

Rohingya refugees cross the Naf River from Myanmar on makeshift rafts, heading for refugee camps in Teknaf, Bangladesh.

With 71.4 million people of concern in 2017, UNHCR and its partners responded to the needs of refugees, IDPs and stateless persons in multiple simultaneous and complex emergencies worldwide, as well as in protracted conflicts.

By the end of 2017, more than 30 UNHCR operations were responding to 13 large-scale emergencies. These included six new emergencies declared in Angola, Bangladesh, the Republic of the Congo, the Democratic Republic of the Congo (DRC), Libya, Zambia, and for the Venezuela situation. As a result,

the Office fully deployed its emergency preparedness and response capabilities under the framework of its new Policy on Emergency Preparedness and Response, which was issued in July 2017. To better protect and assist people of concern from the onset of emergencies, UNHCR raised its operational delivery and coordination in countries experiencing new or deteriorating situations of displacement. The Office also bolstered its response by deploying staff skilled in protection, coordination and technical profiles such as registration; in the prevention of, and response to, sexual

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and gender-based violence (SGBV); shelter; health; and water, sanitation and hygiene (WASH).

In line with the Comprehensive Refugee Response Framework (CRRF), UNHCR's focus was on providing holistic support to meet the immediate needs of people of concern and their host communities and linking the response to solutions early on. Implementing its Grand Bargain commitments, UNHCR worked with local authorities, communities and partners

to improve emergency preparedness, including by expanding its cash-based interventions (CBIs), and helping people meet their basic shelter, health, nutrition, food, and WASH needs.

This chapter outlines UNHCR's response to emergencies in 2017, and its search for, and use of, innovative practices. It highlights the progress made and challenges the Office faced in providing lifesaving assistance to people of concern during multiple, simultaneous emergencies.

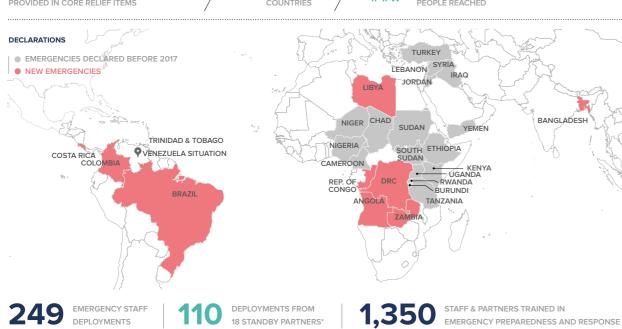
EMERGENCY PREPAREDNESS AND RESPONSE











STANDBY PARTNERS

Rundesanstalt Technisches Hilfswerk (THW) | CANADEM | Centers for Disease Control and Prevention United States of America (CDC) | Danish Refugee Council | Department for International Development, United Kingdom of Great Britain and Northern Ireland (DFID) Directorate for Civil Protection and Emergency Planning, Norway (DSB) | Dutch Surge Support Water (DSS Water, previously Netherlands Enterprise Agency) | Emergency.lu, Luxembourg Ministry of Foreign Affairs | International Humanitarian Partnership | iMMAP | Irish Aid | Norwegian Refugee Council RedR Australia | Save the Children Norway | Swedish Civil Contingencies Agency (MSB) | Swiss Agency for Development and Cooperation (SDC) Veolia Environment Foundation | White Helmets Commiss

Preparing for emergencies

Over the past three years, UNHCR has strengthened its emergency preparedness capacity, making investments to ensure a faster and more efficient response grounded in sound risk assessment. Efforts have involved working with local partners governments, civil society and other stakeholders—to prepare for influxes of people displaced by conflict and to respond to their immediate needs (see the chapter on Expanding partnerships).

Preparing for emergencies involves conducting assessments for possible CBIs, prepositioning relief items, and providing emergency preparedness training to local actors. UNHCR continued its investment in risk analysis and collaborated with other agencies, including at regular global "horizon scanning" sessions organized by the Inter-Agency Standing Committee (IASC) Reference Group on Risk, Early Warning and Preparedness.

UNHCR used the high alert list for emergency preparedness (HALEP) to help country operations assess their capacity to respond to an emergency and put further measures in place. UNHCR's new emergency policy framework made the HALEP mandatory for medium- and high-risk operations and encouraged targeted preparedness support from Headquarters. Training sessions strengthened the ability of more than 1,350 staff and partners on preparedness

and response, including to determine risk, improve preparedness plans, and enhance local response capacity.

UNHCR enhanced its coordination, particularly in refugee situations, and continued to explore ways it could involve development actors earlier in emergency responses. In the course of 2017, technical guidance and capacity-building initiatives were developed for UNHCR staff, partners and host government representatives, in line with the refugee coordination model. Joint regional planning and analysis, and national protection and solutions strategies for IDPs and refugees were also developed under the leadership of regional refugee coordinators.

In 2017, UNHCR issued five regional refugee response plans (RRPs), covering 19 countries. These plans were created in partnership with host governments, United Nations agencies, international NGOs and local first responders. In 2017, two new regional refugee coordinators—responsible for leading operational planning and resource mobilization—were appointed to cover the Burundi and the South Sudan situations. UNHCR also extended the tenures of the regional refugee coordinators for the Nigeria and Syria situations. In addition, a contingency planning exercise for the DRC was undertaken to boost preparedness for the activation of a regional refugee response plan in 2018.

The RRPs provide a comprehensive picture of identified needs. impact on host communities. and operational strategy and financial requirements. In 2017, five RRPs were in place, involvina more than 540 partners in 19 countries. A total of \$7.4 billion was requested in funding to meet assessed needs. and \$3.5 billion in contributions received. The overall funding level of RRPs was 48 per cent.

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Preparing and responding better to the needs of displaced people in emergencies: UNHCR's new emergency policy

In July 2017, UNHCR issued its new Policy on Emergency Preparedness and Response, which became the framework for the Office's efforts to better prepare for, and respond to, the needs of displaced people during emergencies. The policy is based on UNHCR's Strategic Directions 2017-2021 and lessons learned from recent emergencies worldwide. It also reflects UNHCR's role in the early application of the CRRF.

The policy introduces three emergency levels, with clearly defined accountability and coordination roles.

Emergency Level 1 focuses on proactive preparedness. It triggers preparation for a humanitarian emergency, including preparedness missions and human, financial and material support.

Emergency Level 2 is triggered when an operation requires additional support and resources from UNHCR's Headquarters to respond quickly and efficiently.

Emergency Level 3 signifies a situation in which the scale, pace, complexity or consequences of the crisis exceed the existing response capacity of the country operation. A Level 3 emergency requires a "whole-of-UNHCR" response.



IASC humanitarian system-wide Level-3 emergencies are declared by the United Nations Emergency Relief Coordinator. In such emergencies, UNHCR usually:

- Leads the protection, shelter, and camp coordination and camp management (CCCM) clusters when internal displacement is conflict-related.
- Determines its interventions and cluster leadership on a case-by-case basis when internal displacement is due to a natural disaster.



Responding to emergencies

metric tons
of core relief
supplies worth
\$55.3 million,
were delivered to
1.2 million people
of concern in
31 country
operations
worldwide.

In line with its ne
Preparedness ar
made 359 emerg
2017, providing 3
to field operation
redeploying staff
from Headquarte
ensured a complete

Sudan and Uganda.

10,670

In line with its new Policy on Emergency
Preparedness and Response, UNHCR
made 359 emergency deployments in
2017, providing 31,881 days of staff support
to field operations, including through
redeploying staff from other operations and
from Headquarters. Multi-functional teams
ensured a comprehensive emergency
response and standby partners provided
critical support, including with 110 staff
deployments, mostly to Bangladesh, South

UNHCR prepositioned its relief items in seven global stockpiles across Africa, Europe and the Middle East. Doing so enabled the Office to deliver relief items at any given time to 600,000 displaced people by air, road or sea in multiple locations. Simplified procurement rules for emergencies made it easier to purchase items locally and regionally.

Thousands of newly arrived Rohingya refugees cross the border near Anzuman Para village, Palong Khali, Bangladesh.

Responding to the Rohingya refugee crisis

Between August and December 2017, nearly 655,000 refugees fled to Bangladesh from Myanmar's Rakhine State to escape targeted violence and serious human rights violations. They joined more than 276,000 refugees from Myanmar who had fled to Bangladesh in previous years (see the *Asia and the Pacific* regional summary).

Responding to the emergency, UNHCR provided critical protection, shelter, water, sanitation, health and nutrition assistance, and also offered support services to survivors of SGBV.

AT A GLANCE

AUGUST 2017 DECEMBER 2017



7

\$20.4N

VALUE OF RELIEF

10

METRIC TONS OF RELIEF ITEMS DELIVERED

F RELIEF

STAFF AND

\$31M

Raised by the private sector and six National Partners for the Rohingya refugee emergency in Bangladesh

six /a sh

= 10,000 REFUGEES

340,000 REFUGEES

In partnership with the Government, UNHCR developed and implemented a digital data collection system using an innovative approach to household registration. The system enabled UNHCR and partners to understand the size and breakdown of the population, their location, and their protection needs. Refugee families in the Kutupalong camp—known as the Kutupalong-Balukhali expansion site—and surrounding settlements did not need to queue to make themselves known to UNHCR, thanks to a smartphone application that allowed staff to collect shelter-to-shelter data. More than 175,000 refugee families from Myanmar were registered and provided with documentation. The data collected was also used to streamline and verify

refugee identities ahead of the distribution of relief items. The aggregated data from the exercise was also shared with partners to improve evidence-based planning and programming and ensure timely protection interventions for refugees in need of support.

In addition, UNHCR and partners built the Kutupalong-Balukhali expansion site in just five months, and more than 40,000 shelters have been erected since the beginning of the crisis. Together with partners, the Office delivered WASH services rapidly, meeting standards in most of the settlements during the emergency phase, and ensuring interventions were sustainable.

Delivering in high-risk security environments

UNHCR protected and assisted people forced to flee their homes in complex and high-risk security environments. In Afghanistan, Iraq, Somalia, South Sudan, the Syrian Arab Republic (Syria) and Yemen, security measures were vital to protect staff, allowing them to continue delivering lifesaving aid and seek solutions for refugees.

In 2017, UNHCR's security personnel managed more than 400 incidents. Security advisers formed part of multi-functional teams deployed to emergencies, focusing on access to displaced people and appropriate security management systems. The Office applied the programme criticality framework—a common United Nations system policy for decision-making used to determine levels of acceptable security risk for programmes and activities implemented by United Nations personnel—to assess how it could deliver adequate support to people of concern in high-risk environments.



Goodwill Ambassador support

Through wide-ranging activities, UNHCR's supporters illustrated the Office's capacity to respond in a timely and effective manner with lifesaving support to displaced people. Goodwill Ambassador Jung Woo-sung's meetings with Rohingya refugees in Bangladesh, for instance, helped highlight the enormous needs and challenges of the emergency response. In addition, Goodwill Ambassador Helena Christensen's visit to elderly people displaced by conflict in eastern Ukraine spotlighted the central role that UNHCR has played in providing shelter for some of the region's most vulnerable.



UNHCR Goodwill Ambassador, Jung Woo-sung, meets Rohingya refugees in Banaladesh.

AREAS OF INTERVENTION

KEY ACHIEVEMENTS

EMERGENCY PREPAREDNESS AND RESPONSE

REINFORCE EMERGENCY RESPONSE CAPACITY AND EFFECTIVENESS. IN 2017, UNHCR:

Enhance emergency preparedness

Introduced a dedicated Emergency Level 1 response through its revised Policy on Emergency Preparedness and Response, which triggers preparedness activities.

Organized 10 advanced preparedness missions, assessing and prioritizing local and national preparedness interventions.

Used the HALEP in 90 operations to assess their preparedness in cases of displacement and developed 33 refugee contingency plans.

Build capacity in emergency preparedness and response, security and the supply chain

Trained more than 850 people on emergency preparedness and response during: 3 workshops on emergency management, 2 emergency team leadership programmes, 1 senior emergency leadership programme, 11 situational emergency training sessions, 2 emergency management training sessions, 1 training session on information management in emergencies, 1 training session on emergency registration, and 5 inductions to UNHCR emergency response.

Trained more than 500 people from 28 countries through UNHCR's regional centre for emergency preparedness (e-Centre) in Bangkok, which facilitated 19 workshops and trainings. Participants comprised regional, national and local partners, as well as UNHCR staff.

Trained 600 people on security by organizing security management learning programmes, field safety adviser workshops, security management exercises, security risk management workshops, and a programme aimed at increasing women's security awareness.

Trained 2,500 people on supply chain management including in emergencies.

Continued testing innovative approaches, focusing on the Office's accountability to people of concern, as well as participatory assessments and communication with communities

Deploy standby emergency coordination, preparedness and response teams

Ensured deployment to emergencies through agreements with 18 standby partners, as well as internal capacity. Internal capacity included UNHCR's emergency services standby team; the senior corporate emergency roster; its emergency response team; and technical rosters for supply, human resources, administration, finance and programme.

Deployed 359 UNHCR and standby partner staff to emergencies within 72 hours to 25 operations to work as multi-functional teams.

Strengthen inter-agency and strategic partnerships

Continued to work with the IASC Emergency Directors Group and Reference Group on Risk, Early Warning and Preparedness, as well as the United Nations Crisis Management Working Group.

Actively participated in and contributed to inter-agency security forums, including the working groups and steering groups of the Inter-Agency Security Management Network and the United Nations Security Management System.

Enhance policy development

Issued the revised Policy on Emergency Preparedness and Response and mainstreamed it into learning programmes. Updated the Emergency Handbook (in English and French) to reflect policy changes.

Conducted a real-time review of the emergency response in Angola and incorporated lessons learned into training programmes and ongoing activities.

In line with the duty of care for personnel in high-risk duty stations, developed a support package for staff welfare.

AREAS OF INTERVENTION

KEY ACHIEVEMENTS

EMERGENCY PREPAREDNESS AND RESPONSE

REINFORCE EMERGENCY RESPONSE CAPACITY AND EFFECTIVENESS. IN 2017, UNHCR:

Reinforce security management as an organizational culture

Continuously assessed operations to ensure appropriate risk mitigation measures were in place and managed 404 security incidents.

Undertook 62 support missions over 588 days, including to Angola, Bangladesh, Iraq, Uganda and Zimbabwe.

Continued its campaign to reduce road crashes and trained more than 50 trainers to increase awareness.

Developed programme criticality guidelines to ensure UNHCR can deliver effective programmes in high-risk environments.

Trained 15 women (security and staff welfare) to deliver women's security awareness training globally.

OPTIMIZE GLOBAL SUPPLY MANAGEMENT FOR EFFICIENT DELIVERY. IN 2017, UNHCR:

Optimize supply chain for shelter and relief items in emergencies

Maintained the capacity to deliver relief items to 600,000 people in simultaneous emergencies through the global stockpile system.

Delivered 10,670 metric tons of relief items from UNHCR global stockpiles to 31 emergency operations using 31 airlifts, as well as sea and road transport.

Enhanced the global stockpile system by creating a new stockpile in Uganda and 72 new framework agreements with suppliers.

Undertook 21 supply support missions in emergency operations and revised procurement rules and the new local procurement toolkit.

Supported 23 country operations to develop and implement CBIs and procurement, tools and guidance.

PREVENTING, MITIGATING AND RESPONDING TO SEXUAL AND GENDER-BASED VIOLENCE



Brazilian and Venezuelan women paint a wall in the context of the 16 days of activism against sexual and gender-based violence.

Whether a primary cause of their displacement or a significant risk as they flee, men, women and children are too often at risk of sexual and gender-based violence (SGBV) and other forms of abuse, including exploitation and abduction. SGBV remains a critical protection concern for UNHCR. It has devastating and long-term consequences for those displaced people who experience it, and while women and girls are at higher risk from such violence, it also affects men and boys.

Ensuring sexual and gender-based violence programming in emergencies

In 2017, UNHCR deployed Senior Protection Officers dedicated to addressing SGBV in emergency situations in 11 operations for a total of 60 months, as part of the "Safe from the start" initiative. Assessments carried out in follow-up to these deployments showed that UNHCR operations increased the core multi-sectoral activities addressing SGBV and increased the geographical coverage of SGBV programming. The risk of SGBV was therefore mitigated and access to quality services to survivors improved.

In 2017, 41 trainees from the Africa and Middle East and North Africa regions completed an SGBV learning programme on SGBV prevention and response. This has helped expand capacity of UNHCR staff to deliver training for refugees and partner organizations.

In 2017, UNHCR made good progress addressing SGBV by enhancing support to survivors in 33 refugee situations and four IDP situations globally.



Cash and SGBV programming

In 2017, UNHCR conducted studies in Ecuador, Lebanon and Morocco to better understand how to optimize the use of cash to achieve protection outcomes. The findings will be used to develop guidance in cash programming to prevent, mitigate and respond to SGBV.

In addition, UNHCR endeavoured to increase the portion of women as direct beneficiaries of cash assistance, and in particular, survivors and people at risk of SGBV received cash assistance in the Congo, the DRC and Morocco, alongside other complementary forms of assistance such as counselling and livelihood support.

Innovation for protection

UNHCR and partners continued to pilot innovative, multi-sectoral projects aimed at better protecting women and girls from SGBV in different settings. These projects identified the most effective approaches and showed promising ways of mitigating SGBV.

In 2017, 10 multi-sectoral projects were implemented in nine countries, addressing SGBV risks and focusing on four circumstances in which SGBV is more likely to occur—namely, where there are fewer livelihood opportunities, a lack of safe access to energy for cooking, reduced access to technology, and insufficient levels of lighting at night.

With this is mind, UNHCR is piloting projects that provide refugee communities with access to alternative energy sources in Rwanda and the United Republic of Tanzania in order to reduce the risk of SGBV associated with the collection of firewood.



Liquid petroleum gas project reduces risks for women and children in the United Republic of Tanzania

Firewood collection and cooking is the responsibility of women and girls in most refugee situations. It is hard work and can be dangerous. In camps in the United Republic of Tanzania, they can walk 10 kilometres to collect firewood, and many women have been sexually assaulted undertaking this task.

To address this, UNHCR piloted a liquefied petroleum gas (LPG) project, which not only provides refugees with alternative sources of fuel but also helps ensure their protection. A LPG kit includes one full LPG cylinder, a burner and igniter. The project saw the number of women and girls collecting firewood fall from 92 per cent to 30 per cent. As the pilot has proven successful and generated further demand, UNHCR is considering how to increase LPG access across the camps in 2018.



Burundian refugee Frida Nehebauwayo, 17, waits to have her LPG cylinder refilled at Nyarugusu camp in the United Republic of Tanzania.

"Gas helps us a lot. I used to collect firewood from six in the morning and was always late for school. Now, I go to school on time."

—Frida Nehebauwayo, Burundian refugee in the United Republic of Tanzania

Increasing efficient data management

In 2017, UNHCR implemented the Gender-based Violence Information Management System (GBVIMS), an inter-agency initiative that enables humanitarian actors to collect, store, analyze and share data safely and effectively on incidents of SGBV in a consistent and coordinated way. Better quality data can help inform decisions, ultimately to improve

prevention and the care provided to survivors. The GBVIMS has enhanced the safe collection and management of data on incidents of SGBV and trends in many operations, including in the context of the Syria response.

In 2017, the GBVIMS initiative developed the "Inter-agency gender-based violence case management guidelines" which have been used for capacity-building on enhanced quality case management.

The GBVIMS was operational in 14 countries as of the end of 2017.



"We keep it in our heart": sexual violence against men and boys in the Syria crisis.





Male rape and sexual torture widespread in the Syria crisis

Detained during the war in his native Syria, Tarek was held in a darkened cell for a month with 80 other people—but those harsh conditions were the least of it. Kept naked, he and other detainees were strung up by their hands at night, tortured with electric shocks to their genitals, and gang-raped by their captors. "They would come into the cell to violate us, but it was dark—we couldn't see them," he recalled. "All we could hear were people saying, 'Stop! Don't!' I thought we would die."

Tarek's experience is far from unique. A UNHCR report, published in 2017, indicates that sexual violence and torture of men and boys in Syria by multiple parties to the conflict may be far more widespread than previously thought. UNHCR researchers heard accounts of violence against boys as young as 10, and against men, including those in their 80s.

Recommendations geared towards humanitarian organizations, and others involved in working with refugees, included the need for stronger prevention strategies, better confidentiality arrangements, protection against reprisals, improved survivor care, and strengthened awareness of the risks of SGBV among aid workers.

"These are most disturbing accounts revealing just how grave the risk of sexual violence has become for women, girls and, as shown by UNHCR's recent report, also men and boys."

-Volker Türk, UNHCR's Assistant High Commissioner for Protection

The report revealed that the risk of sexual violence is higher for those who are gay, bisexual, transgender or intersex, and does not end when people leave Syria. Inside Syria, armed groups were reported as the main perpetrators, while outside Syria, the danger is often from opportunistic abuse.

Refugee boys in countries of asylum suffer sexual violence at the hands of other male refugees and men in the local community. Sexual exploitation and blackmail of refugee men were reported in countries of asylum, especially among those working in the informal economy, where the vast majority of their families live below the poverty line.

EXPANDING CASH-BASED INTERVENTIONS



Brahim (left) with his wife Halima and their six children from Syria show the cash card they just received from UNHCR and its partners in Greece. The monthly cash assistance will help cover the family's basic needs, giving them the dignity of choice.

UNHCR uses CBIs for a wide range of purposes, typically through multipurpose cash grants, helping people of concern to meet their essential needs, including access to protection, shelter, health, education and livelihoods. Cash, together with in-kind assistance and services, increases efficiency, gives people of concern more choice and more options, and is an integral part of UNHCR's protection strategy.

Delivering cash assistance

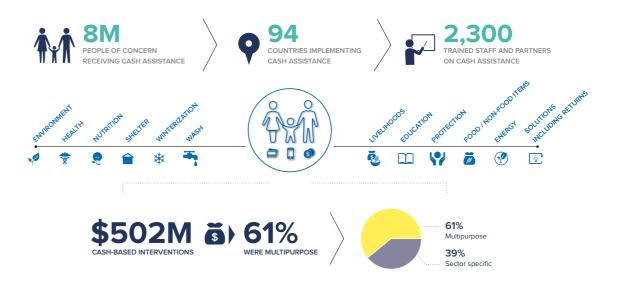
UNHCR's policy on CBIs and its institutionalization strategy (2016-2020) set out its commitment and objectives for the expanded, systematic and innovative use of cash-based assistance. In 2017, the Office delivered \$502 million in cash to

people of concern—a significant increase over the 2015 Grand Bargain baseline of \$325 million. While the overall volume of cash assistance has decreased compared to the previous year, mainly due to fewer return grants in Afghanistan in 2016, more operations, including in Greece, Rwanda and Somalia, have introduced or expanded CBIs (see regional summaries and the chapters on Safeguarding fundamental rights and Building better futures for more CBI examples).

The Office continued to research the use of cash to improve protection, health, education, WASH and basic needs outcomes. More than 61 per cent of CBIs were multipurpose cash grants enabling people of concern to choose how to meet

CASH FACTS | 2017

UNHCR's vision is to ensure that people can meet their needs in dignity, are protected and can transition to solutions through the expanded use of cash assistance



their needs best and, importantly, allowing them to contribute to local economies and host communities. In addition, 25 per cent of the overall cash assistance was provided to meet specific protection objectives.

In line with its institutionalization strategy, UNHCR has integrated cash in existing guidance, tools and processes while developing additional cash tools. Illustrative of this, the Office undertook a global mapping of cash interventions promoting protection, which covered more than 180 CBI programmes across 42 country operations. UNHCR also studied the outcomes related to health, education, WASH and basic needs when delivering cash assistance.



Maximizing effectiveness, efficiency and innovation

UNHCR promoted unified arrangements for cash transfers to maximize the efficiency of CBIs. The Office's corporate tool for managing cash assistance, CashAssist, was strengthened by establishing a direct link between the registration system and the financial service provider. This upgrade enables UNHCR and its partners to deliver and track assistance to people of concern, and staff and partners can now track cash.

In Jordan, the common cash facility (CCF) is a secure and efficient cash transfer facility that is scalable and makes payments more predictable. The CCF provides 90 per cent of all cash assistance to vulnerable refugees living outside camps. With 17 of UNHCR's

partners having joined the cash facility, bank fees for cash transfers have fallen from as high as 5 percent to 1 per cent. Building on this experience in Jordan, the project has been expanded to Greece, and has become part of the addendum on cash assistance to the memorandum of understanding between UNHCR and WFP.

Furthermore, UNHCR has established key partnerships with development actors in Africa and the Middle East to include refugees and others of concern in their programmes. These partners include the UNCDF, Financial Sector Deepening Africa, Grameen Crédit Agricole Foundation and the Swedish International Development Agency (Sida).



UNHCR steps up aid as displaced Syrians brace for winter

Sitting in the single, unheated room that serves as their home in a run-down neighbourhood of the Lebanese capital Beirut, Samira and her husband, Hussein, have a familiar sense of foreboding at the prospect of their sixth winter in exile since fleeing Syria.

Like the majority of the roughly one million registered Syrian refugees living in Lebanon, the couple—originally from Deir Ez-Zour—have good reason to fear the arrival of colder temperatures and winter storms. Conditions were particularly harsh when temperatures fell below zero in previous years. To help vulnerable refugees prepare for the cold weather, UNHCR began providing in between \$225-\$375 winter cash assistance to help with additional costs related to fuel, clothing and medical expenses. Around 650,000 people have received such payments. The programme targeted vulnerable families with a mix of cash assistance, building materials to repair and weather-proof shelters, and distributions of winter items, including high thermal blankets, gas heaters and warm clothes. It also included plans to assist more than 1.1 million people displaced inside Syria, with priority given to those most recently displaced and others living in hard-to-reach or besieged areas.

Samira and her family, who are among the beneficiaries, say the additional support helped keep them warm. "Heating for example, especially with the harsh weather here, is of great help in dealing with my son's condition."



Syrian refugees in Lebanon received winter cash assistance from UNHCR, which they use to pay for food, firewood, clothing and medication



AREAS OF INTERVENTION

KEY ACHIEVEMENTS

BASIC NEEDS AND ESSENTIAL SERVIVES

CASH-BASED INTERVENTIONS. IN 2017, UNHCR:

Enable UNHCR operations to systematically consider and implement

Increased the number of CBI dedicated experts based in operations, from 26 in 2015 to 29 by the end of 2017.

Supported 31 operations in processing the procurement of financial services.

Provide cash assistance across UNHCR operations

Delivered 60% of CBIs through multipurpose cash grants. Provided 80% of CBI funding to country operations.

consider, implement and monitor CBIs

Continue to build the capacity of UNHCR to | Trained more than 2,300 UNHCR staff and partners in CBIs.

Provided dedicated CBI support to 57 countries and 5 regional offices. Undertook 22 CBI and multi-functional country support missions.

Updated UNHCR's financial management system.

Conduct reviews, and develop tools and quidance on CBIs

Undertook 15 CBI-focused reviews, studies and evaluations covering protection and

technical sectors.

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MEETING BASIC NEEDS AND ESSENTIAL SERVICES



The newly constructed Kutupalong-Balukhali extension site as seen from the air. New arrivals have been relocated here on government-allocated land with newly built latrines and freshly dug wells.

Many new and existing emergencies continued to highlight critical challenges, particularly in public health, food security and shelter in urban and semi-urban areas. UNHCR designs its basic needs and essential lifesaving interventions with an agile, adaptable and contextualized response for refugees, IDPs and stateless persons. Its interventions are in line with the 2030 Agenda for Sustainable Development; UNHCR's age, gender and diversity approach; and the United Nations' collective goal to advance gender equality.

Effective, strategic and operational partnerships are, as outlined within the CRRF, essential for meeting the immediate needs of people of concern and improving their quality of life. These needs include shelter, WASH, nutrition and food security, and health, including HIV prevention and treatment, and reproductive health.

Shelter and settlement

UNHCR's global strategy for settlement and shelter (2014-2018) provides a framework to ensure refugees and others of concern can access dignified, secure settlements and shelter, whether they live in urban or rural settings. The framework seeks to improve the quality of emergency shelter responses and supports sustainable settlement solutions by adopting an integrated master plan approach.

In 2017, UNHCR improved the quality of shelter and settlements. It provided accommodation to more than 4.5 million refugees in planned or self-settled camps. At the onset of emergencies, the Office deployed experts and new technology, and developed new partnerships to improve its response.

AT A GLANCE | 2017



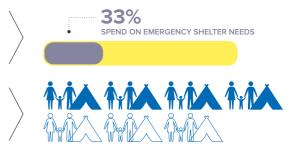
\$500 MILLION

AMOUNT SPENT IN RESPONDING TO THE SHELTER AND SETTLEMENT NEEDS OF PEOPLE OF CONCERN



43

SITUATIONS IN WHICH HOUSEHOLDS IMPROVED OR MAINTAINED THEIR ACCESS TO ADEQUATE SHELTER



In Bangladesh, for example, UNHCR enlisted technical expertise to ensure sound planning and management of the densely populated refugee sites. By using drone technology to map inaccessible areas and to assess flood and landslide risk, it provided a rapid shelter response for 80,000 families.



Families living in refugee housing units in Al Jemea'a camp in Iraq.

Improved shelter solutions

UNHCR's longstanding partnership with Better Shelter and the IKEA Foundation improved the refugee housing unit model, in consultation with people of concern. This durable, cost-effective, flexible and all-in-one shelter solution includes a solar energy unit for a LED lamp and telephone charger, and provides greater dignity, privacy and protection from the elements to displaced families.

In 2017, about 10,000 refugee housing units were deployed to facilitate more sustainable shelter responses in eight operations across Africa and the Middle East. "It provides us with more privacy. My wife and I sleep behind the curtain and my kids sleep on this side, in the main 'room'. The refugee housing unit is a blessing from God for us in the desert," said Hamid and Fatma, beneficiaries at Al Jamea'a camp in Iraq.

UNHCR also developed a new self-standing family tent—a lightweight, self-supporting structure that can be erected by just three people in 30 minutes.

Both the refugee housing unit and the new self-standing family tent offer better shelter solutions and protection-related improvements.

In protracted refugee situations, UNHCR used the master plan approach to prepare more sustainable settlement options for people of concern. For example, in Damak, Nepal, UNHCR committed to improving the living conditions of 7,000 Bhutanese refugees by facilitating the camp's

consolidation and upgrading temporary emergency shelters to semi permanent solutions within three years. Partnerships with private sector and academia strengthened the research and technical approaches UNHCR employs in the field and enhanced cost efficiency.



"Nobody left outside" for global shelter fundraising campaign

Prompted by the significant need for shelter and protection funding, UNHCR launched a three-year global shelter campaign, "Nobody left outside", in May 2016, targeting private sector donors.

By the end of 2017, the shelter campaign had raised more than \$20 million from companies, foundations, philanthropists and individuals worldwide, helping to provide shelter solutions to thousands of families in some UNHCR's most challenging operations as well as to deliver cash assistance and emergency shelter in humanitarian crisis.

The campaign runs until May 2019 and has been implemented by UNHCR offices in 20 countries and UNHCR's National Partners.



A Rohingya refugee, Alin Nisa, with her daughter in Kutupalong Camp Extension site, Bangladesh.

"Our core aim is to ensure that refugees receive the physical protection they need and rightfully deserve."

—Phoebe Goodwin, UNHCR's Associate Site Planner on an emergency mission to Bangladesh

AREAS OF INTERVENTION

KEY ACHIEVEMENTS

SHELTER AND SETTLEMENT

ESTABLISH, IMPROVE AND MAINTAIN SHELTER AND INFRASTRUCTURE. IN 2017, UNHCR:

Implement the UNHCR global strategy for settlement and shelter (2014-2018)

Assisted 17 operations to develop comprehensive shelter and settlement strategies. Implemented the master plan approach to site planning in 3 additional operations in Malawi, Nepal and Uganda.

Continue the development of alternatives to camp policy and master plan approach

Developed a site planning technical training package, including 88 software licenses assigned to technical experts and sent 33 physical site planning toolkits to the field, 15 of which in the context of an emergency deployment.

Developed 4 comprehensive e-learning modules, in partnership with Microdesk.

Strengthened partnerships, particularly with UN-Habitat, to support the development of urban response quidance.

Developed practical tools to guide how CBIs could support shelter responses.

Ensure the systematic deployment of senior shelter and settlement staff from the onset of emergencies

Deployed senior technical staff who undertook 51 missions to ensure the integrity of field responses and reinforce emergency response capacity.

Developed standby partnership arrangements for emergency shelter deployments.

Improve the range of shelter solutions available to UNHCR operations

Completed the design of an improved refugee housing unit, in partnership with Better Shelter.

Completed the self-standing family tent design in preparation for its roll-out in UNHCR's operations in 2018.

Public health



Clinical staff at Nyumanzi integrated health centre for both Ugandan nationals and refugees from South Sudan.

Refugees and asylum-seekers are often unable to benefit from livelihood opportunities and social protection, making it difficult for people to access essential services, such as health care. In its public health strategy (2014-2018), UNHCR aimed to ensure all refugees can access lifesaving and essential health care, and advocated for the inclusion of people of concern in national programmes. In partnership with host governments, United Nations agencies and development partners, UNHCR is working towards a holistic approach to meet and address the needs of both refugees and host communities (see the chapters on Expanding partnerships and Building better futures).

In 2017, country assessments were conducted in the DRC, Djibouti, Guinea and Rwanda in partnership with ILO on the inclusion of refugees in national health care structures, including through community-based health insurance schemes. Capacity-building activities in Algeria, the Congo, South Sudan and Uganda helped train some 240 primary health care workers to provide mental health support to refugees. These efforts also aimed to promote the integration of mental health into refugee primary health care.

UNHCR continued delivering HIV prevention and treatment and reproductive health programmes within a framework of public health, protection and community development. In 2017, UNHCR reinforced reproductive health and HIV prevention and

UNHCR uses its health information system, Twine, to monitor the health status of refugees and the coverage and quality of interventions for some 4.7 million refugees in 26 countries.

treatment programmes in Cameroon, Niger, Rwanda, the United Republic of Tanzania and Zambia. With measures to improve maternal health outcomes enhanced, 17 UNHCR operations had coverage rates of skilled birth attendance of above 90 per cent. Cost-effective and high-impact, neonatal interventions were expanded in Jordan, Kenya and South Sudan.

The Office assisted national authorities with HIV prevention activities and the delivery of antiretroviral therapy to refugees, including in Rwanda. Together with UNFPA, it strengthened maternal health and HIV services for South Sudanese refugees in Uganda by offering training to staff and partners and clinical services to survivors of SGBV, and provided refugee peer education in Niger.



Cash assistance for health

In Jordan, UNHCR and partners use cash as part of a wider programme of referral services for refugees to access health care. Pregnant refugee women were able to use the cash to pay for their deliveries. Using cash enables UNHCR to serve more refugees and people of concern with the same level of funding, as the cost of using a referral system is about three times greater.



Amina Asafi, a Central African refugee midwife, works in the health centre in the Chadian village of Beureuh, serving refugees and Chadians.

Central African refugee midwife giving back to the community in the south of Chad

Amina Assafi, 37, is the mother of two children and joined her parents in a refugee camp in the south of Chad after her husband was killed during the war in the CAR. She is now living in Amboko camp with her family. She is proud of her achievement going from a community health worker to becoming a midwife thanks to UNHCR's support and a DAFI scholarship. She works in the health centre of the Chadian village of Beureuh, serving refugees and Chadians.

"I have a lot of hopes. Before, I did not study in university. But now I came to the camp, I was patient for 10 years and got the opportunity to study. This is hope. Before I didn't know but now I am a state-graduated midwife. This is a success. Be it in Chad or in the CAR or elsewhere in Africa, I can work," says Amina.

AREAS OF INTERVENTION

KEY ACHIEVEMENTS

BASIC NEEDS AND ESSENTIAL SERVICES

IMPROVE HEALTH STATUS OF POPULATION. IN 2017, UNHCR:

Strengthen interventions to reduce the incidence and impact of communicable diseases, including outbreaks

Improve access to expanded noncommunicable disease services at primary health care level

Support and strengthen the provision of mental health services through primary care providers

Collaborated with the Centres for Disease Control and Prevention to develop a toolkit on an expanded programme for immunization (EPI) and include it as a module in the balanced score card (BSC) monitoring tool for primary health care.

Rolled out the second phase of UNHCR's non-communicable disease project in Algeria and Rwanda. This helped to scale up the management of non-communicable disease at the primary care level through targeted capacity-building conducted by partners and through linkages to national programmes.

Completed an evaluation, which demonstrated that trained staff were able to better identify and manage refugees with mental health concerns.

In partnership with War Trauma Foundation, trained 240 primary health care workers on mental health in Algeria, the Congo, South Sudan and Uganda.

ENSURE ACCESS OF PEOPLE OF CONCERN TO REPRODUCTIVE HEALTH AND HIV SERVICES. IN 2017, UNHCR:

Take measures to improve access to skille attendance at delivery

Take measures to improve access to skilled Provided skilled birth attendance for 90% of deliveries in 17 UNHCR operations.

Expand the availability of neonatal care

Completed a two-year project to strengthen neonatal care in Jordan, Kenya and South Sudan. The project helped health workers to improve their skills in newborn care and monitor the progress of deliveries.

Take measures to improve access to a comprehensive range of HIV prevention and treatment services

Supported national structures to make antiretroviral therapy available, including for the prevention of mother-to-child transmission among refugees in the CAR, the DRC and South Sudan

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Food security and nutrition



Congolese refugees collect their monthly food aid at a distribution centre in Nyarugusu refugee camp in the United Republic of Tanzania, where rations have been cut due to lack of funding.

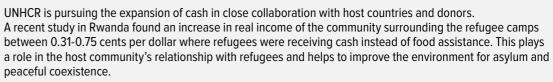
In 2017, many children were severely malnourished, especially where limited resources resulted in food, water and health cuts. Approximately 3.3 million refugees received less than the acceptable standard of food assistance (based on 2,100 kcal/person/day). Countries in Africa—in particular sub-Saharan countries—experienced food cuts greater than others (see Africa regional summary). Food insecurity led to malnutrition and posed protection risks. Data from Chad and Rwanda indicated that some women use transactional sex to help their families' basic needs. Domestic violence also often increased when men were unable to support their households.

In 2017, global acute malnutrition (GAM) reached acceptable levels in 62 per cent of surveyed refugee sites—a minor improvement over 2016. Only around

a quarter (23 per cent) of refugee sites surveyed found that children under the age of five were not stunted, and half (50 per cent) of surveyed sites showed critical levels of child anaemia, indicating an increasingly precarious situation. The infant and young child feeding (IYCF) framework was rolled out with nutrition treatment and prevention programmes, including in the emergency in Bangladesh, where childhood and adult malnutrition levels were high.

To address the complex causes of malnutrition, UNHCR promotes low-cost, high-impact interventions. With WFP, the Office implemented a self-reliance strategy to make the best use of limited resources. The approach targeted the most vulnerable people of concern, providing cash and assistance to cover basic needs. It also pursued initiatives promoting refugee self-reliance.

Cash assistance help to boost the local economy



AREAS OF INTERVENTION

KEY ACHIEVEMENTS

BASIC NEEDS AND ESSENTIAL SERVICES

IMPROVE FOOD SECURITY AND NUTRITIONAL WELL-BEING. IN 2017, UNHCR:

Expand the use of the IYCF framework and nutrition roadmap

In partnership with Save the Children, rolled out the IYCF framework in 4 additional countries (Ethiopia, South Sudan, Sudan, and Uganda).

Strengthened the implementation of the framework in Bangladesh, Jordan and Kenya, where the IYCF framework had already been rolled out.

Strengthen linkages between reproductive health services and nutrition

Conducted a joint nutrition, food security, reproductive health and HIV support mission in Uganda to encourage better quality nutrition and reproductive health care services, and highlighted the linkages between them.

Developed a nutrition roadmap including to guide operations to strengthen the linkages between reproductive health services and nutrition.

Expand self-reliance projects for food security and nutrition

Developed UNHCR's global agriculture strategy and supported agriculture programming to improve food security and livelihoods in Ethiopia, Kenya, South Sudan, Sudan and Liganda

Improve availability of data to support nutrition and food security decision-making

Conducted nutrition surveys in 98 refugee sites. The data also provided key food security indicators.

Reviewed data and updated them to incorporate international norms to inform the revision of the standardized and expanded nutrition surveys.

Improve joint programming at the country level

assistance

Developed joint plans of action after joint assessment missions to Djibouti and Nepal.

Strengthen food security monitoring in the context of livelihood initiatives to better assess impact

Trained staff and partners to conduct surveys measuring the impact of agricultural programmes on refugee livelihoods in 11 operations (Burkina Faso, Cameroon, Chad, Ethiopia, Ghana, Guinea, Malawi, Niger, Somalia, Zambia and Zimbabwe).

Improve targeting methods for food

 ${\bf Conducted\ vulnerability\ assessments\ in\ Cameroon\ and\ Uganda.}$

Signed the joint UNHCR/WFP principles aimed at designing targeted approaches for the provision of food and other essential assistance.

Water, sanitation and hygiene

AT A GLANCE | 2017











IN 19 COUNTRIES

In 2017, UNHCR provided safely managed water and sanitation services to nearly 8.5 million people in 50 countries. Strategic partnerships allowed UNHCR to adopt cost-efficient, sustainable WASH technologies. The Office encouraged the inclusion of people of concern in national WASH service systems and development plans, in line with the CRRF and SDG 6 on ensuring access to water and sanitation for all.

UNHCR completed a four-year project to create an online database of boreholes in refugee settings worldwide, as well as a tool to measure the efficiency of a particular WASH response. This tool has improved budgeting for water provision in camps, particularly in post-emergency situations, and supported the expanded use of motorized water pumps run with hybrid or

solar energy rather than fossil fuel, which could reduce associated costs by up to 80 per cent. In 2017, UNHCR reduced the cost of sanitation services in Bangladesh, Ethiopia, Kenya, and Mozambique by providing sanitation solutions, which converted refugee waste into value-added products, including cooking fuel briquettes, biogas, fertilizer and solid waste recycling.

Furthermore, UNHCR strengthened its emergency WASH response, particularly in Angola, Bangladesh, the DRC and Zambia. The Office involved refugees more heavily in the design and implementation of WASH programmes, resulting in specific toilet designs that improved access for people with disabilities. Furthermore, positioning water points in safer locations helped reduce the risk of SGBV.

Cash assistance for WASH

UNHCR is placing more emphasis on cash-based interventions as a means of delivering WASH assistance. In its report, "Cash-based interventions for WASH programmes in refugee settings", recommendations and best practice guidance for the use of CBIs in refugee settings are put forward. A WASH and cash response matrix was also developed to provide ongoing support to field operations using cash in refugee WASH programmes.

AREAS OF INTERVENTION

KEY ACHIEVEMENTS

BASIC NEEDS AND ESSENTIAL SERVICES

INCREASE OR MAINTAIN THE SUPPLY OF POTABLE WATER TO ENSURE AFFECTED POPULATIONS LIVE IN SATISFACTORY CONDITIONS OF SANITATION AND HYGIENE. IN 2017, UNHCR:

Improve rapid and effective response to WASH in emergencies

Undertook emergency WASH response and provided remote support to teams in Angola, Bangladesh, the DRC, Uganda and Zambia.

Updated WASH emergency equipment specifications catalogue and frame agreements jointly with UNICEF.

With UNICEF, supported training for staff and standby partners in the provision of WASH services during emergencies.

Published the report, "Rapid methods for assessing water, sanitation and hygiene (WASH) services at refugee camps in emergency settings", successfully applied these methods in Bangladesh and provided key information to WASH partners accordingly.

Strengthen evidence-based programming

Developed WASH monitoring mechanisms, including a monthly report card and standardized KAP survey in 4 additional countries (Cameroon, Chad, the DRC and Ethiopia) to improve gap analysis and resource allocation.

Designed a water tool that enables operations to better calculate the costs of their water programmes and include related costs in their planning.

Support the development of multi-year WASH strategies and site-level WASH operational plans

operational plans

Develop innovative solutions for

cost-effective and sustainable WASH solutions in protracted situations

Developed multi-year WASH strategies and site-level operational plans in 18 situations, covering short (emergency), medium (post-emergency), and long-term (protracted) plans.

Supported 7 country operations (Cameroon, Chad, Congo, the DRC, Ethiopia, Niger and the United Republic of Tanzania) using cash-for-WASH programmes.

Improve UNHCR's levels of WASH service provision in urban settings

Reviewed urban WASH programmes and published a guidance note on WASH provisions for refugees in urban situations, which included case studies from Lebanon, Turkey and Uganda.