

Nigerian refugees line up to collect water in Minawao refugee camp, northern Cameroon.





RESPONDING WITH LIFESAVING SUPPORT

Emergency response and preparedness is at the core of UNHCR's work. The timely delivery of protection and assistance plays a critical role in saving the lives of displaced populations.

In recent years, new emergencies, ongoing conflict and protracted crises have triggered record levels of global displacement. While no system-wide IASC Level 3 emergencies were declared in 2016, the Level 3 emergency declarations for Iraq, Syria and Yemen remained in place, as did UNHCR's own internal emergency declarations for the Burundi, Europe, Iraq, South Sudan, Syria, Uganda and Yemen situations. UNHCR also elevated its internal emergency declaration for Nigeria from level 2 to level 3 in August 2016.

Over the course of 2016, UNHCR also deactivated its emergency declarations for the Central African Republic, Myanmar and Ukraine, as the operational response for these situations was found to have stabilized, and the exceptional mobilization of emergency capacities was no longer required.

Nevertheless, UNHCR maintained emergency arrangements for more than 25 countries as of September 2016.

In this chapter:

- Responding to emergencies
- Safety from violence and exploitation
- Lifesaving support



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RESPONDING TO EMERGENCIES

Emergency preparedness

In order to deliver protection and assistance in a more rapid and effective way, UNHCR strengthened its emergency preparedness capacity throughout 2016 with targeted assistance to countries receiving or foreseen to receive refugees, the development of analytical tools, and monitoring of preparedness. As of January 2017, an emergency preparedness section will be established to ensure that this work is sustained.

In 2016, UNHCR developed and adopted the High Alert List for Emergency Preparedness (HALEP) to monitor the risk of displacement and the organization's readiness to respond to influxes, together with partners and governments. Ten country operations will be prioritized in 2017 for targeted, emergency-preparedness activities based on the HALEP.

The World Humanitarian Summit, which was convened by the UN Secretary General in May 2016, generated a number of commitments that highlighted the important role that local actors play in emergency preparedness. The Summit also reaffirmed that affected populations are "rights holders" who

must be placed at the centre of decision-making processes. Given the impetus provided by the Summit, and in line with its commitment working with local actors, UNHCR will strengthen local partnerships in emergency preparedness in 2017, and ensure participation of local communities, displaced populations and authorities, as well as with humanitarian and development actors.

In 2016, a joint approach with local actors was developed in consultation with local and international NGOs. This approach, which focuses on mapping and complementing local capacity, analysis, planning, protection-centred preparedness and capacity-building, was applied in the United Republic of Tanzania and will be promoted in all prioritized HALEP countries, starting with four countries in 2017.

In 2017, new advance emergency administration and supply teams will be deployed to deteriorating situations and to assist operations to put in place preparedness measures. These teams will assess and improve the support services needed to respond to an emergency including office space, logistics, warehousing, procurement,

telecommunication infrastructure, and accommodation for staff.

UNHCR is also piloting a partnership model for emergency preparedness – the refugee emergency response agreement (RERA) – to mobilize additional partner

capacity when technical gaps are identified. RERAs have been established with DRC, NRC and OXFAM for expertise in CCCM; shelter; community-based protection; WASH; housing, land and property; education; SGBV; health; and cash-based interventions.

Emergency preparedness at UNHCR

UNHCR prioritizes emergency preparedness to ensure that all refugees and IDPs affected by an emergency situation receive protection and humanitarian assistance in a timely, adequate, efficient and dignified manner. To this end, UNHCR will:

- Monitor the capacity of its operations and partners to respond to emergencies in new and ongoing emergencies;
- Support inter-agency and global early warning systems;
- Undertake preparedness planning at local and national levels with host governments and partners, local authorities and relevant stakeholders, with a focus on mapping and complementing local capacities;
- Ensure emergency preparedness and a comprehensive protection response that is based on humanitarian standards, access to rights, the resilience of communities, and accountability to refugees, IDPs and local communities;
- Train and prepare humanitarian actors to support the capacity of first responders, as well as to rapidly deploy to emergencies;
- Establish strategic supply systems and routes, taking into account local markets and legal and political barriers to the movement of people and commodities;
- Pre-position emergency supplies to deploy resources rapidly;
- Ensure relevant policy initiatives and priorities are integrated in the response, such as cash-based interventions, alternatives to camps, livelihoods and private sector engagement;
- Develop and strengthen deployment capacity with rosters of well-trained protection, emergency management and technical staff.

Emergency response

UNHCR's emergency response system is immediately activated upon the declaration of an IASC system-wide Level 3 emergency or UNHCR emergency declaration. To ensure resources are mobilized as quickly as possible, UNHCR maintains capacity to dispatch relief items within 48 hours to some 600,000 people. Where feasible,

relief and shelter items are also sourced locally or regionally where markets and infrastructure allow.

In addition, UNHCR emergency stand-by teams can be deployed within 72 hours to manage and coordinate a response and address the most urgent needs of affected populations. These teams are supported by technical specialists in the

Emergency classifications

UNHCR emergency classifications: UNHCR defines three levels of emergency response taking into account the impact on affected populations, the complexity of the situation and the capacity of the Office to respond. A UNHCR emergency declaration triggers an immediate mobilization of human, financial, and material resources to support the country operation in its response to the crisis.

A system-wide Level 3 emergency: the global humanitarian system's classification for the most severe crises, which require system-wide mobilization to significantly increase the scope of the response and improve the overall effectiveness of assistance. They are declared by the Emergency Relief Coordinator on behalf of the IASC, of which UNHCR is an active member.

areas of security, prevention and response to SGBV, health, WASH, programme, supply management, and human resources management. Human resource management, supply and programme rosters were established in 2015 and 2016. Finance and administration rosters will be set up in 2017.

UNHCR has existing agreements with 18 standby partners who will continue to support emergency staff deployments as well as provide technical services and infrastructure, such as water and sanitation facilities, communication technology, renewable energy, and office and accommodation facilities. To ensure a coordinated inter-agency response in emergencies, UNHCR will continue to actively participate in the IASC Emergency Directors Group. ■

“It’s a sobering reality that new crises are likely to continue to proliferate, calling for a rapid mobilization of emergency resources, and we are unlikely to see a large-scale comprehensive resolution of major crises in the coming 12 months.”

- Filippo Grandi, UN High Commissioner for Refugees at the Consultations with NGOs in June 2016

UNHCR’s stand-by partners

- CANADEM
- Centers for Disease Control and Prevention, United States
- Danish Refugee Council
- Department for International Development, United Kingdom of Great Britain and Northern Ireland
- Emergency.lu / Luxembourg Ministry of Foreign Affairs
- German Federal Agency for Technical Relief
- iMMAP Inc.
- International Humanitarian Partnership
- Irish Aid
- Netherlands Enterprise Agency
- Norwegian Directorate for Civil Protection
- Norwegian Refugee Council
- RedR Australia
- Save the Children Norway
- Swedish Civil Contingencies Agency
- Swiss Humanitarian Aid Unit, Swiss Agency for Development and Cooperation
- Veolia Environment Foundation
- White Helmets Commission, Argentina

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Emergency response, security and supply	
Capacities, skills and knowledge fostered and developed	
Enhance emergency preparedness	<ul style="list-style-type: none"> ■ 70 operations will use the HALEP and diagnostic tool to assess their level of preparedness. ■ 10 prioritized country operations at high risk will be supported through tailored preparedness missions and contingency planning workshops, with a focus on mapping and complementing local capacities. ■ A platform for early warning, preparedness analysis and contingency planning will be developed. ■ RERAs with NGO partners will be tested.
Tools for emergency preparedness and response	<ul style="list-style-type: none"> ■ UNHCR's "Emergency handbook" will be updated continuously and made available in Arabic, French and Spanish. ■ Innovative approaches to emergency response will continue to be tested by the UNHCR emergency lab, with focus on participatory assessments and feedback through communicating with communities.
Training for emergency preparedness and response, security and the supply chain	<ul style="list-style-type: none"> ■ 460 UNHCR and partner staff will be trained on emergency preparedness and response through: 3 workshops on emergency management; 1 senior emergency preparedness and response leadership programme; 3 situational emergency trainings; 3 emergency management trainings; and 2 inductions to UNHCR emergency response workshops. ■ 360 participants will be trained on security through: 2 security management learning programmes; 2 field safety adviser workshops; 5 security management exercises; 3 security risk management workshops; and 1 emergency trauma bag training for field safety advisers. ■ 2,000 participants will be trained on supply chain management through e-learning and workshops. ■ The Regional Centre for Emergency Preparedness (eCentre) in Bangkok will conduct 14 workshops and trainings for UNHCR and partner staff.
Emergency response capacity and effectiveness reinforced	
Optimize supply chain for provision of shelter and core relief items in emergencies	<ul style="list-style-type: none"> ■ Relief items for approximately 600,000 people will be available from UNHCR's 7 global stockpiles for dispatch within 48 hours. ■ Core relief items will be pre-positioned in regional warehouses in Djibouti and Uganda for rapid delivery to deteriorating situations in East and West Africa. ■ Country preparedness plans will be linked to global supply chain planning to better forecast emergency needs. ■ 15 experienced supply staff will be trained in emergency responses and participate in UNHCR's emergency supply roster for a period of two years. ■ Supply rules will be adjusted to facilitate a speedy response to emergencies through streamlined procedures and increased local procurement. ■ Local and regional market capacity analysis and the use of cash-based interventions in emergencies will be enhanced.
Deploy stand-by emergency coordination, preparedness and response teams	<ul style="list-style-type: none"> ■ A range of flexible mechanisms for emergency deployments will be maintained, including agreements with 18 stand-by partners. ■ More than 200 staff will be ready to be deployed within 72 hours from UNHCR's internal rosters, including the senior corporate emergency roster, the emergency response team, and technical rosters for the deployment of supply, human resources, administration, finance and programme staff. ■ 12 permanent emergency services staff on stand-by will continue to act as core teams in the first emergency response to provide leadership, inter-agency coordination, and protection, including community-based protection. ■ Advance emergency administrative and supply teams will be available for deployment to support country operations which are at high risk of an emergency outbreak.





Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Inter-agency and strategic partnerships strengthened	
Inter-Agency Standing Committee (IASC)	<ul style="list-style-type: none"> ■ UNHCR will continue to work with the IASC Emergency Directors Group; Task Team on Preparedness and Resilience and related initiatives; Task Team on Principled Humanitarian Action; UN Crisis Management Working Group; and the Communicating with Disaster-Affected Communities Network. ■ 90 participants will be trained through 2 IASC emergency team leadership programmes and 2 workshops on strengthening protection and the response capacity of local partners.
UN Security Management System (UNSMS)	<ul style="list-style-type: none"> ■ Active participation and contribution in security forums of the Inter-Agency Security Management Network and the United Nations Security Management System will continue. ■ The UN Programme Criticality Steering Group will be supported through effective representation in the Programme Criticality Coordination Team.
Policy development strengthened	
UNHCR emergency policies and procedures	<ul style="list-style-type: none"> ■ UNHCR's "Policy on emergency response activation, leadership and accountabilities" will be revised and updated based on lessons learned from emergencies in 2015 and 2016. ■ 2 real-time assessments of emergencies will be conducted and the lessons learned will be incorporated into training programmes and ongoing activities.
Security management reinforced as an organizational culture	
Implement the plan of action to strengthen the culture of security within UNHCR	<ul style="list-style-type: none"> ■ Operations will be continually assessed to ensure appropriate risk mitigation measures are in place. ■ The security policy will be reviewed, and security aspects will be integrated into relevant UNHCR policies. ■ Security risk mitigation strategies for operations will be continually reviewed and monitored to ensure that operations are prepared for varying threats and able to respond to the needs of affected populations. ■ Security guidance on UNHCR and UNSMS policy issues will be provided to management, security advisers and staff. ■ Security structures and equipment will continue to meet appropriate standards and organizational needs through technical assessments of equipment and the maintenance of a stockpile of global equipment.



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SAFETY FROM VIOLENCE AND EXPLOITATION

Activities and programmes that seek to prevent and respond to SGBV are accorded the highest priority from the onset of all emergencies and are planned, programmed and implemented as non-negotiable features of UNHCR's response to displacement. Life-threatening outcomes can result from SGBV, including homicide, suicide, the potential for increased rates of maternal and infant mortality, as well as AIDS-related mortality. Other consequences include physical pain, emotional and psychological harm, and the loss of social status when survivors of SGBV are driven into further poverty, isolated and stigmatized, even by their own families.

Measures to prevent and address SGBV are multi-faceted and complimentary. Prevention alone is not effective without response mechanisms, and response cannot be fully effective without prevention. This requires coordinated action from a wide range of stakeholders, including communities, civil society, and State entities.

UNHCR remains deeply committed to bringing all concerned actors together to put in place effective and accessible SGBV prevention and response systems. The Office will continue providing dedicated technical support to emergency operations, including through the

deployment of Senior Protection Officers (SGBV), in order to address needs in a timely, compassionate and confidential manner. A non-discriminatory approach to SGBV prevention and response is fundamental, and UNHCR will continue to advocate for this principle to become standard in all humanitarian settings.

Addressing SGBV during and beyond humanitarian emergencies remains a complex, global task. Effectively responding to SGBV requires strong leadership, political will, cooperation at all levels and dedicated resources and expertise. Where these factors have come together in humanitarian settings, clear and positive results have been possible. UNHCR will continue prioritizing its efforts to strengthen and refine its leadership and approaches in this key area of protection.

Responding to SGBV

Through its advocacy with governments and collaboration with partners and local communities, UNHCR will continue investing in a key set of services underpinning SGBV response programming: medical care; psychosocial support; safety and security; and access to justice. As part of the medical response, for example, more can be done to ensure that all rape survivors have timely access to post-exposure prophylaxis in order to prevent HIV infection. Access to timely mental health and psychosocial support for survivors helps address the emotional and psychological consequences of SGBV, such as post-traumatic stress,

depression, anxiety, fear, shame, and suicidal thoughts and behaviour. Community workers and trained female peer counsellors play a critical role in providing support for survivors, and UNHCR will continue to invest in building their capacity to do so.

Access to justice is also a critical component of prevention and response activities; ensuring perpetrators are brought to justice has implications beyond the individual survivor, sending a strong message to communities about the rule of law. Nevertheless, a number of barriers can limit the ability of SGBV survivors to access justice, including the lack of sufficient knowledge or resources of law enforcement agencies to respond appropriately, difficulties encountered when prosecuting perpetrators, as well as social stigma and fear of retaliation. However, important strides are being made in supporting survivors' access to legal recourse. UNHCR will continue providing governments with technical support so that survivors seeking legal redress can do so in a secure and timely manner.

The Office works to ensure that protective and safe environments are available to all survivors of SGBV. Recognizing that building protective environments starts at the grassroots level, increased community awareness and strengthened local capacity are needed to prevent and address SGBV. Further, greater focus should be placed on working within existing community structures and national institutions to forge and reinforce partnerships with relevant stakeholders.

Preventing SGBV

As with response activities, initiatives to prevent SGBV are equally lifesaving and need to be implemented from the onset of displacement. Preventing SGBV requires identifying, understanding, and addressing its root causes and contributing factors. This requires immediate action as well as sustained, long-term prevention strategies aimed at attitudinal and behavioural change. UNHCR engages in a number of prevention activities alongside communities, local partners, and government authorities, including to: ensure safe access to basic needs; mitigate risks through physical protection; promote gender equality; and address legal or policy frameworks to end impunity.

Incorporating community-based and gender-sensitive measures into the planning, implementation, and monitoring of WASH, shelter, as well as fuel and energy programmes, can also reduce the risk of multiple forms of SGBV. For example, sufficient and appropriate levels of community and household lighting can reduce the risk of SGBV by influencing security and social dynamics at night. While important innovations have been made in community-level lighting, far more needs to be done in ensuring that all sectoral experts are fully aware of and conversant in their role to prevent SGBV. To achieve this, the Office will continue providing guidance and training, supporting innovative ideas, and strengthening collaboration. ■



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LIFESAVING SUPPORT

Cash-based interventions

UNHCR began using cash-based interventions (CBIs) in the mid-1980s, and their use has grown across sectors and regions. In 2014, the expanded and systematic use of CBIs became a corporate priority, and the Office has since been increasing its efforts to enhance the use of this modality of assistance. UNHCR is now implementing CBIs in more than 60 countries, ranging from large-scale, multi-purpose cash grants to smaller-scale sectoral cash assistance and cash to strengthen the protection of vulnerable people of concern.

The increased use of CBIs gives people who have minimal or no income the ability to make their own choices about how to meet their needs in a dignified manner. It also contributes to the local economy and helps build positive relations between refugees and host populations.

While CBIs are expanding rapidly, the cash modality is not yet used in all operations and sectors to its full potential. To remedy this, UNHCR developed a five-year “Strategy for Institutionalization of CBIs (2016-2020)” and policy on CBIs to support the systematic, expanded and innovative use of CBIs.

UNHCR is focusing on the implementation of the following three main objectives:

1. Meeting its Grand Bargain commitment to “scale up cash assistance where appropriate, with the aim to double the amount of funds programmed for CBIs in aid delivery by the end of 2020”.
2. Continuing to increase CBI “proficiency” at all levels, across all functions and operations, supported by a robust CBI infrastructure and related capacity-building initiatives. In 2020, all operations will be able to consider and use CBIs in the same way as in-kind assistance.
3. Supporting host governments, strengthening strategic partnerships and building new alliances for expanding the use of CBIs to meet the protection and solutions needs of refugees and other people of concern to UNHCR, so they may live in dignity.

Successful realization of these objectives will require the active engagement of host governments and the full spectrum of UNHCR’s partners, notably sister agencies of the United Nations, NGOs, development actors, private sector service providers and CBI networks and alliances. The Office is committed to working through collaborative approaches that maximize synergies with, and the comparative advantages of, other actors. UNHCR will further ensure that, pursuant to the Comprehensive Refugee Response Framework, CBIs are designed to leverage national development systems and existing social safety nets.

Implementing cash-based interventions

To meet its key objectives, UNHCR will focus on a number of priorities in 2017.

Providing country-specific support:

UNHCR’s long-term focus is to expand the systematic use of CBIs in all operations. At least 11 additional countries (Afghanistan, the Republic of the Congo, the Democratic Republic of the Congo, Ethiopia, the Islamic Republic of Iran, Kenya, Niger, Rwanda, Somalia, Sudan and Uganda) will receive dedicated and sustained technical support during 2017 to scale up the use of CBIs. In addition, all countries implementing CBIs will receive guidance.

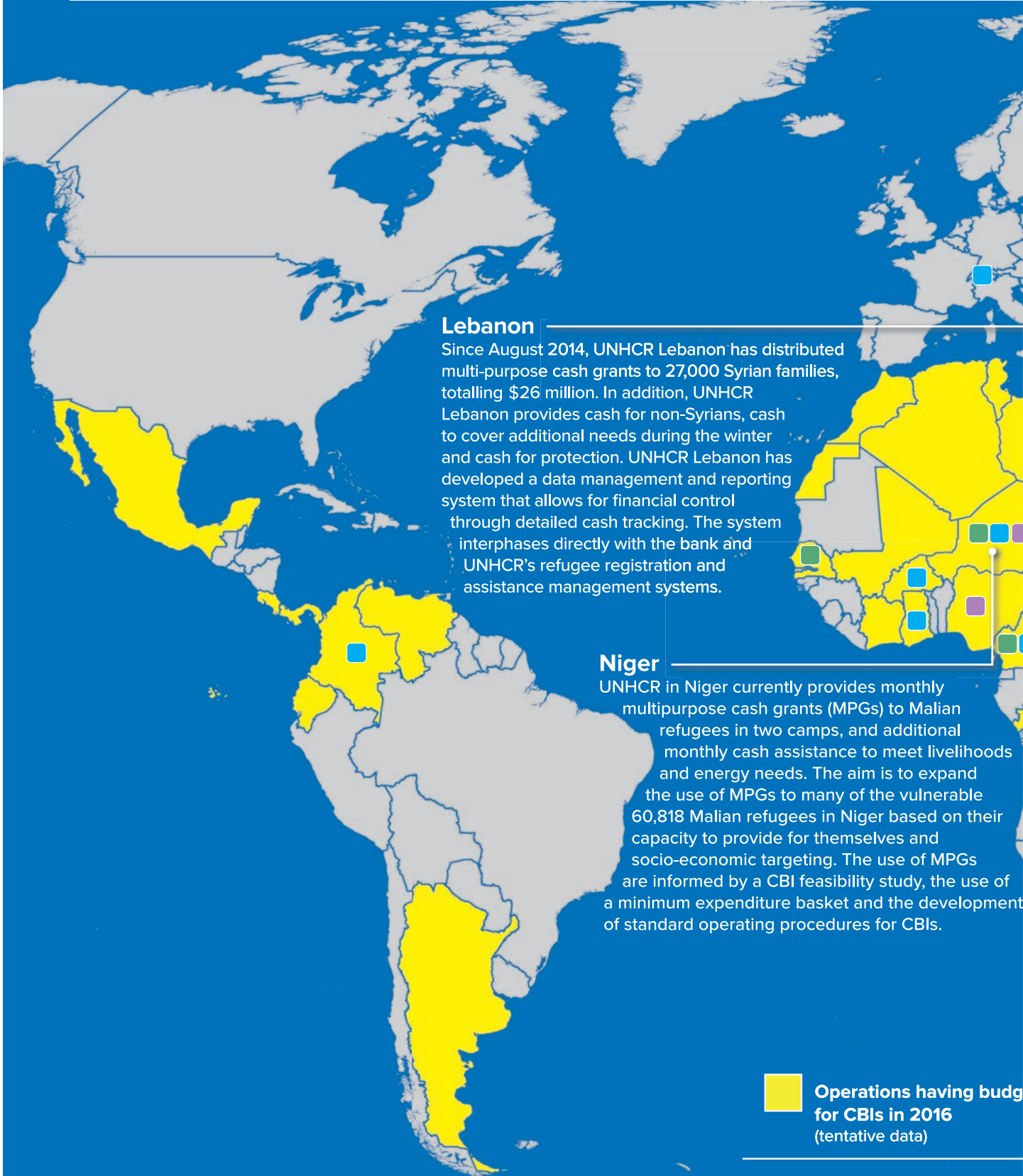
Preparedness and emergency response:

UNHCR will systematically consider the feasibility of using CBIs at all stages of response, from preparedness to durable solutions. Preparedness efforts will build on achievements in 2016, such as the four comprehensive feasibility assessments and related trainings conducted in Afghanistan, Myanmar, Nigeria and Uganda. UNHCR and partners will factor the results into contingency plans, which will serve as a model for CBIs and emergency preparedness. The inter-agency team will also conduct additional feasibility assessments, including in Burundi and Niger.

Building the capacity of staff and

partners: UNHCR will strengthen the knowledge and capabilities for CBIs, including among partners, through

Cash-Based Interventions in UNHCR



Lebanon

Since August 2014, UNHCR Lebanon has distributed multi-purpose cash grants to 27,000 Syrian families, totalling \$26 million. In addition, UNHCR Lebanon provides cash for non-Syrians, cash to cover additional needs during the winter and cash for protection. UNHCR Lebanon has developed a data management and reporting system that allows for financial control through detailed cash tracking. The system interphases directly with the bank and UNHCR's refugee registration and assistance management systems.

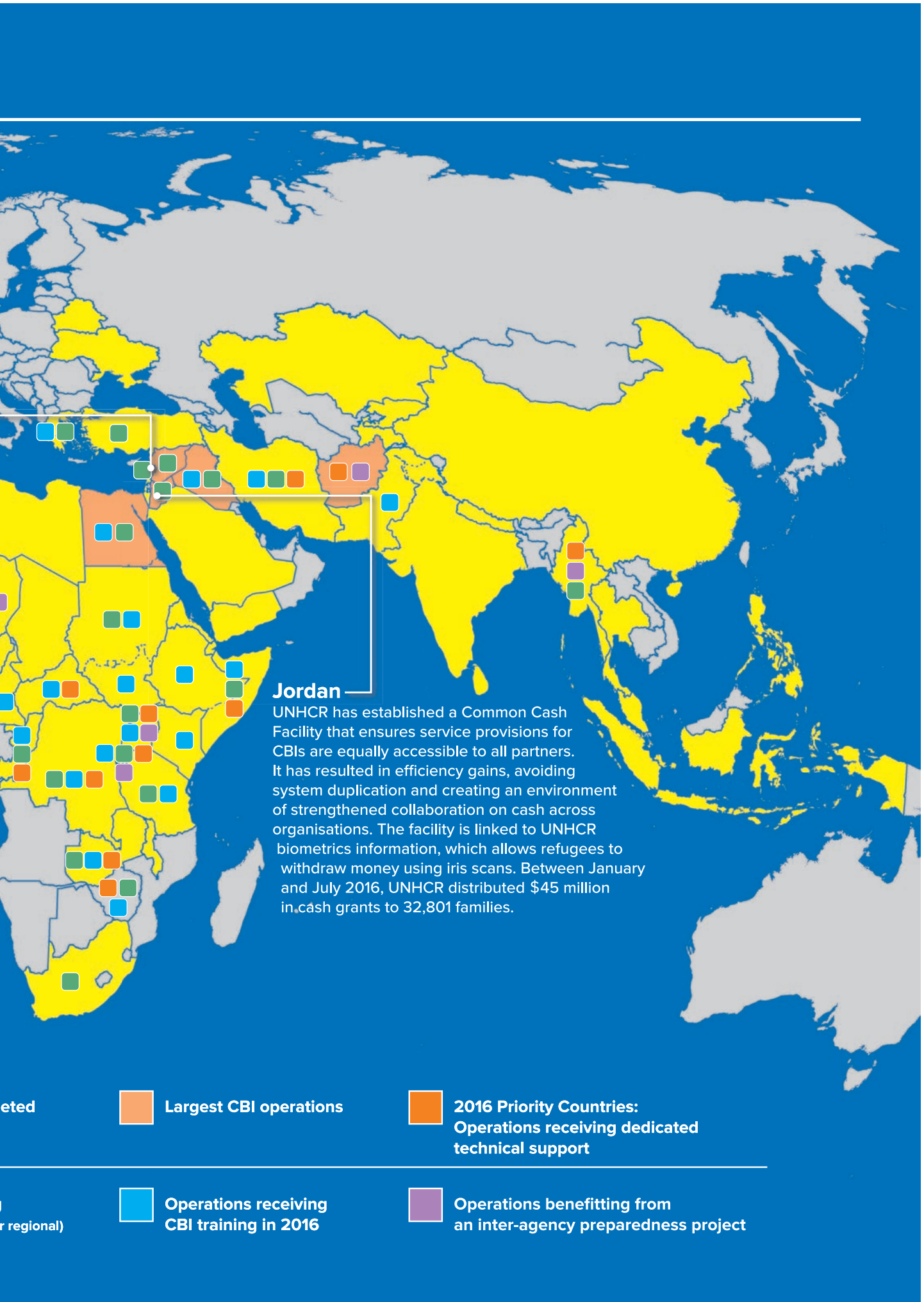
Niger

UNHCR in Niger currently provides monthly multipurpose cash grants (MPGs) to Malian refugees in two camps, and additional monthly cash assistance to meet livelihoods and energy needs. The aim is to expand the use of MPGs to many of the vulnerable 60,818 Malian refugees in Niger based on their capacity to provide for themselves and socio-economic targeting. The use of MPGs are informed by a CBI feasibility study, the use of a minimum expenditure basket and the development of standard operating procedures for CBIs.

 Operations having budget for CBIs in 2016 (tentative data)

 Operations with existing CBI expertise (in-country)





expert deployments, technical missions and training. Some 650 staff, including 50 partner staff, received training on the use of CBIs in 2016, and this will increase to 850 UNHCR and partner staff in 2017. The Office will also strengthen technical support to country operations, building on almost 300 working days of technical support extended to some 20 countries in 2016. CBIs will also be incorporated into existing and new training, building on the access provided to all staff to a learning programme on CBIs in 2016.

Maximizing effectiveness, efficiency and innovation: UNHCR will avoid the creation of parallel systems when implementing CBIs. Building on existing mechanisms, the Office will pursue a “common cash facility approach” through financial service providers that reduces duplication, creates synergies and increases coordination with partners. This approach, already in place in countries such as Jordan and Lebanon, provides UNHCR and its partners equal and direct access to financial service providers. Using private sector financial and mobile cash transfer capabilities, UNHCR will seek to increase direct implementation, which amounted to \$214.6 million in 2015. The Office will also strengthen engagement with partners on aspects such as assessment, response analysis, targeting, community outreach and monitoring, which are critical to carrying out CBIs successfully.

Ensuring sound financial control: Following the 2016 review of the end-to-end delivery of CBIs conducted in Jordan, Lebanon and Somalia in collaboration with PricewaterhouseCoopers, UNHCR will develop and implement a robust CBI financial control framework that will eventually be applied in all operations.

Initiatives will build on good practice such as the CBI information management system, currently in use in Lebanon, in accordance with the “Policy on the protection of personal data of persons of concern to UNHCR”.

Embedding CBIs in broader protection and solutions strategies: UNHCR will accelerate the use of cash for strengthening protection of the most vulnerable people of concern, building on good practices such as the cash for protection programme in Lebanon. Protection considerations will continue to be included in all aspects of CBI programming, including through protection risk analyses; age, gender and diversity mainstreaming; and data protection. UNHCR will also advocate for the inclusion of refugees and other people of concern in broader national protection and safety nets, building on successes in countries such as Costa Rica, the Islamic Republic of Iran and Uganda. Protection training on CBIs and direct support to operations on protection strategy development will continue, drawing on lessons learned in Malawi, Myanmar, Niger, Rwanda, South Africa, Sudan and the United Republic of Tanzania in 2016.

Building the evidence base and developing guidance: UNHCR and partners will proactively enhance and promote common research, as well as monitoring and evaluation, to build a body of evidence on the impact of CBIs. For example, the “CBIs for health programmes in refugee settings” review concluded in 2016 that the success of a health programme using CBIs depends on several factors that must be considered before implementation, such as understanding barriers and

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Basic needs and essential services	
Cash-based interventions (CBIs)	
Enable UNHCR operations to systematically consider and implement CBIs	<ul style="list-style-type: none"> ■ Operations with limited capacity to implement CBIs will be provided with targeted support to assess, design, implement and monitor their use. ■ Operations with ongoing CBIs will receive support to address emerging issues throughout implementation. ■ CBI experts will be deployed to selected operations.
Ensure CBIs are incorporated into Headquarters functions	<ul style="list-style-type: none"> ■ The action plan for UNHCR's "Strategy for the Institutionalization of CBIs (2016-2020)" will continue to be implemented. ■ The capacity of UNHCR will be strengthened to mainstream the use of CBIs into UNHCR functions.
Continue to build the capacity of UNHCR to consider, implement and monitor CBIs	<ul style="list-style-type: none"> ■ The learning programme on CBIs will accept 4 cohorts in 2017, and online learning modules will be made available to all staff. ■ CBIs will continue to be incorporated into sectoral trainings. ■ CBIs will be incorporated into staff trainings for different functional areas, emergencies and senior management.
Conduct reviews, and develop tools and guidance on CBIs	<ul style="list-style-type: none"> ■ Reviews in areas such as child protection, SGBV and livelihoods will be conducted to inform programming on CBIs for these areas. ■ Operational guidance based on evidence will be developed.

obstacles for refugees in accessing health services. In 2017, the findings of research and reviews on child protection, SGBV, education, WASH, shelter and livelihoods will inform the development of operational guidance on CBIs in these areas.

Shelter and settlement

UNHCR's "Global strategy for settlement and shelter (2014-2018)" will be in its penultimate year of implementation in 2017. In order to achieve its objectives, the organization focuses on four overarching areas of intervention:

1. The design of integrated responses connecting shelter and settlement to other crucial sectors such as protection, WASH, health, livelihoods, education and the environment.

2. Improving the response to conflict-related large-scale emergencies by supporting country-level shelter clusters and coordinating the Global Shelter Cluster.

3. Improving the range of shelter solutions available to UNHCR operations worldwide through research and development, and the adoption of innovative technologies.

4. Engaging with relevant partners and external entities within the sector to develop shelter and settlement research methodologies and good practices.

Meeting the shelter and settlement needs of people of concern to UNHCR in emergency situations remains a priority for the organization. In parallel, the Office continues to pursue integrated

and sustainable responses through the “Master Plan” approach (see *Glossary*), which are linked to the local and national development plans of host communities. This approach promotes access to shared and improved infrastructure such as schools, health centres and markets for both refugees and host communities. For example, UNHCR is working with local authorities and partners in Chad to support the transition of the Amboko and Gondje camps towards self-sufficient settlements, including to map the presence and capacity of shared infrastructure, such as health and education facilities, to address the needs of both displaced and host communities.

To ensure field practitioners are equipped with the essential tools to deliver such responses, UNHCR will continue capacity-building through dedicated technical training for its staff and partners, incorporating standard design templates to roll out the physical site planning toolkit to all operations implementing shelter and settlement programmes.

Given the growing prominence of urban displacement and the challenges of delivering effective assistance in urban settings, UNHCR will strengthen engagement with partners, including academia and the private sector. The Office will also aim to ensure the availability of practical tools to establish

urban sectoral responses, including implementing hosting arrangements and establishing collective centres. Building on lessons learned from operations such as Lebanon, UNHCR is committed to exploring research methodologies to clarify the impact and feasibility of the use of CBIs in shelter programmes in country-specific contexts.

Building on past achievements, such as the development of the self-standing family tent and lessons learned from the refugee crisis in Europe, UNHCR will engage in further research and develop a standard winterization kit with partners such as IFRC and ICRC. In line with UNHCR’s “Global strategy for settlement and shelter (2014-2018)”, these efforts will seek to apply innovative technologies while complementing the cultural practices and way of life of people of concern.

From emergency to sustainable shelter solutions

For decades, UNHCR has had to urgently respond to sudden onset emergencies and provide suitable emergency shelter to affected populations quickly and efficiently. UNHCR has three global shelter solutions: the standard family tent, the framed family tent, and the refugee housing unit. These can be deployed to any part of the world, depending on the context.

While there is no global, one-size-fits-all shelter solution, emergency responses often involve the provision of tents. Although tents have a limited lifespan in varying climatic conditions, their advantage is the short time it takes to install them, which allows affected people to be sheltered as quickly as possible. Nevertheless, a variety of shelter options are required to respond to the changing needs in the different settings in which UNHCR operates.

Further, of particular importance are shelter assistance programmes geared towards more durable and sustainable solutions. These should maximize the use of local material, skills and building techniques whenever possible. To support this evolution, UNHCR developed the “Shelter design catalogue”, containing shelter designs developed across a variety of locations, contexts and climates. This publication will assist sector specialists in implementing a phased shelter response through more predictable planning and implementation.

Site management and coordination

UNHCR is committed to meeting the needs of people of concern in a

coordinated fashion from the onset of an emergency, and providing assistance appropriate to the context while avoiding duplication of services during all the stages of the displacement. While many refugees live in urban contexts – two out of every three refugees settle in towns or cities globally – rural refugee settlements remain a feature of the global displacement landscape, in particular in large-scale emergencies.

Building on its longstanding experience in managing camps and similar structures, including lessons learned from the recent refugee crisis in Europe, UNHCR will work with national authorities to strengthen their capacity for field coordination and site management, as well as continuing to build the capacity of UNHCR staff and partners. The Office will also ensure that vital inter-sectorial linkages are made, such as with protection, WASH, health, environment, education and livelihoods. UNHCR will prioritize the development of guidance and selection of good practices to effectively manage formal and informal settlements in a sustainable manner that benefit refugees, host communities and national systems. This includes examining how camp closure and decommissioning of communal structures are put into practice.

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Shelter and settlement	
Populations are able to satisfy their settlement and shelter needs in a safe, dignified and sustainable manner	
Implement the UNHCR “Global strategy for settlement and shelter (2014-2018)”	<ul style="list-style-type: none"> ■ 100% of target countries (20 target countries in 2017) will develop comprehensive shelter and settlement strategies. ■ The “Master Plan” approach will be implemented in 3 additional operations.
Continue professional development of shelter and settlement staff and partners to enable the design of integrated responses (“Alternatives to camps” policy and “Master Plan” approach)	<ul style="list-style-type: none"> ■ Dedicated training will be conducted for shelter and settlement practitioners. ■ SGBV mitigation measures will be mainstreamed in all shelter and settlement training. ■ The site planning toolkit will be rolled out to all UNHCR country operations. ■ Practical tools for the implementation of shelter and settlement programmes in urban contexts will be developed. ■ Cash for shelter guidelines will be developed. ■ A complementary e-learning module on settlements will be developed.
Ensure the systematic deployment of senior shelter and settlement staff at the onset of emergencies	<ul style="list-style-type: none"> ■ Technical experts will be on standby to respond to emergency needs. ■ Talent outreach initiatives will be strengthened and combined with capacity-building efforts.
Improve the range of shelter solutions available to UNHCR operations	<ul style="list-style-type: none"> ■ Engagement with relevant partners and external entities will be strengthened to further research and develop innovative solutions. ■ A standard winterization toolkit will be developed.

Public health

Ensuring access to health care for refugees in both emergency and protracted settings is a key component of UNHCR’s protection mandate and an operational priority. While the approach employed to address these needs is dependent on the context, UNHCR provides direct technical support as well as operational guidance to country operations and partners. The rapid deployment of technical health care experts to emergencies in order to address the main causes of morbidity and mortality is key to an effective response. Expanding the inclusion of refugees in national health-care systems will also continue to be a major focus, as outlined in UNHCR’s “Global strategy for public health (2014-2018)”.

Communicable diseases remain the major cause of illness in refugee communities. UNHCR and partners pursue a comprehensive approach to disease control and engages with national programmes to include refugees in prevention, detection and response measures. In this regard, the Office also strengthens case management, community mobilization and multi-sectoral preparedness and response measures, such as immunization and WASH interventions.

The expanded programme on immunization (EPI) is considered one of the most cost-efficient preventive health interventions for childhood survival. In 2015, the average measles coverage in refugee camp settings improved to 90 per cent; 2016 efforts are on track to achieve the same level of coverage. To

further improve EPI services, UNHCR will continue reviewing programmatic effectiveness, ensuring timely interventions, and advocating to reduce risks associated with vaccine-preventable disease outbreaks.

Improving childhood survival rates, including reducing preventable mortality among children under five during the first six months of an emergency, remains a core strategic objective. In 2015, UNHCR recorded the lowest mortality rate among children under five since 2010. However, infant mortality accounted for 42 per cent of all under-five deaths reported in refugee camps, with a large proportion of these occurring in the month following birth. To address this, UNHCR will continue expanding and strengthening measures to improve survival rates in the first month after birth through

low-cost, high-impact interventions such as thermal care, resuscitation and early initiation of breastfeeding. In 2017, UNHCR aims to maintain or reduce mortality levels of children under five years of age in 44 situations where refugees live in camps or settlements.

UNHCR will enhance the provision of reproductive health services as an integral part of its public health programmes. The Office will work with partners to implement this, with early expansion to comprehensive reproductive health services. Particular emphasis will be given to improving access to, and the quality of, comprehensive emergency obstetric care and services for SGBV survivors. While their availability continues to increase, services must be improved in terms of quality and utilization.

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Basic needs and essential services	
Health status of the population improved	
Strengthen interventions to reduce the incidence and impact of communicable diseases, including outbreaks	<ul style="list-style-type: none"> ■ Updated EPI monitoring tools will be introduced in at least 10 operations.
Improve access to expanded non-communicable disease services at primary health care level	<ul style="list-style-type: none"> ■ Refugee sites in 6 countries will be provided with a package of services to improve management of non-communicable diseases (an increase from 3 countries in 2016).
Support and strengthen provision of mental health services through primary care providers	<ul style="list-style-type: none"> ■ The integration of mental health in primary health care will be completed in 5 countries through interactive capacity-building and supervision workshops.
Improve the availability of health information to support public health decision-making	<ul style="list-style-type: none"> ■ An updated health information system will be implemented in all applicable countries by the end of 2017.
People of concern have optimal access to reproductive health and HIV services	
Take measures to improve access to skilled attendance at delivery	<ul style="list-style-type: none"> ■ More than 80% of countries where UNHCR supports health services will have coverage rates of skilled birth attendance above 90%.
Expand the availability of essential neonatal care	<ul style="list-style-type: none"> ■ At least 5 sites in at least 3 countries will be implementing a complete package of essential neonatal care.
Take measures to improve access to a comprehensive range of HIV services	<ul style="list-style-type: none"> ■ ART and prevention of mother-to-child transmission services will be made available to refugees in sites across 3 countries where they are currently not available.

Partnerships and collaboration

For more information on UNHCR's collaboration and partnerships, please see the chapter on *Supporting UNHCR's work*.

Shelter and settlement

UNHCR places particular emphasis on building long-lasting partnerships to provide efficient and quality shelter responses in emergency situations. The support of the Autodesk Foundation, ECHO, Microdesk, and the Swiss Agency for Development and Cooperation, has been crucial to ensuring the development of innovative and sustainable shelter and settlement solutions. Further collaboration with UNITAR's Operational Satellite Applications Programme (UNOSAT) continues to strengthen the design and planning of settlements.

UNHCR is strengthening dialogue with academia and the private sector to encourage the sharing of technical knowledge. In order to ensure that refugees are included in local development plans, UNHCR is working with national and local authorities, along with partners such as UN-Habitat in Kenya and Mozambique, to implement the "Master plan approach". Developed with Stanford University and Ennead Architects, this planning concept anchors refugees within national and local services, infrastructure and the economy, helping to mitigate some of the perceived

negative impacts that may be associated with a new settlement, especially when established in fragile environments. Master planning is a continuous process that frames the overall assistance strategy. It is dynamic and should reflect changing priorities, population movements and profiles, and be informed by regular detailed assessments and consultations among various stakeholders, including the inhabitants.

UNHCR continues to invest in improving the range of shelter solutions and core relief items available to country operations through the research and development of innovative products, together with the ICRC and IFRC. The Office will also work to further develop the Refugee Housing Unit, a housing solution that is designed to last for three years and shelter a family of five, in collaboration with Better Shelter.

Health and nutrition

UNHCR is committed to improving the provision of public health and nutrition services for people of concern. Meeting the healthcare needs of refugees in emergency situations is a priority for the Office, while at the same time, pursuing the mainstreaming of refugees in national health care systems. To this end, UNHCR works with national authorities and maintains longstanding partnerships with UNFPA and UNICEF to provide reproductive health supplies and vaccines respectively, as well as playing an active role as a member of the WHO-led Global Health Cluster.

The Office is at the forefront of the response to address HIV in humanitarian situations and is expanding its partnership with the Global Fund to meet critical gaps in care services for HIV, tuberculosis and malaria infections in emergencies. UNHCR is also a UNAIDS co-sponsor and together with WFP co-leads the Inter-agency Task Force on Addressing HIV in Humanitarian Settings.

UNHCR is collaborating with research institutions and academia to support efforts to build an evidence-base to improve health programming. In 2017, the Office will also engage with research consortia in the Africa and the Middle East and North Africa regions to implement scalable mental health and psychosocial support interventions.

Food security and livelihoods

2017 will see the introduction and initial implementation of the 2016-2020 joint UNHCR-WFP “Strategy for enhancing self-reliance for food security and nutrition in protracted refugee situations”, which aims to reduce dependence on humanitarian assistance and see refugees attain greater self-reliance in food security and nutrition. In 2017, UNHCR and WFP will continue to collaborate on refining targeting methodology to ensure that food assistance reaches those most in need.

WASH

UNHCR leads WASH sector coordination in refugee responses and has RERAs with Oxfam and IRC to encourage more predictable delivery of life-saving WASH services during refugee emergencies.

UNHCR is a member of UN-Water, and is actively involved in its joint steering group. During protracted refugee situations and in cases where refugees are hosted in local communities, collaboration with development agencies will continue to improve the Office’s ability to support long-term access to WASH services for refugees by, for example, adopting more cost-efficient technology. These partnerships also encourage the harmonization of service provision to host communities, as well as the integration of refugee WASH services within national structures, in line with national development goals.

UNHCR’s MoU with UNICEF envisages joint trainings on WASH in emergencies for standby partner organizations such as DRC, Irish Aid, MSB, NRC, RedR and SDC. In 2017, UNHCR will continue to work with academic institutions, the private sector and other organizations such as the UNESCO-IHE Institute for Water Education, the Humanitarian Innovation Fund, as well as Tufts, Cranfield and Loughborough universities to develop cost-effective and sustainable WASH solutions.

Food security and nutrition

Multi-sectoral efforts are required to make significant and lasting improvements to nutritional status and child survival. In this regard, UNHCR will focus on activities contributing to the prevention of all forms of malnutrition while continuing to ensure treatment for people who are already malnourished.

A nutrition roadmap, which will consolidate proven interventions, procedures and guidelines, will drive activities in 2017. UNHCR will continue to roll out an infant and young child feeding (IYCF) framework, drawing in actors from all sectors in a cost-effective and nutrition-sensitive manner, for example, by: reinforcing linkages and activities between maternal services and infant care and feeding; prioritizing infants and their families for access to water, sanitation and shelter; highlighting the specific needs of infants and young children among protection actors; and

ensuring close and coordinated follow-up with vulnerable families.

In many contexts refugees have limited access to land, employment and freedom of movement. Food assistance is often a crucial component of their food security. Ensuring quality and quantity of food assistance and targeting it to the most vulnerable families is increasingly important. To improve the effectiveness and accuracy of targeting methodology, UNHCR will work with WFP to review experiences in targeting assistance and develop global guidance on Targeting of Food Assistance.

Effective monitoring is needed to determine the nutritional and food security status of refugees and whether they are resorting to negative coping mechanisms to meet their food needs. In 2017, UNHCR will update its food security and nutrition monitoring systems to allow for expanded monitoring and analysis of the situation and programmes.

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Basic needs and essential services	
Food security and nutritional well-being improved	
Expand the use of the IYCF framework and nutrition roadmap	<ul style="list-style-type: none"> ■ The various elements of the IYCF framework and the nutrition road map will be implemented in at least 7 refugee contexts.
Strengthen linkages between reproductive health services and nutrition	<ul style="list-style-type: none"> ■ Joint programming will be implemented in at least 3 refugee situations.
Expand self-reliance projects for food security and nutrition	<ul style="list-style-type: none"> ■ Self-reliance projects for improved food security and nutrition will be developed in at least 2 refugee situations. ■ Joint assessment missions (JAMs) will be gradually expanded to include more documentation of livelihoods and self-reliance strategies in refugee communities.
Improve availability of data to support nutrition and food security decision making	<ul style="list-style-type: none"> ■ The standardized expanded nutrition surveys (SENS) will be revised based on a review of evidence collected between 2011 and 2016.
Improve joint programming at country level	<ul style="list-style-type: none"> ■ Concrete plans of actions will be developed following 75% of JAMs.
Strengthen food security monitoring in the context of livelihood initiatives to better assess impact	<ul style="list-style-type: none"> ■ Food security information will be collected in selected self-reliance and livelihoods projects.
Improve targeting methods for refugee food assistance	<ul style="list-style-type: none"> ■ Targeting approaches for food assistance will be reviewed, and guidance developed.

Water, sanitation and hygiene (WASH)

In situations where UNHCR provides emergency lifesaving WASH services to those fleeing conflict and persecution, the Office will continue ensuring rapid and effective response through needs assessments, making available tools for rapid analysis of data, and the timely deployment of experts. In addition, the Office will expand the number of emergency WASH items available under procurement frame agreements and in its global stockpiles.

Where UNHCR provides long-term WASH services for people affected by

protracted displacement, the organization will support the development of multi-year WASH strategies and site-level operational plans to determine needs and gaps, measure progress made against indicators, and develop a common understanding of short (emergency), medium (post-emergency), and long-term (protracted) interventions. Strategies and operational plans will be developed through a collaborative approach, taking into account the principles of refugee protection, cost-effectiveness and sustainability. Country operations will also continue implementing solar water pumping and sanitation “waste to value” solutions, as well as cash-for-WASH programmes, where appropriate.

In line with SDG 6, “Sustainable water and sanitation for all”, UNHCR will strengthen advocacy for refugees and displaced people in protracted situations to be included in national WASH development plans. Evidence-based programming will be strengthened by further rolling

out the WASH monitoring system, the standardized knowledge attitudes and practice (KAP) survey, the borehole database, WASH infrastructure mapping, and WASH costing tools for improved gap analysis and informed resource allocation. ■

Anticipated areas of intervention in 2017	Key achievements targeted in 2017
Basic needs and essential services	
Supply of potable water increased or maintained, and affected populations live in satisfactory conditions of sanitation and hygiene	
Improve rapid and effective response to WASH in emergencies	<ul style="list-style-type: none"> ■ An additional 6 commonly used emergency WASH items will be made available under framework agreements and global stockpiles.
Strengthen evidence-based programming	<ul style="list-style-type: none"> ■ Monitoring mechanisms (monthly report card and standardized KAP survey) will be rolled out to 6 additional countries for improved gap analysis and resource allocation.
Support the development of multi-year WASH strategies and site-level WASH operational plans	<ul style="list-style-type: none"> ■ 3 priority countries will be supported to develop multi-year WASH strategies and site-level operational plans in order to provide a clear overview of the WASH situation, needs and gaps, progress against indicators, and a description of the agreed short (emergency), medium (post-emergency), and long-term (protracted) plans.
Develop innovative solutions for cost effective and sustainable WASH solutions in protracted situations.	<ul style="list-style-type: none"> ■ 2 country operations will receive support to progress with implementing solar water pumping and sanitation ‘waste to value’ solutions. ■ 2 country operations will be supported in cash-for-WASH programmes.

Blind Salvadoran couple play dead to flee gang threat

This article is an adapted version of a UNHCR news story.
29 June 2016

MEXICO CITY, Mexico | When gun-toting gang thugs pumped round after round into their home in El Salvador, blind couple Rosario and Victor* grabbed their daughter and threw themselves onto the floor to dodge the bullets.

Minutes later, several figures they could not see broke into the house as they lay huddled on the ground. Victor had draped himself protectively over 10-year-old Natalia and Rosario, who thought they were about to die.

“I was paralyzed, dead throughout every part of my body,” Rosario says, weeping as she relives the terror. “But then we realized it was the police and I started to breathe again.”

The family had been hounded by the gang, who demanded \$500 in “rent” for the two massage therapy clinics they ran in the Salvadoran capital. When the gang doubled its extortion demand, the family shut the businesses and moved house several times to escape their tormenters.

Easily recognizable because of their grey canes, the gang found them time and again but, recognizing their vulnerability, the police came up with a novel – if macabre – way of spiring the family to safety.

They should play dead.

Placing them on stretchers and covering them with a shroud-like white sheet, the police carried the family out of the house and through the streets of their ramshackle neighbourhood.



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Blind Salvadoran refugee Rosario* reaches out for her husband Victor's hand.

“I was not dead, but I felt as though I was,” says Rosario. Once clear of the neighbourhood, they joined thousands of people fleeing the street gangs – or “maras” – whose crimes range from murder, rape and extortion to drug dealing, kidnapping and human trafficking.

The police took them close to the border with Guatemala, leaving Rosario and Victor in the care of Natalia. “We were safe but with nothing but our pyjamas,” Victor recalls. “We had just \$20 that we borrowed when we crossed into Guatemala, guided all the way by our daughter.”

Once there, they spent two days sleeping on the street with no food. They were finally helped by a truck driver who helped them cross the border to Mexico, where they sought help at a shelter for migrants.

With the assistance of UNHCR, the family was transferred to another shelter, one with better facilities for the visually handicapped.

“Thousands of men, women and children are now fleeing gang violence in El Salvador, which is now one of the world's most violent countries,” said Mark Manly, UNHCR's representative in Mexico.

“Like Rosario and Victor, many have faced extreme risks and are in urgent need of protection.”

The couple sought, and were granted, asylum in Mexico, where they are finding a measure of peace. Rosario and Victor would like to start their massage therapy business again, although they still worry about the reach of the gangs. •

**Names have been changed for protection reasons.*