ANC. There was however also a significant reduction among the Syrian population that reported getting ANC during pregnancy with 81% in 2023 compared to 90% in 2022. For Syrians, the predominant reason was not affording the fees, while for Sudanese and other nationalities, lack of information reached similar levels of importance. The impact of fees among Syrians is probably related to their preference for getting ANC from private providers while Sudanese and other nationalities to a higher degree rely on public facilities.

A higher percentage reported having delivered at home; 7% in 2023 compared with 3% in 2022. This is clearly related to the Sudanese population, since The Syrian figure remains unchanged at 1% while in the Sudanese population 13% reported having delivered at home.

The percentage of women delivering through planned cesarean section is 30% which is a reduction from 34% in 2022. It is still very high by international comparison and a reflection of the Egyptian overall high cesarean rate. The Syrians have the highest reported percentage of planned c-section: 57% compared to 20% among Sudanese and 16% among other nationalities.

Since the data on ANC and deliveries concern a two-year period, much of what the Sudanese group reported will reflect the situation in Sudan as well as in Egypt since a large group just arrived and went through pregnancy and delivery in their country of origin.

Hopefully, we will see an increased proportion of Sudanese attending ANC and delivering in health facilities as they get access to Egyptian health care services.

Chronic diseases

There is no great difference between the figures reported in 2022 and 2023.

In 2022 18% of surveyed individuals reported having a chronic disease while in 2022 the corresponding figure was 20%. In 2023 69% reported having accessed treatment for their disease during the 3 months preceding the survey, while in 2022 the figure was 67%.

There is however a significant difference between the different refugee groups. Among Syrians, access to chronic care increased a little during 2023 when 78% reported receiving it compared to 74% in 2022. The corresponding figures in 2023 were for Sudanese 62% and for other nationalities 63%.

There is also a difference in where the services are obtained. 34% of Sudanese reported going straight to the pharmacy rather than to a health facility compared with 16% of Syrians and 18% among other nationalities.

In all groups, the leading two reported chronic diseases are Hypertension and Diabetes.

Summary, Analysis, And Trends

Access to care

In 2022, 21% of surveyed individuals reported needing healthcare (excluding chronic diseases) during the 3 months preceding the survey and 83% were able to receive the needed service at the first point of care. In 2023, the corresponding figures were 18% and 77%. Hence a slight decrease in reported access to care was recorded. The decrease is again attributed to the increase of the Sudanese population since in 2023 Syrians reported accessing the needed services at the first point of care while 68% of Sudanese and 79% of other nationalities reported the same. For all populations, not affording the fees was the main barrier to access.

Households reported increased costs for health care. For those households that had sought healthcare during the month preceding the survey, the median expenditure in 2023 was 1000 EGP compared with 800 EGP in 2022. The two expenditure posts that had increased were medication and diagnostic tests which corresponds to the expected effects of a weakened Egyptian currency.

There is a change in how households get money to pay for services; in 2023, 52% rely on wages, while in 2022 63% did the same. There is a corresponding increase in reliance on community participation that contributed to 19% of the households' expenditure in 2023 while in 2022 the figure was 10%. The level of borrowing does not seem to have significantly increased, going from 27% to 28% which is reassuring.

Hospitalizations

The proportion reporting to have been hospitalized was in 2023 5% just as in 2022. However, while in 2022, 60% of hospitalizations were due to emergencies and 40% to elective procedures, the figures in 2023 were 72% and 28% respectively.

This indicates that access to hospital care might have decreased and to a higher extent only considered when very urgent. The percentage of persons reporting paying for hospital care increased from 71% to 75% and median cost of hospitalization increased from 2400 EGP to 3000 EGP.

Knowledge

There is a general decrease in knowledge about available services. In 2022, 63% of households knew that child vaccinations can be obtained for free in public facilities. In 2023, the figure was 44%.

In 2022, 60% of households knew that basic health services are available in public health facilities for refugees and asylum seekers on par with Egyptian citizens. In 2023, the figure was 44%. In 2022, roughly half of the households knew about the UNHCR NCD- and hospitalization programs, while in 2023, the figure had gone down to 36%.

This decrease can definitely be attributed to the newly arrived Sudanese that have not yet been reached by the same level of information as the refugee groups that have been here for some time. To find ways to disseminate information to this group is a priority for the health sector for 2024.

1- Sample characteristics

1- Household Members

- **1,316** households with **5,214** household members were surveyed, including **489 Syrian** households with **1,939** household members, **491 Sudanese** households with **2,009** household members and **336 Other Nationalities** households with **1,266** household members.
- **37%** of surveyed household heads were Syrian, **37%** Sudanese, **9%** South Sudanese, **7%** Eritreans, **4%** Ethiopians, **2%** Yemenis, **2%** Somalis, **1%** Iraqi, and **1%** Other.
- **52%** of the household heads that conducted the survey were males and **48%** were females.
- **49%** of the household members (including household heads) were males and **51%** were females.
- **55%** of the household heads were married, **32%** were never married, **8%** were divorced or separated, and **4%** widowed.
- **50%** of the household members age 12 years and above, were never married, **42%** were married, **4%** were divorced or separated, and **3%** were widowed. **0.3%** between the age 12 & 18 years old reported being married. **40%** of these were boys and **60%** girls.
- **9%** of household members were under 5 years old, **26%** were between 5 and 18 years old, and **65%** 18 years old and above.
- **66%** of the household heads can read in any language, of which **88%** can read and write in Arabic and **28%** in English. **34%** can neither read nor write in any language.
- **22%** of household heads had tertiary level of education (Bachelor, Master, PhD), **28%** had secondary level, **21%** middle school level, **18%** were in primary level of education, **3%** vocational training and **7%** with no formal education. **1%** did not know.
- **24%** of the household members above 18 years of age had tertiary level of education (Bachelor, Master, PhD), **25%** secondary level, **20%** middle school level, **16%** primary level of education, **3%** vocational training and **8%** with no formal education. **4%** did not know.
- **38%** of household heads are working, whereof **88%** wage-employed and **12%** self-employed.
- **27%** of household heads surveyed arrived in Egypt in 2023, **7%** in 2022, **9%** in 2021, **5%** in 2020, **6%** in 2019, **5%** in 2018, **8%** in 2017, **8%** in 2016, **3%** in 2015, **2%** in 2014, **11%** in 2013, **6%** in 2012, **2%** in 2011, and **1%** before 2010.
- The governorates in which most reported residing were Giza (**41%**), Cairo (**35%**), Qalyubia and Alexandria (**7%** each).
- The most common districts of residence in Giza were Faisal (**29%**), 6th October (**23%**) and Imbaba and Ard El Lewa (**10%** each). In Cairo, the corresponding districts were Ain Shams (**25%**), Maadi (**21%**), and East Nasr City (**13%**).
- The average household size was **4.0** persons. **1%** of households consisted of **10** persons, **2%** of **9**, **3%** of **8**, **7%** of **7**, **10%** of **6**, **15%** of **5**, **17%** of **4**, **15%** of **3**, **11%** of **2** and **19%** of only **1** person.

1- Sample characteristics

All Nationalities

Response

1,354

Households contacted and asked to participate in the study

98%

Of responding households accepted participation in the study

2%

Refused or were too young for study participation

62%

Household heads were unemployed

Sample

1316

Households surveyed

5,214

Household members in surveyed households

4.0

The average number of members per household

48%

Household heads are female

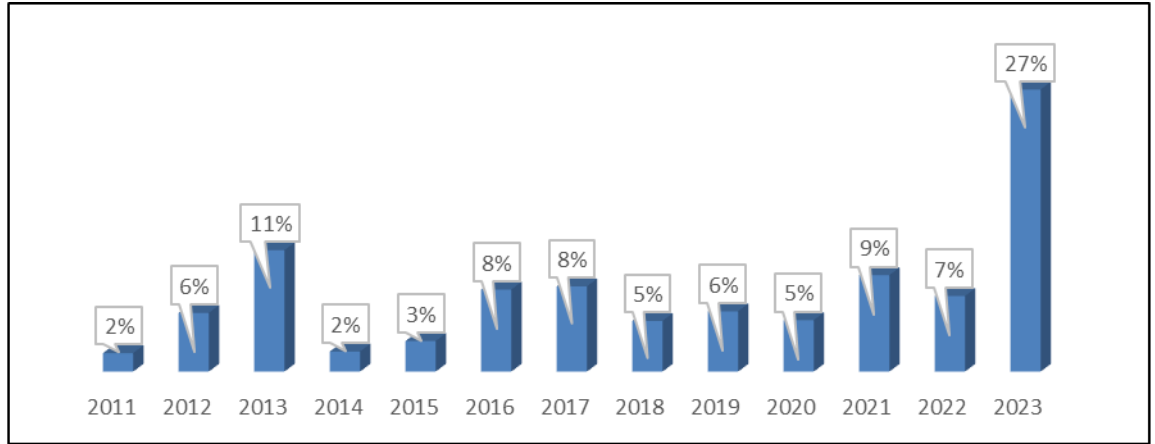
9%

Household Members aged <5 years

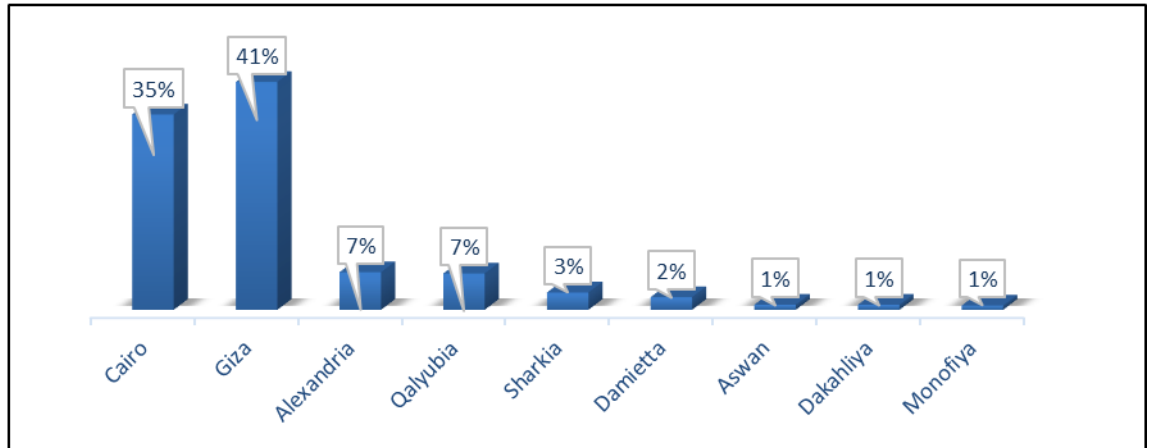
26%

Household members aged from 5 to 17

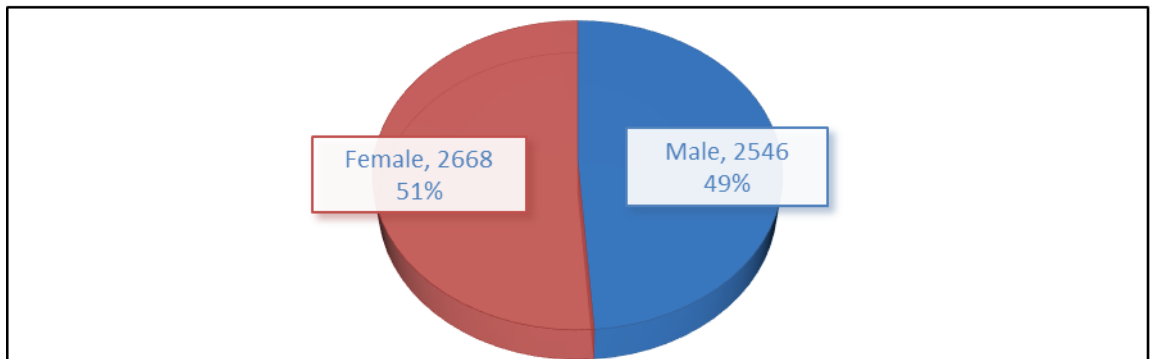
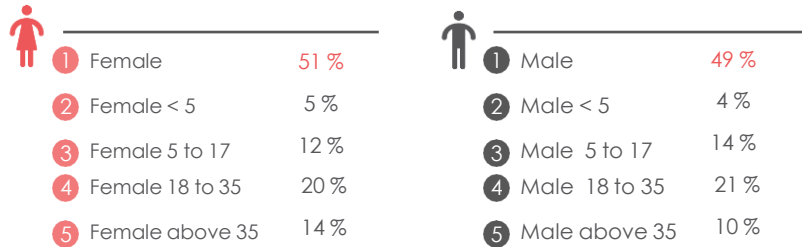
1- Year of arrival to Egypt, by Household (n: 1316)



2- Distribution of household by governorate (n: 1316)



3- Age and sex distribution of Household Members (n: 5214)



1- Sample characteristics

Syrian

Response

508

Households contacted and asked to participate in the study

96%

Of responding households accepted participation in the study

4%

Refused or were too young for study participation

47%

Household heads were unemployed

Sample

489

Households surveyed

1,939

Household members in surveyed households

4.0

The average number of members per household

32%

Household heads are female

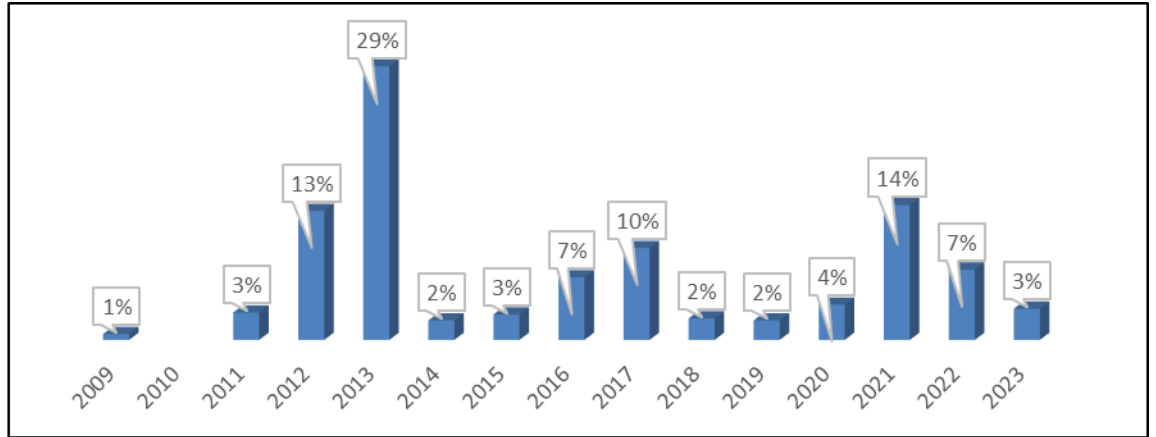
8%

Household members aged <5 years

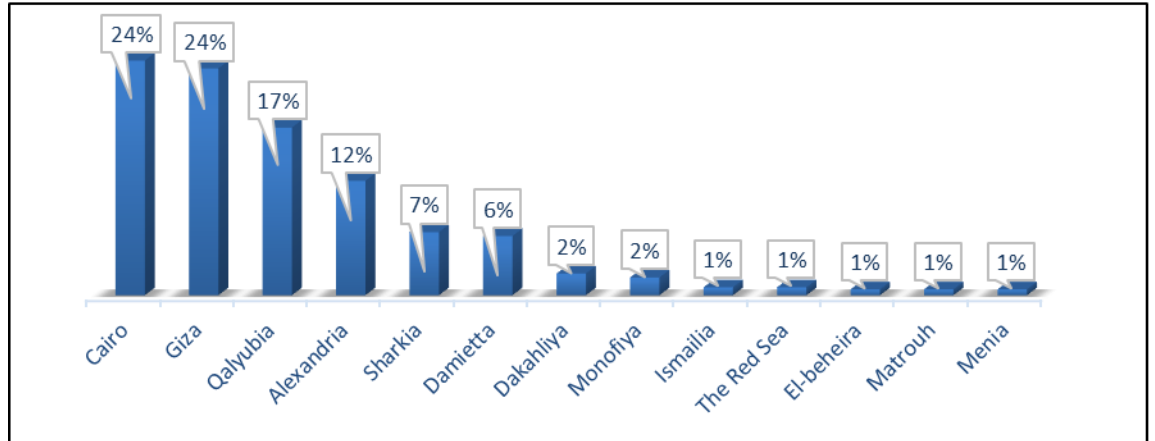
28%

Household members aged from 5 to 17

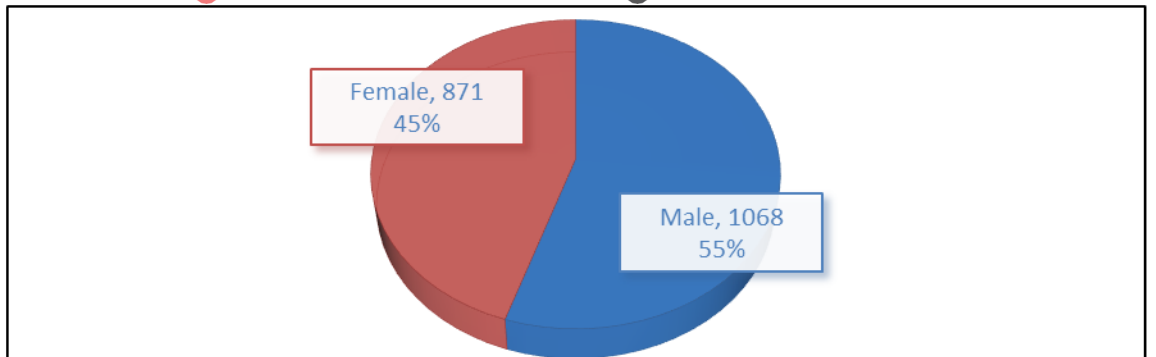
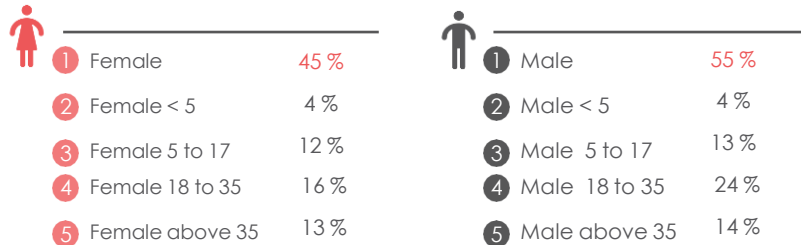
1- Year of arrival to Egypt, by Household (n: 489)



2- Distribution of household by governorate (n: 489)



3- Age and sex distribution of Household Members (n: 1939)



1- Sample characteristics

Sudanese

Response

492

Households contacted and asked to participate in the study

99.7%

Of responding households accepted participation in the study

0.2%

Refused or were too young for study participation

74%

Household heads were unemployed

Sample

491

Households surveyed

2,009

Household members in surveyed households

4.1

The average number of members per household

59%

Household heads are female

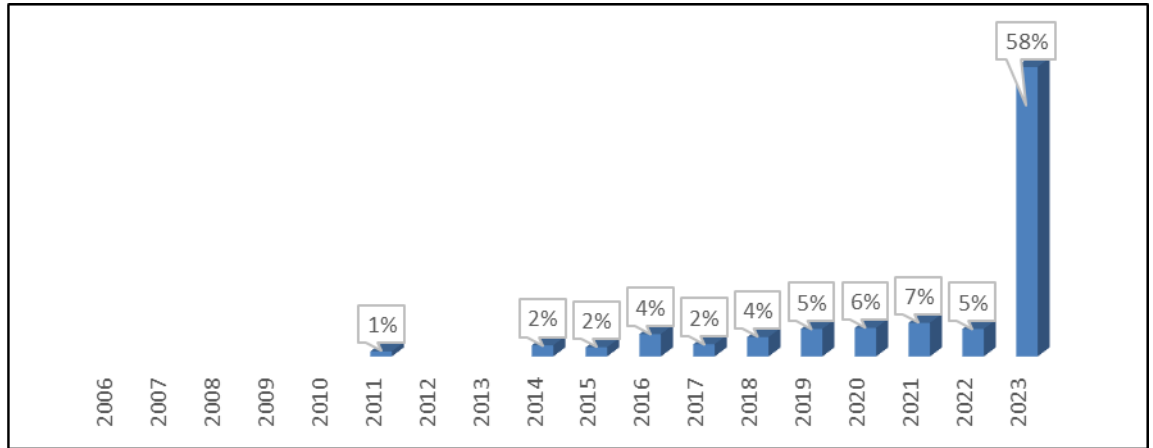
10%

Household members aged <5 years

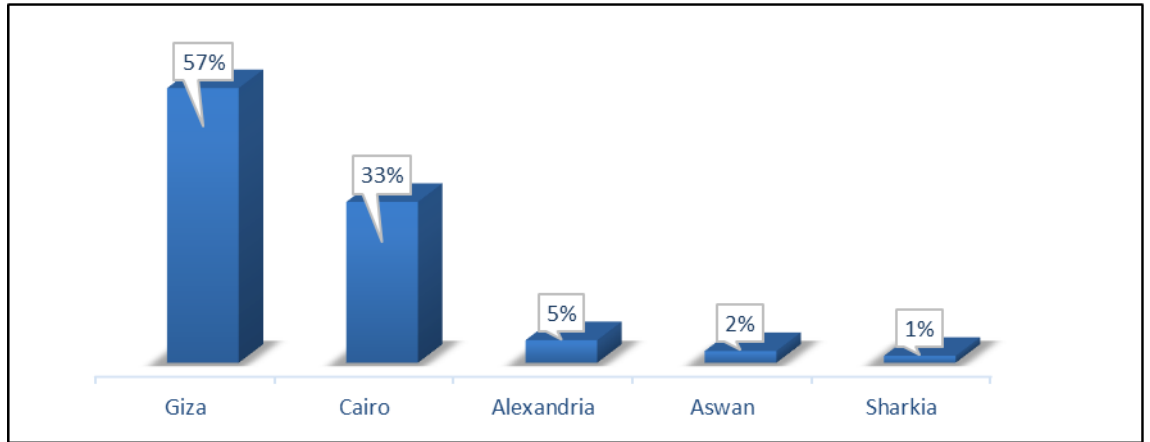
32%

Household members aged from 5 to 17

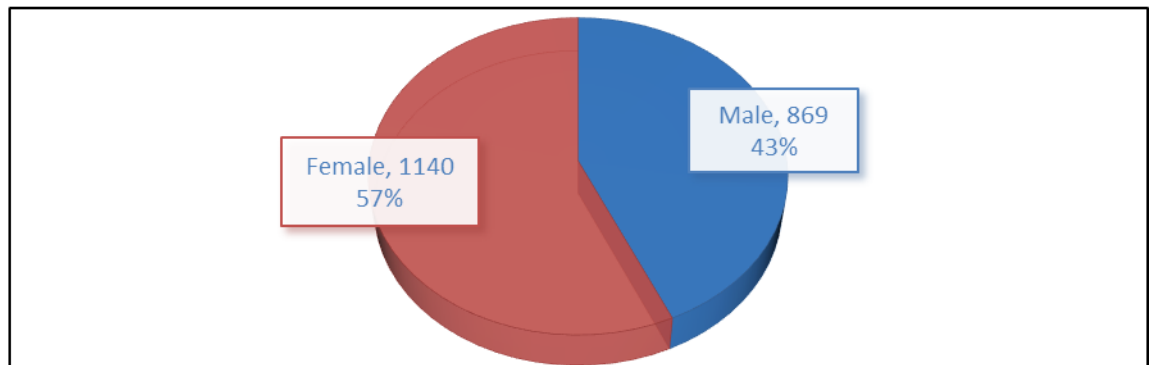
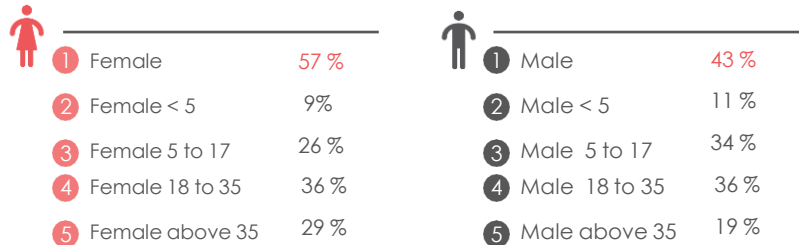
1- Year of arrival to Egypt, by Household (n: 491)



2- Distribution of household by governorate (n: 491)



3- Age and sex distribution of Household Members (n: 2009)



1- Sample characteristics

Other Nationalities

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

Response

354

Households contacted and asked to participate in the study

97%

Of responding households accepted participation in the study

3%

Refused or were too young for study participation

67%

Household heads were unemployed

Sample

336

Households surveyed

1,266

Household members in surveyed households

3.8

The average number of members per household

56%

Household heads are female

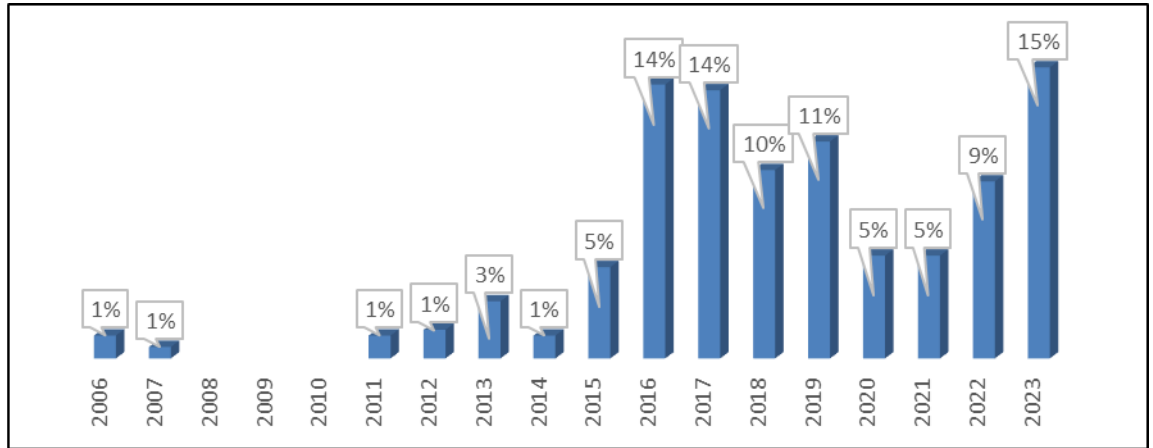
9%

Household members aged <5 years

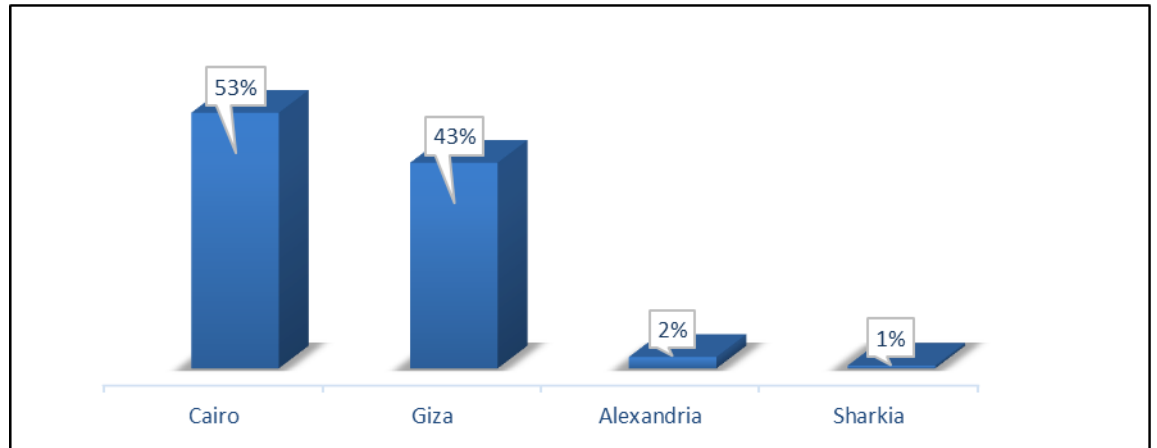
26%

Household members aged from 5 to 17

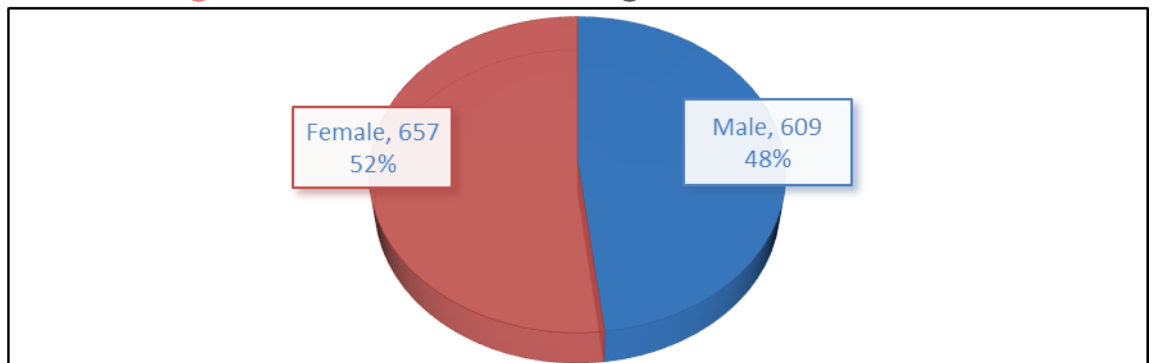
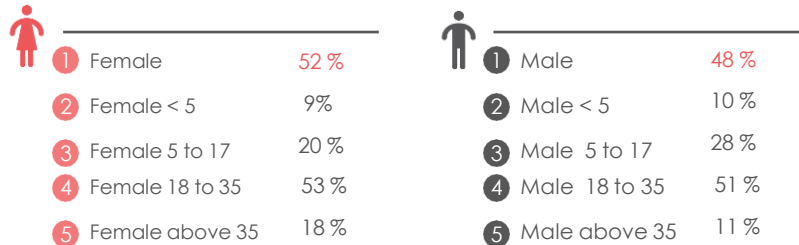
1- Year of arrival to Egypt, by Household (n: 336)



2- Distribution of household by governorate (n: 336)



3- Age and sex distribution of Household Members (n: 1266)



2- Child health

2.1- Child Immunizations Children > 8 months and < 5 years of age. (Measles or MMR injection)

- Households with children < 5 years reported that they had information about immunization schedules for **80%** of the children between 9 months and 5 years of age, while **20%** did not have the information.
- **78%** of the surveyed children > 8 months and < 5 years have an immunization card, **19%** did not have and **3%** did not answer.
- Measles or MMR vaccination coverage among eligible children > 8 months and < 5 years was **80%**, **11%** were not vaccinated and **9%** did not know or answer.
- Among those received the vaccine, the majority receiving it in a Public health center (**80%**), while **15%** received it before arrival, **2%** at a Mobile vaccination team and Private health center, and **1%** did not answer .
- The main reasons for Measles or MMR non-vaccination of eligible children was not knowing where to go for the vaccination (**39%**), No time cause of work/ care for children (**33%**), No information about immunization schedules (**15%**), Service is not available (**9%**), Couldn't afford service fees (**7%**), Service provider refused to provide me with service (**4%**), and Too far/ transportation issue or due to illness (**2%**).
- For **3%** of the children that had received measles or MMR vaccine, it was reported difficulties to obtain the vaccine. As reasons were mentioned rude staff, Did not know where to go for vaccines (**22%** each), could not afford transport and Long waiting periods (**11%** each).

2.2- Child Immunizations Children under 5 years old (Polio Vaccine)

- Polio vaccination coverage among eligible > 8 months and < 5 years children was **86%**, **7%** were not vaccinated and **8%** did not know or answer.
- Among those received the vaccine, the majority receiving it in a Public health center (**76%**), Before arrival in (Host Country Name) (**15%**), Mobile vaccination team (**6%**), and Private health center (**6%**).
- The main reasons for Polio non-vaccination of eligible children was No information about immunization schedules (**29%**), Didn't know where to go (**25%**), No time as I had to work/ care for children (**18%**), Couldn't afford service fees (**14%**), Service is not available (**11%**), Service provider refused to provide me with service or Too far/ transportation issue (**7%**), and due to illness (**4%**).
- For **3%** of the children that had received the Polio vaccination , it was reported difficulties to obtain the vaccine. As reasons were mentioned, they Did not know where to go for vaccines (**27%**), Long waiting periods and Staff was rude (**18% each**), and due to illness (**9%**).

2.1- Child Immunizations - (Measles or MMR injection)

All Nationalities (Total Surveyed 407)

80%

Household members under 5 with information on the immunization schedule

78%

Have an immunization card

80%

Children had received measles/MMR vaccine

80%

Of children that had received a measles or MMR vaccine, received it at a public health center

15%

Of children that had received a measles or MMR vaccine, received it before arrival to Egypt

39%

Among those who did not receive the vaccine the reason was that they didn't know where to go

33%

Among those who did not receive the vaccine the reason was No time as I had to work/ care for children

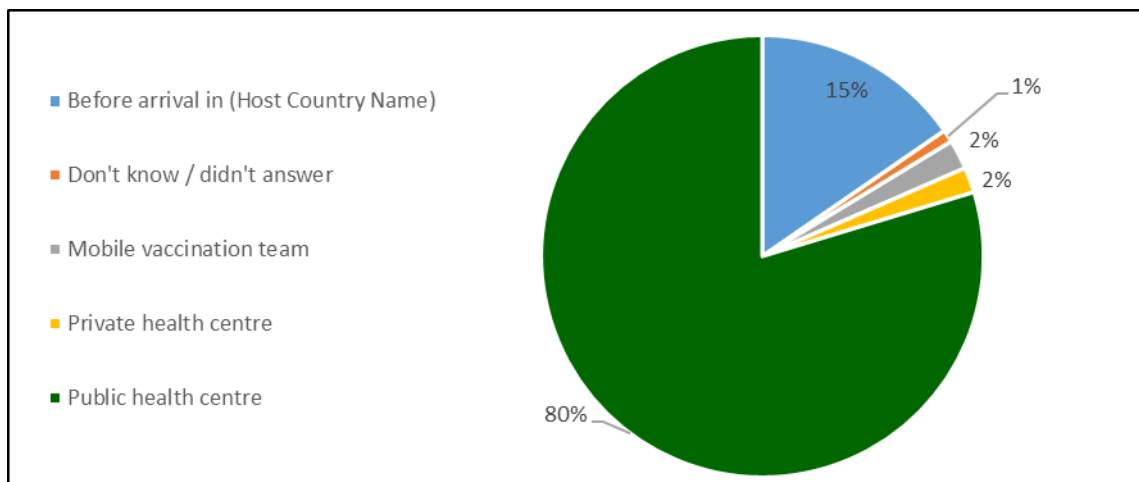
3%

Among those received the vaccine, faced difficulties obtaining measles vaccine

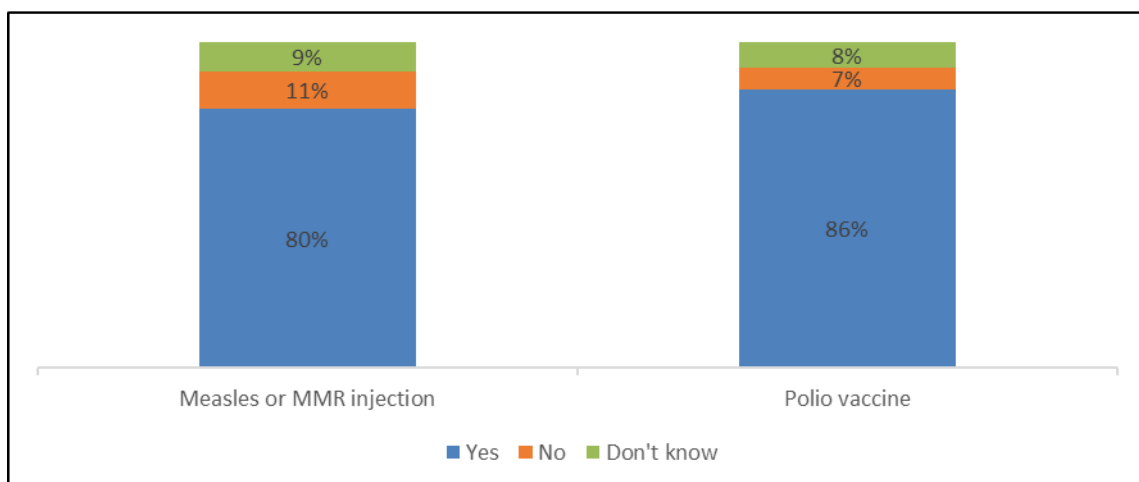
22%

Among those who faced difficulty getting the vaccine the reason was Staff was rude and Did not know where to go for vaccines

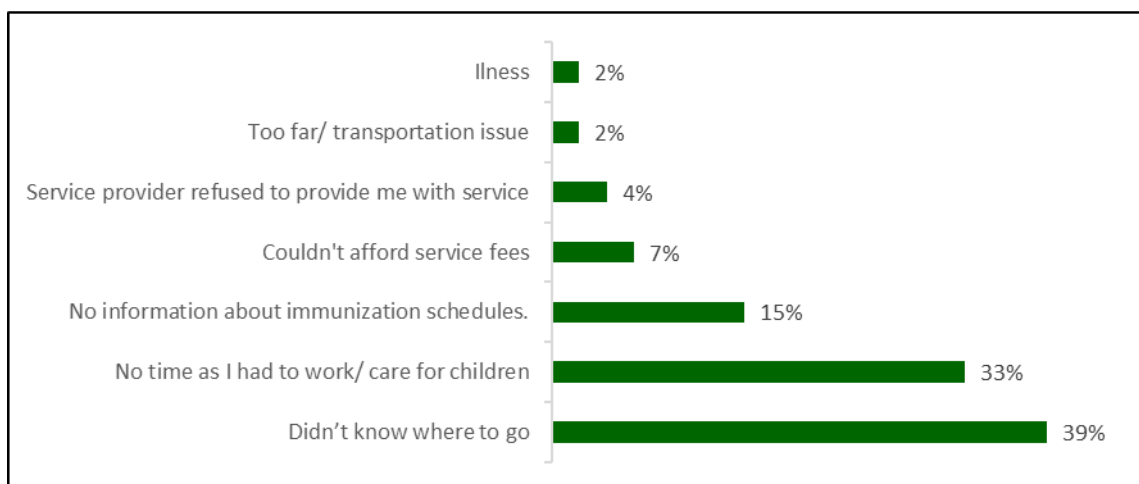
1- Place where child received measles vaccination (n:325)



2- Coverage of vaccination (n:407)



3- Reasons why child did not receive Measles vaccination (n:46)



2.2- Child Immunizations - (Polio Vaccine)

All Nationalities (Total Surveyed 407)

86%

Children had received Polio vaccine

76%

Children had received vaccine at a public health center

15%

Children had received vaccine before arrival

29%

Among those who did not receive the vaccine the reason was No information about immunization schedules

25%

Among those who did not receive the vaccine the reason was they Didn't know where to go

3%

Households with children who faced difficulties obtaining polio vaccine

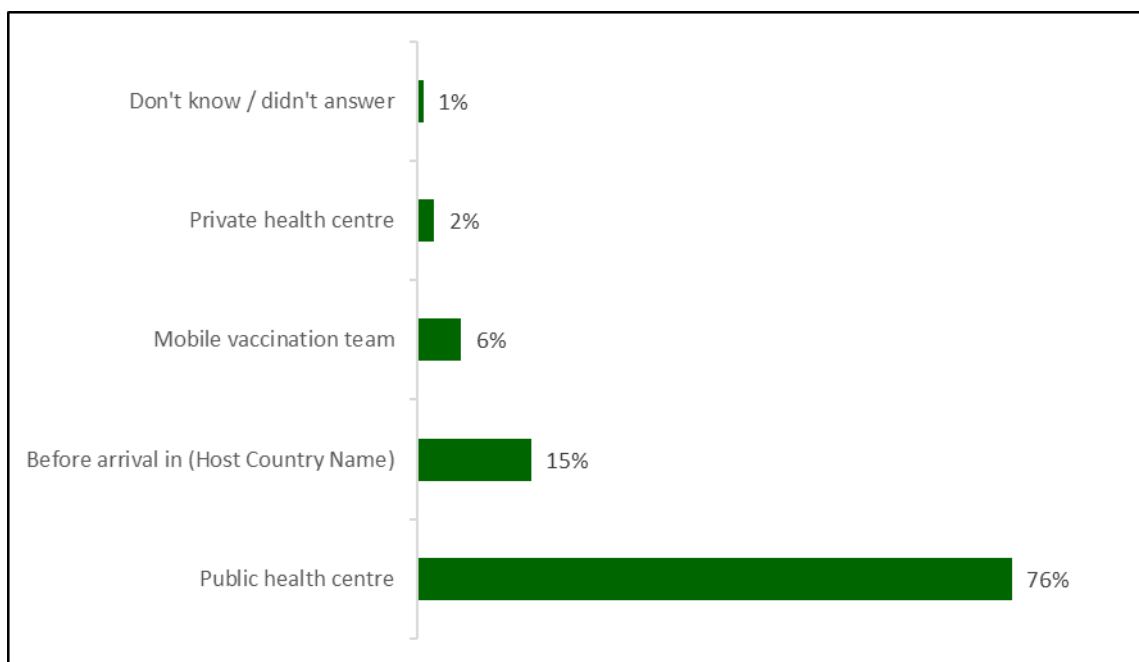
27%

Among those who faced difficulty getting the vaccine the reason was they did not know where to go for vaccines

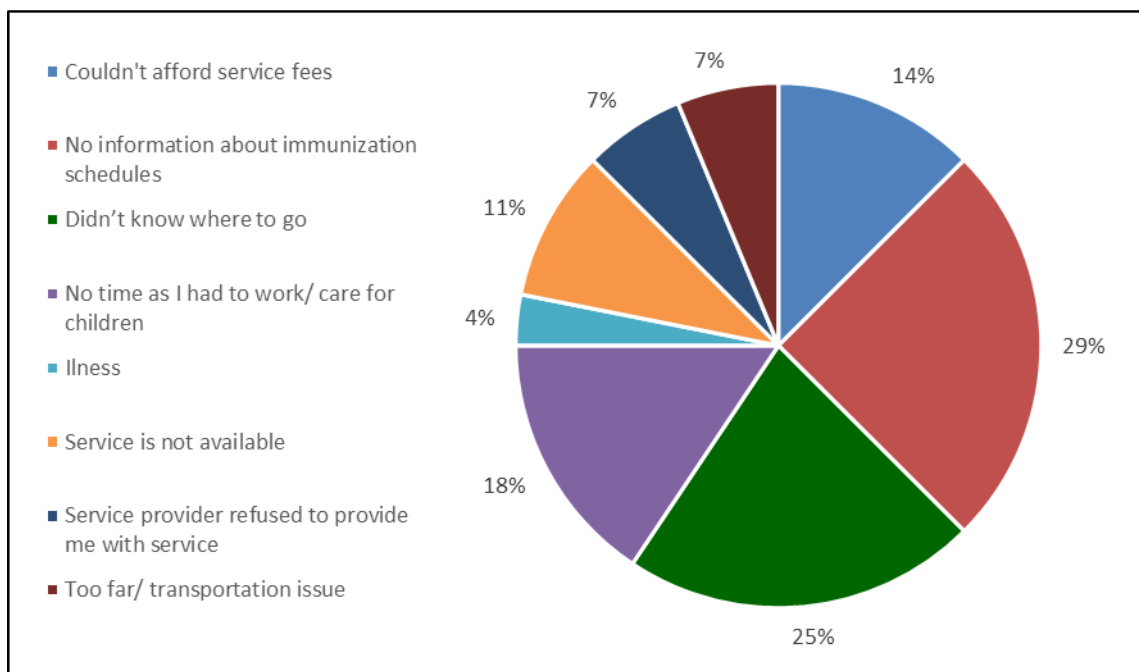
18%

Among those who faced difficulty getting the vaccine the reason was Long waiting periods and Staff were rude

1- Place where child received Polio vaccination (n:407)



2- Reasons why child did not receive Polio vaccination (n:28)

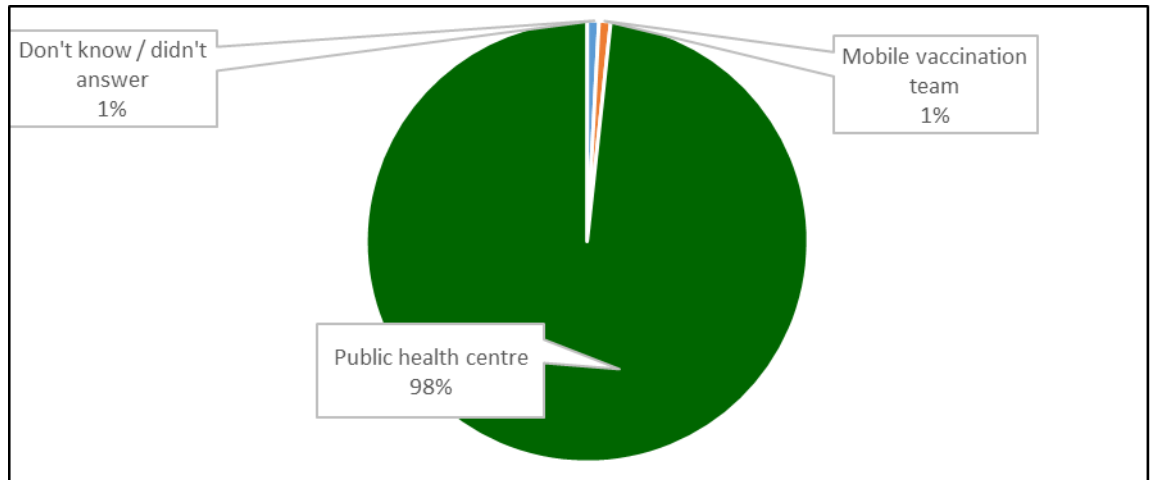


2.1- Child Immunizations - (Measles or MMR injection)

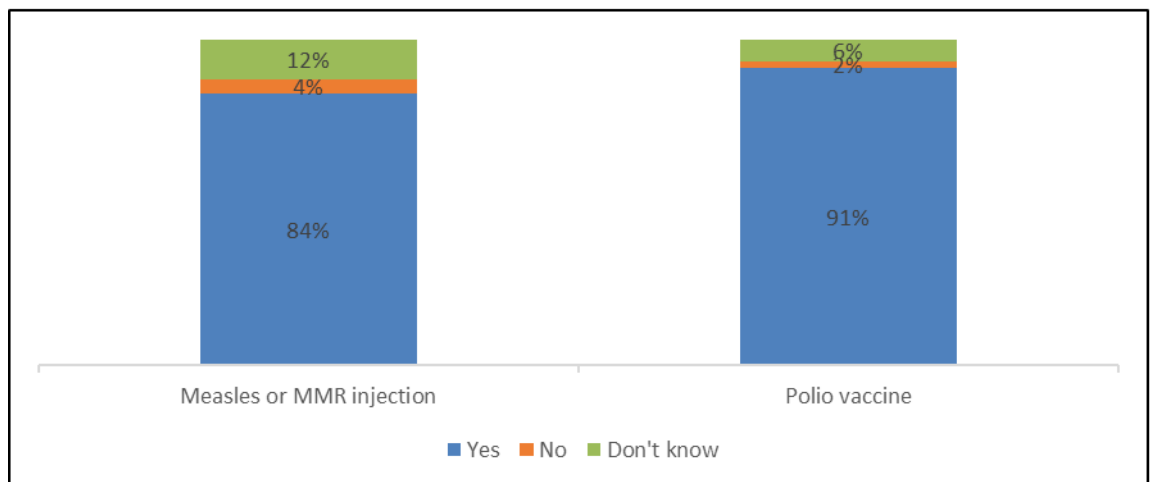
Syrian (Total Surveyed 140)

96%	Household members under 5 with information on the immunization schedule
96%	Have an immunization card
84%	Children had received measles/MMR vaccine
98%	Of children that had received a measles or MMR vaccine, received it at a public health center
50%	Among those who did not receive the vaccine the reason was that they have no information about immunization schedules
33%	Among those who did not receive the vaccine the reason was they didn't know where to go
0%	No Households with children faced difficulties obtaining measles vaccine

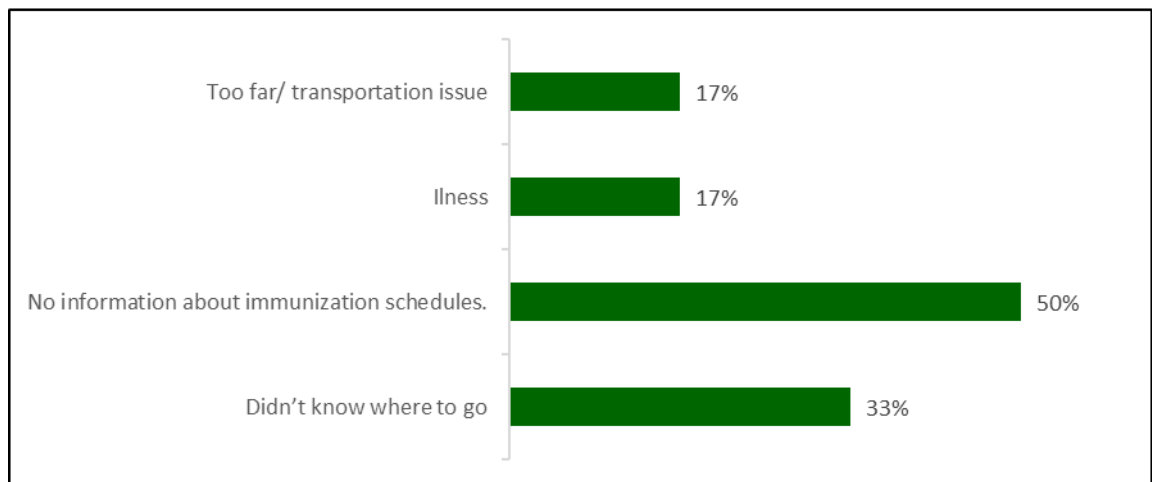
1- Place where child received measles vaccination (n:117)



2- Coverage of vaccination (n:140)



3- Reasons why child did not receive Measles vaccination (n:6)



2.2- Child Immunizations - (Polio Vaccine)

Syrian (Total Surveyed 140)

91%

Children had received Polio vaccine

91%

Children had received vaccine at a public health center

7%

Children had received vaccine at a Mobile vaccination team

67%

Among those who did not receive the vaccine the reason was No information about immunization schedules

33%

Among those who did not receive the vaccine the reason was Illness and Too far/ transportation issue

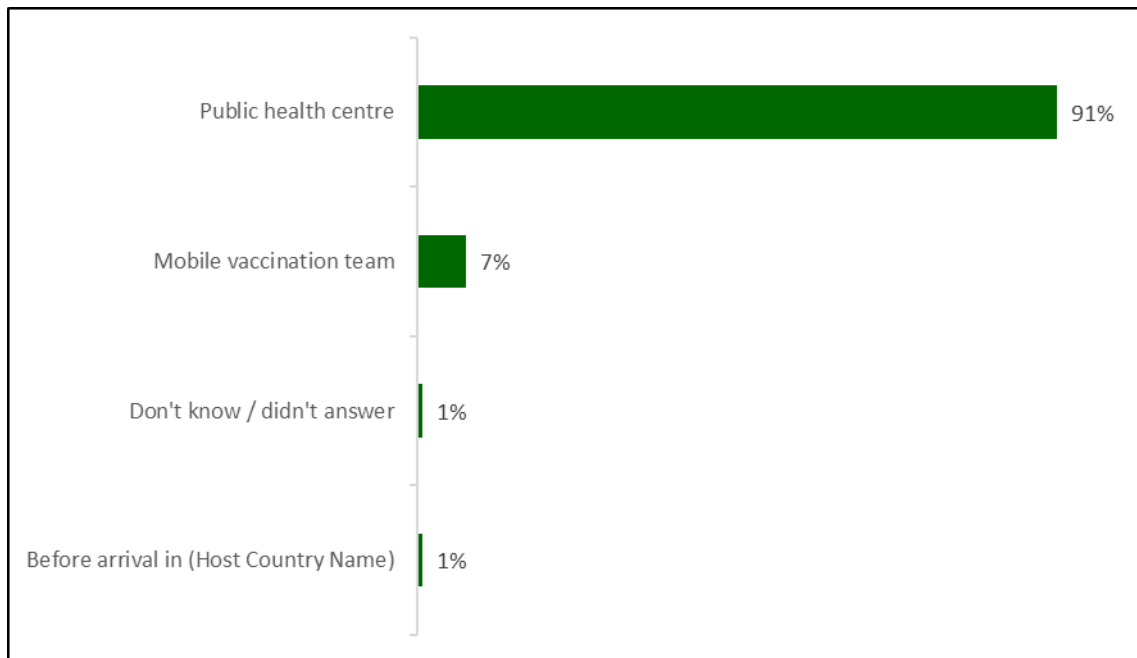
1%

Households with children who faced difficulties obtaining polio vaccine

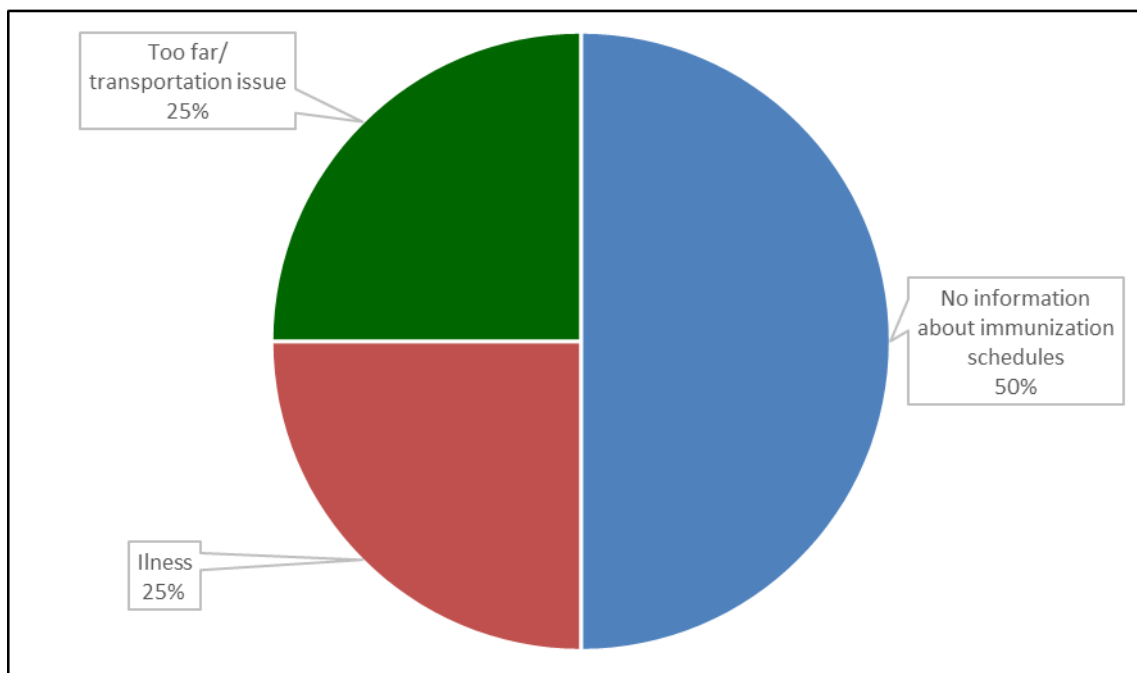
100%

Among those who faced difficulty getting the vaccine they don't know / didn't answer regarding the reason

1- Place where child received Polio vaccination (n:128)



2- Reasons why child did not receive Polio vaccination (n:3)



2.1- Child Immunizations - (Measles or MMR injection)

Sudanese (Total Surveyed 169)

76%

Household members under 5 with information on the immunization schedule

71%

Have an immunization card

72%

Children had received measles/MMR vaccine

64%

Of children that had received a measles or MMR vaccine, received it at a public health center

26%

Of children that had received a measles or MMR vaccine, received it before arrival to Egypt

36%

Among those who did not receive the vaccine the reason was that they didn't know where to go

36%

Among those who did not receive the vaccine the reason was No time as I had to work/ care for children

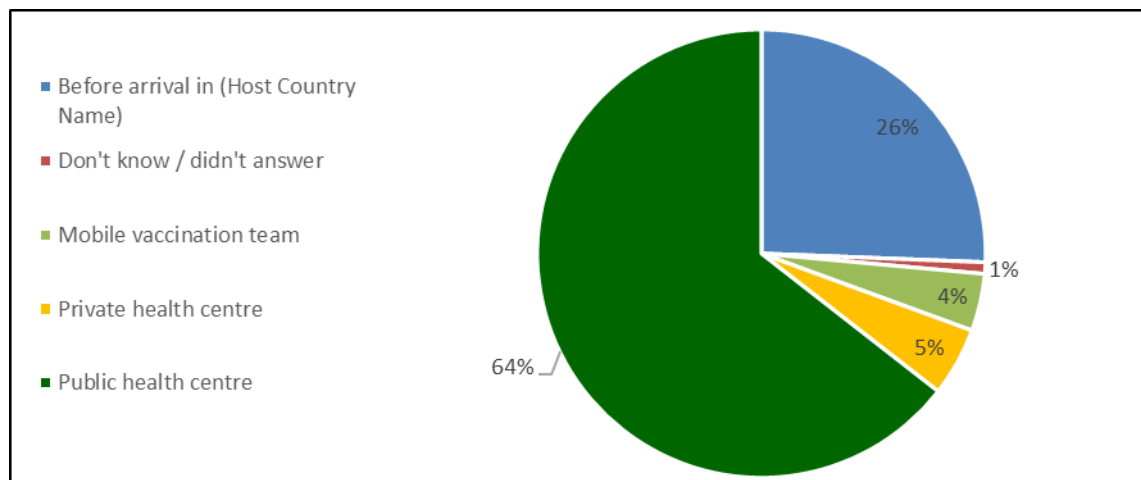
5%

Among those received the vaccine, faced difficulties obtaining measles vaccine

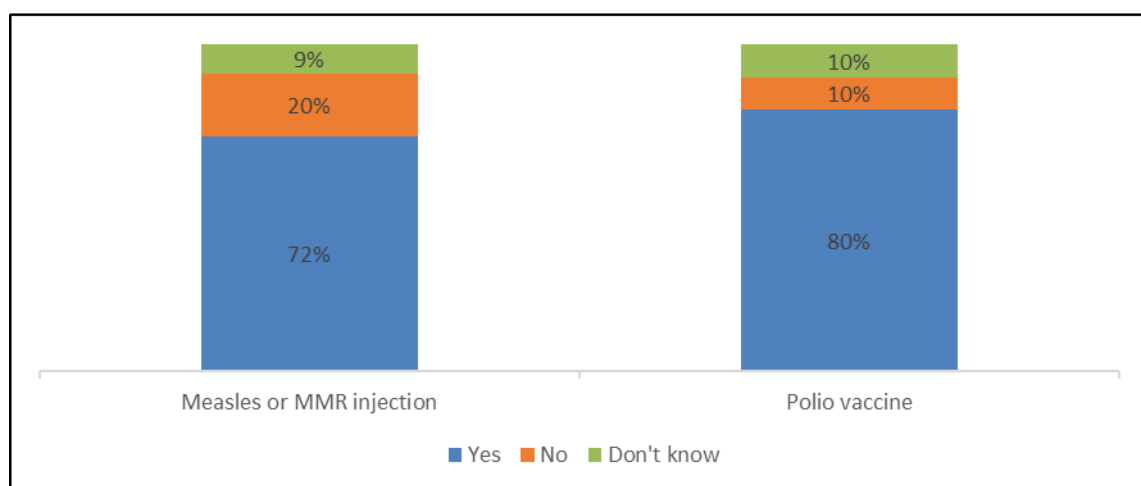
33%

Among those who faced difficulty getting the vaccine the reason was Did not know where to go for vaccines

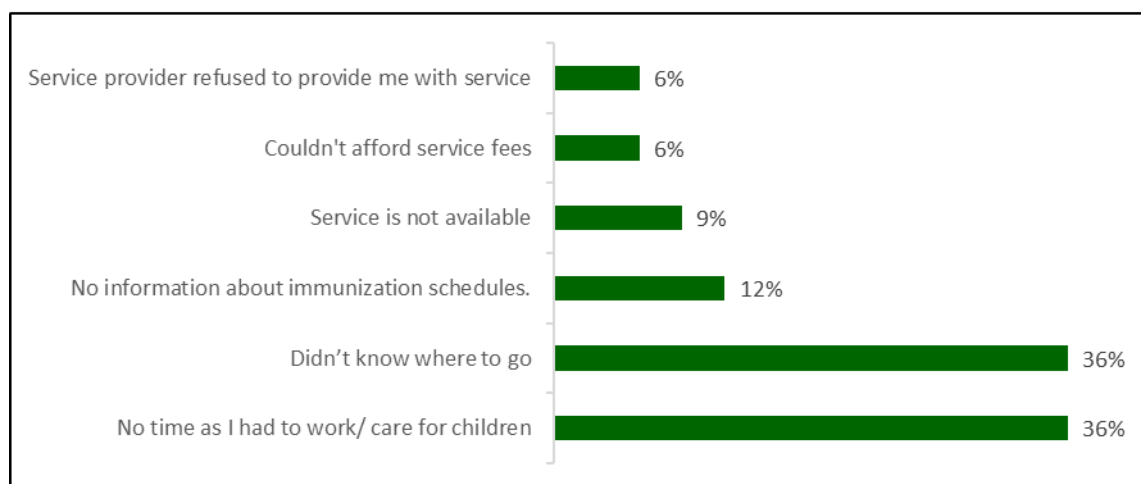
1- Place where child received measles vaccination (n:169)



2- Coverage of vaccination (n:169)



3- Reasons why child did not receive Measles vaccination (n:33)



2.2- Child Immunizations - (Polio Vaccine)

Sudanese (Total Surveyed 169)

80%

Children had received Polio vaccine

64%

Children had received vaccine at a public health center

24%

Children had received vaccine Before arrival

29%

Among those who did not receive the vaccine the reason was they Didn't know where to go

18%

Among those who did not receive the vaccine the reason was No time as I had to work/ care for children, No information about immunization schedules & Couldn't afford service fees

7%

Households with children who faced difficulties obtaining polio vaccine

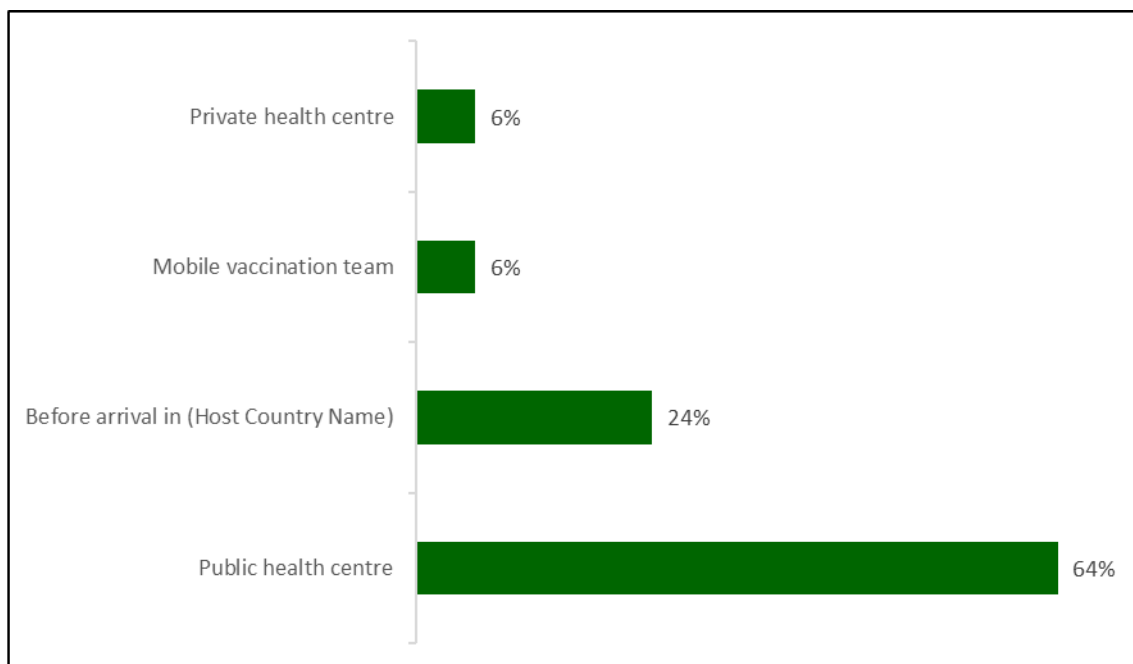
33%

Among those who faced difficulty getting the vaccine they Did not know where to go for vaccines

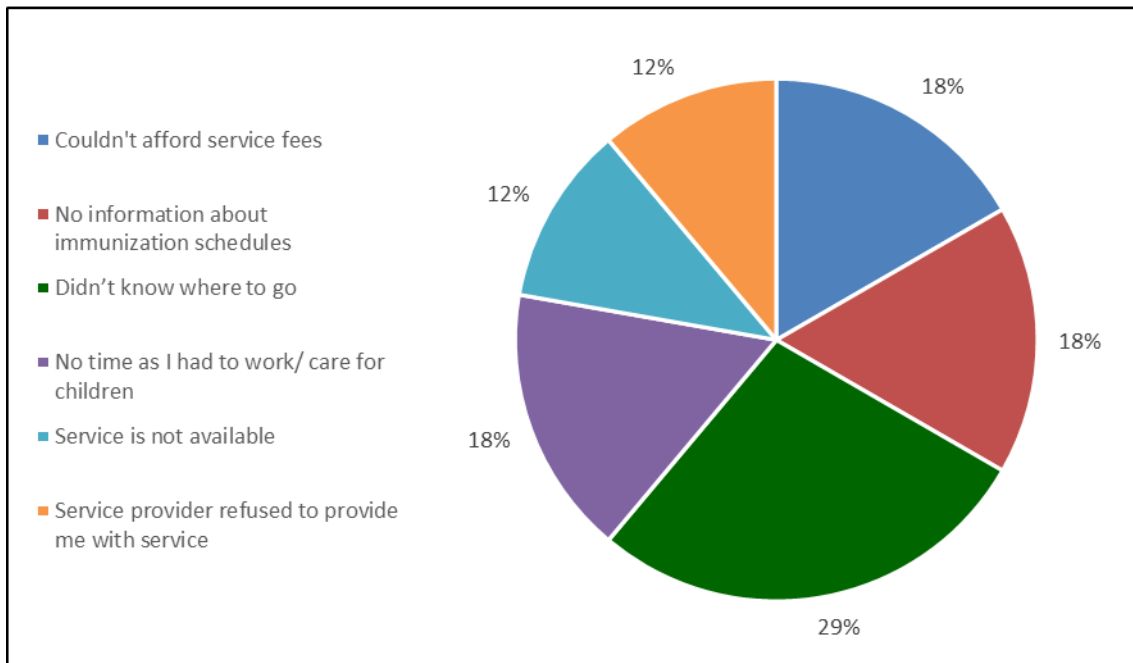
22%

Among those who faced difficulty getting the vaccine the reason was Long waiting periods

1- Place where child received Polio vaccination (n:169)



2- Reasons why child did not receive Polio vaccination (n:17)



2.1- Child Immunizations - (Measles or MMR injection)

Other Nationalities (Total Surveyed 98)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

64%

Household members under 5 with information on the immunization schedule

64%

Have an immunization card

89%

Children had received measles/MMR vaccine

76%

Of children that had received a measles or MMR vaccine, received it at a public health center

22%

Of children that had received a measles or MMR vaccine, received it Before arrival

57%

Among those who did not receive the vaccine the reason was that they didn't know where to go

43%

Among those who did not receive the vaccine the reason was No time as I had to work/ care for children

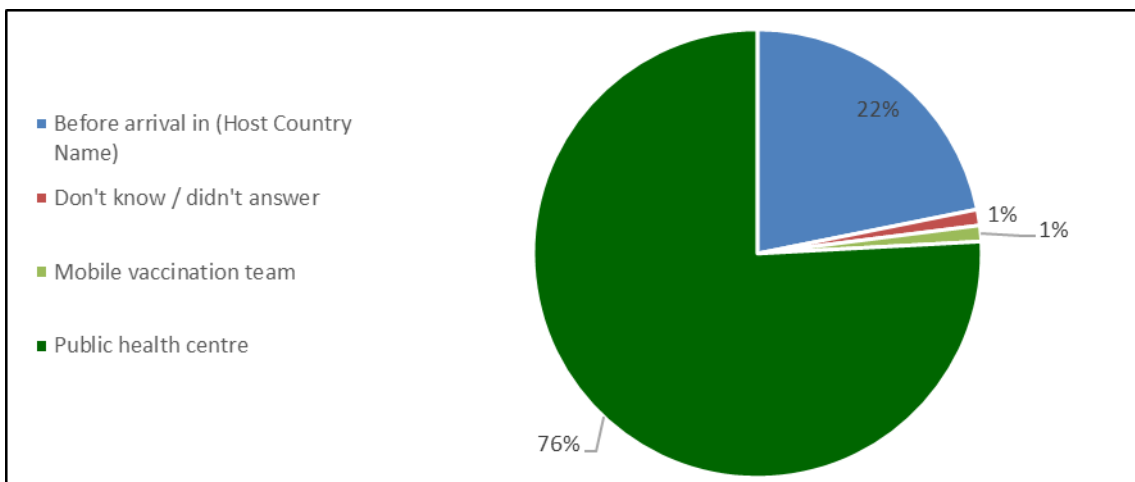
3%

Among those received the vaccine, faced difficulties obtaining measles vaccine

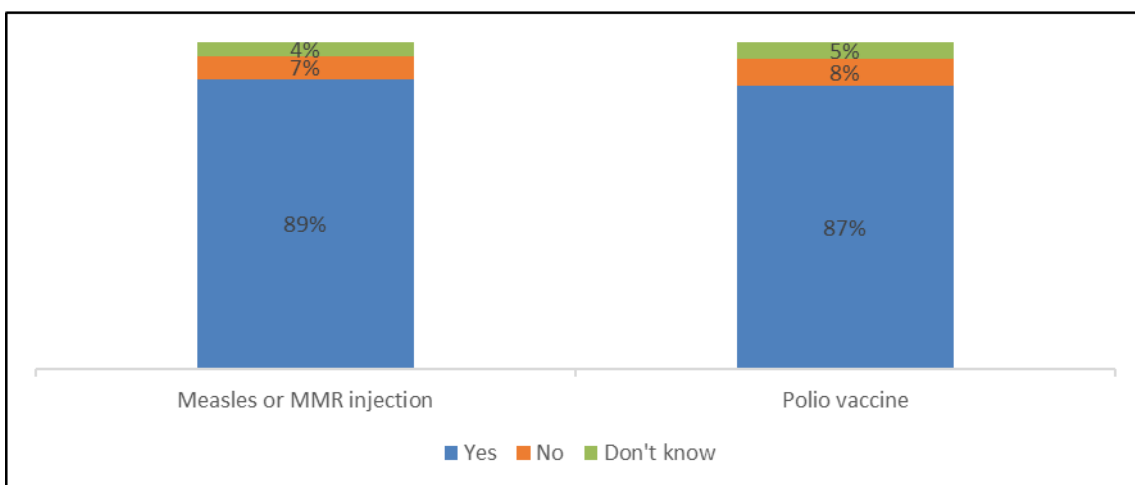
67%

Among those who faced difficulty getting the vaccine the reason was Staff were rude

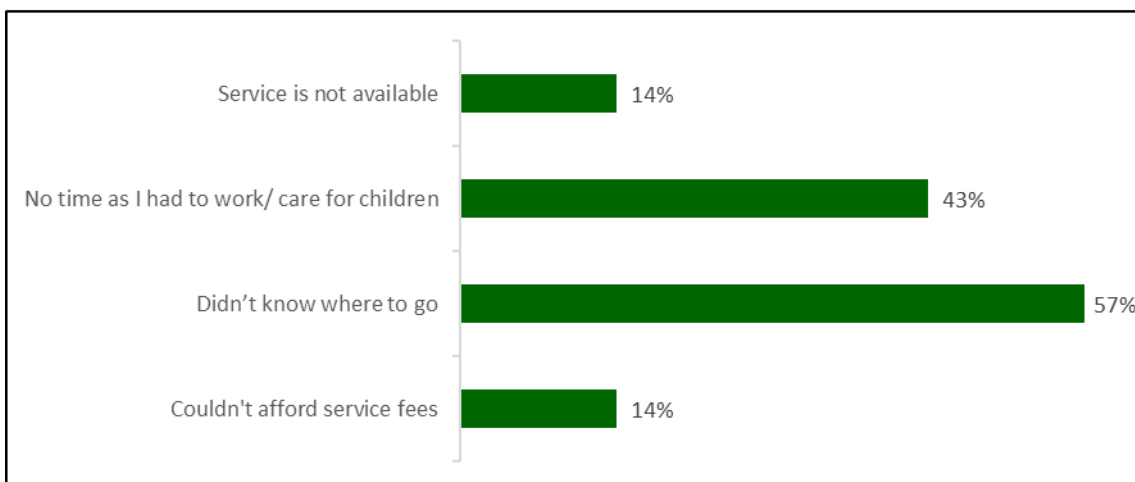
1- Place where child received measles vaccination (n:98)



2- Coverage of vaccination (n:98)



3- Reasons why child did not receive Measles vaccination (n:7)



2.2- Child Immunizations - (Polio Vaccine)

Other Nationalities (Total Surveyed 98)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

87%

Children had received Polio vaccine

73%

Children had received vaccine at a public health center

21%

Children had received vaccine Before arrival

38%

Among those who did not receive the vaccine the reason No information about immunization schedules

25%

Among those who did not receive the vaccine the reason was No time as I had to work/ care for children, Didn't know where to go

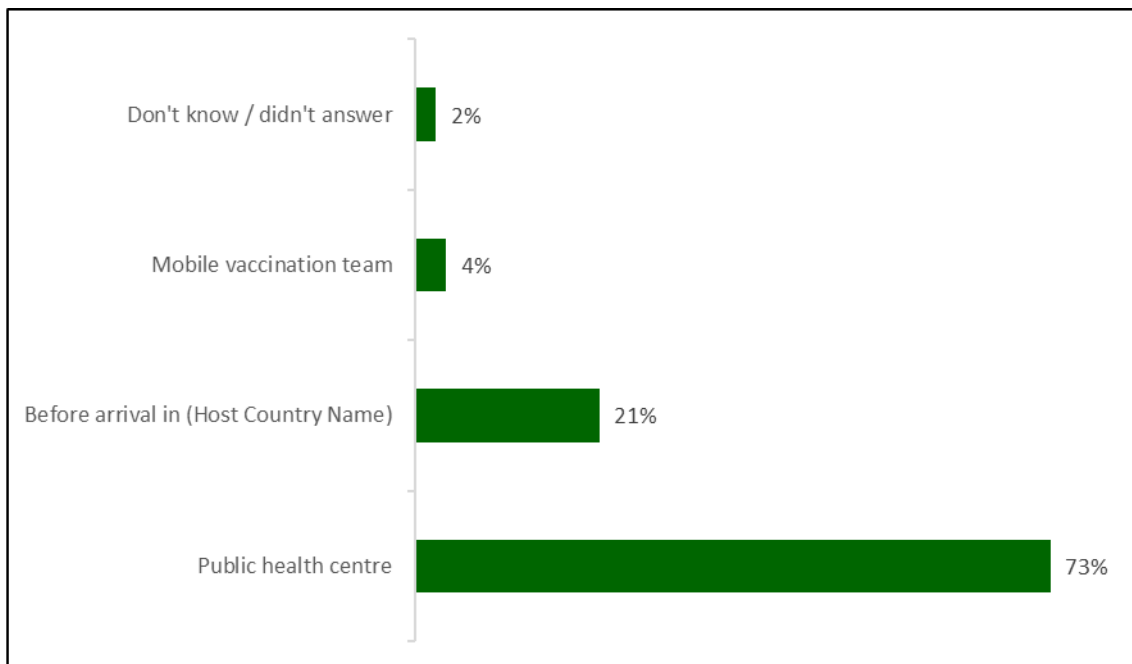
1%

Households with children who faced difficulties obtaining polio vaccine

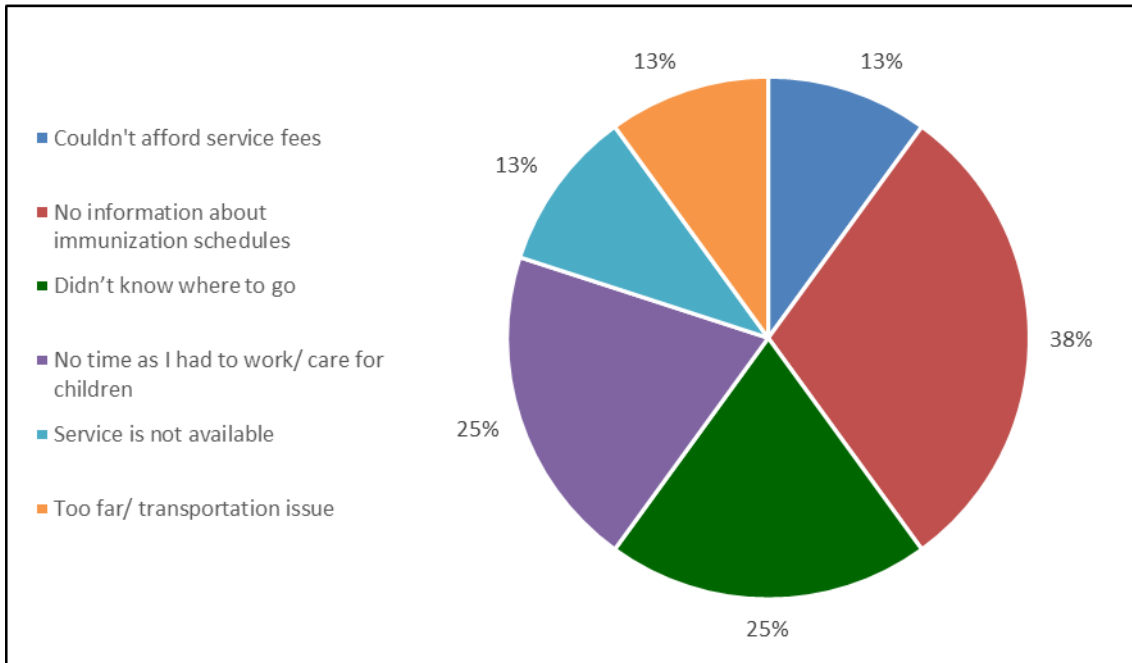
100%

Among those who faced difficulty getting the vaccine the reason was Staff were rude

1- Place where child received Polio vaccination (n:98)



2- Reasons why child did not receive Polio vaccination (n:8)



2- Child characteristics

2.3- Nutrition Module - Children under 5 years old + IYCF - Children under 2 years old

- **83%** of the surveyed members did not notice any growth or feeding difficulties over the last month, **15%** noticed difficulties, and **2%** did not know or answer..
- **28%** of those who noticed any growth or feeding difficulties over the last month, Sought nutrition care, while **72%** did not.
- **92%** % of surveyed children reported not enrolled nor being treated in any nutrition program, **3%** were admitted in a health facility, **1%** were with regular outpatient visits (Weekly/ Bi-weekly/Monthly), and **3%** Don't know or didn't answer.
- **84%** of the surveyed children had at some point been breastfed, **16%** were never breastfed, and **1%** did not know or answer.
- **48%** of the surveyed children under 2 years had been breastfed within 1 hour after birth, **30%** after 1 hour from birth and **23%** did not know the exact time.
- **70%** of surveyed children under 2 years were breastfed yesterday during the day or at night, **39%** were bottle-fed with milk-formula and **74%** had eaten any solid or semi-solid food. **3%** of surveyed children were reported neither having breast-milk, formula nor food during the preceding day and night.

All Nationalities (Total Surveyed 466)

83%
did not notice any growth or feeding difficulties over the last month

28%
of the ones in which it was noted growth or feeding problems, sought nutrition care

92%
Are not enrolled or being treated in any nutrition program

4%
Children are reported currently enrolled in a nutrition program where of the majority were reported being admitted in a health facility rather than being treated as an outpatient.

84%
Children were breastfed

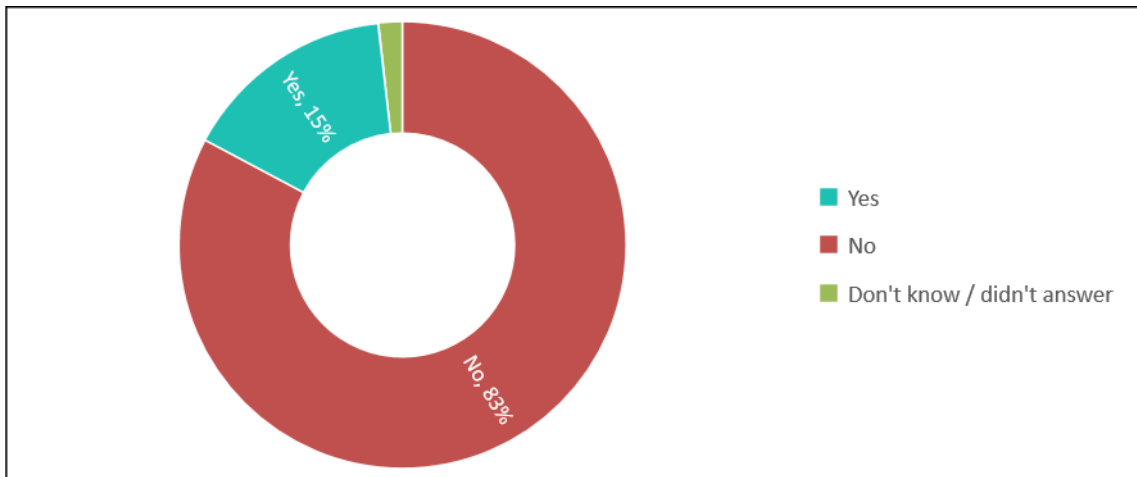
48%
Children were breastfed within the 1st hour after delivery

70%
Of the children breastfed were breastfed yesterday during the day or at night

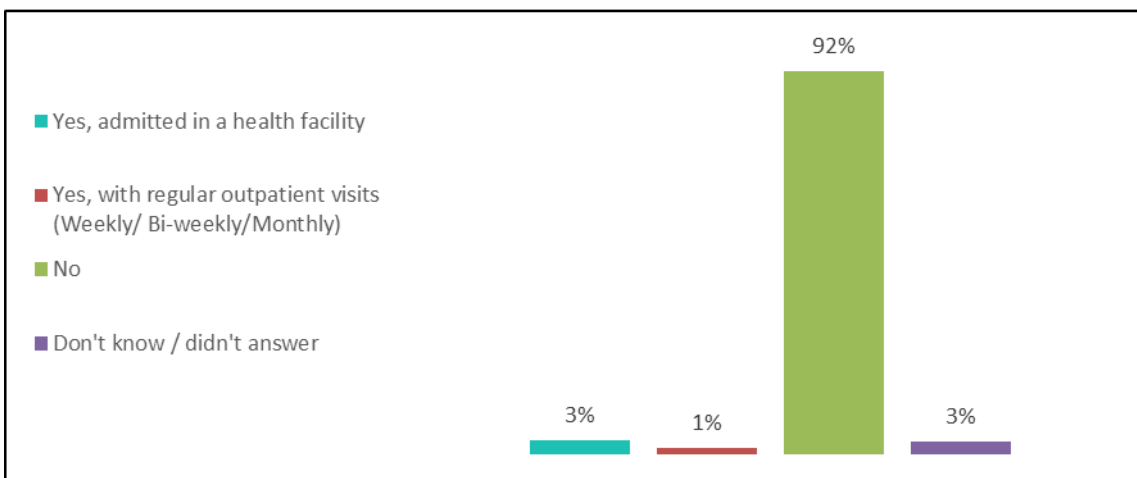
39%
Of the children breastfed were bottle-fed with milk-formula yesterday during the day or at night

74%
Children Ate any solid or semi-solid food yesterday during the day or night

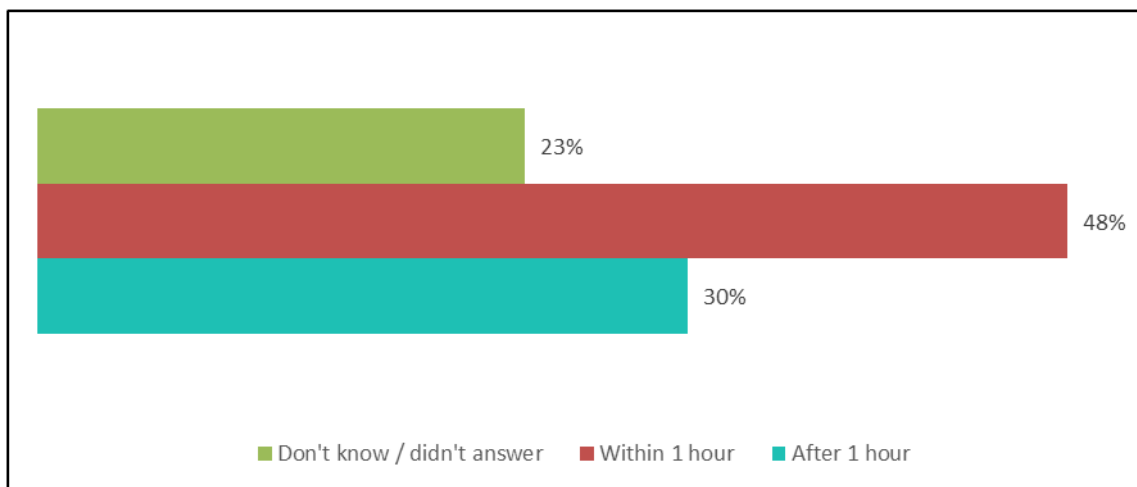
1- Notice of growth or feeding difficulties over the last month (n:466)



2- Enrolled or treatment in any nutrition program (n:466)



3- How long after birth did you first put the child to the breast (n:40)



Syrian (Total Surveyed 151)

89%
did not notice any growth or feeding difficulties over the last month

25%
of the ones in which it was noted growth or feeding problems, sought nutrition care

97%
Are not enrolled or being treated in any nutrition program

2%
Children are reported currently enrolled in a nutrition program were being admitted in a health facility.

80%
Children were breastfed

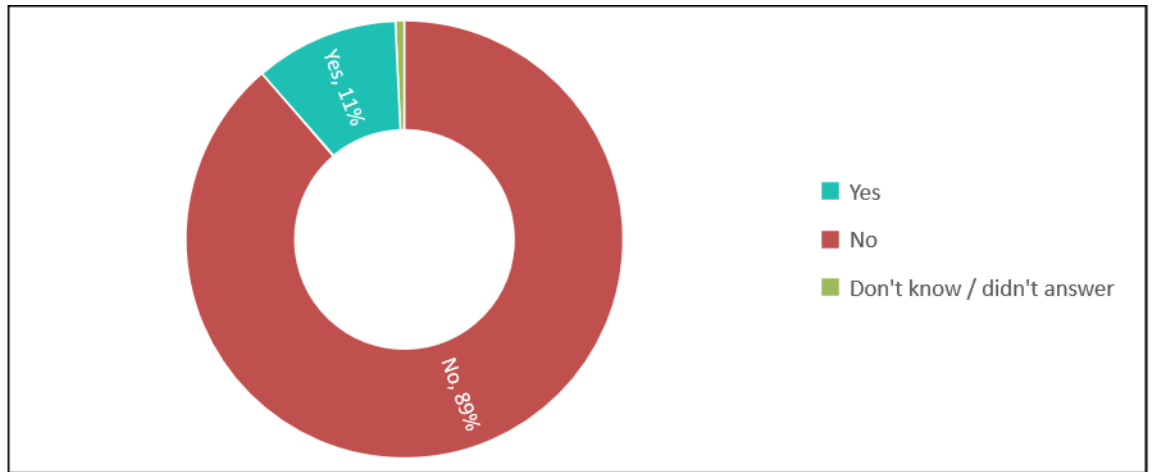
63%
Children were breastfed within the 1st hour after delivery

69%
Of the children breastfed were breastfed yesterday during the day or at night

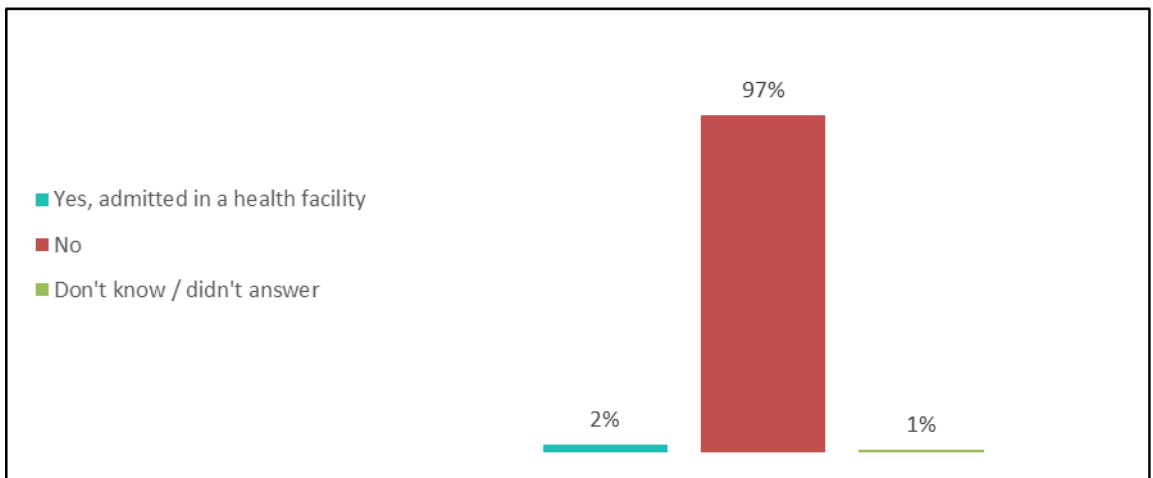
41%
Of the children breastfed were bottle-fed with milk-formula yesterday during the day or at night

81%
Children Ate any solid or semi-solid food yesterday during the day or night

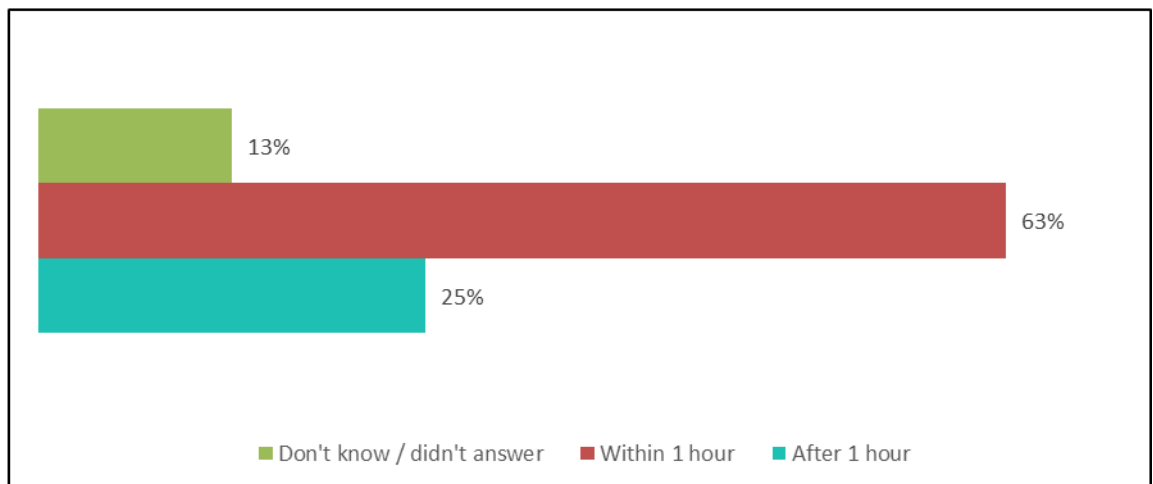
1- Notice of growth or feeding difficulties over the last month (n:151)



2- Enrolled or treatment in any nutrition program (n:151)



3- How long after birth did you first put the child to the breast (n:8)



Sudanese (Total Surveyed 196)

76%
did not notice any growth or feeding difficulties over the last month

30%
of the ones in which it was noted growth or feeding problems, sought nutrition care

89%
Are not enrolled or being treated in any nutrition program

8%
Children are reported currently enrolled in a nutrition program where of the majority were reported being admitted in a health facility rather than being treated as an outpatient.

90%
Children were breastfed

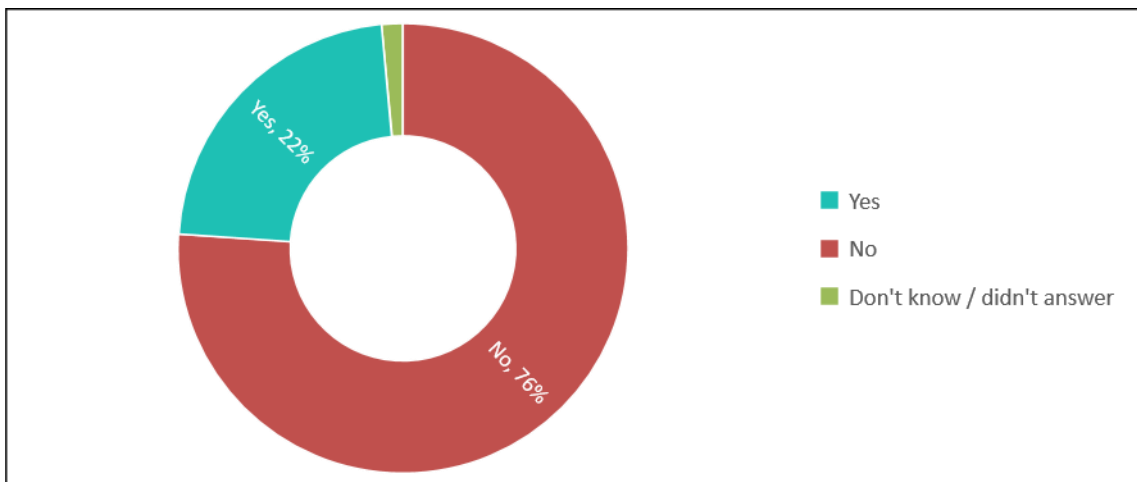
57%
Children were breastfed within the 1st hour after delivery

74%
Of the children breastfed were breastfed yesterday during the day or at night

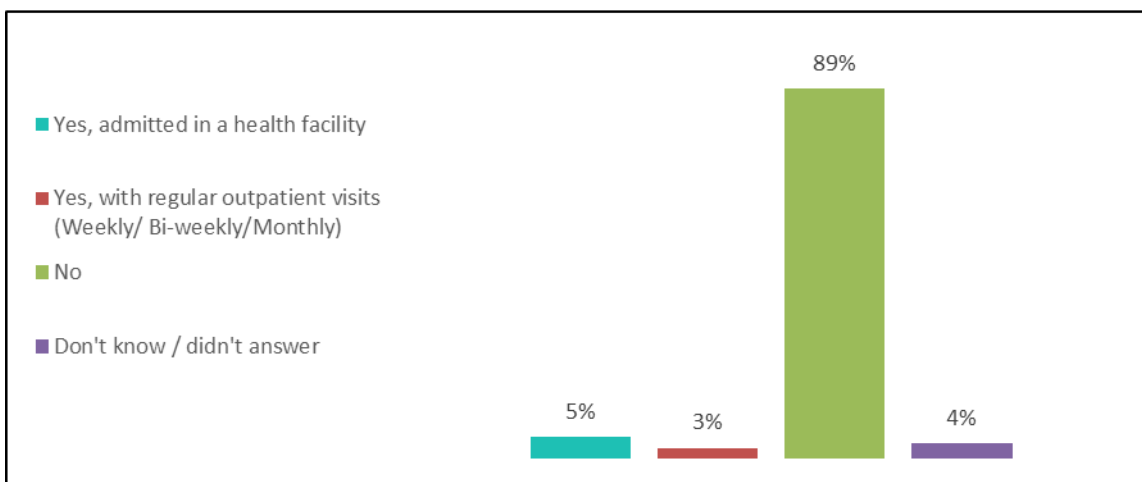
29%
Of the children breastfed were bottle-fed with milk-formula yesterday during the day or at night

73%
Children Ate any solid or semi-solid food yesterday during the day or at night

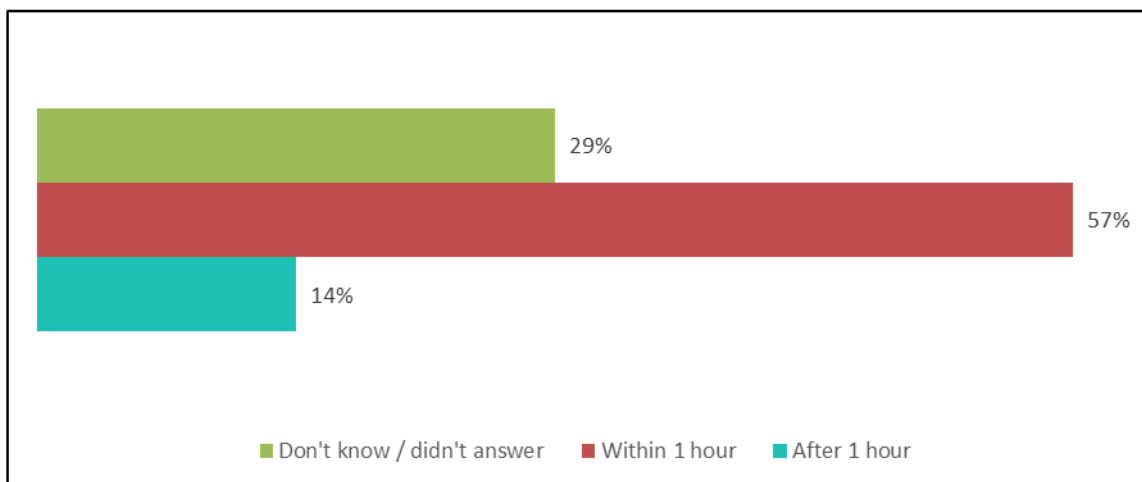
1- Notice of growth or feeding difficulties over the last month (n:196)



2- Enrolled or treatment in any nutrition program (n:196)



3- How long after birth did you first put the child to the breast (n:21)



Other Nationalities (Total Surveyed 119)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

87%

did not notice any growth or feeding difficulties over the last month

25%

of the ones in which it was noted growth or feeding problems, sought nutrition care

92%

Are not enrolled or being treated in any nutrition program

3%

Children are reported currently enrolled in a nutrition program where of the majority were reported being admitted in a health facility rather than being treated as an outpatient.

76%

Children were breastfed

64%

Children were breastfed after the 1st hour after delivery

63%

Of the children breastfed were breastfed yesterday during the day or at night

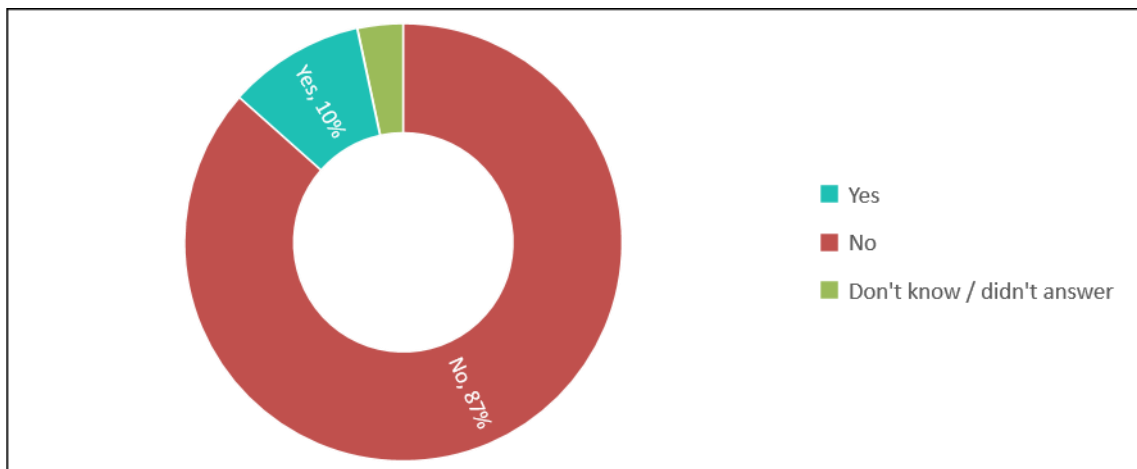
53%

Of the children breastfed were bottle-fed with milk-formula yesterday during the day or at night

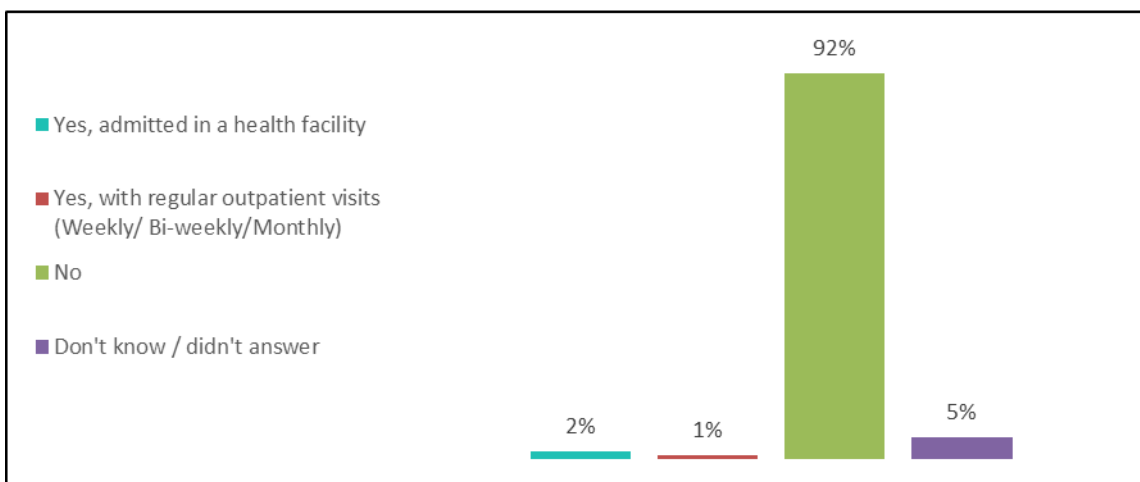
66%

Children Ate any solid or semi-solid food yesterday during the day or night

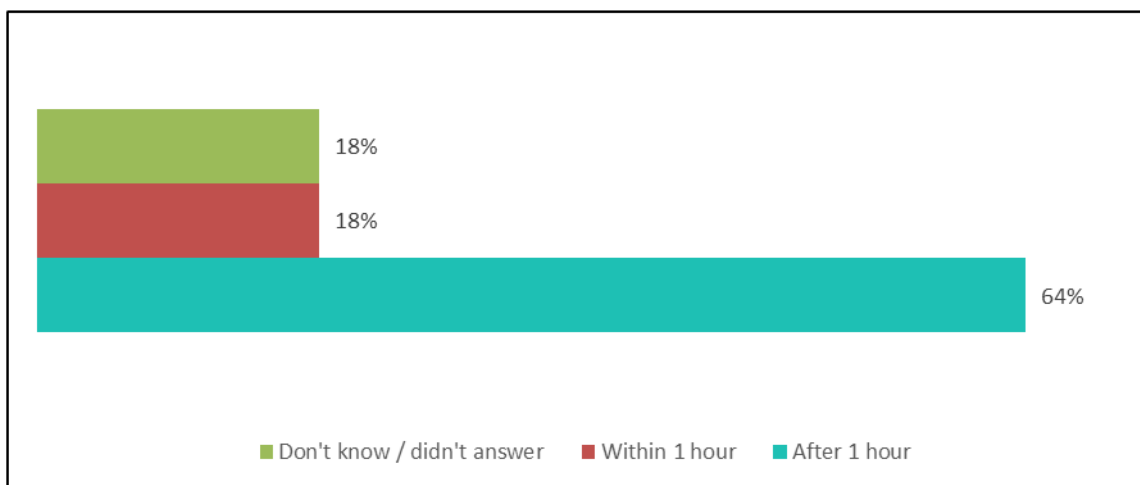
1- Notice of growth or feeding difficulties over the last month (n:119)



2- Enrolled or treatment in any nutrition program (n:119)



3- How long after birth did you first put the child to the breast (n:11)



3- Antenatal Care & Reproductive Health



3- Antenatal Care & Reproductive Health

- **18%** of women between 15 - 49 years of age reported being a mother of a child 2 years old or younger, **81%** reported not being a mother of a child 2 years old or younger, and **1%** did not know or answer.
- **66%** of these reported they received antenatal care during their pregnancy, **30%** did not receive antenatal care, and **4%** did not know or answer.
- **28%** of women who did not receive ANC reported the reason Couldn't afford user fees, **15%** did not know where to go, **14%** did not answer and **10%** Couldn't find the service and Didn't have identification documents, **7%** Felt it was unnecessary, **5%** Health centre refuse to provide services, **3%** Couldn't communicate in the same language as the service provider and Too far / Transport issues, and **1%** Couldn't get time off work / Caring for other children and Don't like the health services/staff.
- Among the **66%** pregnant women who received ANC, **51%** of their first visit took place in a Public facility, **35%** in a Private facility, **9%** in an NGO facility and **6%** with UNHCR Health Partner.
- **75%** of those who received ANC received 4 or more visits, **21%** received ANC 1 to 3 visits, **1%** received no visits, and **4%** did not know or answer.
- **16%** of women who received ANC reported facing difficulties such as the inability to afford user fees (**40%**), Too far / Transport issues and long waiting time (**17% each**), **13%** did not know or answer, and Didn't know where to go, Couldn't get time off work / Caring for other children, and Staff was rude (**7% each**).
- Among the pregnant women who had delivered, **45%** of deliveries took place in a Private facility, **38%** of deliveries took place in a Public facility, **2%** of deliveries took place on the way to hospital, and **7%** did not know or answer.
- Among the pregnant women who delivered in a Private facility, the reason was, they prefer to go to private facility (**46%**), Couldn't access public hospital (**20%**), did not know or answer (**18%**), and Doctor decision (**8%**).
- **7%** delivered at home, reason for delivering at home was they couldn't afford the fee (**38%**), Onset of labor before the expected date (**24%**), No one to take or accompany me / couldn't go alone (**14%**), Too far / Transport issues/geographical barriers (**10%**), Not A Legal Marriage and Traditional beliefs/practices (**5%**).

3- Antenatal Care & Reproductive Health



3- Antenatal Care & Reproductive Health

- **53%** of deliveries were Normal delivery, **3%** did not know or answer, and **44%** were Caesarean section. Out of those, **69%** were scheduled (planned), and **31%** emergencies (unplanned).
- **75%** of pregnant had to pay for the delivery, with a median cost of **4,000EGP** for the delivery of which **83%** were not reimbursed the amount they paid, **11%** were fully reimbursed, **5%** were partially reimbursed.
- Out of the pregnant who had to pay for the delivery, **83%** did not receive cash assistance for delivery, and **13%** received cash assistance for delivery.
- **15%** new-born babies needed to be admitted or kept in hospital for special care for an average of **4 days**, costing a median of **2,500 EGP**.
- In **82%** of the deliveries, the child was issued a birth certificate, in **15%** a certificate was not issued, and **3%** did not know or answer.
- out of those for whom the certificate was not issued, the reasons reported were: Lack of Documents (**40%**), They don't know how to register the birth (**16%**), Were asked for money to register the birth (**11%**), Authorities refused (**7%**), and Didn't know they had to register the birth, felt It's not important to register the birth and Couldn't get time off work / Caring for other children (**4% each**).
- **17%** of the mothers were provided with contraceptive options or advice following delivery, **77%** were not provided with the option, and **6%** did not know or answer.
- **25%** of the mothers reported receiving postpartum/postnatal care after delivery, **40%** were at a private clinic/Hospital, **42%** at a public hospital, **6%** at Home, and **6%** at an NGO facility (charity, faith based organization), while **75%** reported not receiving postpartum/postnatal care after delivery.
- In the 6 weeks after the delivery, the mothers reported visiting the clinic and receiving postpartum care, **38%** visited 1 time, **15%** visited 2 times and **47%** had 3 or more visits .

3- Antenatal Care & Reproductive Health

All Nationalities (Total Surveyed 1609)

18%

Of women between 15 - 49 years of age is with a child 2 years old or younger

66%

Pregnant woman received ANC care

30%

Pregnant woman didn't received ANC care

28%

Among those who didn't receive ANC care the reason was they couldn't afford user fees

51%

First ANC visit in a public clinic/Hospital

75%

Of the women receiving ANC went for 4 or more visits

16%

Pregnant woman who had difficulty accessing ANC

40%

Among those who faced difficulty getting the ANC reported they couldn't afford user fees

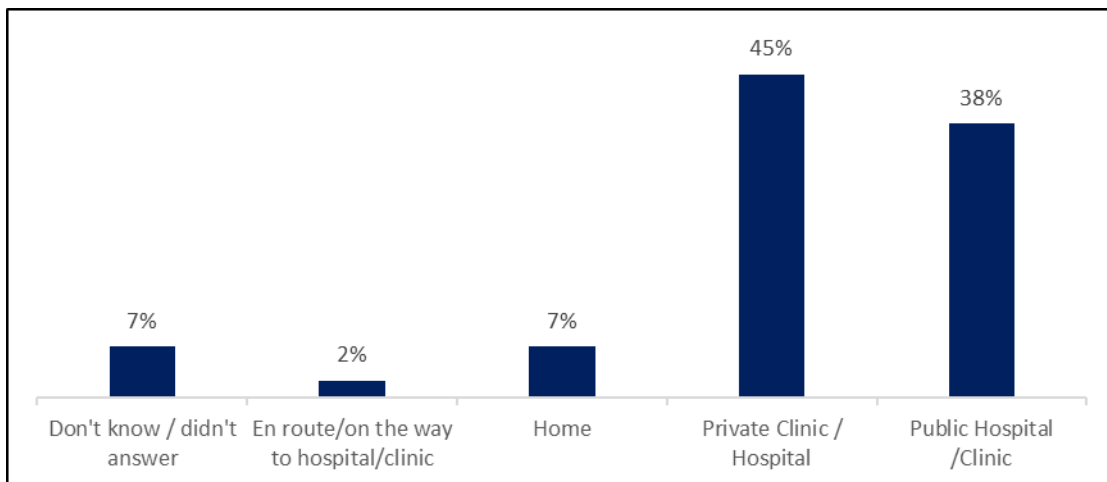
45%

Delivered a baby in a private hospital

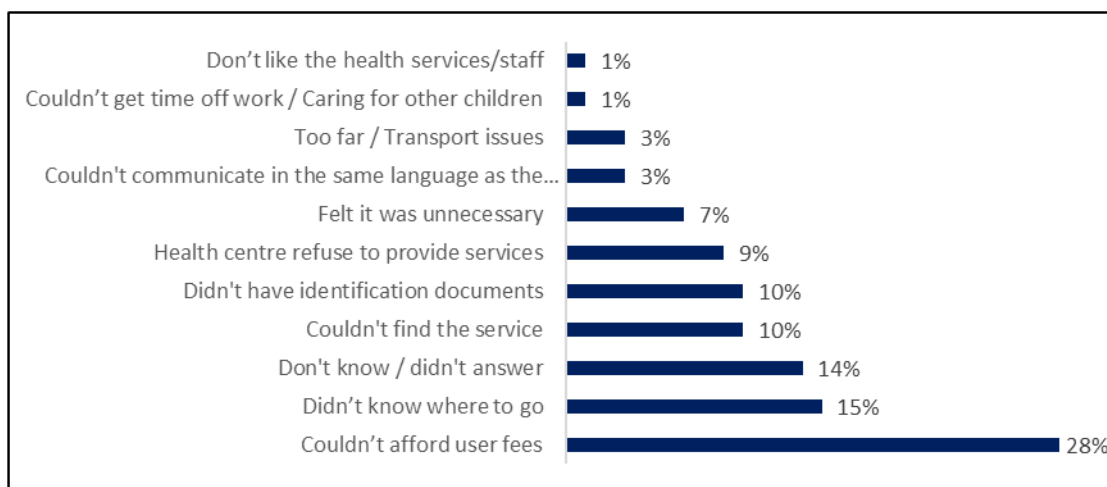
38%

Among those who delivered at Home(7%) the reason was they Couldn't afford user fees

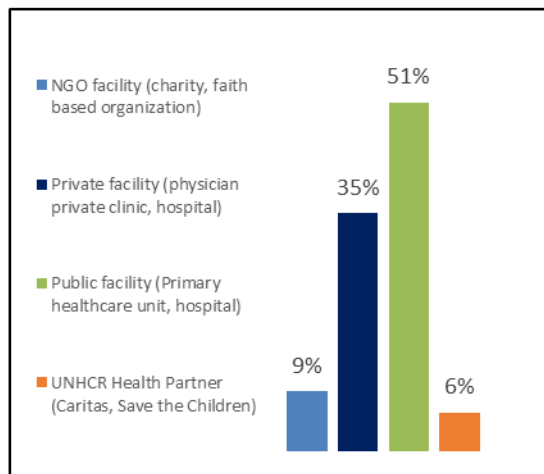
1- Delivery Place(n=293)



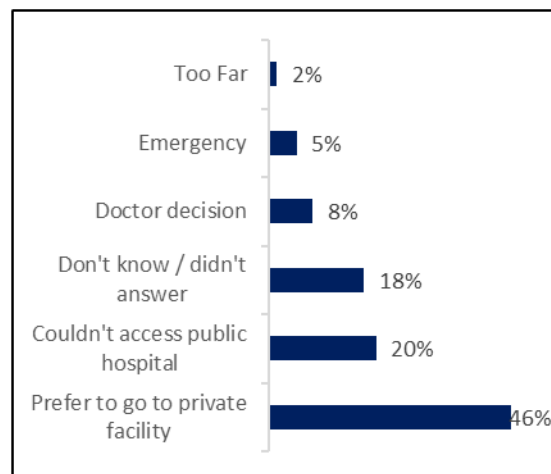
2- Reasons for not receiving ANC care among pregnant woman (n=88)



3- Area where the first ANC visit take place (n:193)



4- Reason the delivery took place at a private clinic (n:132)

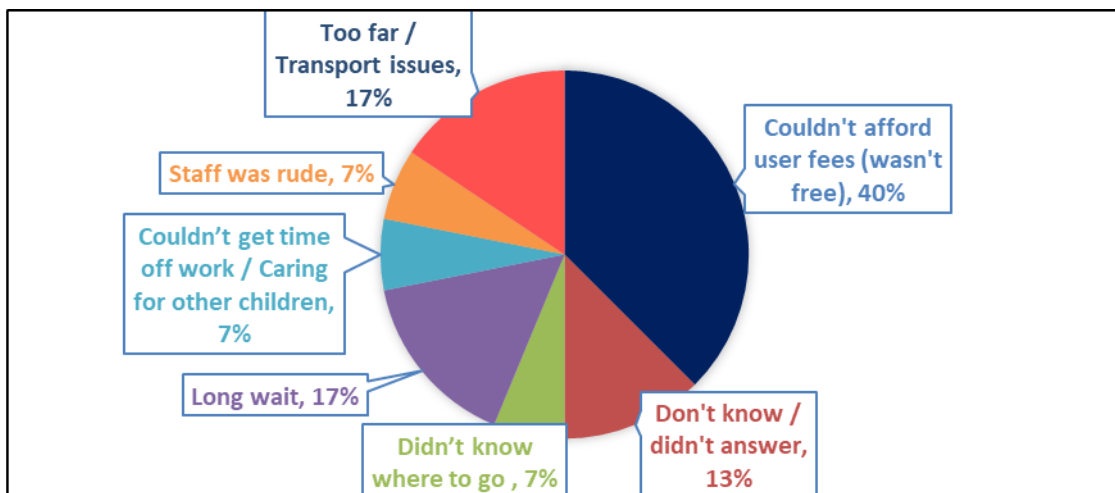


3- Antenatal Care & Reproductive Health

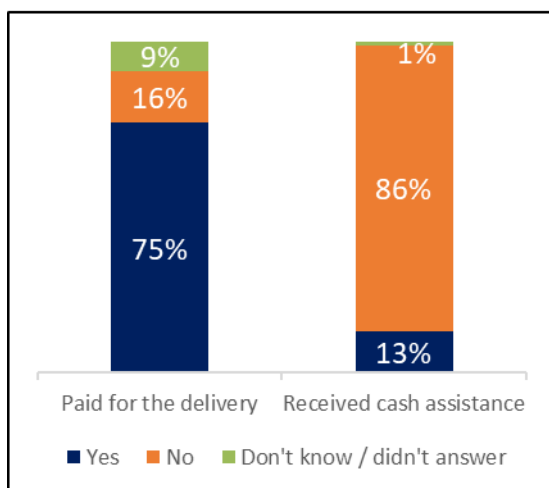
All Nationalities (Total Surveyed 1609)

- 53%**
Delivery was a Normal delivery
- 44%**
Delivery was a Caesarean section
- 75%**
Pregnant woman paid for the delivery
- 13%**
Among those who paid for the delivery received cash assistance
- 4,000 EGP**
Median delivery cost
- 15%**
Of new born baby needed admission to the hospital
- 4**
Average number of days the baby was admitted
- 2,500 EGP**
Median paid for baby hospitalization
- 82%**
Issued a birth certificate to the child
- 17%**
Provided with contraceptive options after delivery
- 25%**
Received any postpartum/postnatal care after delivery
- 42%**
Of the persons that received PNC went to a public Clinic / Hospital

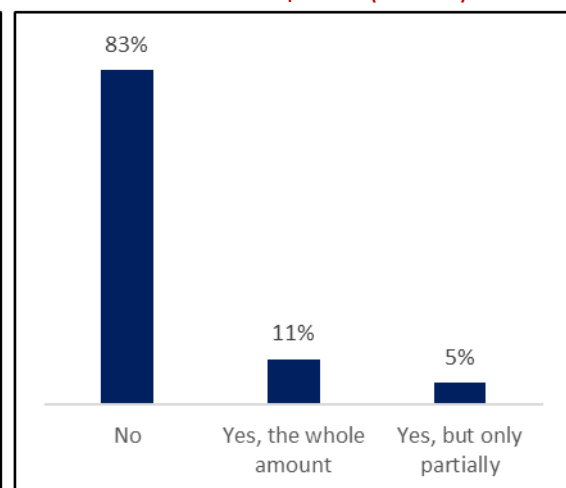
1- Difficulties in getting ANC care among pregnant woman (n:30)



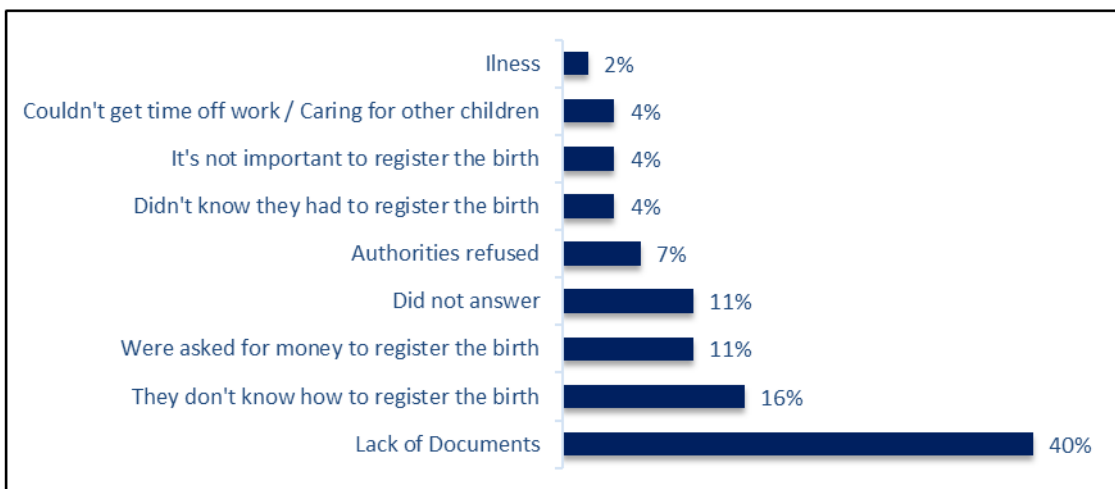
2- Paid for delivery and Received Cash assistance



3- Reimbursed the amount that was paid (n:221)



4- Reason the child was not issued with a birth certificate (n:45)



3- Antenatal Care & Reproductive Health

Syrian (Total Surveyed 498)

18%

Of women between 15 - 49 years of age is with a child 2 years old or younger

81%

Pregnant woman received ANC care

18%

Pregnant woman didn't receive ANC care

50%

Among those who didn't receive ANC care the reason was they Couldn't afford user fees

36%

First ANC visit in a public clinic/Hospital

74%

Of the women receiving ANC went for 4 or more visits

7%

Pregnant woman who had difficulty accessing ANC

40%

Among those who faced difficulty getting the ANC was they Couldn't afford user fees and long wait

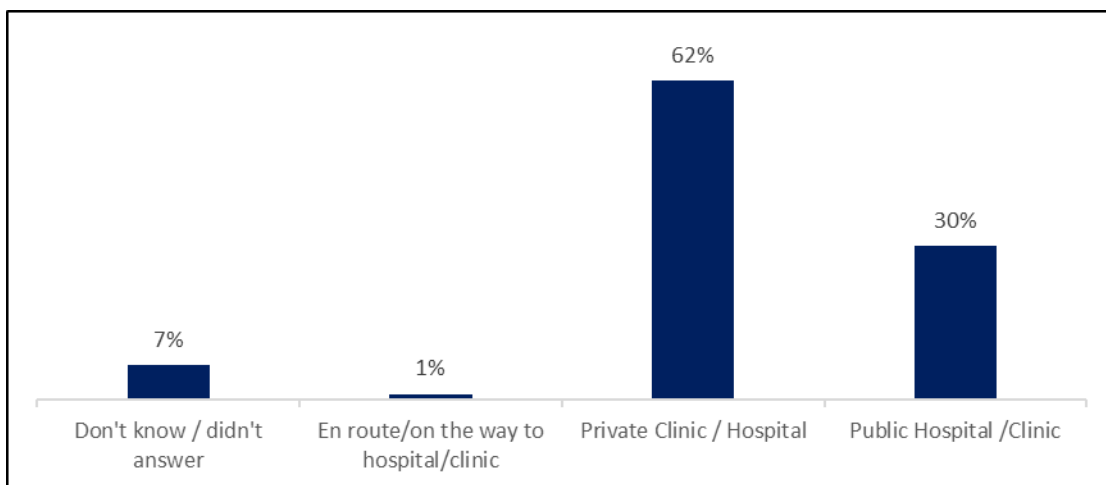
62%

Delivered a baby in a private hospital

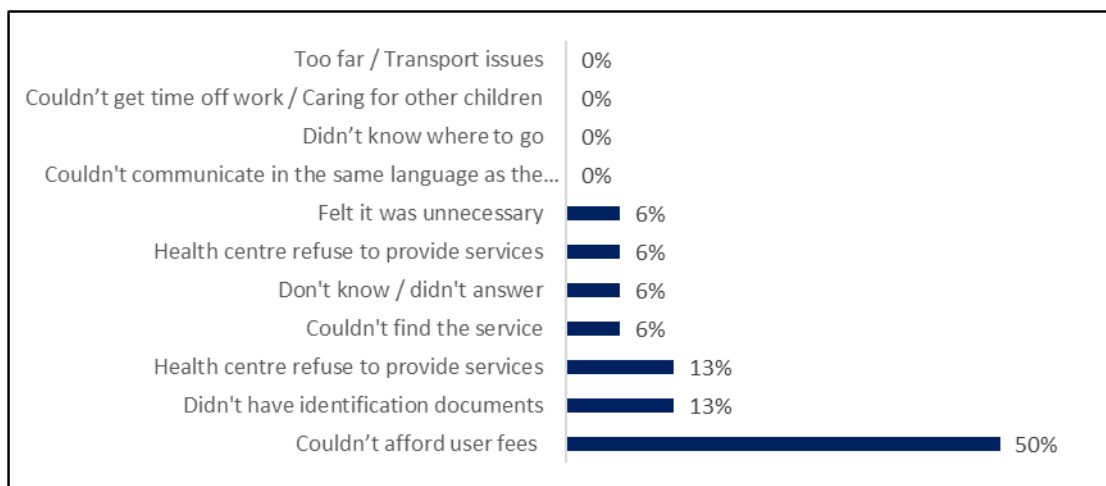
0%

Among those who delivered at Home(0%) the reason was they Couldn't afford user fees

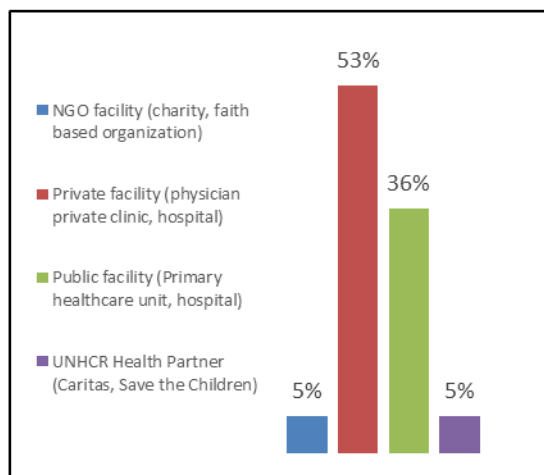
1- Delivery Place (n=90)



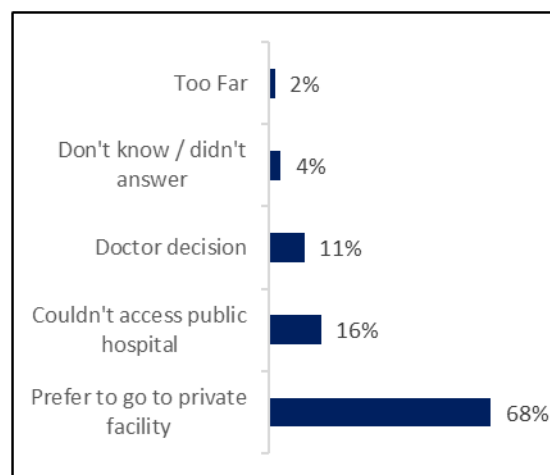
2- Reasons for not receiving ANC care among pregnant woman (n=16)



3- Area where the first ANC visit take place (n:73)



4- Reason the delivery took place at a private clinic (n:56)



3- Antenatal Care & Reproductive Health

Syrian (Total Surveyed 498)

27%

Delivery was a Normal delivery

73%

Delivery was a Caesarean section

82%

Pregnant woman paid for the delivery

3%

Among those who paid for the delivery received cash assistance

5,000 EGP

Median delivery cost

24%

Of new born baby needed admission to the hospital

2

Average number of days the baby was admitted

2,750 EGP

Median paid for baby hospitalization

99%

Issued a birth certificate to the child

12%

Provided with contraceptive options after delivery

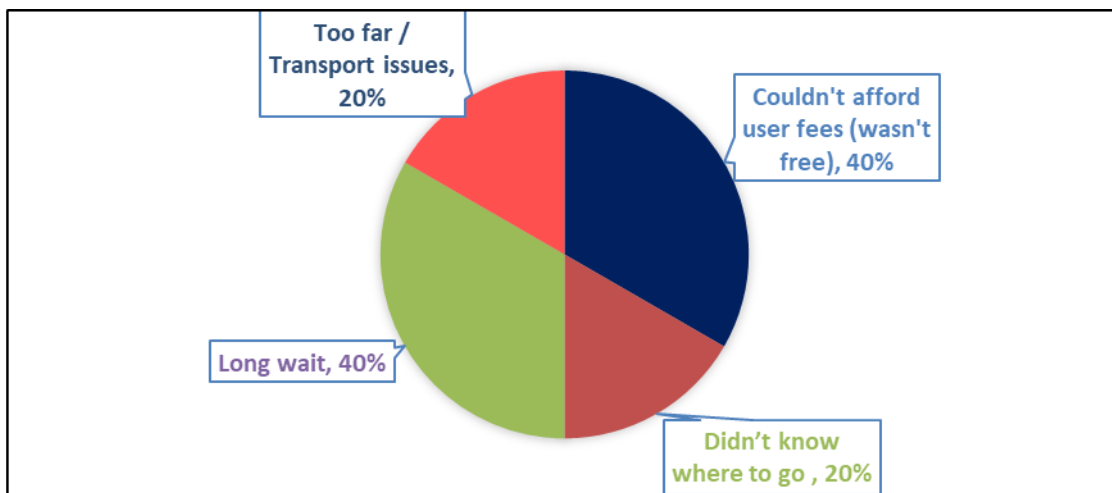
30%

Received any postpartum/postnatal care after delivery

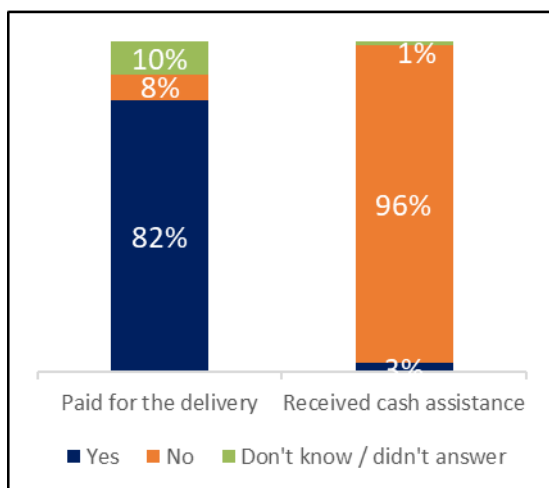
22%

Of the persons that received PNC went to a public Clinic / Hospital

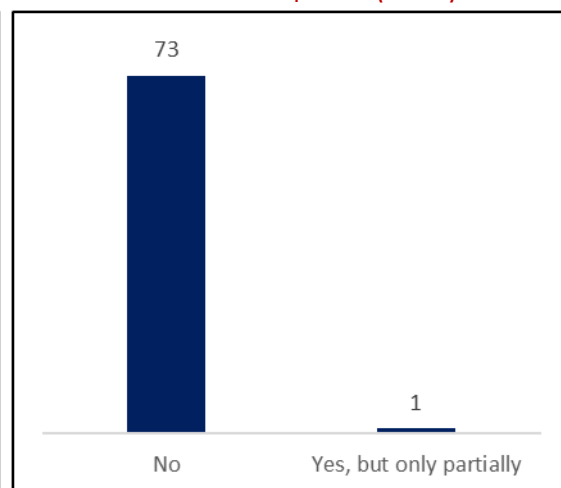
1- Difficulties in getting ANC care among pregnant woman (n:5)



2- Paid for delivery and Received Cash assistance



3- Reimbursed the amount that was paid (n:74)



3- Antenatal Care & Reproductive Health

Sudanese (Total Surveyed 655)

18%

Of women between 15 - 49 years of age is with a child 2 years old or younger

58%

Pregnant woman received ANC care

38%

Pregnant woman didn't received ANC care

26%

Among those who didn't receive ANC care the reason was they couldn't afford user fees

63%

First ANC visit in a public clinic/Hospital

74%

Of the women receiving ANC went for 4 or more visits

27%

Pregnant woman who had difficulty accessing ANC

53%

Among those who faced difficulty getting the ANC was they Couldn't afford user fees

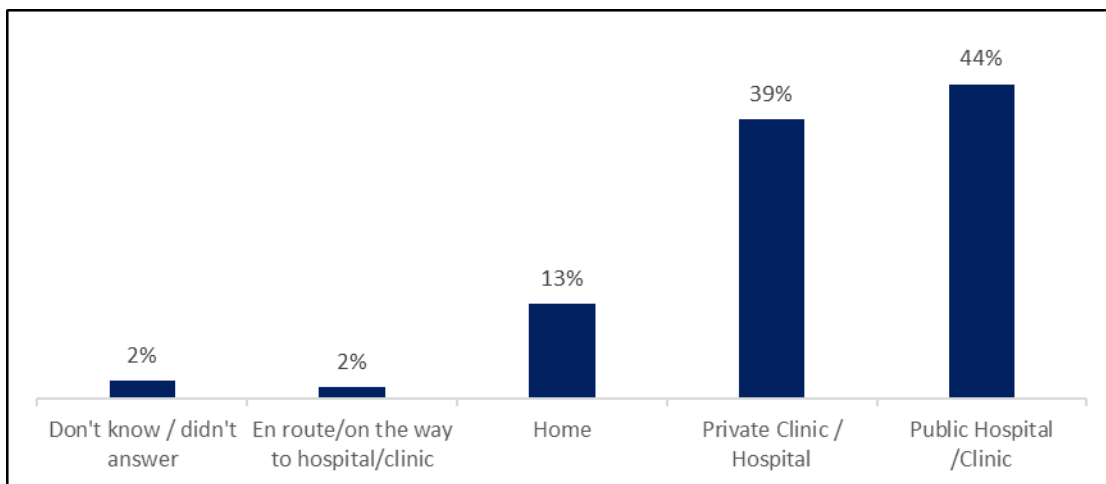
39%

Delivered a baby in a private hospital

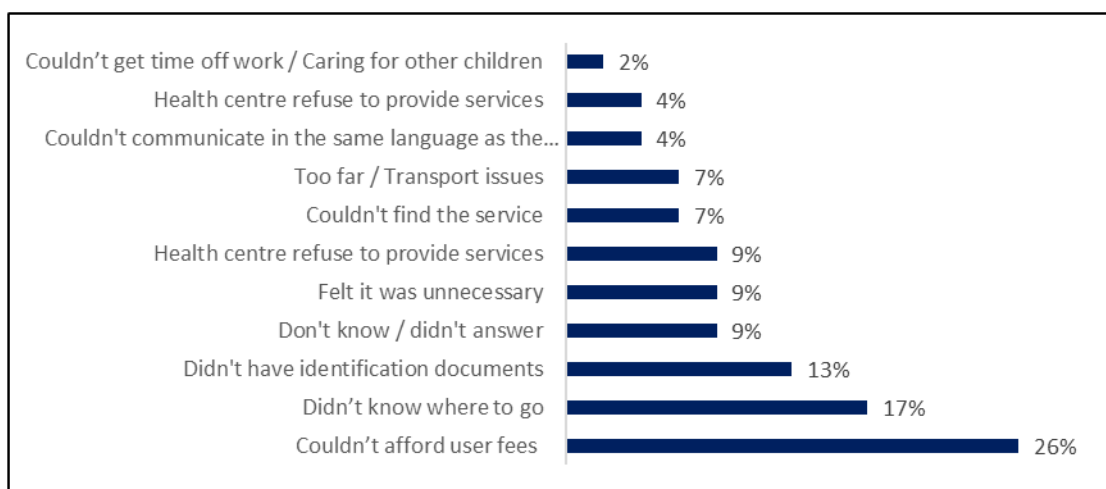
50%

Among those who delivered at Home(13%) the reason was they Couldn't afford user fees

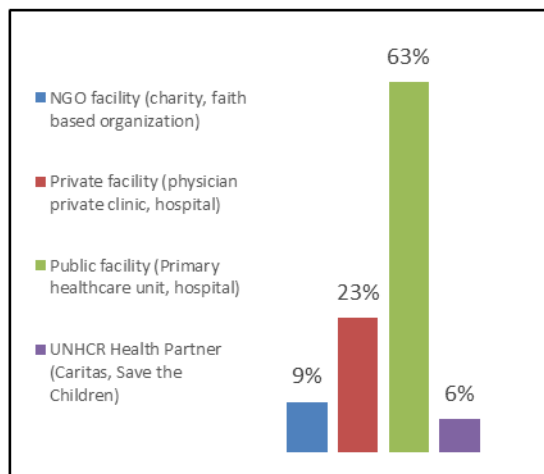
1- Delivery Place(n=121)



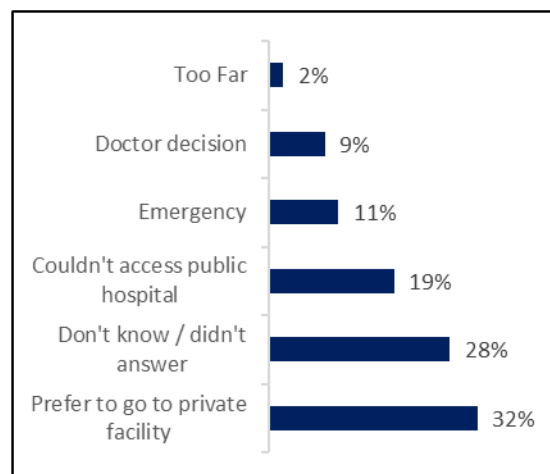
2- Reasons for not receiving ANC care among pregnant woman (n=46)



3- Area where the first ANC visit take place (n:70)



4- Reason the delivery took place at a private clinic (n:47)

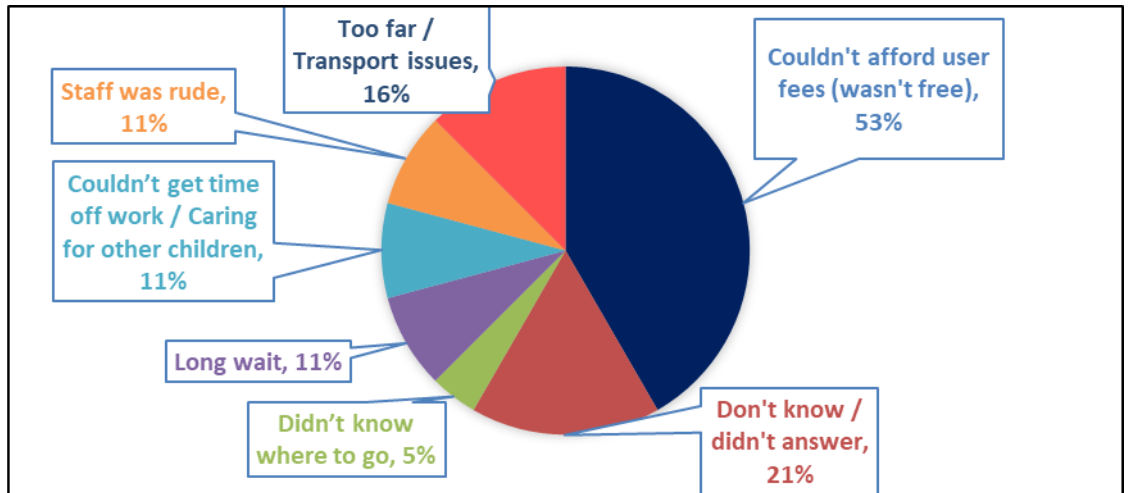


3- Antenatal Care & Reproductive Health

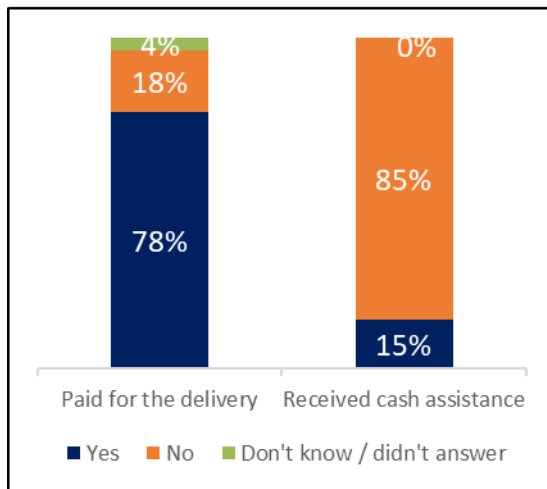
Sudanese (Total Surveyed 655)

- 67%**
Delivery was a Normal delivery
- 31%**
Delivery was a Caesarean section
- 78%**
Pregnant woman paid for the delivery
- 15%**
Among those who paid for the delivery received cash assistance
- 3,000 EGP**
Median delivery cost
- 12%**
Of new born baby needed admission to the hospital
- 1**
Average number of days the baby was admitted
- 2,500 EGP**
Median paid for baby hospitalization
- 71%**
Issued a birth certificate to the child
- 20%**
Provided with contraceptive options after delivery
- 31%**
Received any postpartum/postnatal care after delivery
- 50%**
Of the persons that received PNC went to a public Clinic / Hospital

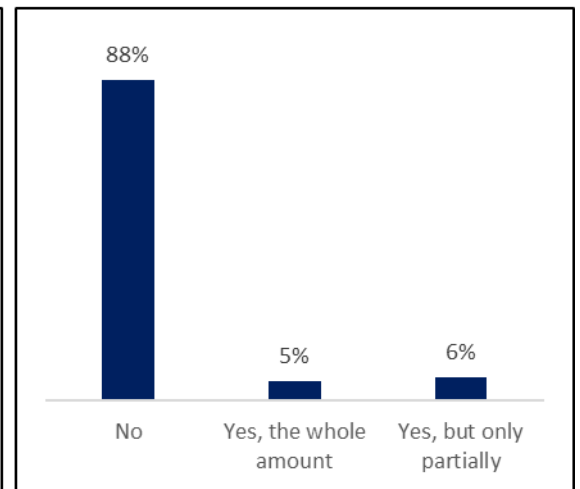
1- Difficulties in getting ANC care among pregnant woman (n:19)



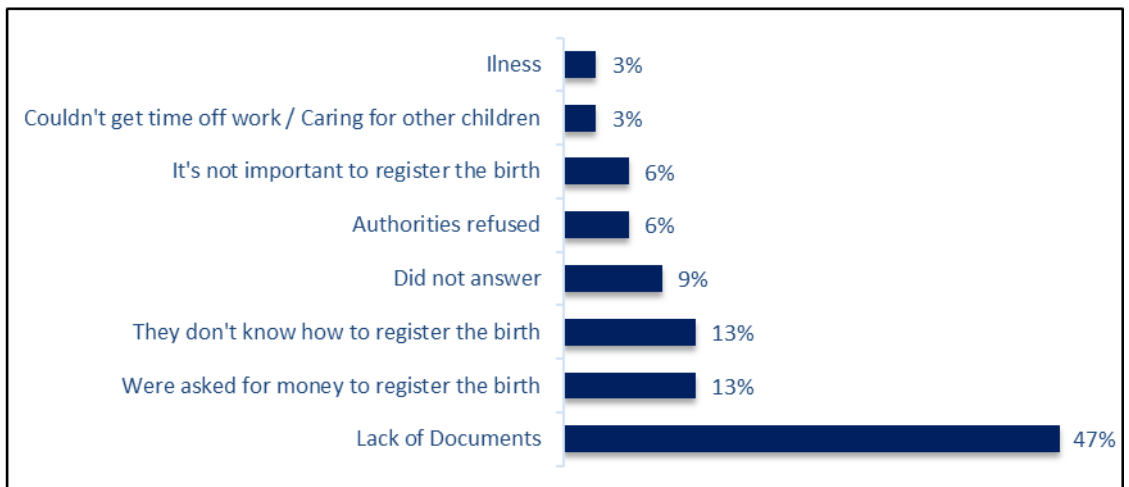
2- Paid for delivery and Received Cash assistance



3- Reimbursed the amount that was paid (n:94)



4- Reason the child was not issued with a birth certificate (n:32)



3- Antenatal Care & Reproductive Health

Other Nationalities (Total Surveyed 456)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

18%

Of women between 15 - 49 years of age is with a child 2 years old or younger

61%

Pregnant woman received ANC care

32%

Pregnant woman didn't receive ANC care

19%

Among those who didn't receive ANC care the reason was they couldn't afford user fees

56%

First ANC visit in a public clinic/Hospital

78%

Of the women receiving ANC went for 4 or more visits

12%

Pregnant woman who had difficulty accessing ANC

67%

Among those who faced difficulty getting the ANC was they Couldn't afford user fees

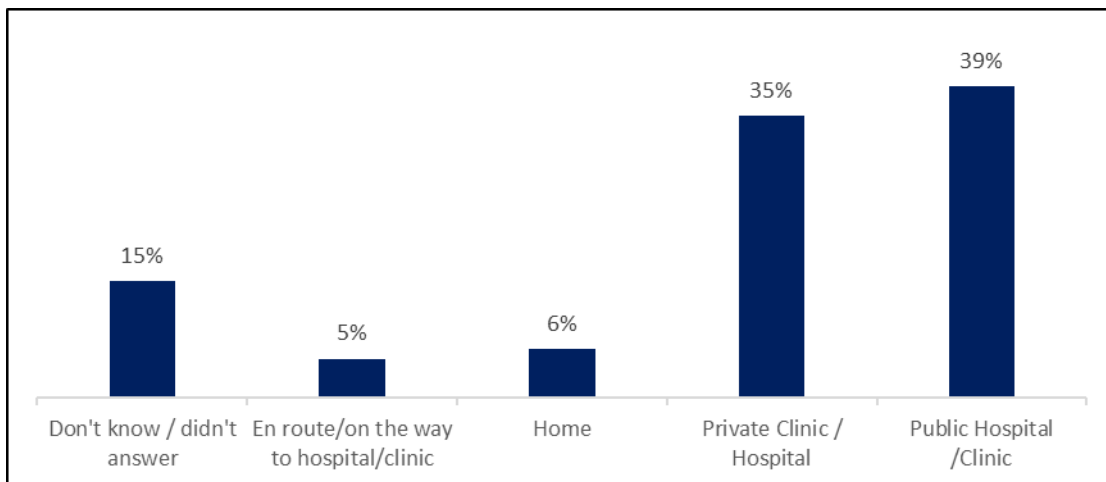
35%

Delivered a baby in a private hospital

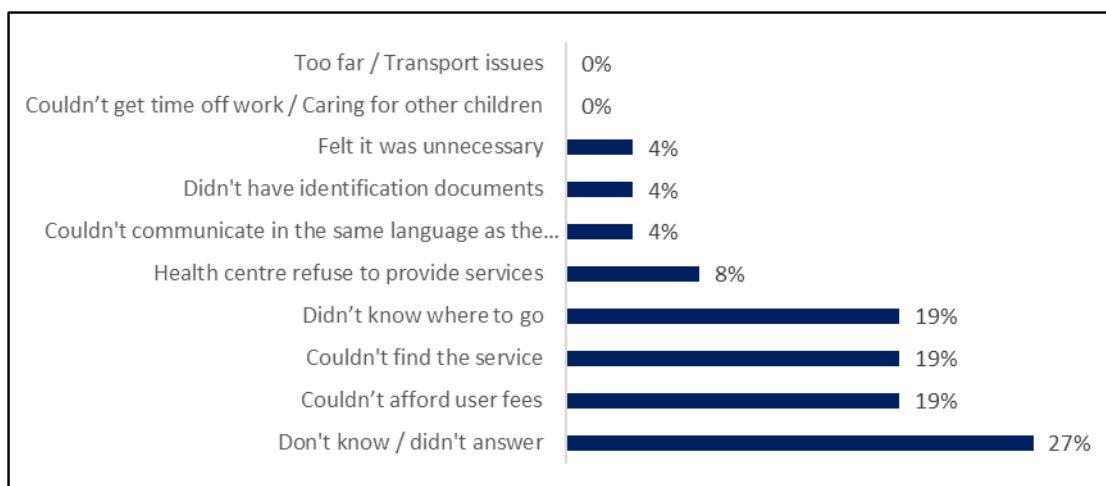
60%

Among those who delivered at Home(6%) the reason was Onset of labor before the expected date

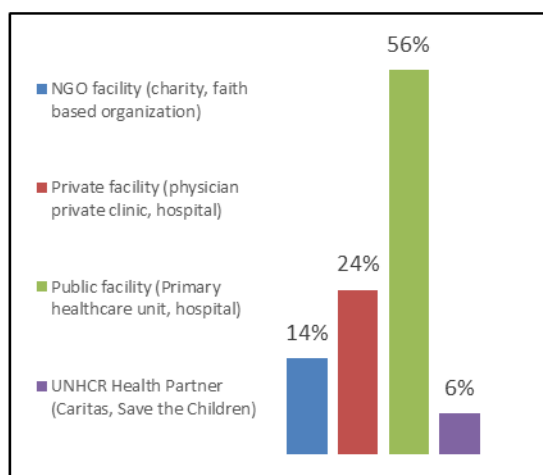
1- Delivery Place(n=82)



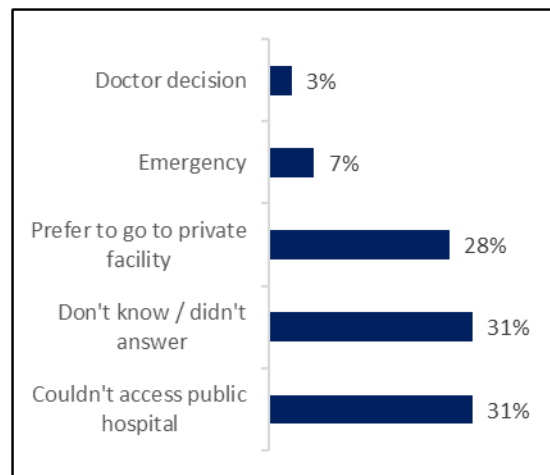
2- Reasons for not receiving ANC care among pregnant woman (n=26)



3- Area where the first ANC visit take place (n:50)



4- Reason the delivery took place at a private clinic (n:29)



3- Antenatal Care & Reproductive Health

Other Nationalities (Total Surveyed 456)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

62%
Delivery was a Normal delivery

29%
Delivery was a Caesarean section

65%
Pregnant woman paid for the delivery

23%
Among those who paid for the delivery received cash assistance

3,500 EGP
Median delivery cost

7%
Of new born baby needed admission to the hospital

2
Average number of days the baby was admitted

2,500 EGP
Median paid for baby hospitalization

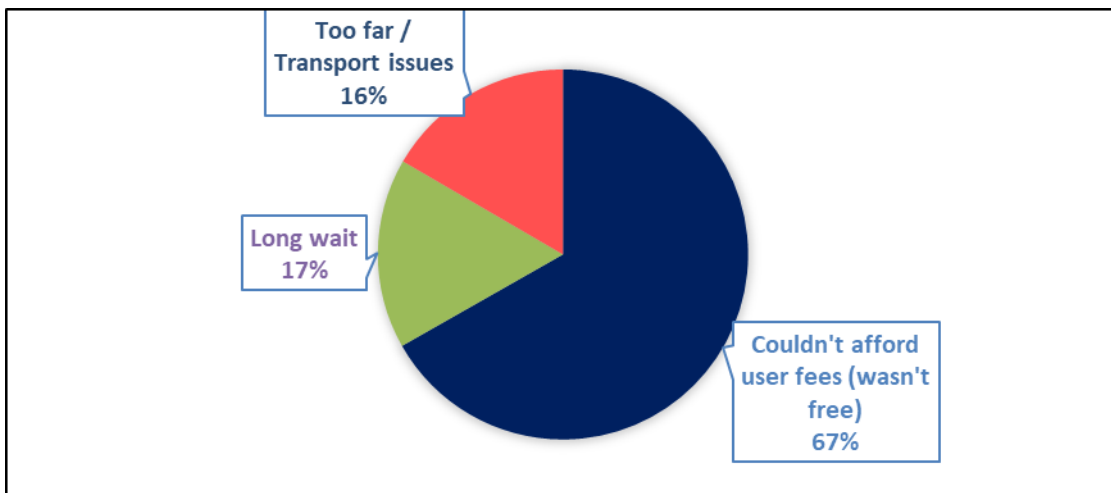
79%
Issued a birth certificate to the child

18%
Provided with contraceptive options after delivery

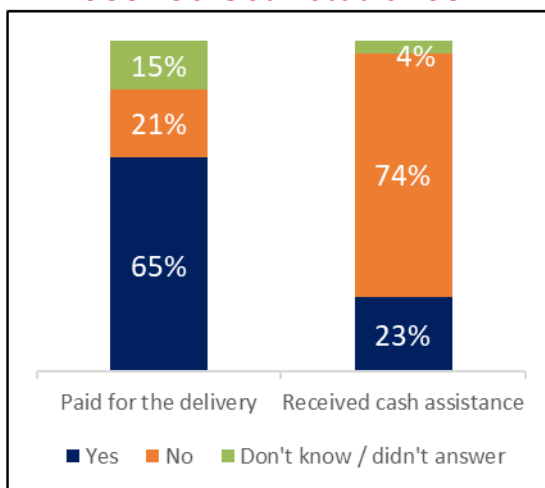
9%
Received any postpartum/postnatal care after delivery

71%
Of the persons that received PNC went to a public Clinic / Hospital

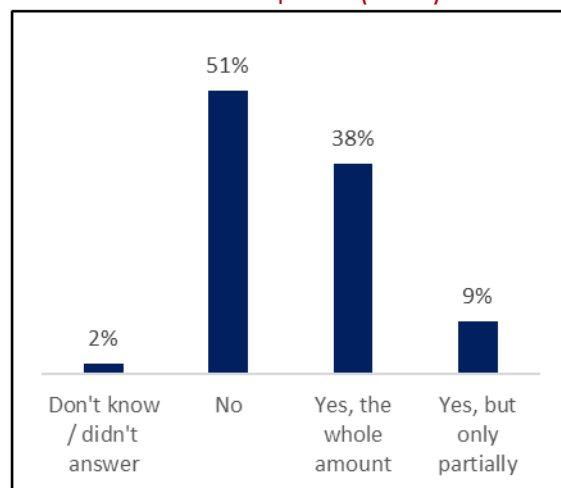
1- Difficulties in getting ANC care among pregnant woman (n:6)



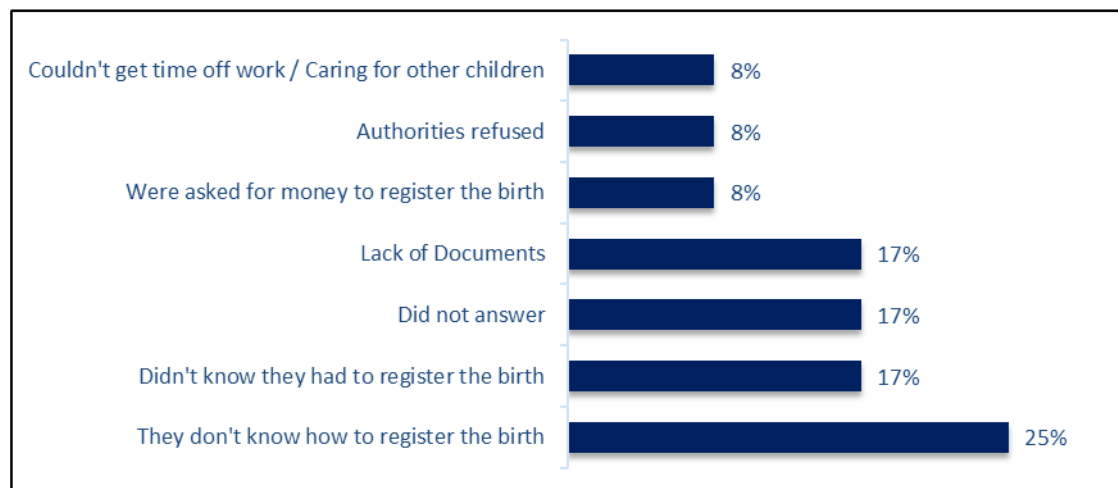
2- Paid for delivery and Received Cash assistance



3- Reimbursed the amount that was paid (n:53)



4- Reason the child was not issued with a birth certificate (n:12)



4- Chronic Diseases, Mental Illness and Disability among household members



4.1- Chronic Diseases

- **18%** of the surveyed households members reported having at least one chronic medical condition.
- The most common chronic conditions were Hypertension, Diabetes, Musculo-skeletal, Asthma, Neurological disease, and Heart disease (**34%** , **27%**, **15%** , **14%** , **12%** and **11%** respectively).
- **69%** of household members with chronic conditions were able to access medicine and health services in the last three months, **30%** were unable to access, and **1%** did not know or answer .
- **40%** of household members with chronic condition, received care at a Private facility (physician private clinic, hospital), **23%** received care at a Public facility (Primary healthcare unit, hospital), **23%** received care at a Pharmacy, and **17%** received care at UNHCR Health Partner (Caritas, Save the Children), and **5%** received care at an NGO facility (charity, faith based organization).
- **30%** of surveyed household members with chronic conditions were unable to access medicines or health services needed in the last three months reasons were, **65%** couldn't afford user fees, **14%** Don't know where to go, **8%** did not answer, **7%** Long wait, **6%** Service was not available in facility, **4%** Can't afford transport, **2%** Couldn't communicate in the same language as the service provider, and **1%** Couldn't get time off work / Caring for other children.
- A median of **400EGP** was payed by the household, monthly for chronic medication.



4.2- Impairment

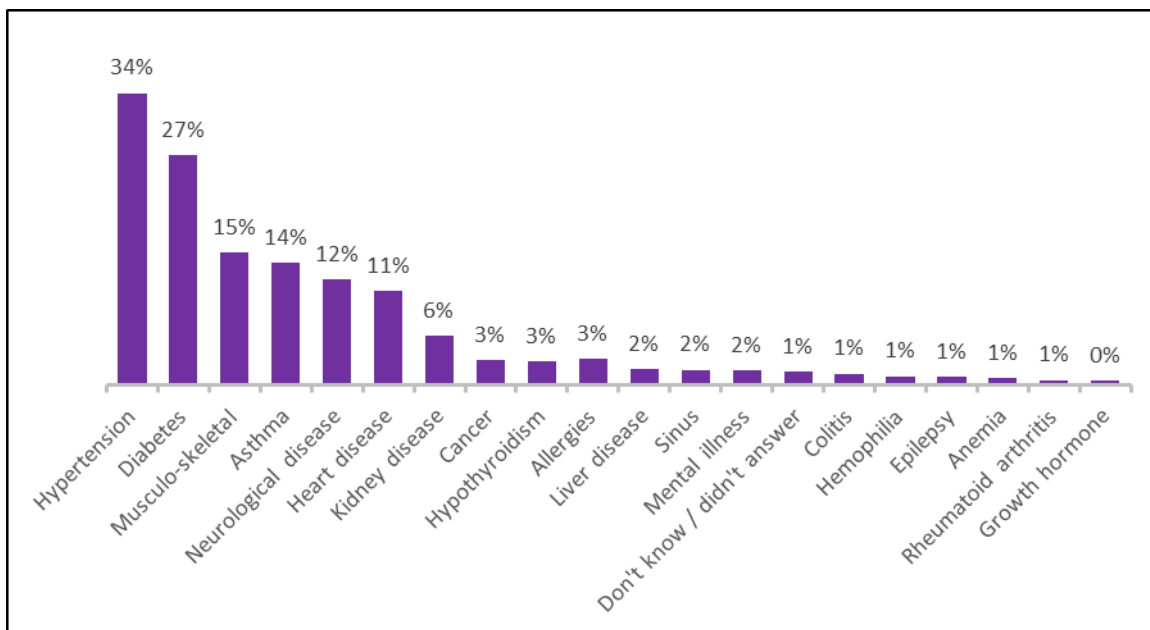
- **6%** of household members reported having an impairment, out of which most of them having Physical impairment(fractures, burns, deformities)(**49%**),**23%** having have Sensory impairment (deaf, blind), **18%** have mental impairment epilepsy, depression, PTSD, alcohol/ substance abuse, psychosis, medically unexplained complaint, **11%** have Intellectual impairment (developmental delay, etc, relating to cognitive abilities), and **3%** have Speech impairment.
- The causes of the impairment were Natural (From birth / congenital, illness, degenerative) (**42%**), Accident (Road accident, Domestic accident)(**25%**), War (**17%**), violence (**9%**), Domestic Abuse (**1%**), and Don't know / didn't answer (**10%**).
- Among those with impairments, **65%** reported never received any assistance for their impairment, **32%** received medical assistance, **2%** receiving psychological assistance, and **1%** receiving the assistive devices for their impairment or rehabilitation.
- The reasons for not being able to get assistance were the inability to afford user fees (**43%**), did not know where to go (**12%**), no services available (**10%**), Felt it was unnecessary (**9%**), still waiting for an appointment (**8%**), Couldn't communicate in the same language as the service provider (**6%**), Security issues (**5%**) and Too far / Transport issues (**5%**).

4.1- Chronic Diseases

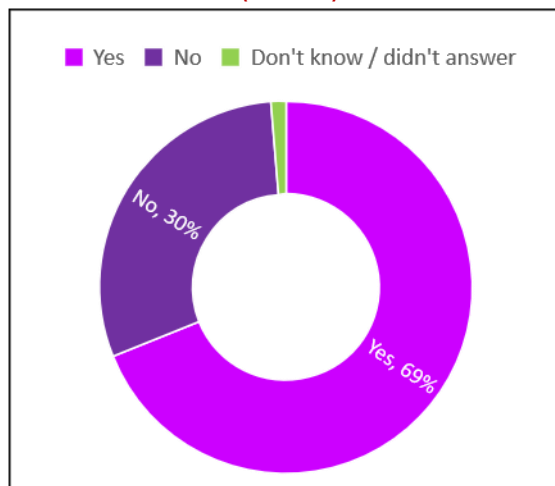
All Nationalities (Total Surveyed 5214)

- 18%**
Households members with at least one chronic medical condition
- 34%**
of the ones with a chronic condition who reported having Hypertension
- 27%**
with Diabetes
- 15%**
with Musculo-skeletal
- 14%**
with Asthma
- Access to service for chronic conditions
- 30%**
of the ones reporting a chronic medical condition who were not able to access medicine or other health services
- 69%**
with chronic conditions who were able to access medicine or other health services
- 40%**
Received care at a Private facility
- 23%**
Received care in a Public facility and a pharmacy
- 400 EGP**
The median payed for Chronic medication
- Barriers to accessing care for chronic conditions (n=280)
- 65%**
Could not afford user fees
- 14%**
Don't know where to go

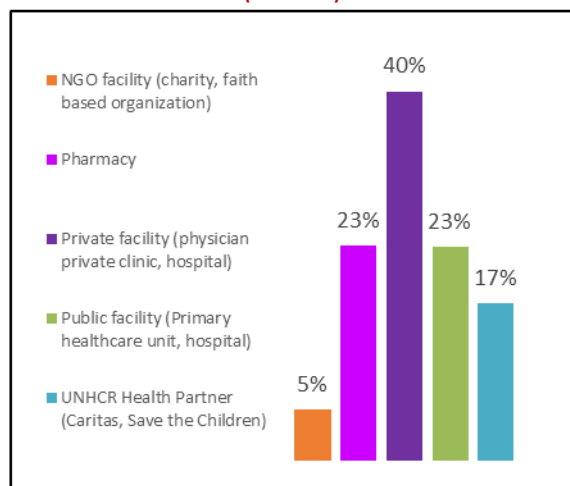
1- Report of members with at least one chronic illness (n=940)



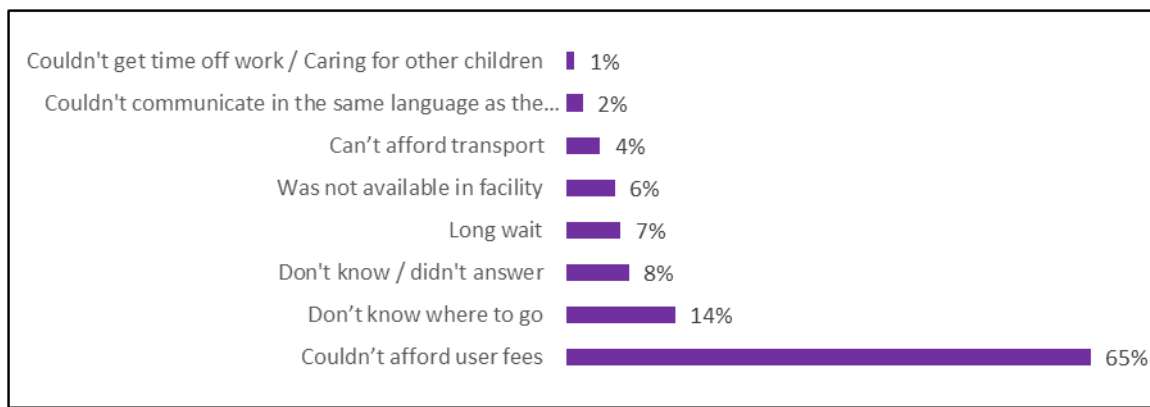
2- Ability to access services for individuals with chronic illnesses (n:940)



3- Places where individuals received care for their chronic illnesses (n:648)

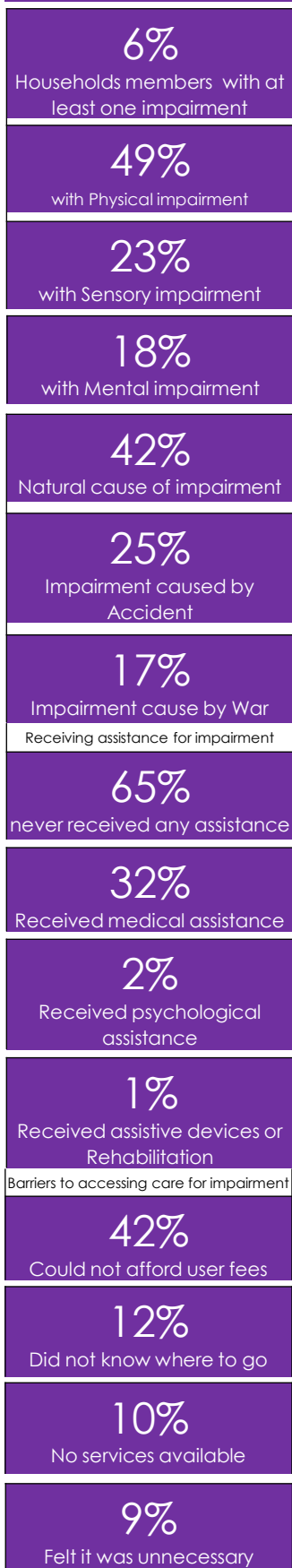


4- Reasons for inability to access care (n:280)

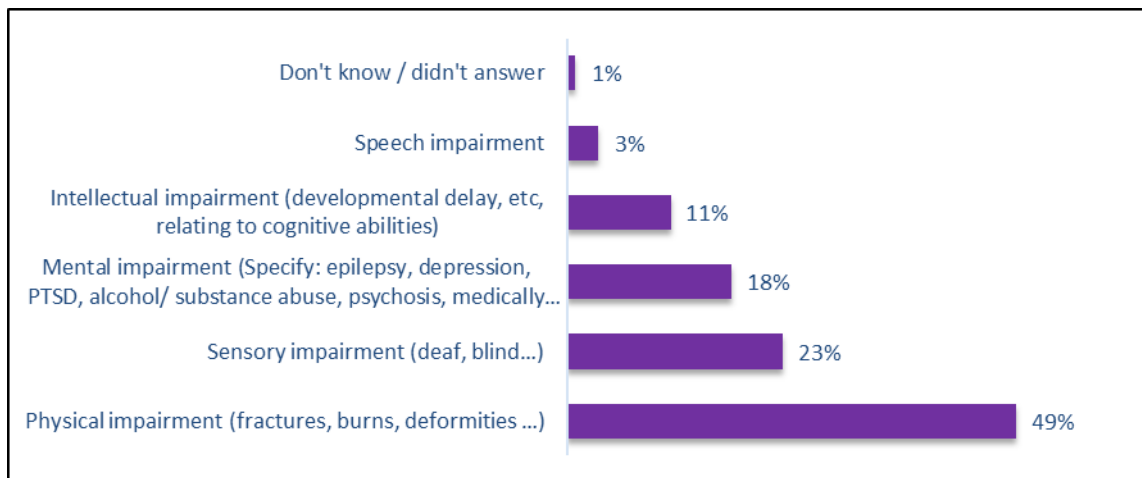


4.2- Impairment

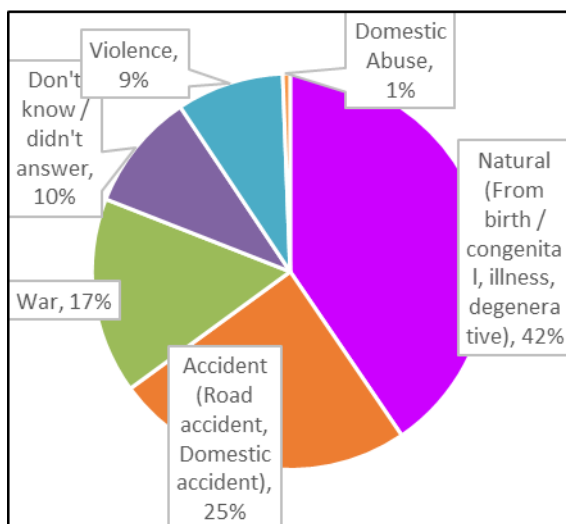
All Nationalities (Total Surveyed 5214)



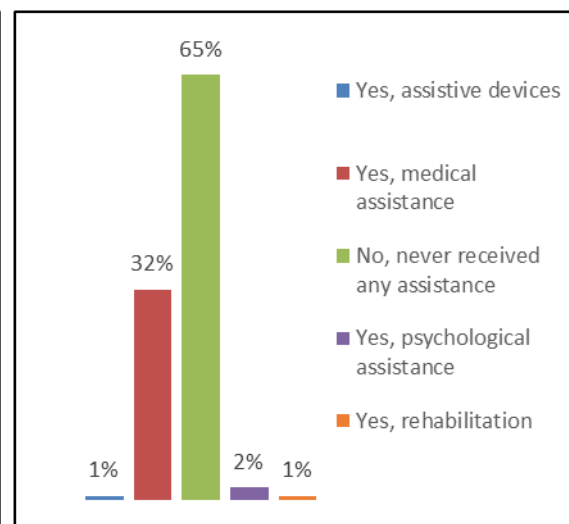
1- Different kind of Impairment (n:321)



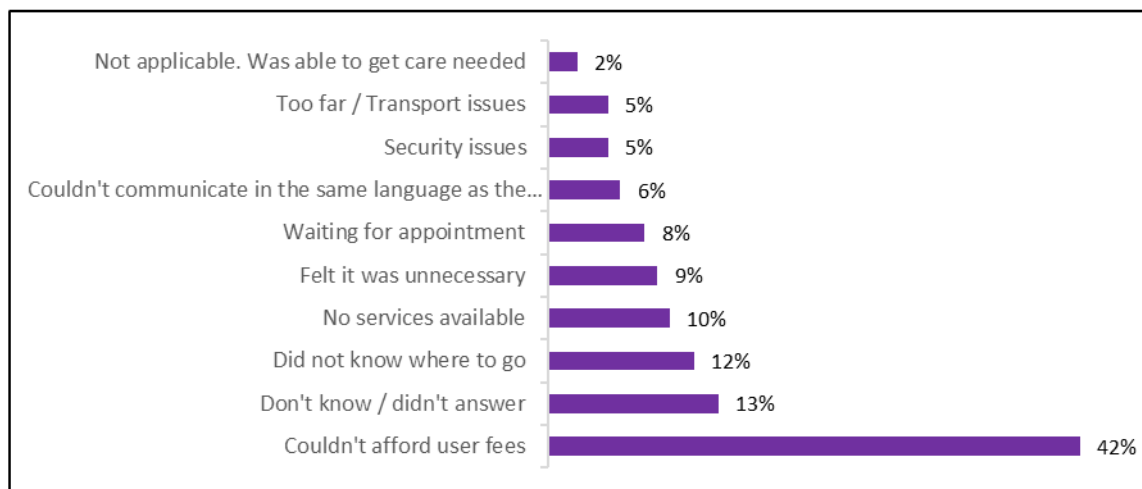
2- Cause of Impairment (n:321)



3- Assistance for their impairment (n:321)



4- Inability to access assistance (n:208)



4.1- Chronic Diseases

Syrian (Total Surveyed 1939)

20%
Households members with at least one chronic medical condition

35%
of the ones with a chronic condition who reported having Hypertension

26%
with Diabetes

22%
with Musculo-skeletal

17%
with Neurological disease
Access to service for chronic conditions

21%
of the ones reporting a chronic medical condition were not able to access medicine or other health services

78%
with chronic conditions were able to access medicine or other health services

53%
Received care at a Private facility

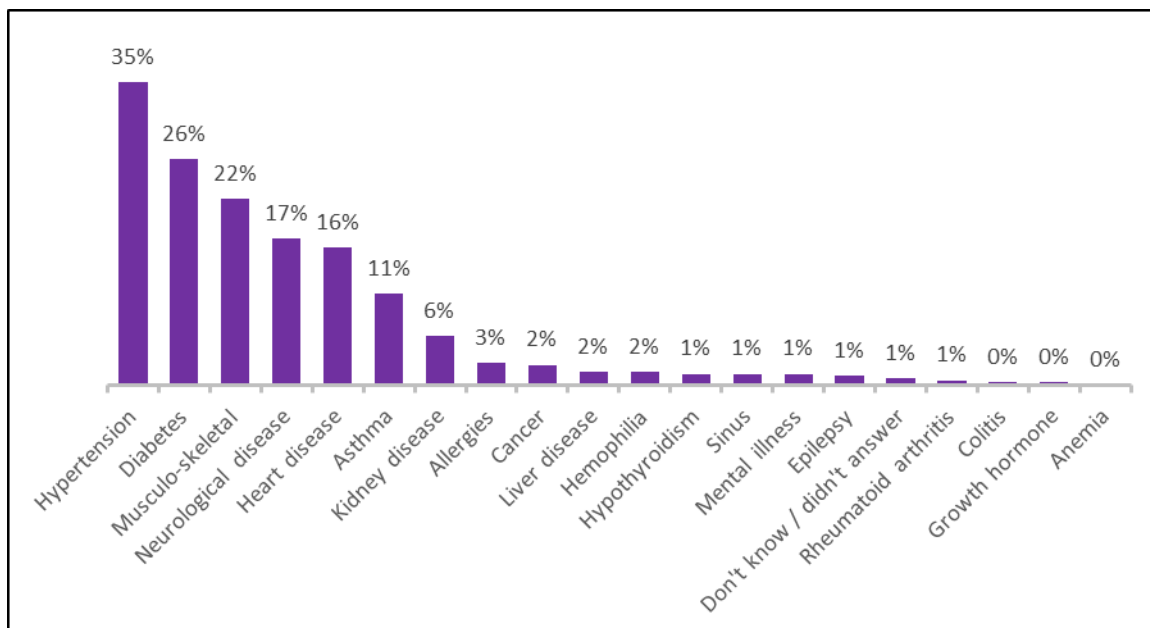
21%
Received care in a Public facility

425 EGP
The median payed for Chronic medication
Barriers to accessing care for chronic conditions (n=81)

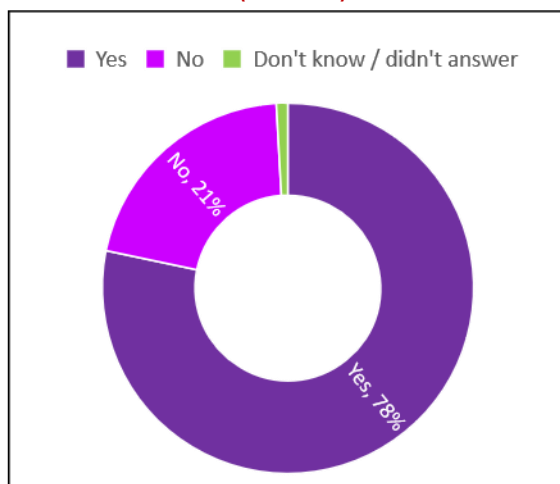
62%
Could not afford user fees

10%
Don't know where to go

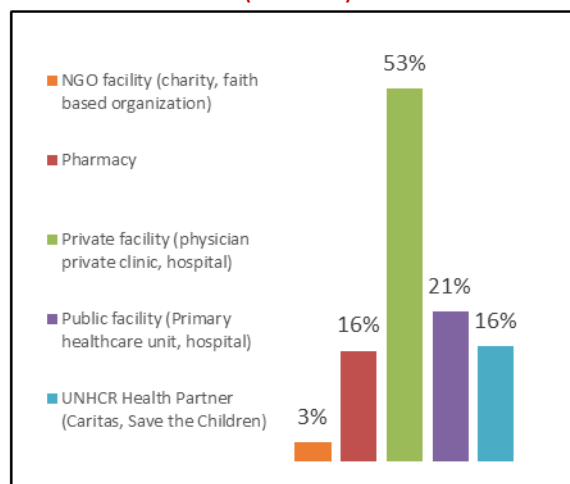
1- Report of members with at least one chronic illness (n=390)



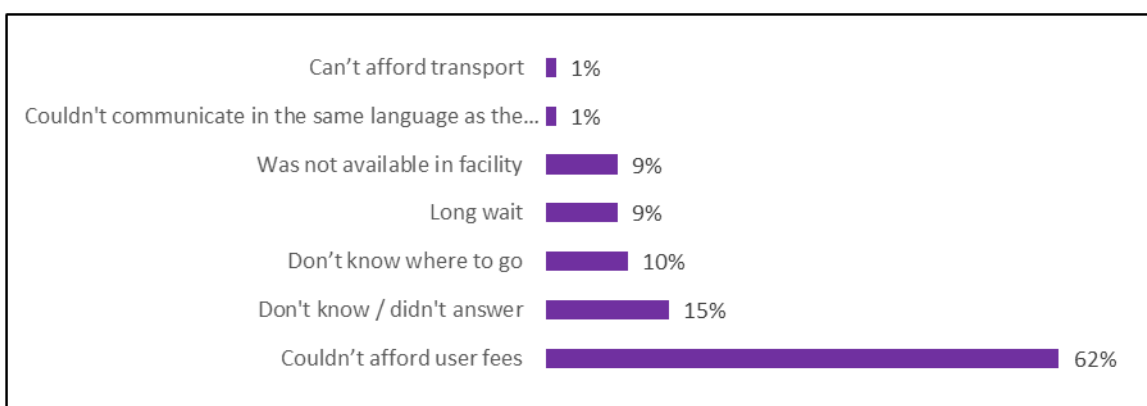
2- Ability to access services for individuals with chronic illnesses (n=390)



3- Places where individuals received care for their chronic illnesses (n=305)



4- Reasons for inability to access care (n:81)



4.2- Impairment

Syrian (Total Surveyed 1939)

6%

Households members with at least one impairment

52%

with Physical impairment

21%

with Sensory impairment

20%

with Mental impairment

50%

Natural cause of impairment

26%

Impairment caused by Accident

21%

Impairment cause by War
Receiving assistance for impairment

62%

never received any assistance

36%

Received medical assistance

3%

Received psychological assistance

0%

Received assistive devices or Rehabilitation

Barriers to accessing care for impairment

35%

Could not afford user fees

12%

Security issues

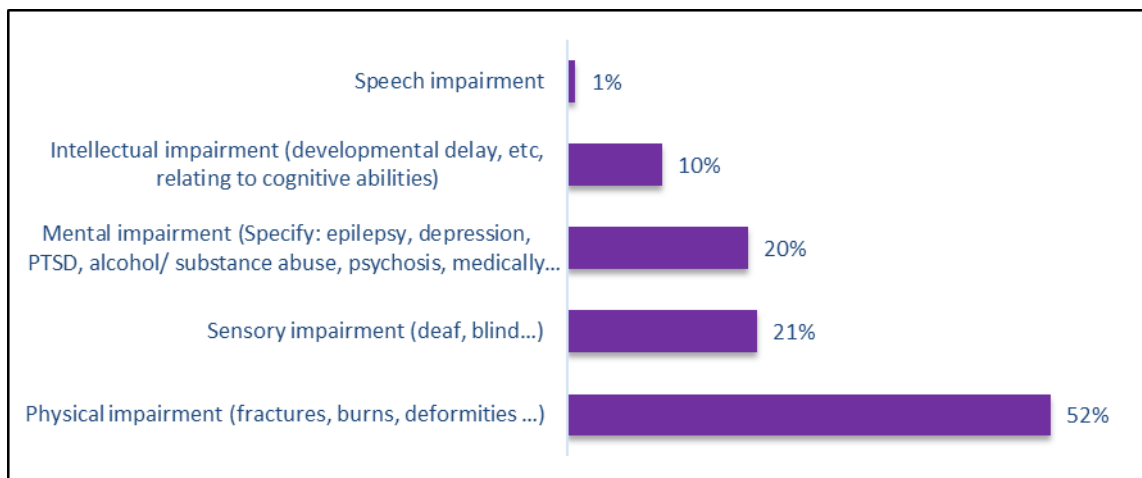
17%

No services available

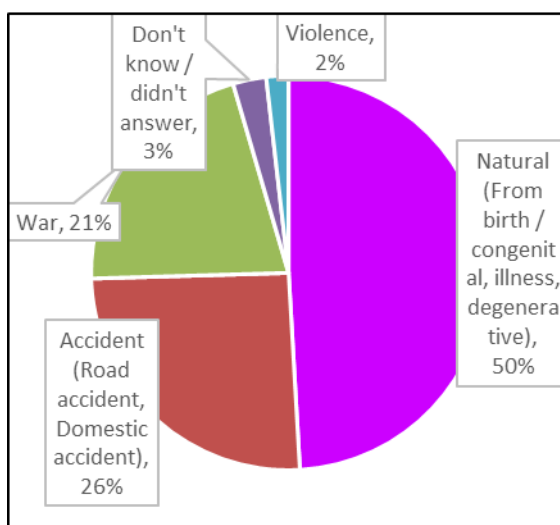
15%

Felt it was unnecessary

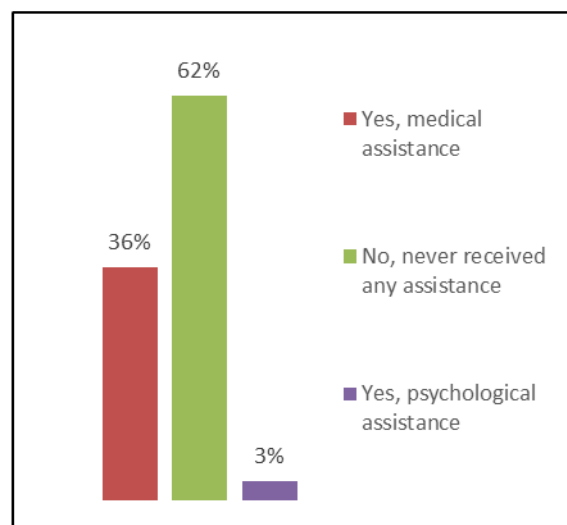
1- Different kind of Impairment (n:107)



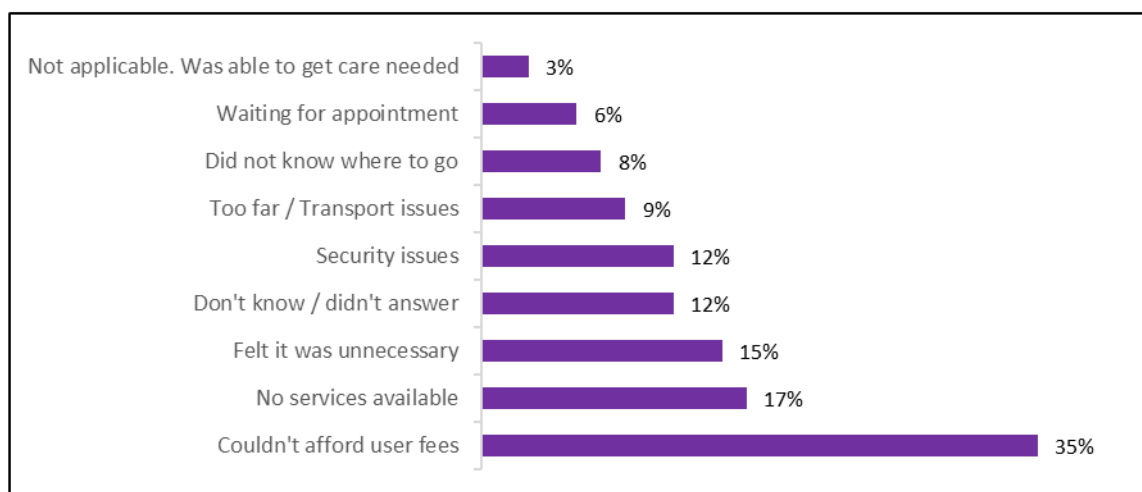
2- Cause of Impairment (n:107)



3- Assistance for their impairment (n:107)



4- Inability to access assistance (n:66)



4.1- Chronic Diseases

Sudanese (Total Surveyed 2009)

- 20%**

Households members with at least one chronic medical condition
- 35%**

of the ones with a chronic condition who reported having Hypertension
- 30%**

with Diabetes
- 9%**

with Musculo-skeletal
- 19%**

with Asthma disease

Access to service for chronic conditions
- 37%**

of the ones reporting a chronic medical condition were not able to access medicine or other health services
- 62%**

with chronic conditions were able to access medicine or other health services
- 24%**

Received care at a Private facility
- 34%**

Received care at a Pharmacy
- 500 EGP**

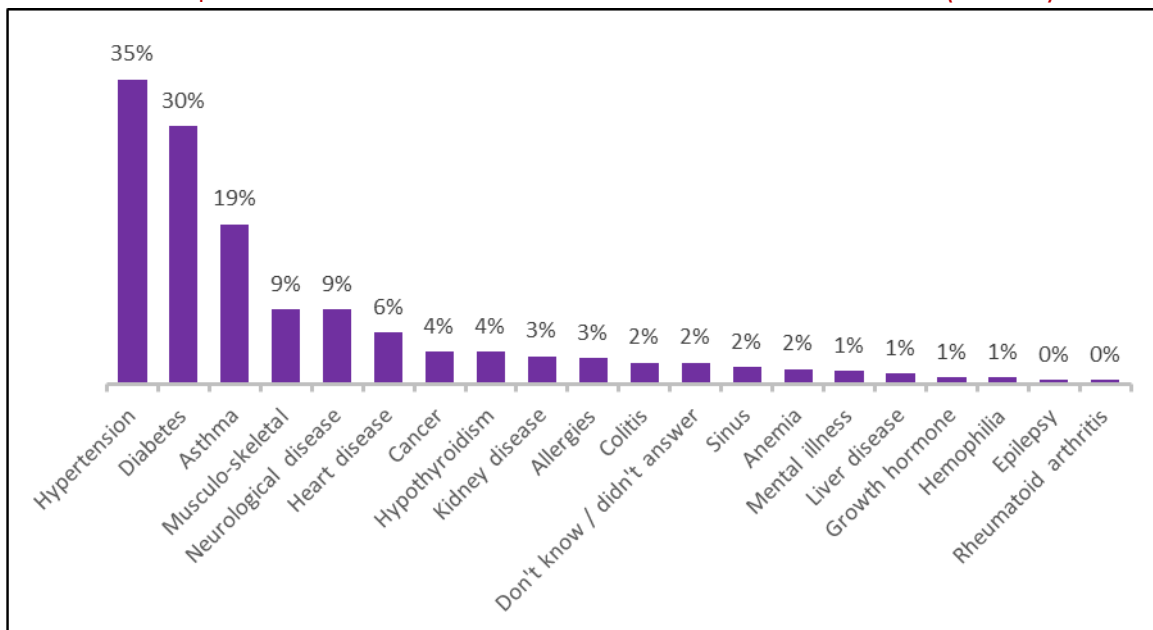
The median payed for Chronic medication

Barriers to accessing care for chronic conditions (n=150)
- 68%**

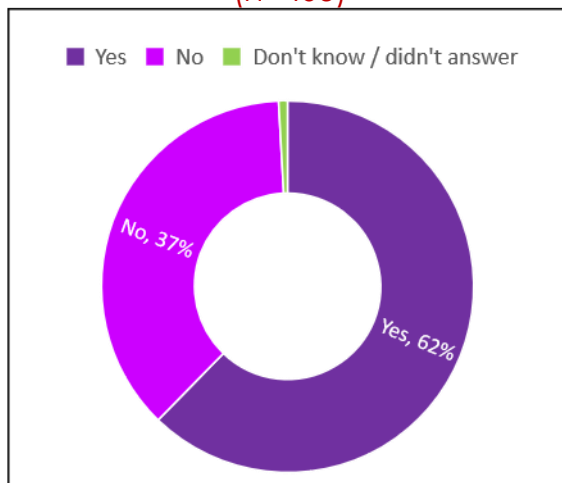
Could not afford user fees
- 15%**

Don't know where to go

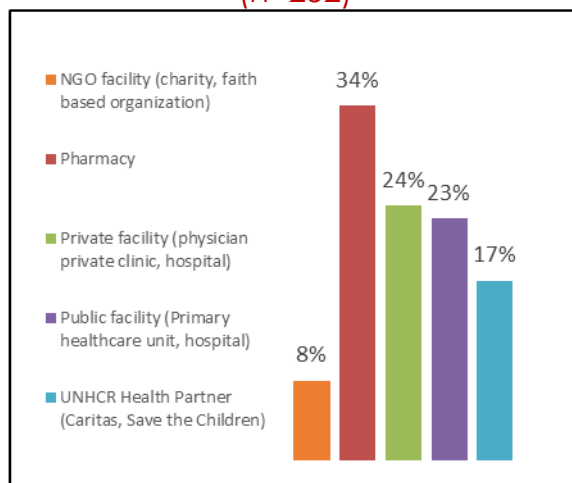
1- Report of members with at least one chronic illness (n=405)



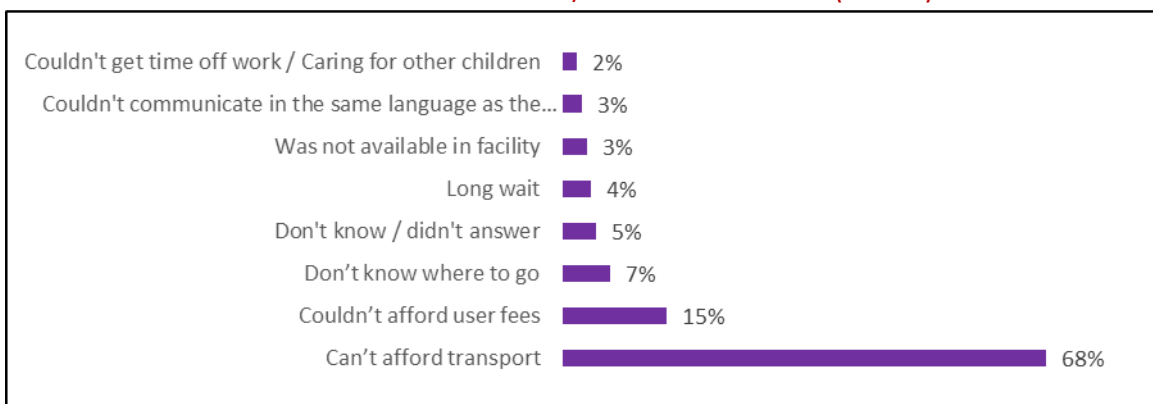
2- Ability to access services for individuals with chronic illnesses (n=405)



3- Places where individuals received care for their chronic illnesses (n=252)



4- Reasons for inability to access care (n:150)

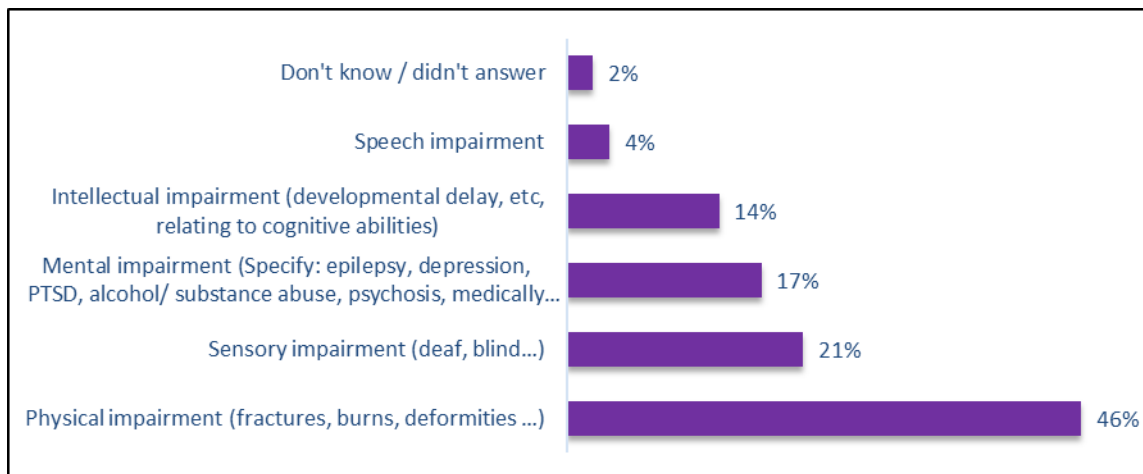


4.2- Impairment

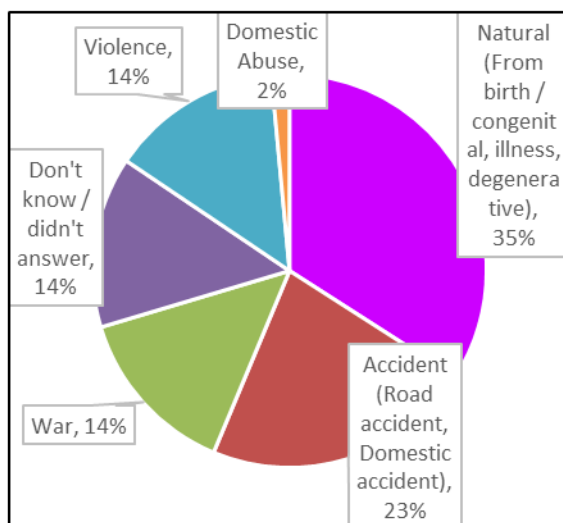
Sudanese (Total Surveyed 2009)

7%	Households members with at least one impairment
46%	with Physical impairment
21%	with Sensory impairment
17%	with Mental impairment
35%	Natural cause of impairment
23%	Impairment caused by Accident
14%	Impairment cause by War
74%	never received any assistance
23%	Received medical assistance
2%	Received psychological assistance
1%	Received Rehabilitation
45%	Could not afford user fees
13%	Did not know where to go
10%	Waiting for appointment or Couldn't communicate in the same language
5%	Felt it was unnecessary

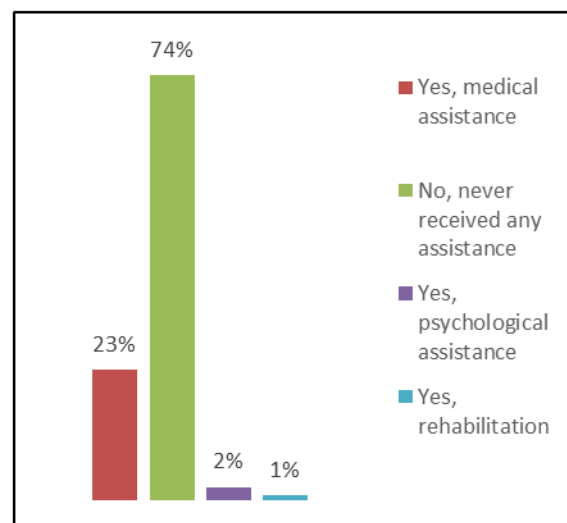
1- Different kind of Impairment (n:132)



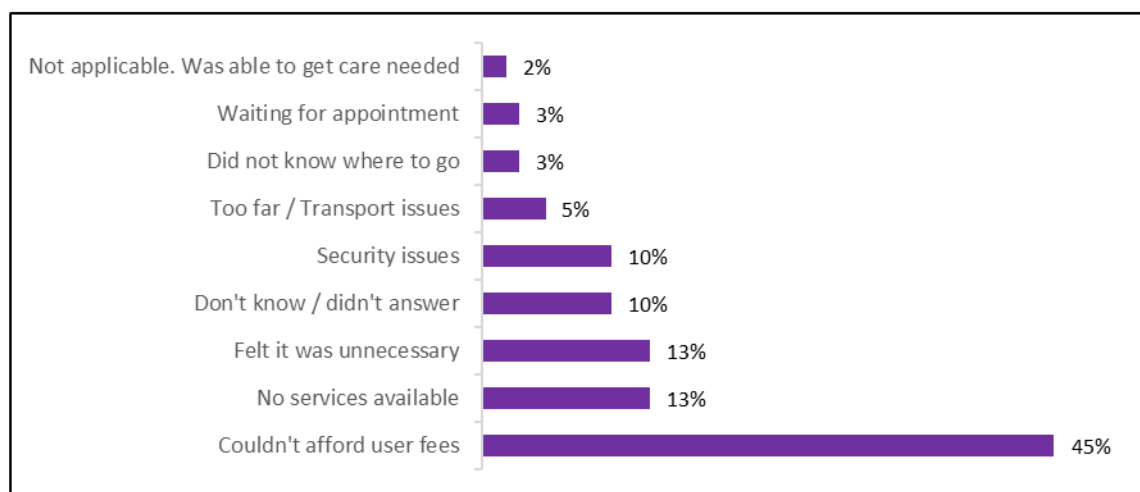
2- Cause of Impairment (n:132)



3- Assistance for their impairment (n:132)



4- Inability to access assistance (n:98)



4.1- Chronic Diseases

Other Nationalities (Total Surveyed 1266)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

7%

Households members with at least one chronic medical condition

26%

of the ones with a chronic condition who reported having Hypertension

19%

with Diabetes

17%

with Musculo-skeletal

12%

with Asthma or Kidney disease

Access to service for chronic conditions

34%

of the ones reporting a chronic medical condition were not able to access medicine or other health services

63%

with chronic conditions were able to access medicine or other health services

36%

Received care at a Private facility

27%

Received care at a Public facility

300 EGP

The median payed for Chronic medication

Barriers to accessing care for chronic conditions (n=49)

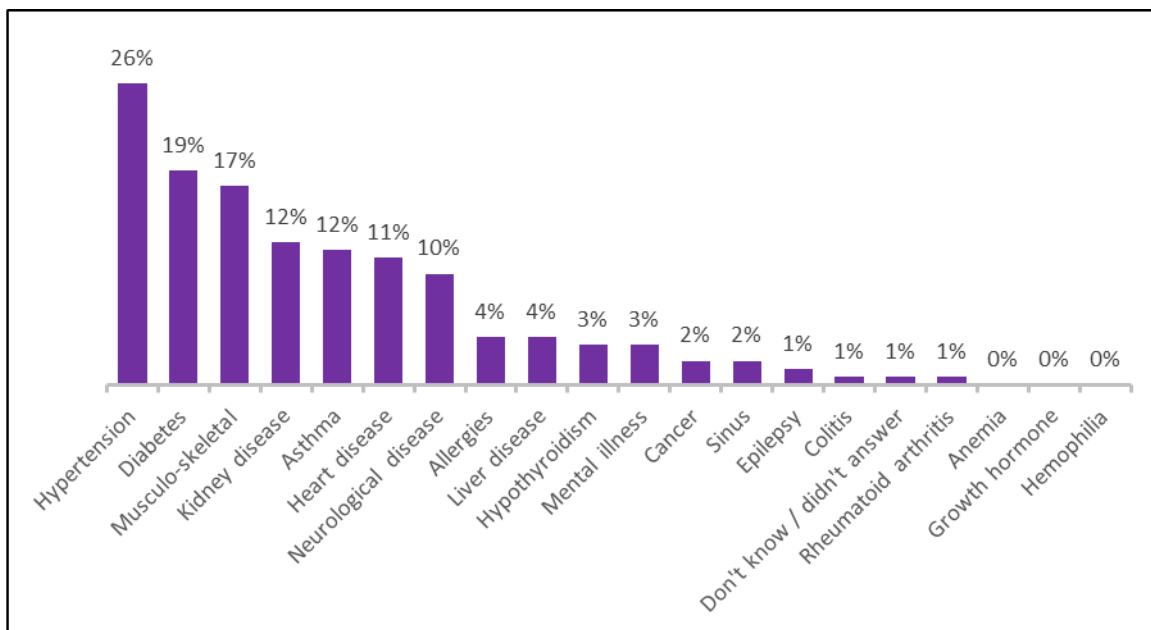
61%

Could not afford user fees

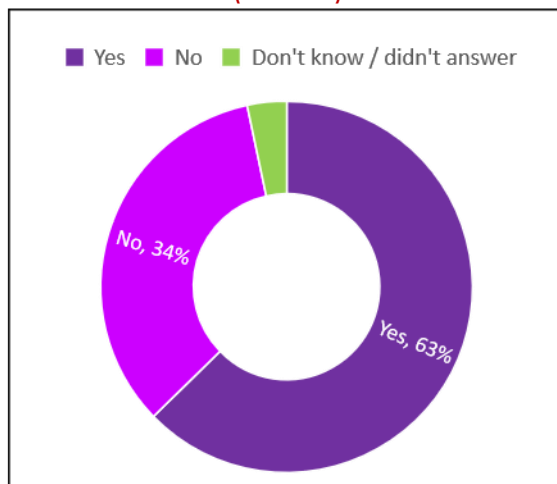
16%

Don't know where to go

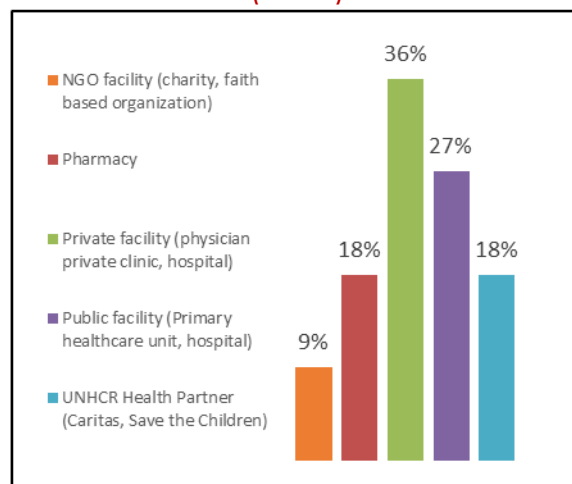
1- Report of members with at least one chronic illness (n=145)



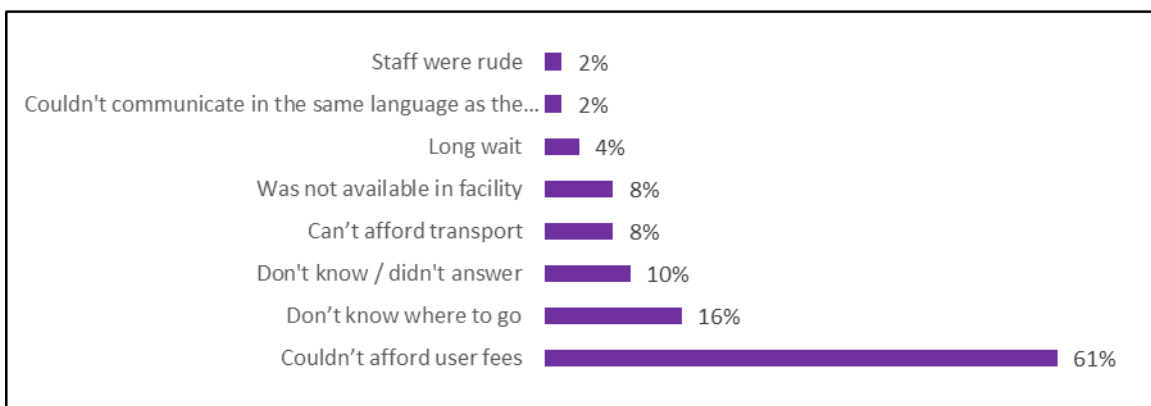
2- Ability to access services for individuals with chronic illnesses (n=145)



3- Places where individuals received care for their chronic illnesses (n=91)



4- Reasons for inability to access care (n:49)



4.2- Impairment

Other Nationalities (Total Surveyed 1266)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

6%

Households members with at least one impairment

48%

with Physical impairment

30%

with Sensory impairment

16%

with Mental impairment

41%

Natural cause of impairment

28%

Impairment caused by Accident

13%

Impairment cause by War
Receiving assistance for impairment

54%

never received any assistance

43%

Received medical assistance

2%

Received assistive devices

1%

Received Rehabilitation

Barriers to accessing care for impairment

45%

Could not afford user fees

14%

Did not know where to go or No services available

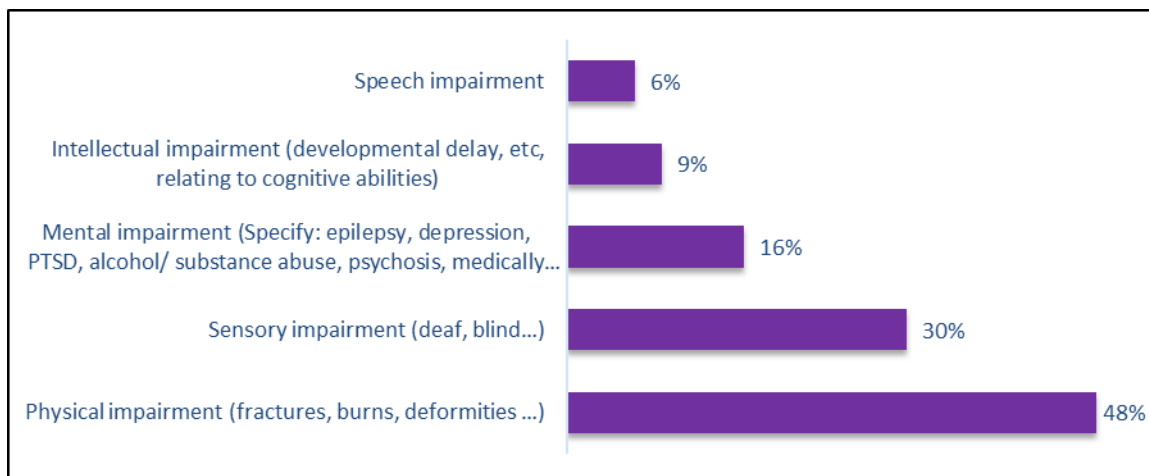
5%

Waiting for appointment or Couldn't communicate in the same language

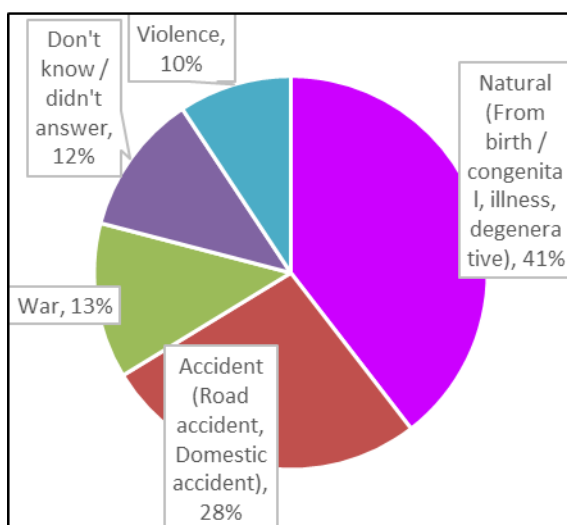
7%

Felt it was unnecessary

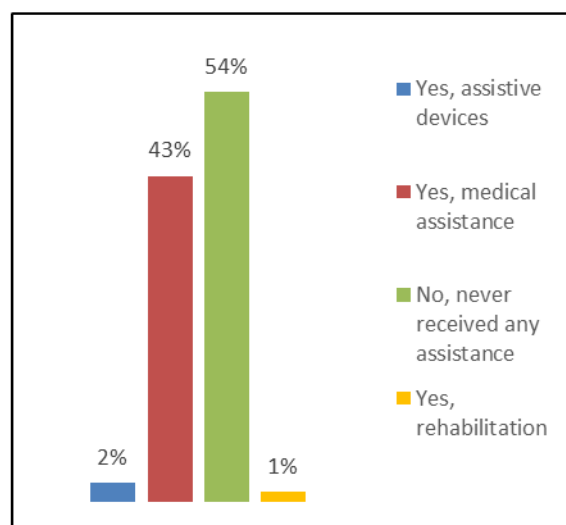
1- Different kind of Impairment (n:82)



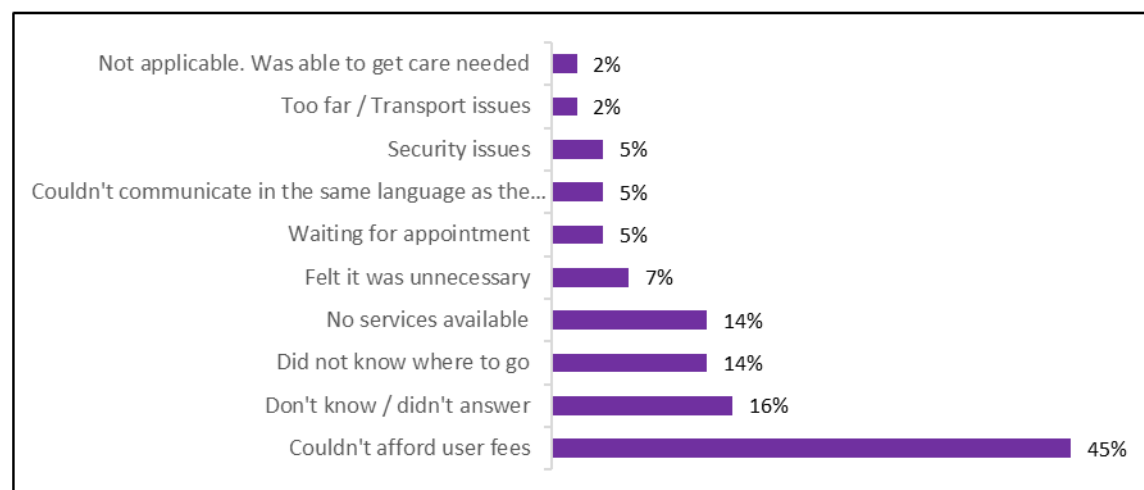
2- Cause of Impairment (n:82)



3- Assistance for their impairment (n:82)



4- Inability to access assistance (n:44)



5- Access and Knowledge of Health Services



5.1- Access to Health Services

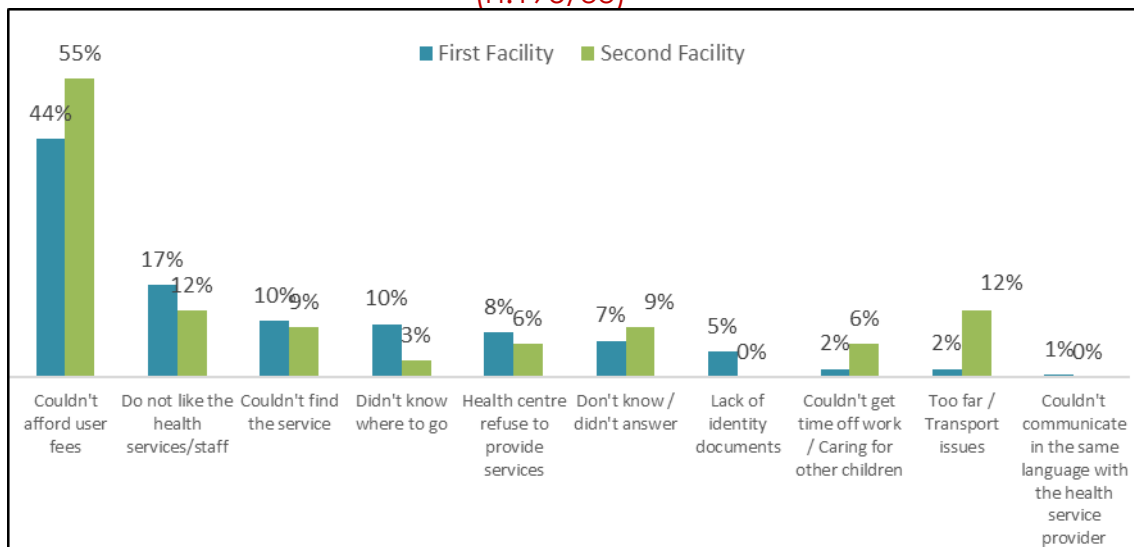
- **18%** of the household members needed health care services in the past 3 months (excluding for chronic disorders).
- Among those who sought care **77%** were able to obtain it at the first point of care, **21%** were not able, **2%** did not know or answer, and among those who obtained care, **37%** of the household members who sought care at the first place, did so at a private facility, **35%** sought care at a Public Facility, **15%** received care at an NGO clinic, **10%** at a Pharmacy, and **3%** did not know or answer.
- **82%** had to pay a median of **400 EGP** for services received at first point of care of which **88%** were not refunded the amount paid, **9%** were fully refunded, **0%** were partially refunded, and **3%** Did not answer or know.
- **21%** of the household members reported not being able to obtain health care despite seeking it, **44%** of those reported that they couldn't afford user fees, **17%** do not like the health services/staff, and **10%** reported Service was unavailable or did not know where to go.
- **21%** of the household members that needed access to health care services in the past 3 months required authorization from (Government/ UNHCR/ Other) prior to accessing care, of which **45%** were able to get the authorization and **55%** were not able to obtain it due to Contact person was not accessible (**64%**), Time was too short to ask for authorization(**11%**), **11%** did not provide an answer and **7%** Did not know the contact person address or telephone or Did not think that I get authorization even if I ask.
- **88%** of household members who sought care, were satisfied with the healthcare services received from the first place. **12%** were not satisfied and **1%** did not know or answer.
- **11%** out of the of household members who sought care, were referred or sought care elsewhere, while **88%** were not, and **1%** did not know or answer.
- Among those who were referred elsewhere, **48%** sought care at a Private Clinic / Hospital, **36%** received care at a Public Facility, **12%** at an NGO clinic, and **5%** did not know or answer.
- Among those who were referred elsewhere , **89%** paid for the services, paying a median of **800 EGP** for the referral services, of which **86%** were not refunded the amount paid, **2%** were partially refunded and **12%** were fully refunded.
- **64%** of the household members who were referred, were able to get the health care services at the referred place, **33%** were not able to get the services, and **4%** did not answer or know.
- **55%** out of the household members who were not able to get the health care services at the referred place, reported the reason not being able to afford user fees, **12%** reported they Don't like the health services/staff or Too far / Transport issues, and **9%** Couldn't find the service.
- **89%** of household members who were referred or sought care elsewhere, were satisfied with the healthcare services received at the second facility while **11%** were not satisfied.

5.1- Access to Health Care in the Last Three Months

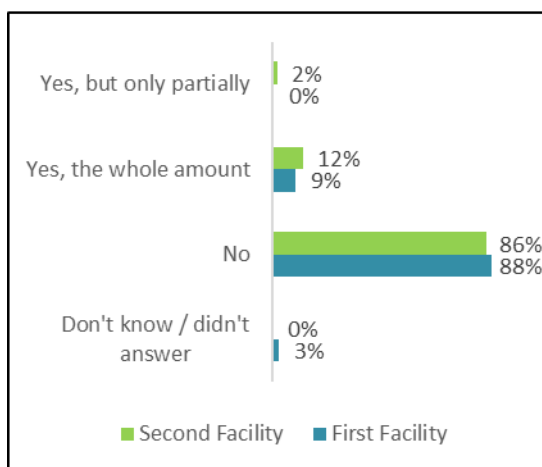
All Nationalities (Total Surveyed 5214)

18%
Household member needed health care in the last 3 months
21%
Required authorization prior to accessing care
45%
Of those requiring authorization, were able to get it
First point of care
77%
Individuals were able to get health care
82%
Individuals paid for the health care services given
88%
Were satisfied with the healthcare services
EGP 400
The median cost for care in first facility
Second point of care
11%
Individuals were referred somewhere else
64%
Individuals were able to get health care services
89%
Individuals paid for the health care services given
EGP 800
The median cost for care in second facility
89%
Individuals who sought care at second facility were satisfied

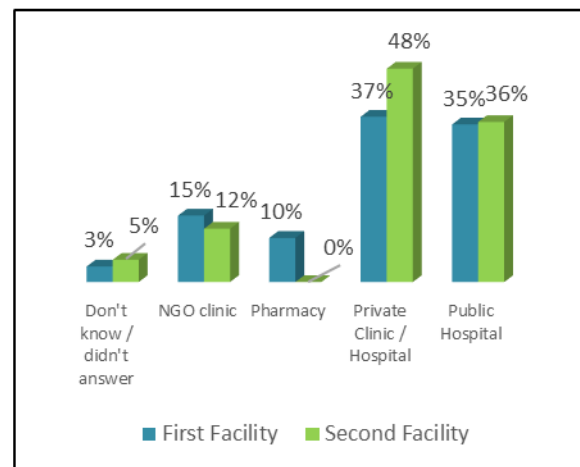
1- Barriers to accessing services at the first point and second point of care (n:195/33)



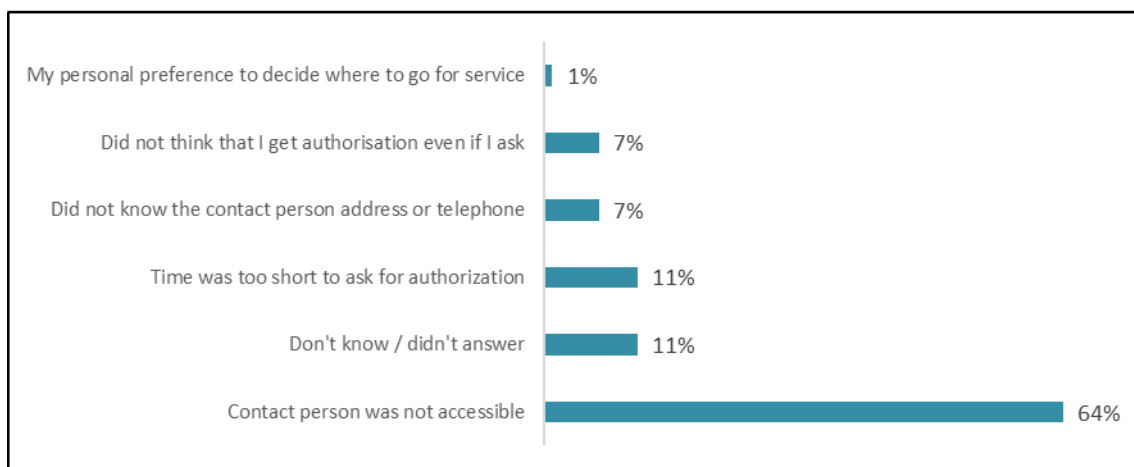
2- Refund of the amount paid (n:586/58)



3- Point of care accessed by the individuals in the last 3 months (n:926/101)



4- The reason for being denied the authorization (n:105)

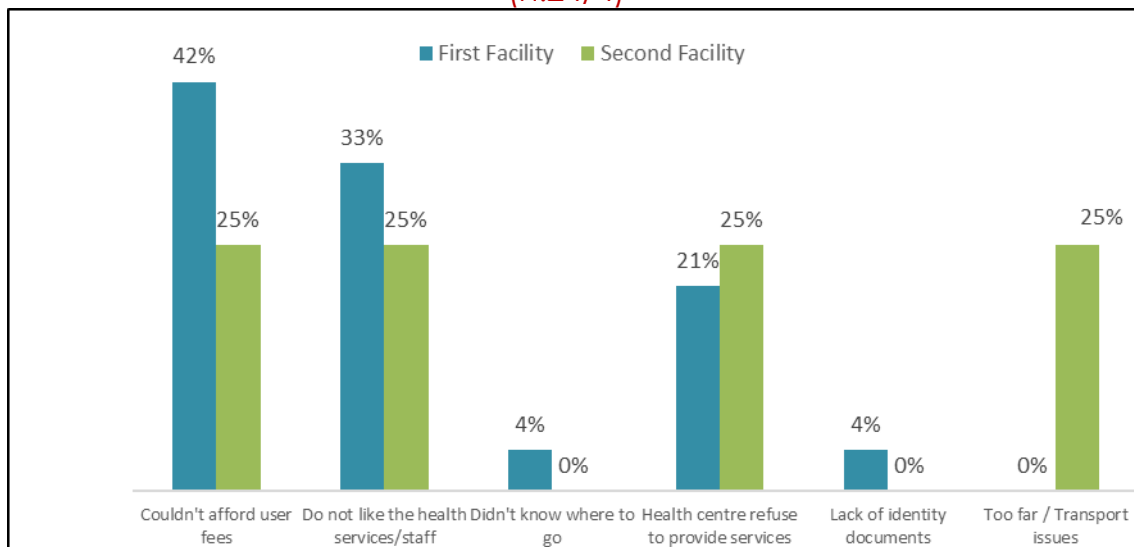


5.1- Access to Health Care in the Last Three Months

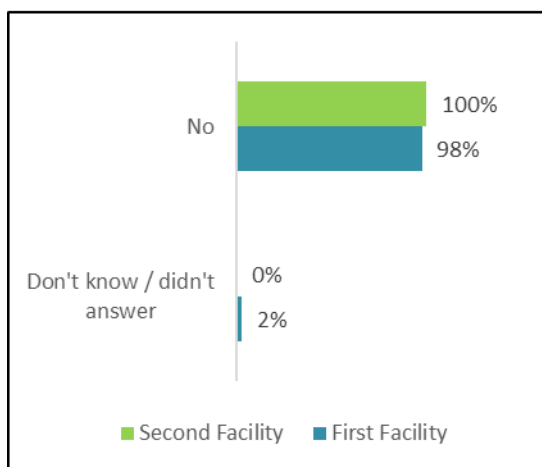
Syrian (Total Surveyed 1939)

14%
Household member needed health care in the last 3 months
7%
Required authorization prior to accessing care
42%
Of those requiring authorization, were able to get it
First point of care
91%
Individuals were able to get health care
84%
Individuals paid for the health care services given
91%
Were satisfied with the healthcare services
EGP 400
The median cost for care in first facility
Second point of care
8%
Individuals were referred somewhere else
81%
Individuals were able to get health care services
94%
Individuals paid for the health care services given
EGP 300
The median cost for care in second facility
94%
Individuals who sought care at second facility were satisfied

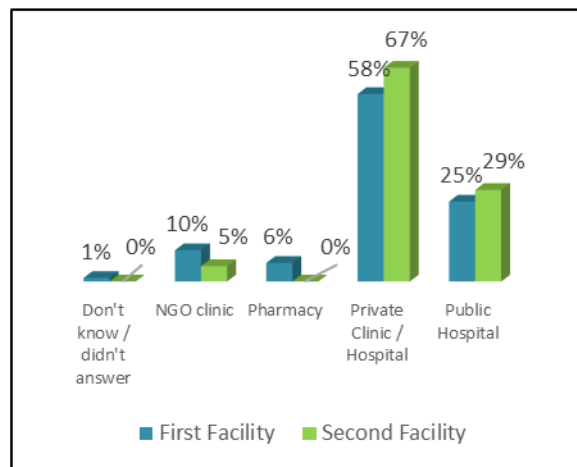
1- Barriers to accessing services at the first point and second point of care (n:24/4)



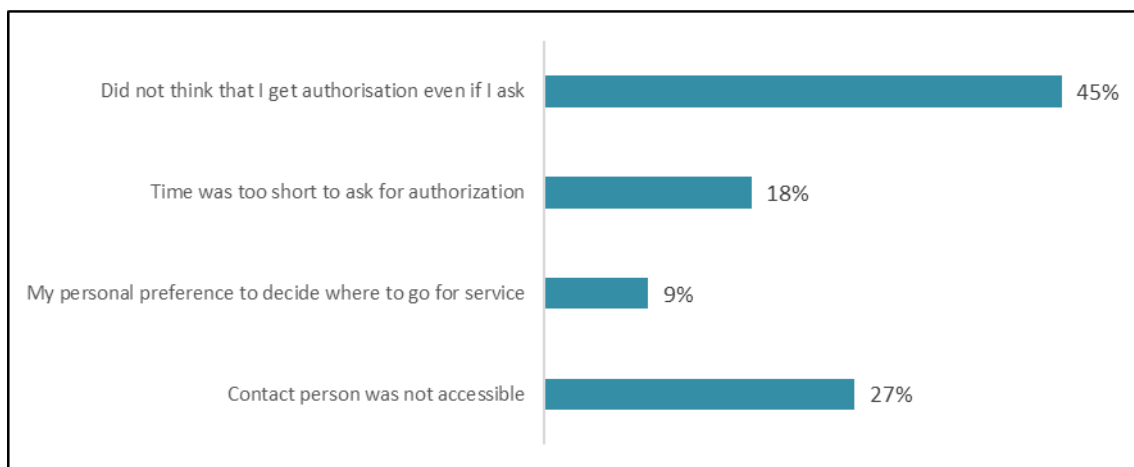
2- Refund of the amount paid (n:212/16)



3- Point of care accessed by the individuals in the last 3 months (n:277/21)



4- The reason for being denied the authorization (n:11)

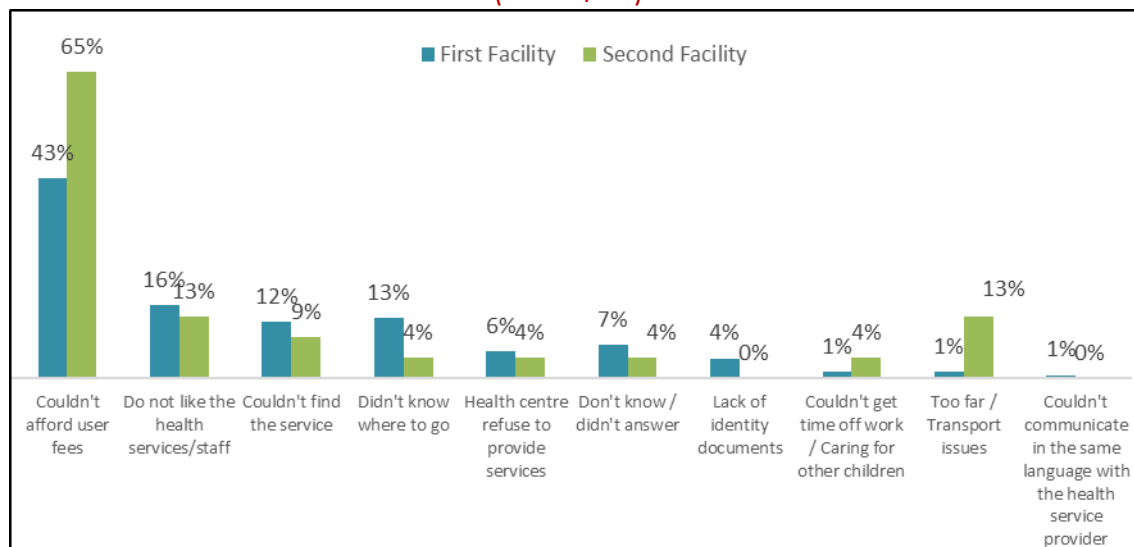


5.1- Access to Health Care in the Last Three Months

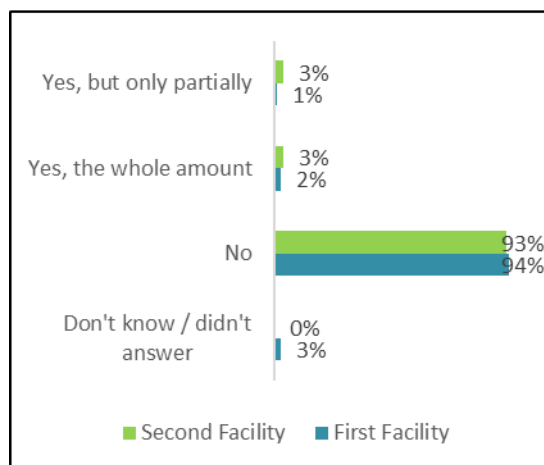
Sudanese (Total Surveyed 2009)

23%
Household member needed health care in the last 3 months
33%
Required authorization prior to accessing care
42%
Of those requiring authorization, were able to get it
First point of care
68%
Individuals were able to get health care
82%
Individuals paid for the health care services given
87%
Were satisfied with the healthcare services
EGP 500
The median cost for care in first facility
Second point of care
13%
Individuals were referred somewhere else
57%
Individuals were able to get health care services
88%
Individuals paid for the health care services given
EGP 1,200
The median cost for care in second facility
85%
Individuals who sought care at second facility were satisfied

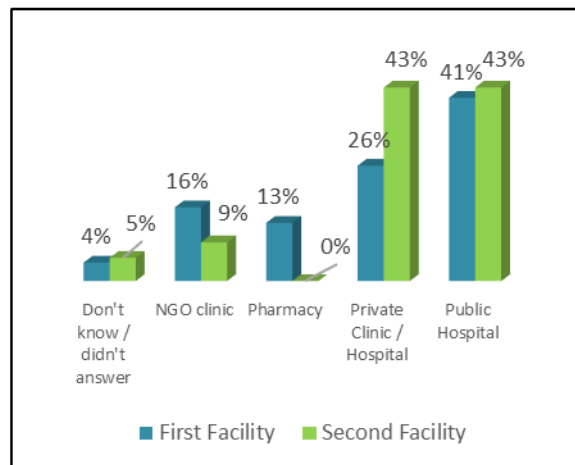
1- Barriers to accessing services at the first point and second point of care (n:141/23)



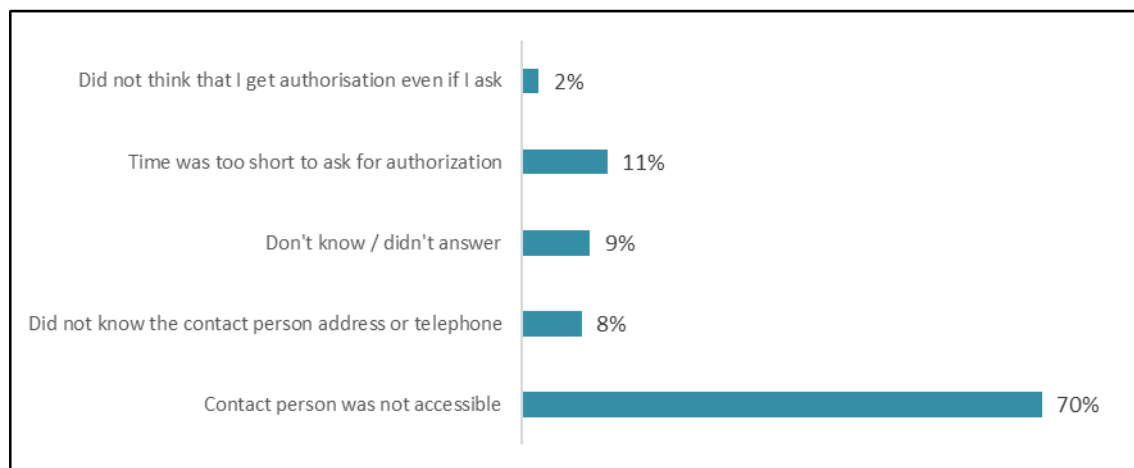
2- Refund of the amount paid (n:256/29)



3- Point of care accessed by the individuals in the last 3 months (n:463/58)



4- The reason for being denied the authorization (n:87)



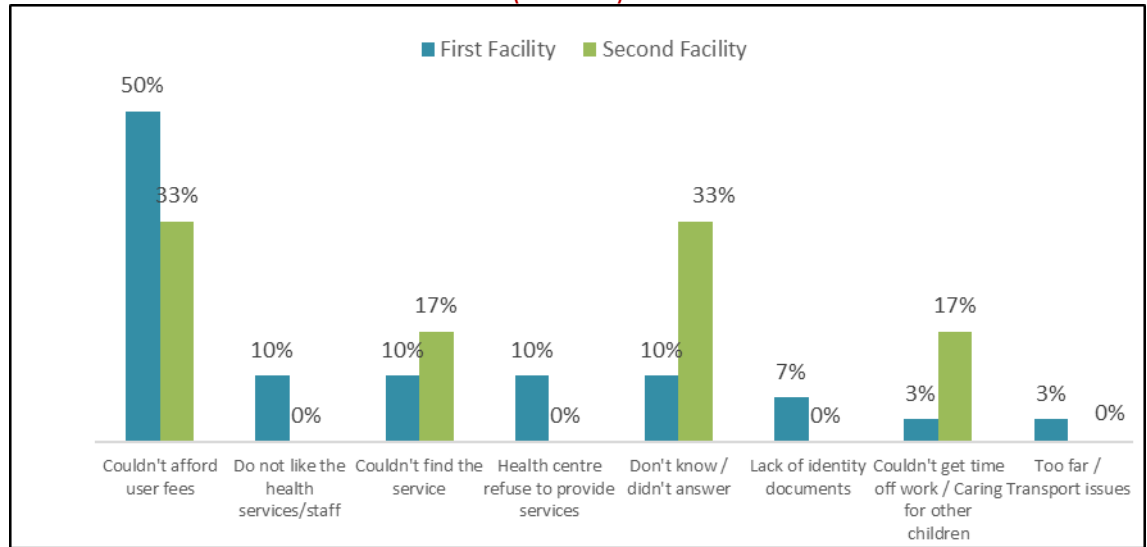
5.1- Access to Health Care in the Last Three Months

Other Nationalities (Total Surveyed 1266)

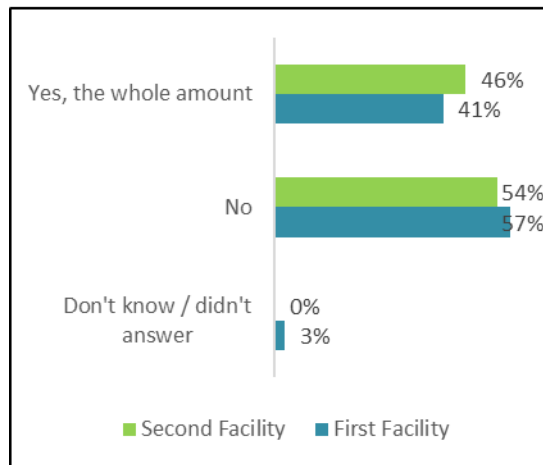
(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

15%
Household member needed health care in the last 3 months
11%
Required authorization prior to accessing care
67%
Of those requiring authorization, were able to get it
First point of care
79%
Individuals were able to get health care
80%
Individuals paid for the health care services given
82%
Were satisfied with the healthcare services
EGP 255
The median cost for care in first facility
Second point of care
12%
Individuals were referred somewhere else
68%
Individuals were able to get health care services
87%
Individuals paid for the health care services given
EGP 500
The median cost for care in second facility
93%
Individuals who sought care at second facility were satisfied

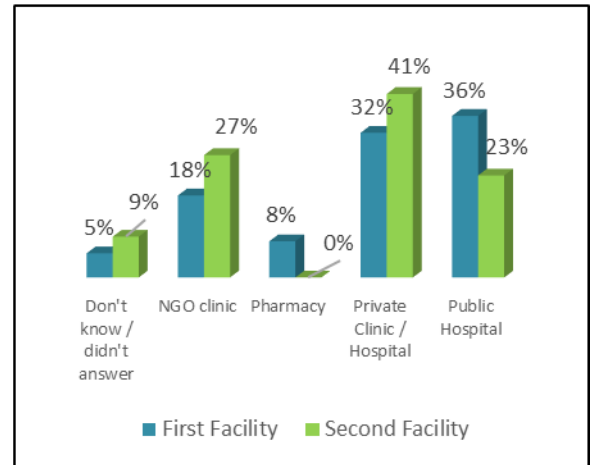
1- Barriers to accessing services at the first point and second point of care (n:30/6)



2- Refund of the amount paid (n:118/13)



3- Point of care accessed by the individuals in the last 3 months (n:186/22)



4- The reason for being denied the authorization (n:7)



5- Access and Knowledge of Health Services

5.2- Access to Health Services and Health Seeking Behavior

- **48%** of the surveyed head of the household seek care when a household member is sick at Public Clinics / Hospitals, **32%** at Private Clinics / Hospitals, **13%** at an NGO facility (charity, faith based organization), **10%** at a Pharmacy, and **8%** Did not know / didn't answer .
- **77%** of the surveyed head of the household stated spending money on health care services in the last month, while **23%** did not spend money.
- The Median health expenditure of the household who spend money on health care services in the last month was **1000 EGP** with a median of **250 EGP** spent on consultation fee, Median of **435 EGP** spent on diagnostics tests, Median of **500 EGP** spent on medication and a median of **250 EGP** spent on hospitalization fees.
- To cover healthcare expenditure, **52%** of the surveyed head of the household who spent money on healthcare relied on their wages to cover health expenditure, **28%** of them relied on loans and borrowing, while **19%** relied on community participation, **17%** on their savings, **4%** relied on remittances, and **1%** relied on UNHCR.

5.3- Hospitalizations during the last year

- **5%** of the surveyed household members reported being hospitalized in the past year. **72%** of those were hospitalized for an emergency, and **28%** for an elective or planned procedure.
- **61%** of hospitalization was in a public hospitals while **39%** were in a private hospitals.
- **52%** of the household members who were hospitalized were self-referral, verse **21%** were referred by a public facility, **18%** were referred by a private facility / private doctor, **7%** were referred by UNHCR referral partner (E.g.: Save the Children), and **2%** were referred by an NGO / Charity organization with a median hospitalization stay of **4 days** .
- **75%** of the hospitalized household members had to pay for their hospitalization, with a median payment of **3000EGP**.

5.2- Access to Health Services and Health Seeking Behavior

All Nationalities (Total Surveyed 1316)

Place where the Household Heads seek care at when someone is sick

48%

At a Public Clinics / Hospitals

32%

At a Private Clinics / Hospitals

13%

At an NGO facility

10%

At a Pharmacy

EGP 1,000

Median spent on health care

EGP 250

Median spent on consultation fees

EGP 435

Median spent on diagnostic tests

EGP 500

Median spent on medication and medical supplies

EGP 250

Median spent on hospitalization fees

How Head of household managed to pay the health-related expenditure

52%

By wage

28%

By loan/borrow

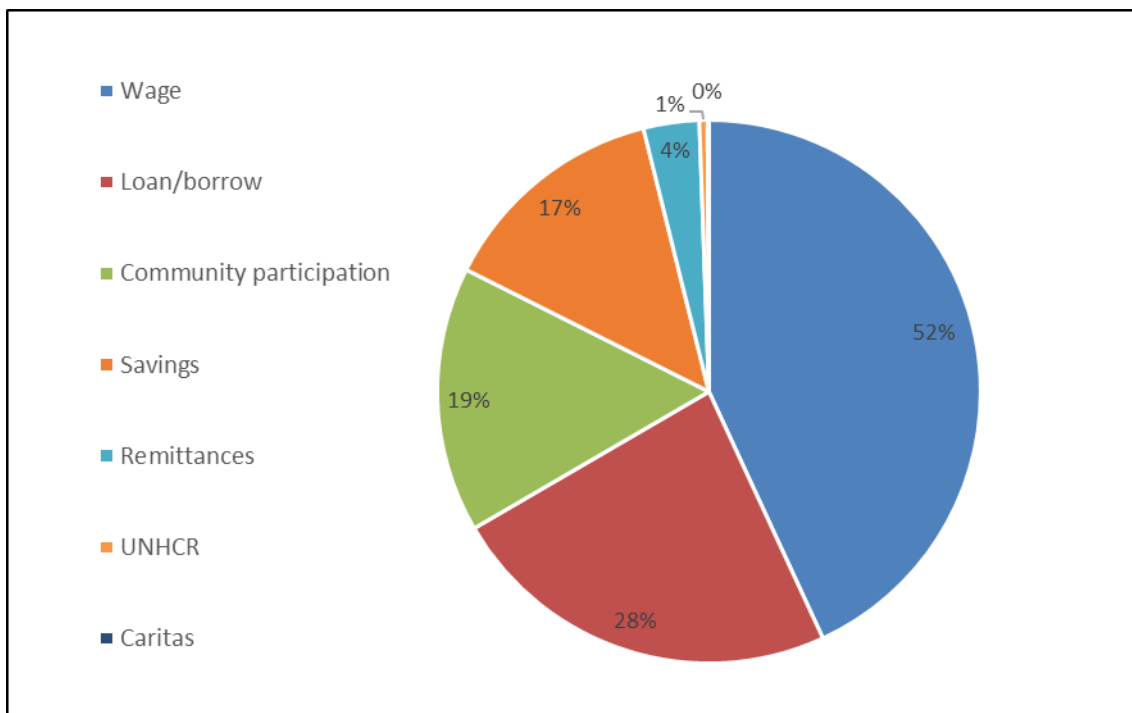
19%

By Community participation

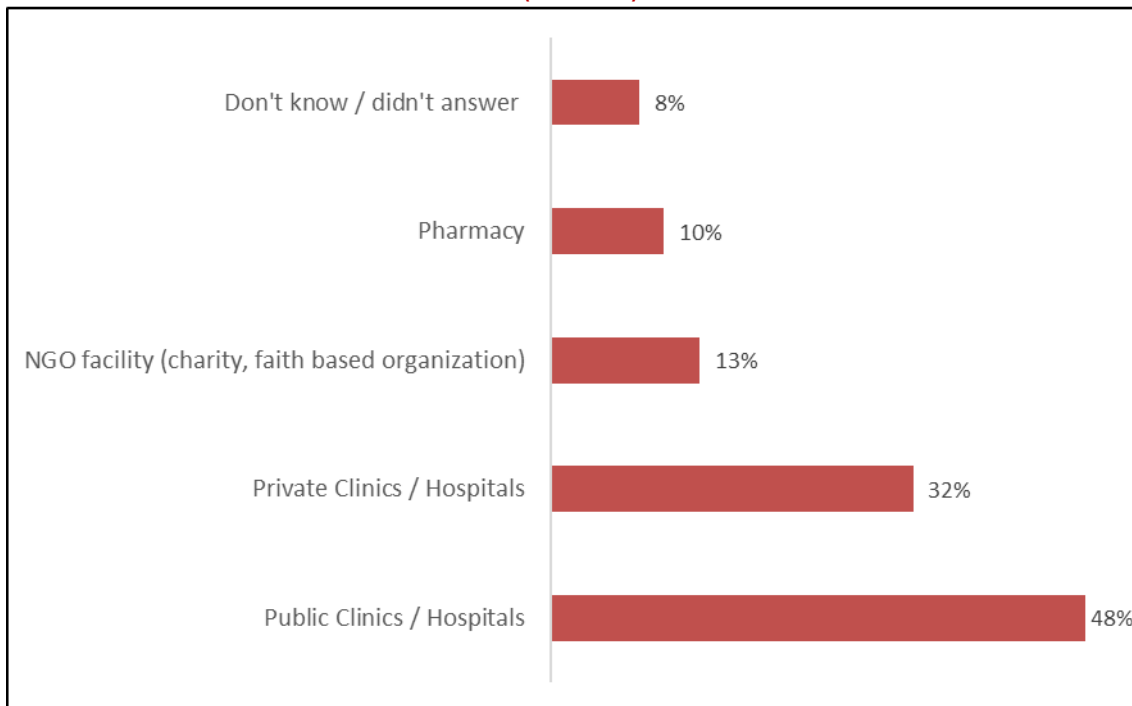
17%

By Savings

1- How the head of the household manage to pay for the health-related expenditure (n:1020)



2- Place where they seek help when a household member is sick (n:1316)



5.3- Hospitalizations during the last year

All Nationalities (Total Surveyed 5214)

5%

Individuals who were hospitalized in the last year

Type of Hospitalized

72%

Emergency

28%

Elective / Planned

61%

Individuals were hospitalized in a public facility

39%

Individuals were hospitalized in a private facility

Ways of admission to the Hospital

52%

By self-referral

21%

By public facility

18%

By private facility / private doctor

75%

Hospitalized household members who had to pay for their hospitalization

3,000 EGP

The median cost for hospitalization

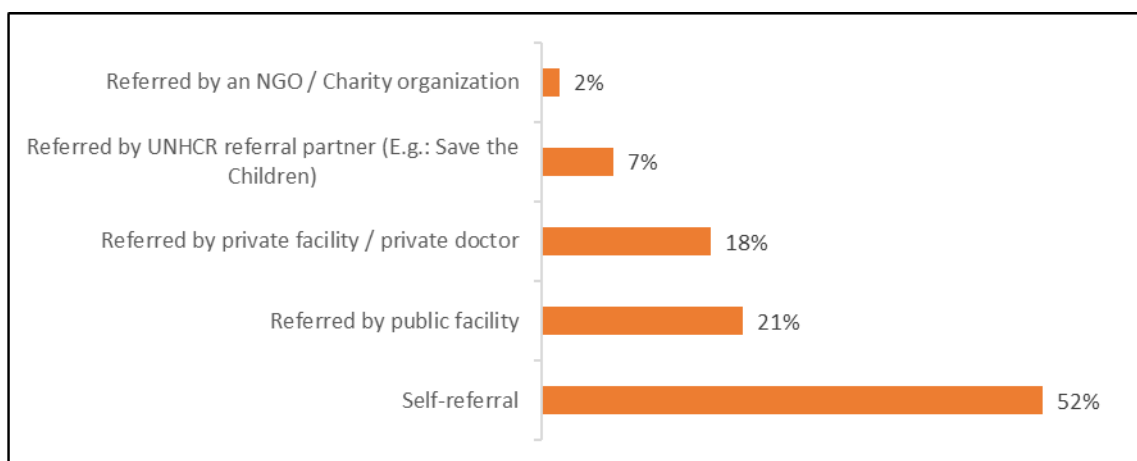
12 Days

The average days stayed in the hospital

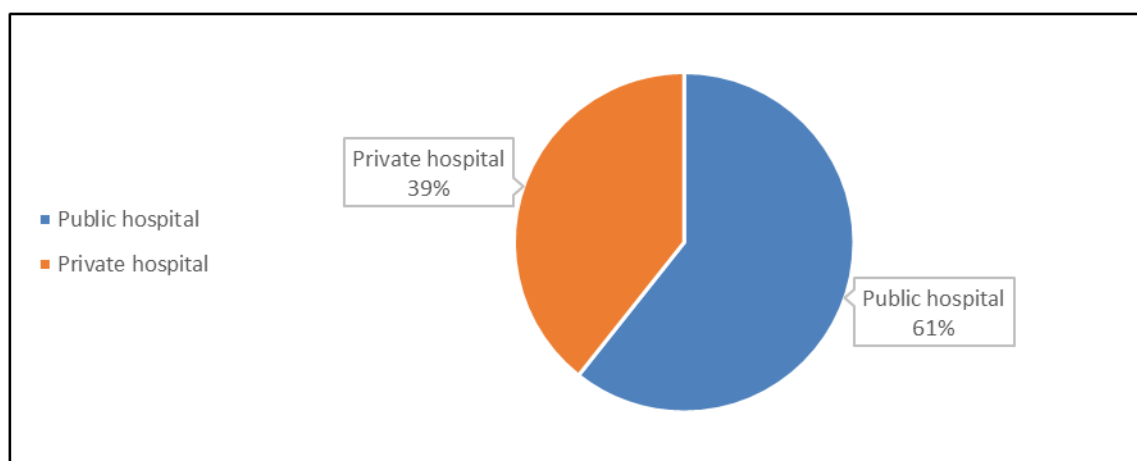
4 Day

The median days stayed in the hospital

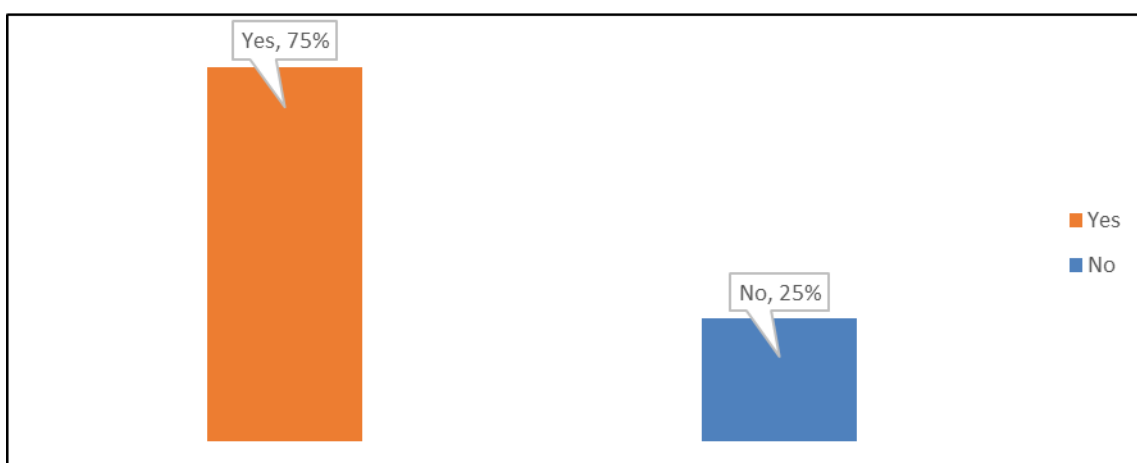
1- The way the individual was admitted to the hospital (n:267)



2- Type of Hospital the individual was admitted to (n:267)



3- Household who had to pay for the hospitalization (n:267)



5.2- Access to Health Services and Health Seeking Behavior

Syrian (Total Surveyed 489)

Place where the Household Heads seek care at when someone is sick

44%

At a Public Clinics / Hospitals

43%

At a Private Clinics / Hospitals

10%

At an NGO facility

13%

At a Pharmacy

EGP 1,000

Median spent on health care

EGP 425

Median spent on consultation fees

EGP 600

Median spent on diagnostic tests

EGP 665

Median spent on medication and medical supplies

EGP 500

Median spent on hospitalization fees

How Head of household managed to pay the health-related expenditure

72%

By wage

34%

By loan/borrow

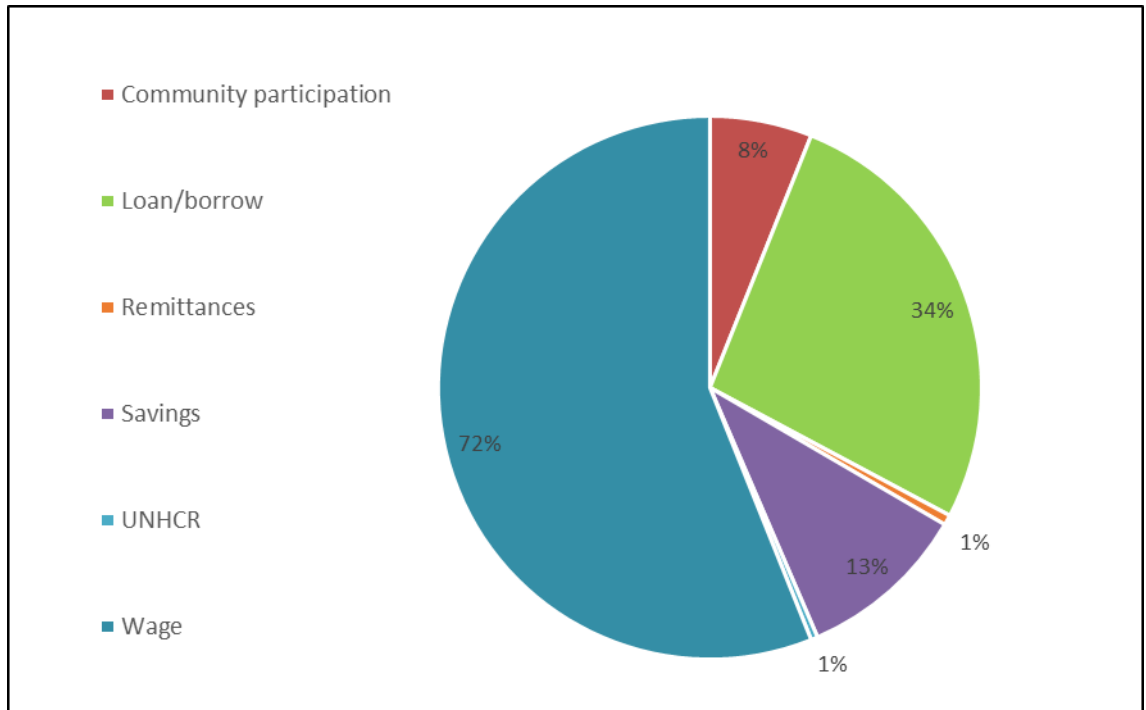
8%

By Community participation

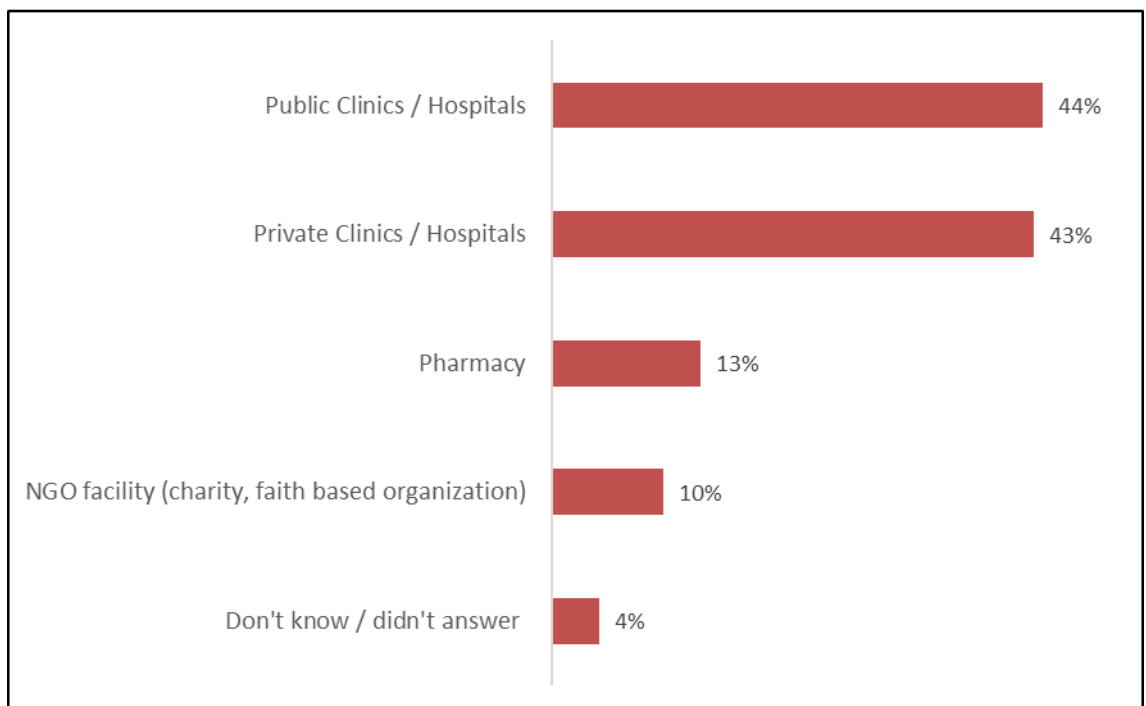
13%

By Savings

1- How the head of the household manage to pay for the health-related expenditure (n:385)



2- Place where they seek help when a household member is sick (n:489)



5.3- Hospitalizations during the last year

Syrian (Total Surveyed 1939)

4%

Individuals who were hospitalized in the last year

Type of Hospitalized

64%

Emergency

36%

Elective / Planned

39%

Individuals were hospitalized in a public facility

61%

Individuals were hospitalized in a private facility

Ways of admission to the Hospital

29%

By self-referral

30%

By public facility

34%

By private facility / private doctor

80%

Hospitalized household members who had to pay for their hospitalization

4,250 EGP

The median cost for hospitalization

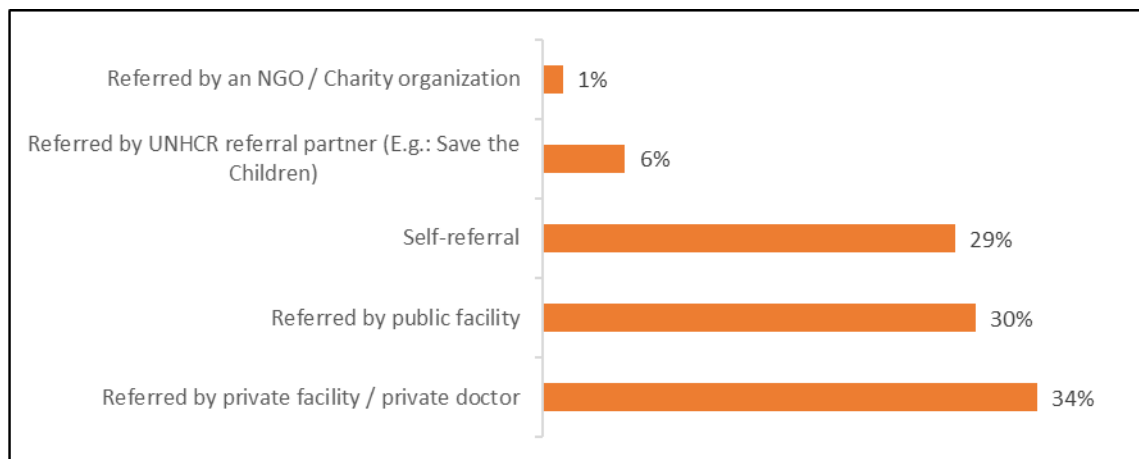
3 Days

The average days stayed in the hospital

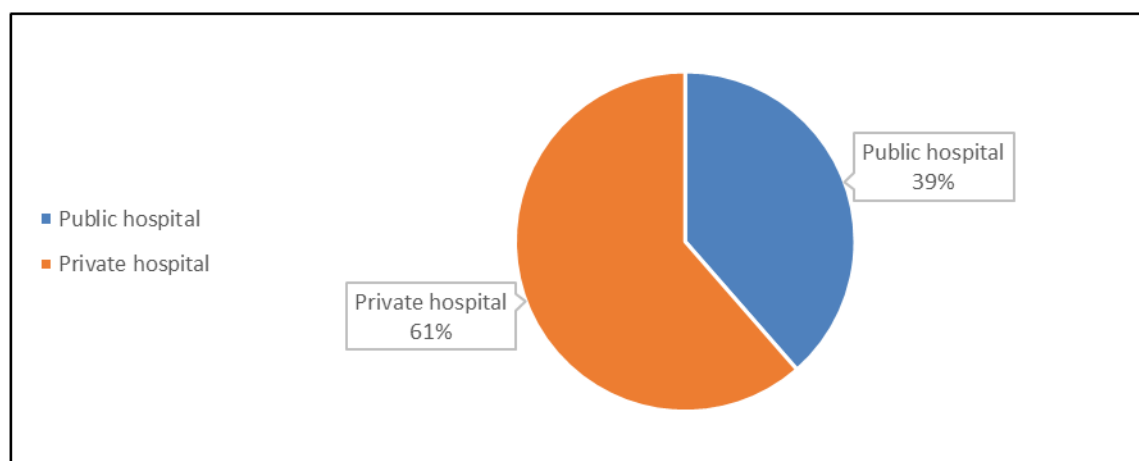
1 Day

The median days stayed in the hospital

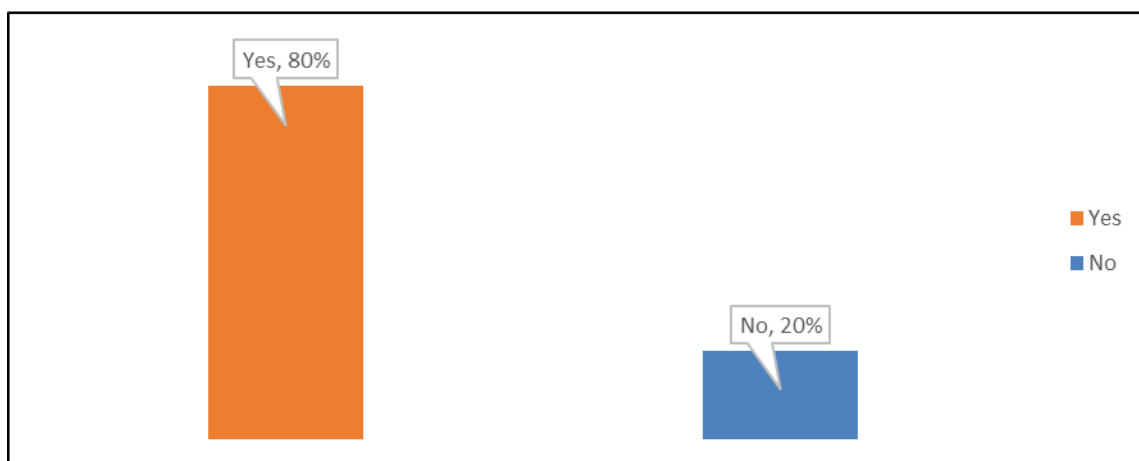
1- The way the individual was admitted to the hospital (n:70)



2- Type of Hospital the individual was admitted to (n:70)



3- Household who had to pay for the hospitalization (n:70)



5.2- Access to Health Services and Health Seeking Behavior

Sudanese (Total Surveyed 491)

Place where the Household Heads seek care at when someone is sick

58%

At a Public Clinics / Hospitals

22%

At a Private Clinics / Hospitals

14%

At an NGO facility

9%

At a Pharmacy

EGP 1,500

Median spent on health care

EGP 200

Median spent on consultation fees

EGP 400

Median spent on diagnostic tests

EGP 500

Median spent on medication and medical supplies

EGP 250

Median spent on hospitalization fees

How Head of household managed to pay the health-related expenditure

42%

By wage

27%

By loan/borrow

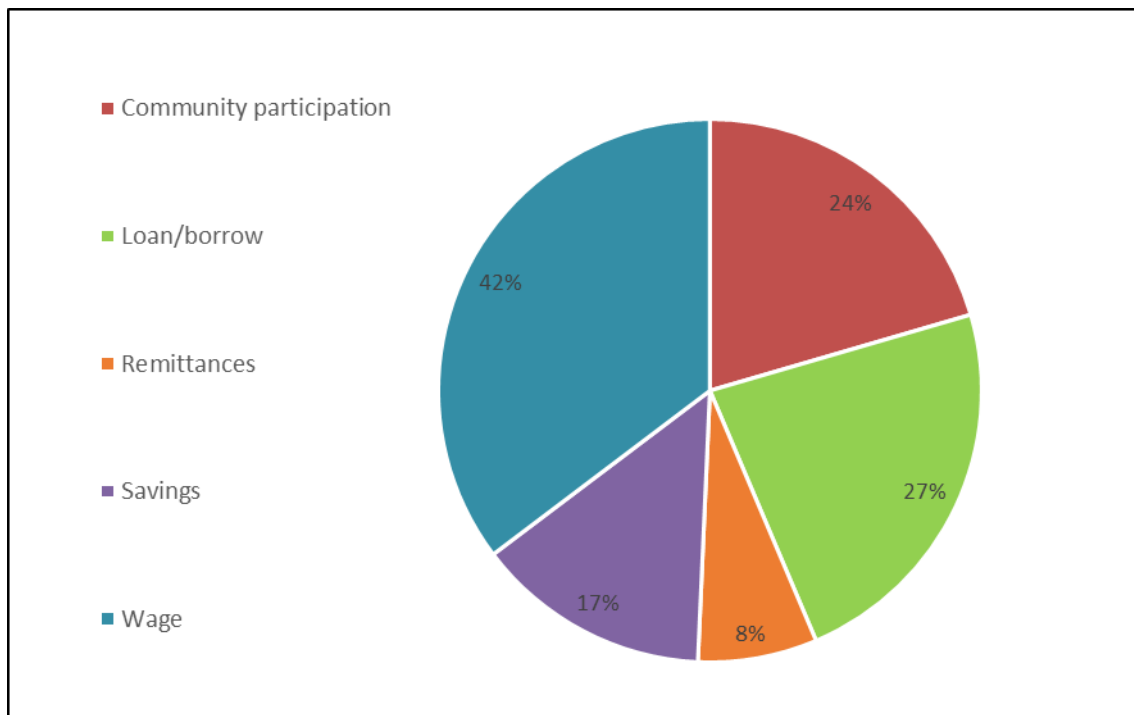
24%

By Community participation

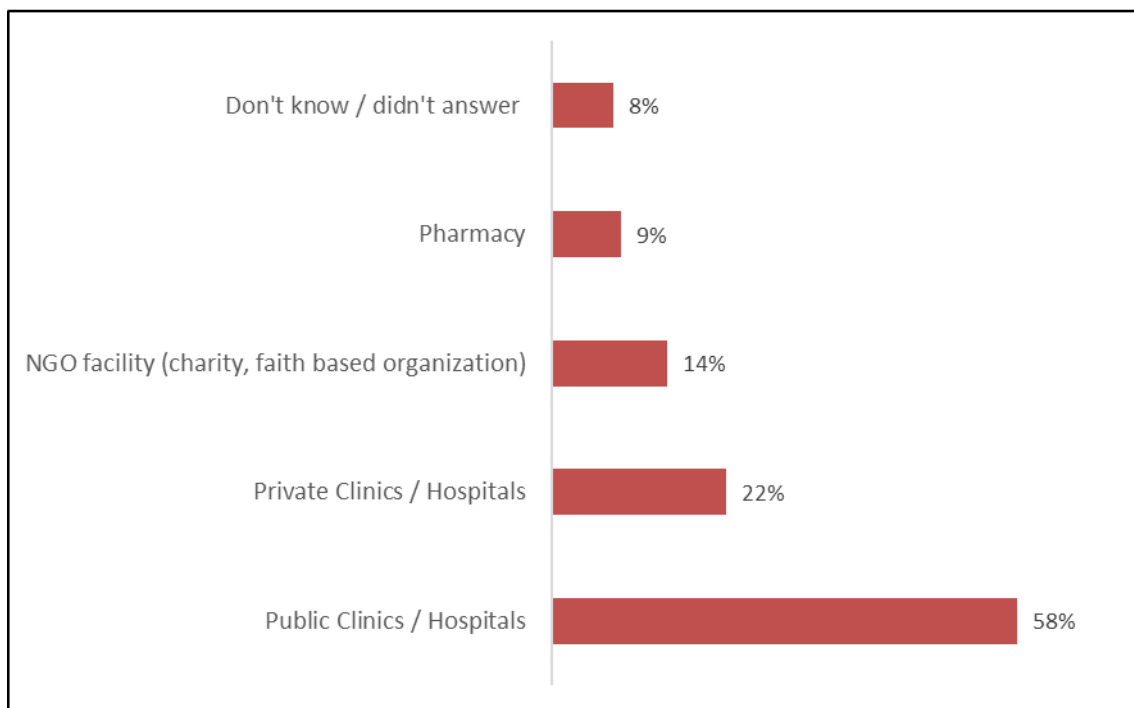
17%

By Savings

1- How the head of the household manage to pay for the health-related expenditure (n:415)



2- Place where they seek help when a household member is sick (n:491)



5.3- Hospitalizations during the last year

Sudanese (Total Surveyed 2009)

8%

Individuals who were hospitalized in the last year

Type of Hospitalized

77%

Emergency

23%

Elective / Planned

71%

Individuals were hospitalized in a public facility

29%

Individuals were hospitalized in a private facility

Ways of admission to the Hospital

64%

By self-referral

15%

By public facility

11%

By private facility / private doctor

74%

Hospitalized household members who had to pay for their hospitalization

3,000 EGP

The median cost for hospitalization

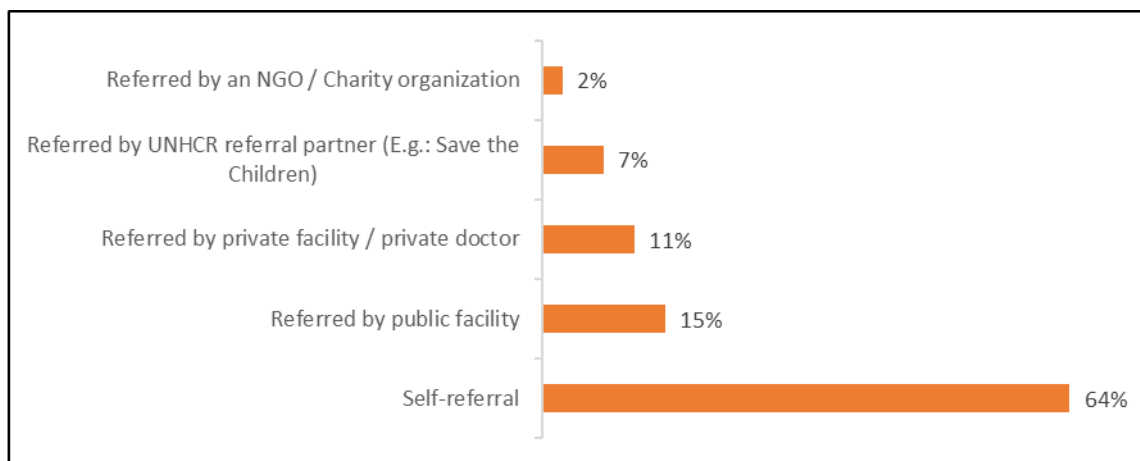
7 Days

The average days stayed in the hospital

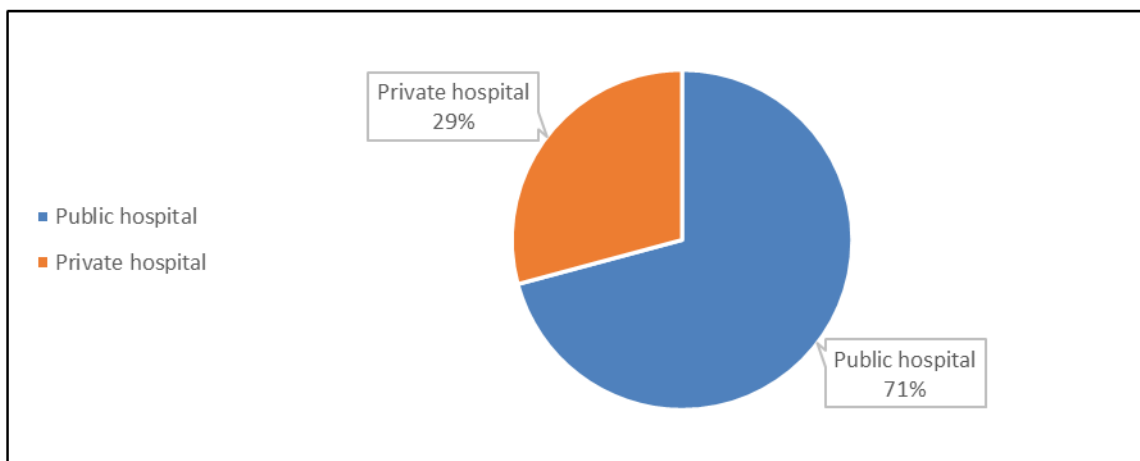
3 Day

The median days stayed in the hospital

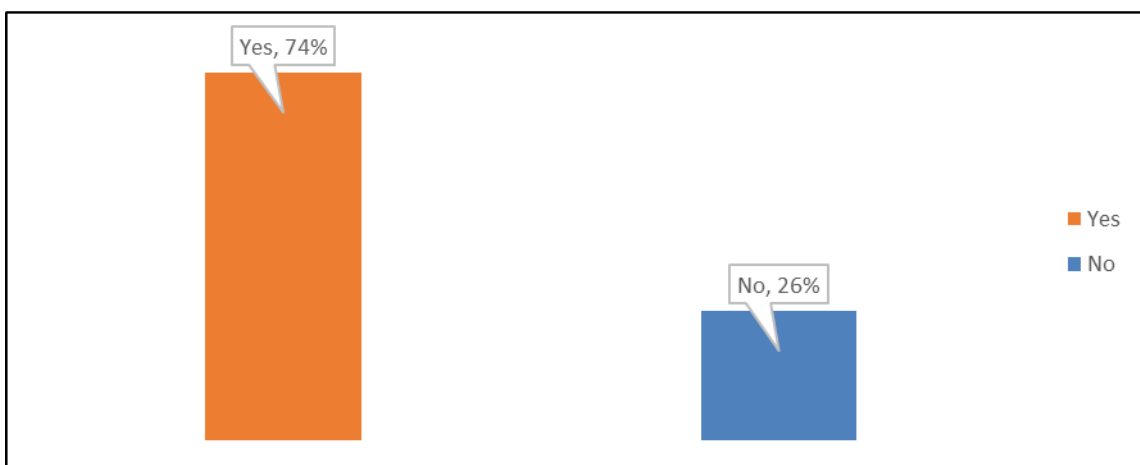
1- The way the individual was admitted to the hospital (n:161)



2- Type of Hospital the individual was admitted to (n:161)



3- Household who had to pay for the hospitalization (n:161)



5.2- Access to Health Services and Health Seeking Behavior

Other Nationalities (Total Surveyed 336)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

Place where the Household Heads seek care at when someone is sick

38%

At a Public Clinics / Hospitals

32%

At a Private Clinics / Hospitals

16%

At an NGO facility

7%

At a Pharmacy

EGP 590

Median spent on health care

EGP 200

Median spent on consultation fees

EGP 500

Median spent on diagnostic tests

EGP 350

Median spent on medication and medical supplies

EGP 250

Median spent on hospitalization fees

How Head of household managed to pay the health-related expenditure

37%

By wage

20%

By loan/borrow

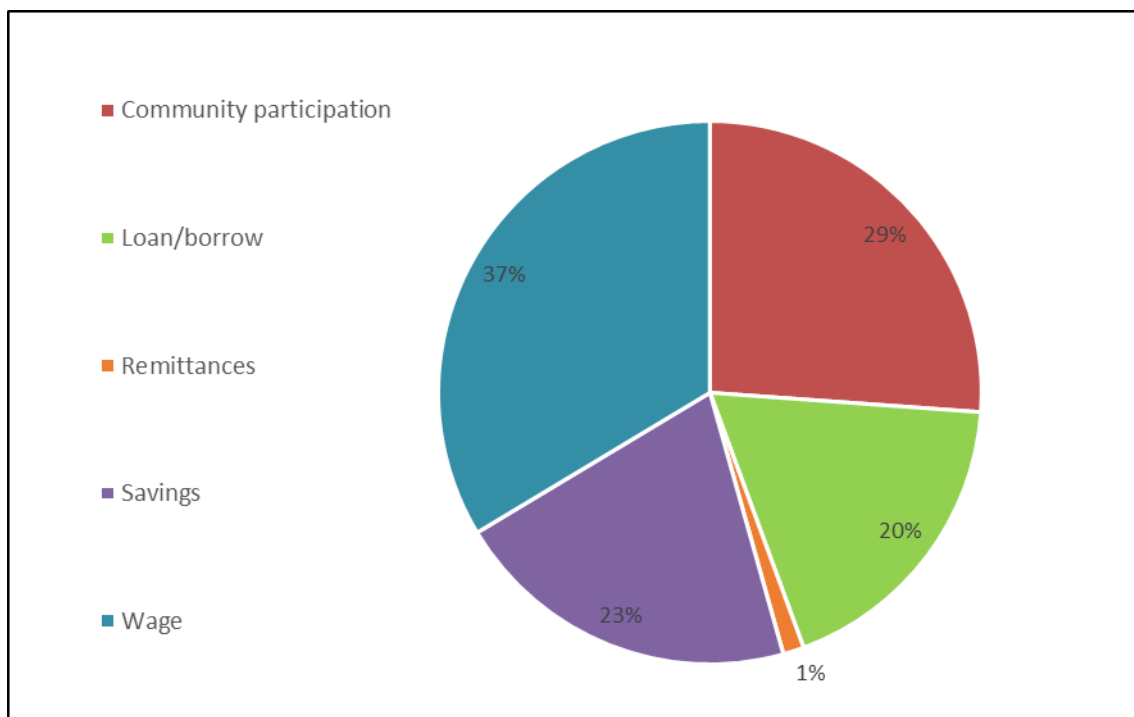
29%

By Community participation

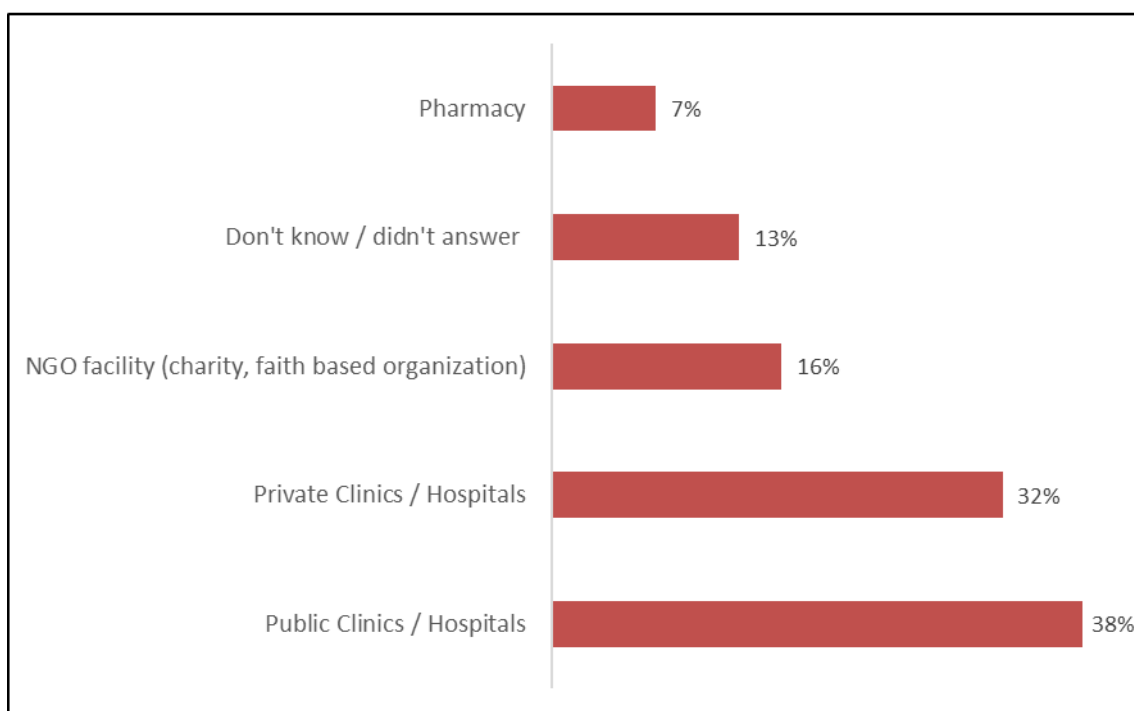
23%

By Savings

1- How the head of the household manage to pay for the health-related expenditure (n:220)



2- Place where they seek help when a household member is sick (n:336)



5.3- Hospitalizations during the last year

Other Nationalities (Total Surveyed 1266)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

3%

Individuals who were hospitalized in the last year

Type of Hospitalized

64%

Emergency

36%

Elective / Planned

58%

Individuals were hospitalized in a public facility

42%

Individuals were hospitalized in a private facility

Ways of admission to the Hospital

44%

By self-referral

31%

By public facility

14%

By private facility / private doctor

72%

Hospitalized household members who had to pay for their hospitalization

2,000 EGP

The median cost for hospitalization

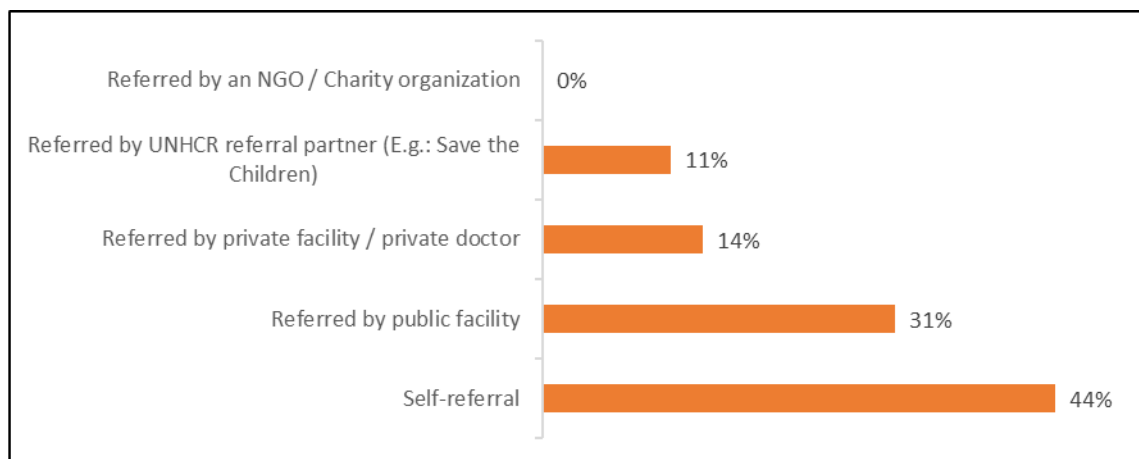
2 Days

The average days stayed in the hospital

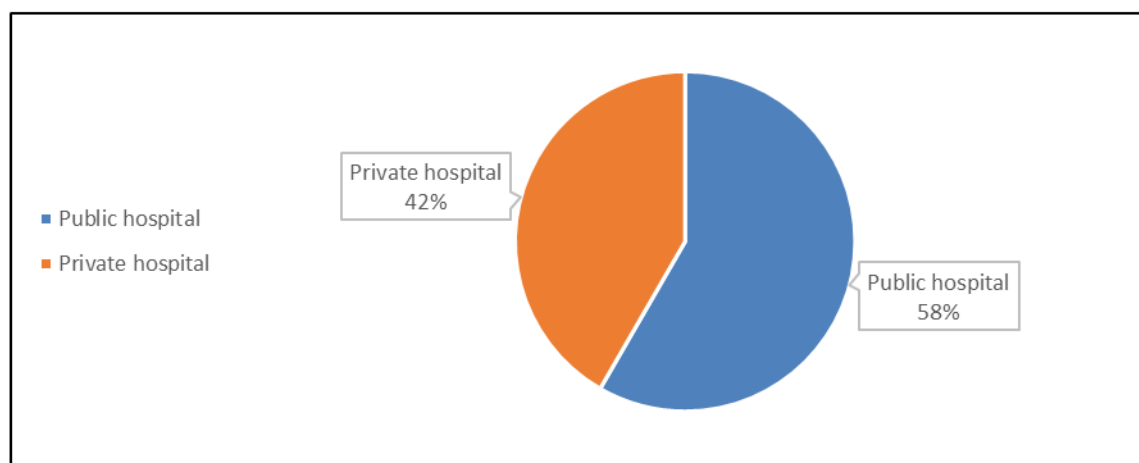
1 Day

The median days stayed in the hospital

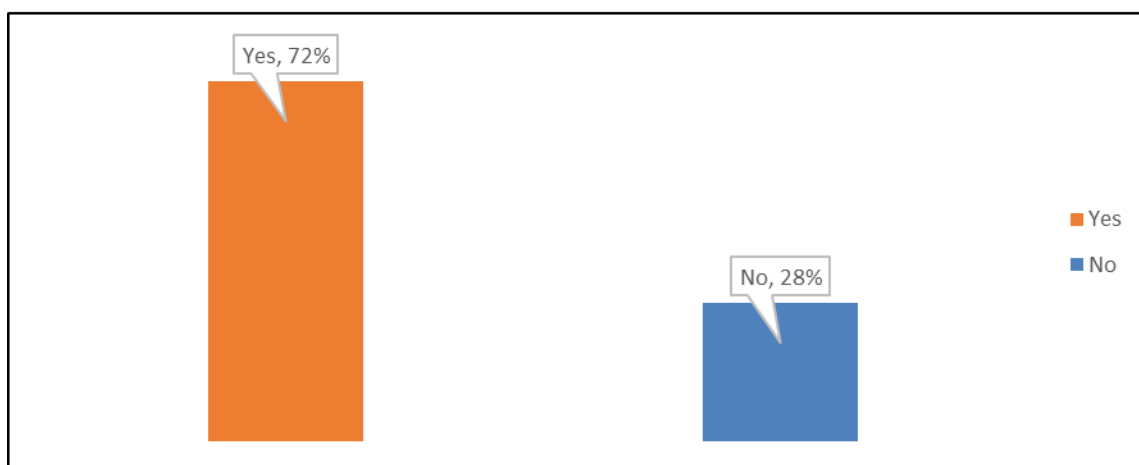
1- The way the individual was admitted to the hospital (n:36)



2- Type of Hospital the individual was admitted to (n:36)



3- Household who had to pay for the hospitalization (n:36)



6- Knowledge of Health Services



6.1 - Knowledge of available health services and coverage

- **44%** of the surveyed household heads reported knowing that refugee children have free access to vaccination at the Ministry of Health facilities.
- **44%** of the surveyed household heads knew that all refugees can access healthcare services at public (governmental) primary health care facilities on equal footing with Egyptians.
- **36%** of the surveyed household heads knew that they can access chronic diseases care through UNHCR's health partner clinics with small user contribution fees.
- **36%** of the surveyed household heads knew that can receive free hospital care for most of the critical medical conditions through the UNHCR referral care program.
- **42%** of the surveyed household heads knew that pregnant women can get a financial assistance from UNHCR that covers the delivery cost at public facilities.
- **88%** of the surveyed households heads knew that refugees in Egypt get issued any legal residency documents, either by UNHCR or the government.
- **53%** of the surveyed household heads reported having a valid legal residency card, of which **88%** the legal residency document was issued in the state/city they are currently live in.
- **46%** of the surveyed household heads reported not having a valid legal residency card, reason of prevention was being in process of obtaining the document (Waiting for an appointment) (**50%**), Cost of getting the document (**20%**), Lack of ID documents (**14%**), and Don't know where to apply to get it (**6%**) .
- **5%** of the household heads surveyed with non valid legal residency card reported being denied himself or a member of his family health services due the lack of documentation, of which **70%** denied at a public facility and **15%** denied at UNHCR health partners, and **15%** denied at a private facility.

6- Knowledge of available health services and coverage

All Nationalities (Total Surveyed 1316)

44%

Household heads know about free child vaccinations at the Ministry of Health facilities

44%

know about accessing healthcare services at public health care facilities on equal footing with Egyptians

36%

know about chronic diseases care through UNHCR's health partner clinics with small user contribution fees

36%

know about free hospital care for most of the critical medical conditions through the UNHCR referral care program

42%

know that pregnant women can get financial assistance from UNHCR that covers the delivery cost at public facilities

88%

Know that refugees in Egypt get issued legal residency documents, either by UNHCR or the government

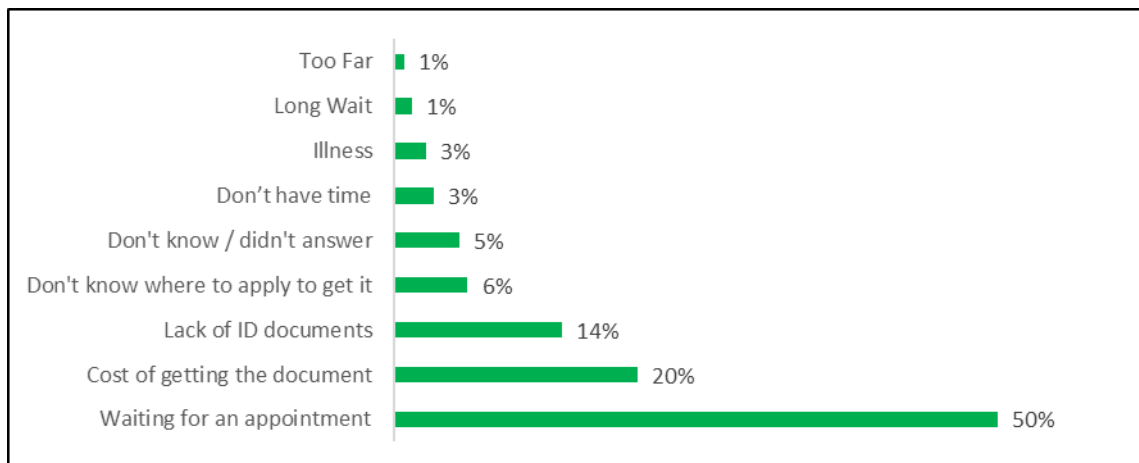
53%

Have a valid legal residency document

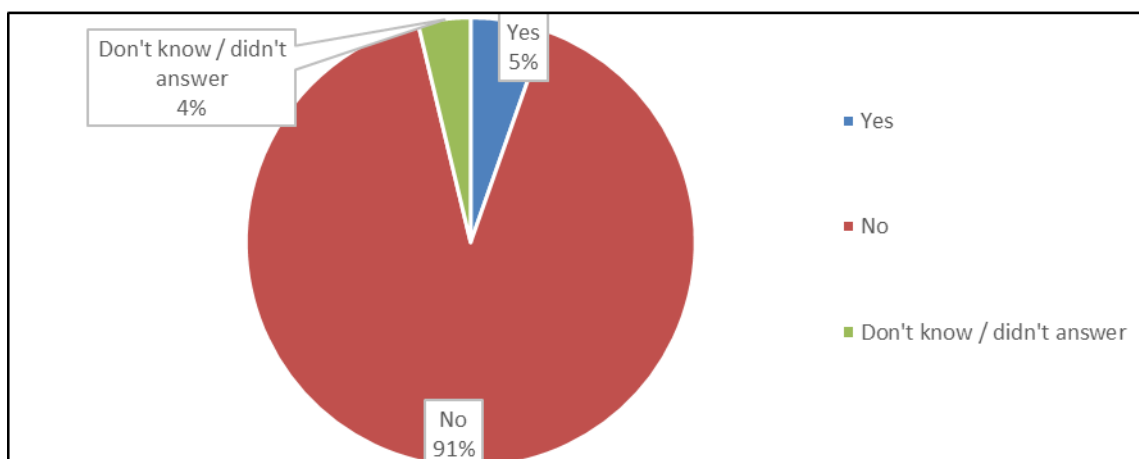
88%

Of those having a valid legal residency document issued in the state/city they currently live in

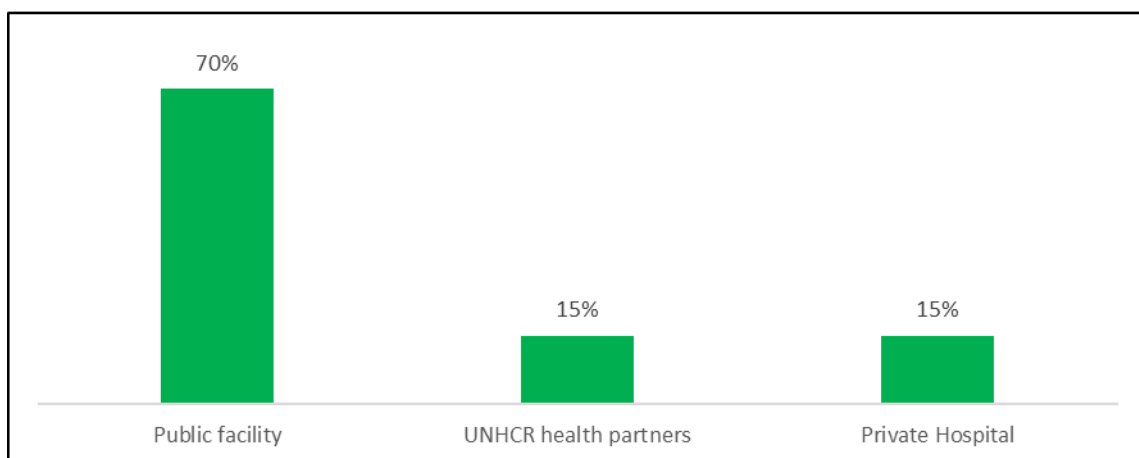
1- Prevention cause of getting the residency document (n:611)



2- Denied any health services due to lack of documents (n:611)



3- Facilities denied access to health services due to lack of documents (n:33)



6- Knowledge of available health services and coverage

Syrian (Total Surveyed 489)

61%

Household heads know about free child vaccinations at the Ministry of Health facilities

58%

know about accessing healthcare services at public health care facilities on equal footing with Egyptians

40%

know about chronic diseases care through UNHCR's health partner clinics with small user contribution fees

38%

know about free hospital care for most of the critical medical conditions through the UNHCR referral care program

43%

know that pregnant women can get a financial assistance from UNHCR that covers the delivery cost at public facilities

91%

Know that refugees in Egypt get issued any legal residency documents, either by UNHCR or the government

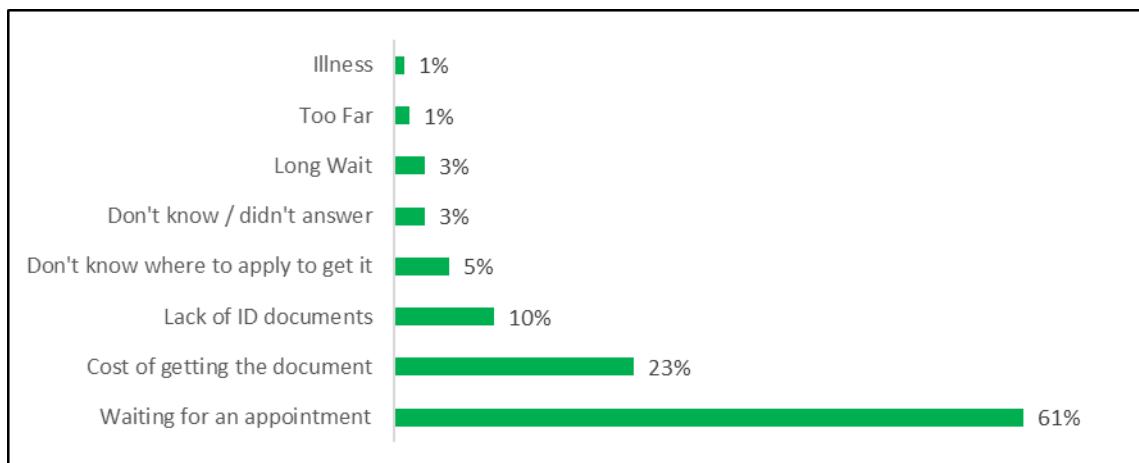
57%

Have a valid legal residency document

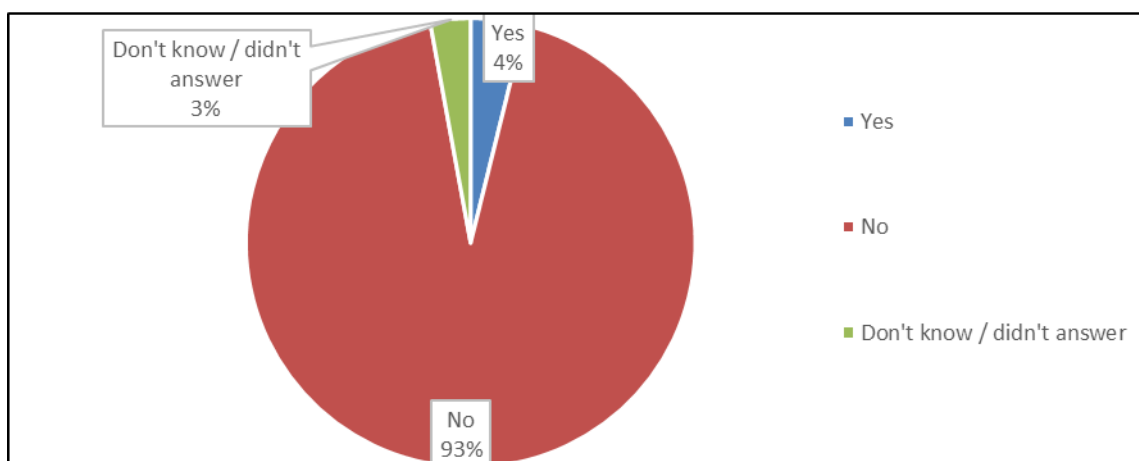
84%

Of those having a valid legal residency document issued in the state/city they currently live in

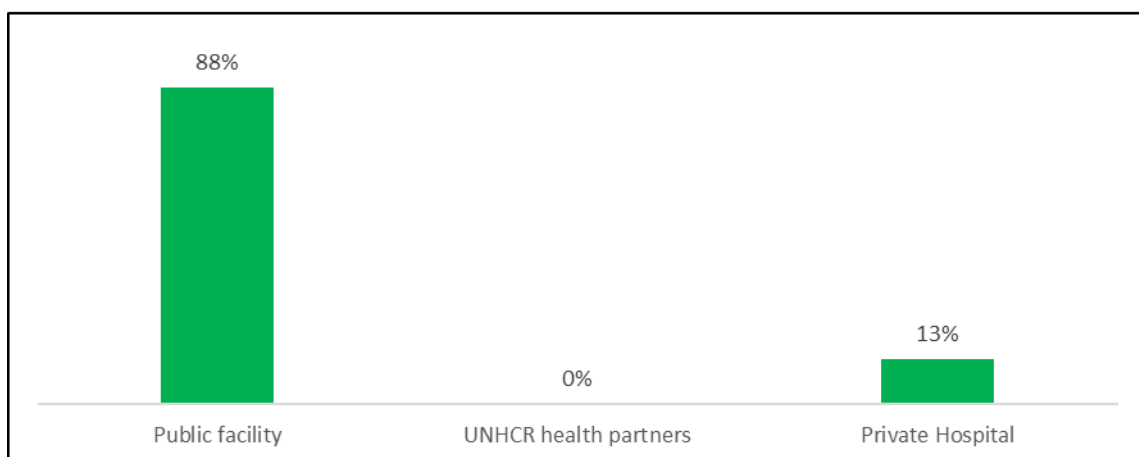
1- Prevention cause of getting the residency document (n:207)



2- Denied any health services due to lack of documents (n:207)



3- Facilities denied access to health services due to lack of documents (n:8)



6- Knowledge of available health services and coverage

Sudanese (Total Surveyed 491)

33%

Household heads know about free child vaccinations at the Ministry of Health facilities

35%

know about accessing healthcare services at public health care facilities on equal footing with Egyptians

38%

know about chronic diseases care through UNHCR's health partner clinics with small user contribution fees

40%

know about free hospital care for most of the critical medical conditions through the UNHCR referral care program

43%

know that pregnant women can get a financial assistance from UNHCR that covers the delivery cost at public facilities

89%

Know that refugees in Egypt get issued any legal residency documents, either by UNHCR or the government

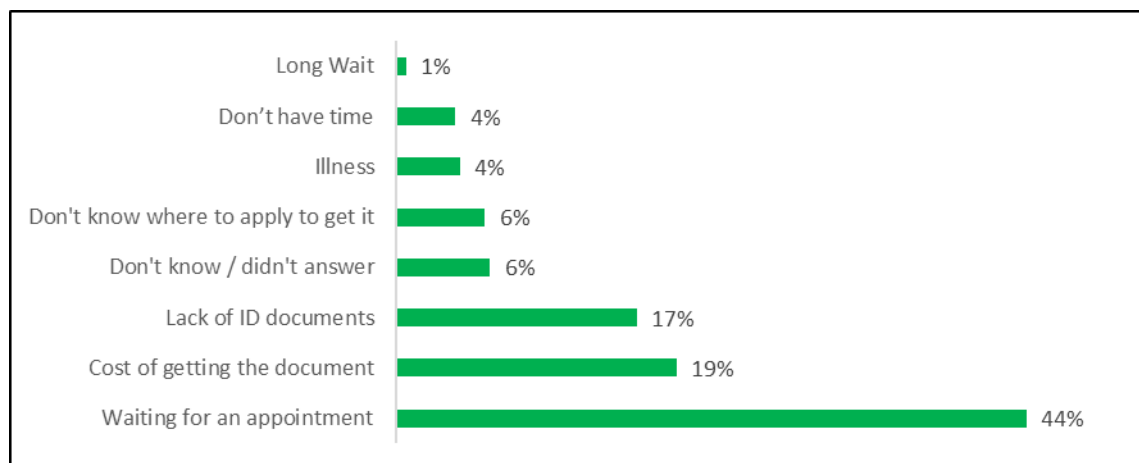
40%

Have a valid legal residency document

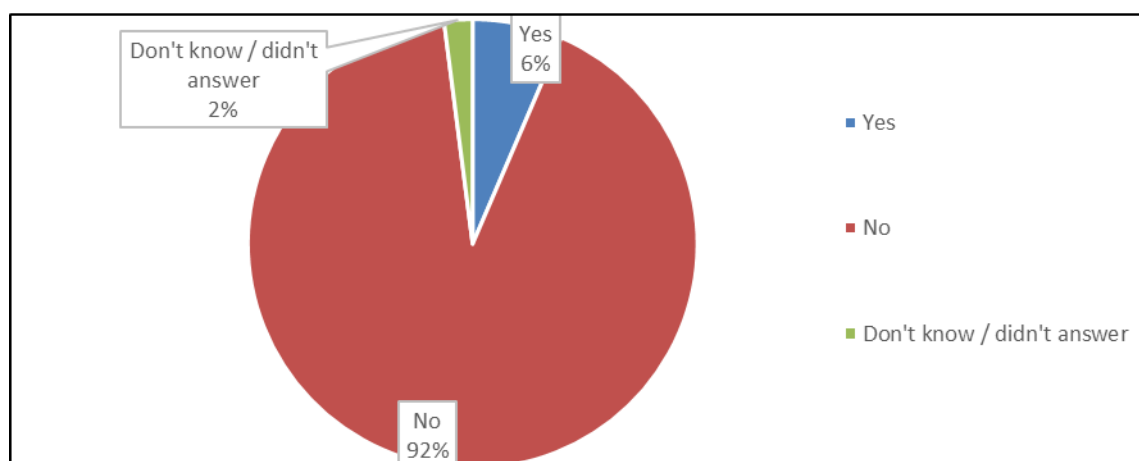
90%

Of those having a valid legal residency document issued in the state/city they currently live in

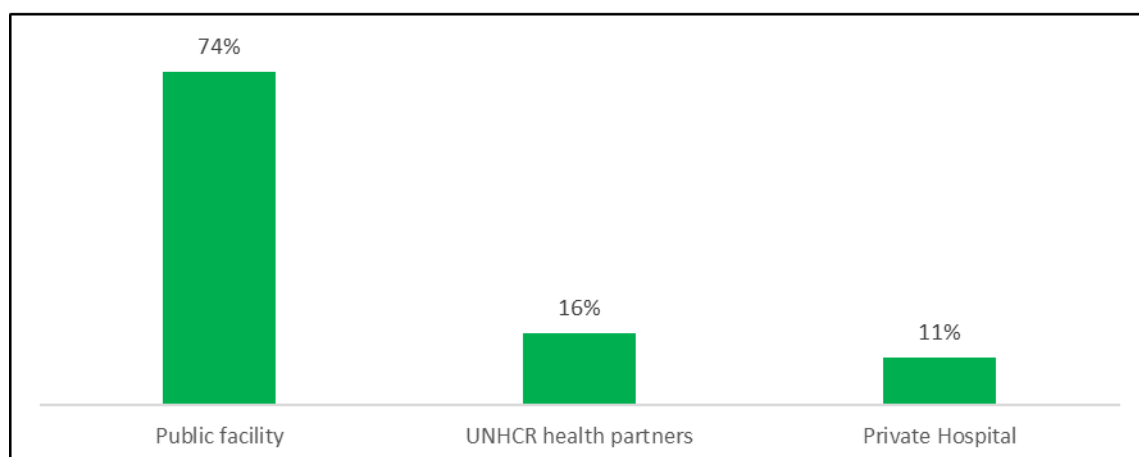
1- Prevention cause of getting the residency document (n:294)



2- Denied any health services due to lack of documents (n:294)



3- Facilities denied access to health services due to lack of documents (n:19)



6- Knowledge of available health services and coverage

Other Nationalities (Total Surveyed 336)

(Eritrea / Ethiopia / Iraq / Somalia / South Sudan / Yemen / Afghanistan & Others)

34%

Household heads know about free child vaccinations at the Ministry of Health facilities

34%

know about accessing healthcare services at public health care facilities on equal footing with Egyptians

27%

know about chronic diseases care through UNHCR's health partner clinics with small user contribution fees

28%

know about free hospital care for most of the critical medical conditions through the UNHCR referral care program

40%

know that pregnant women can get a financial assistance from UNHCR that covers the delivery cost at public facilities

84%

Know that refugees in Egypt get issued any legal residency documents, either by UNHCR or the government

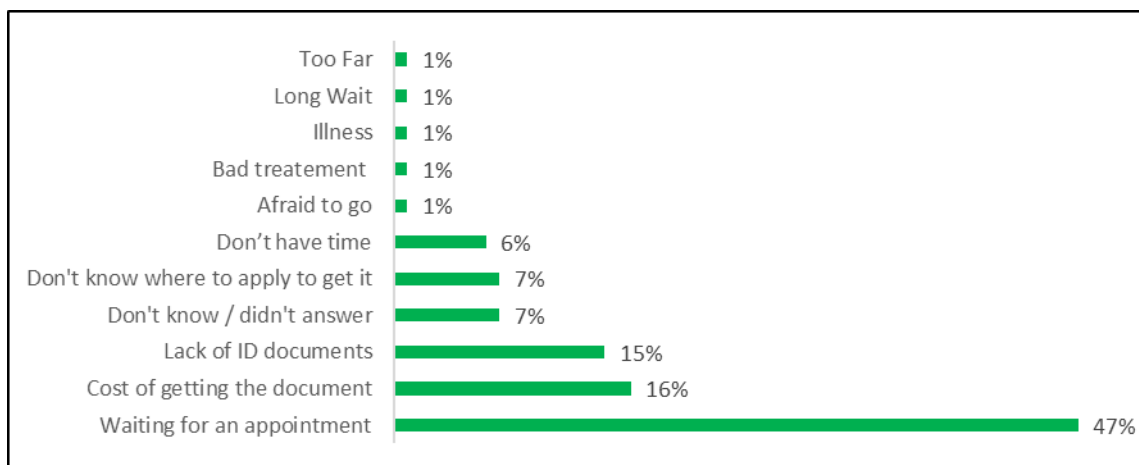
65%

Have a valid legal residency document

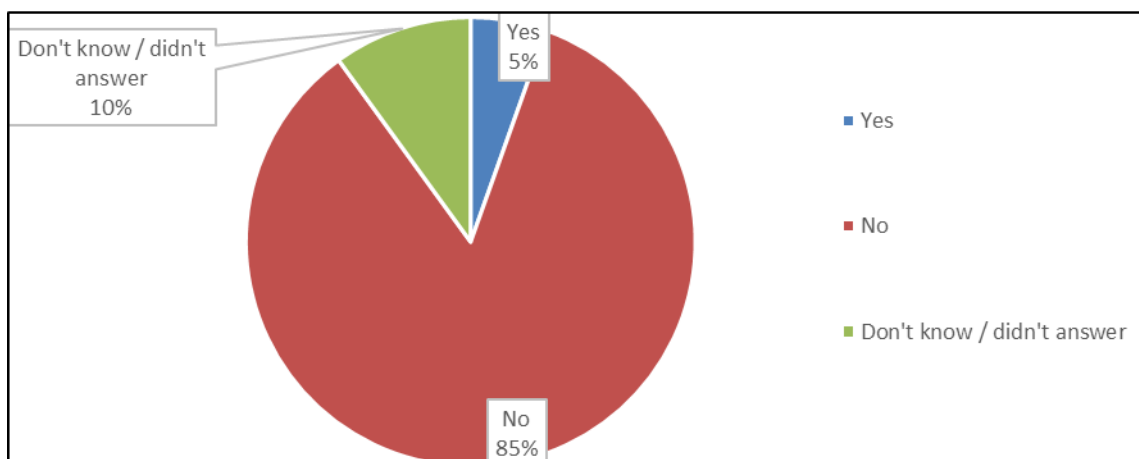
93%

Of those having a valid legal residency document issued in the state/city they currently live in

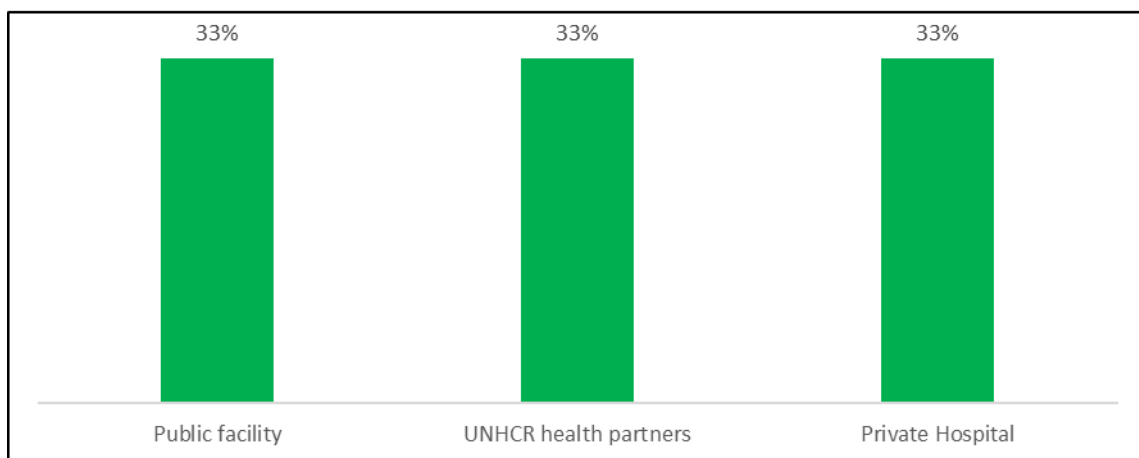
1- Prevention cause of getting the residency document (n:110)



2- Denied any health services due to lack of documents (n:110)



3- Facilities denied access to health services due to lack of documents (n:6)





Thank you _____