

UNHCR COVID-19 Preparedness and Response

Highlights

- While the epicenter of the COVID-19 outbreak remains in the United States and Western Europe, WHO has reported worrying upward trends in various parts of Africa, the Americas, and Eastern Europe, without a concentrated outbreak so far in refugee and internally displaced camps and settlements.
- As of 20 April 2020, UNHCR estimated that 167 States have partially or fully closed their borders to contain the spread of the virus. 57 of these states are making no exception for people seeking asylum.
- UNHCR issued a [press release](#) drawing attention to the increasingly desperate situation of forcibly displaced people affected by the economic impact of COVID-19.
- Since the end of March, UNHCR has disbursed \$30 million in cash assistance, including advanced payments, to enable refugees, internally displaced people and other persons of concern to cope with the adverse economic impact of COVID-19.
- UNHCR is supporting national health authorities by providing additional isolation units, which have allowed to include specific areas for triage, the storage of medical equipment or changing rooms for doctors. To date, more than 2,100 refugee housing units have been provided for use as isolation units in 60 locations throughout the Americas. Plans are in the works to provide 1,000 additional units.
- UNHCR contributed substantively to the latest report of the Secretary General [“Covid-19 and human rights, we are all in this together”](#) launched on 23 April.



Somali refugee teacher, Amina Hassan, gives an English lesson to grade five pupils over the radio system at Dadaab camp in Kenya.

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Global Overview

UNHCR is taking measures to prevent or slow down the possible large-scale spread of the outbreak in refugee and internally displaced populations and takes action to limit infections by responding to the virus with life-saving support, including water, medical care and hygiene materials. Wherever possible, UNHCR boosts public health and hygiene in areas hosting displaced people, including airlifting emergency supplies and establishing isolation units.

In the face of the protection challenges posed by the COVID-19 pandemic, UNHCR has employed the multi-stakeholder approach of the [Global Compact on Refugees](#) to work closely with national authorities, partners, clusters, and people of concern — refugees, asylum seekers, returnees, internally displaced people and stateless persons — in more than 130 countries to analyze changes in the protection and operational environment and maintain essential protection and aid activities.

UNHCR Response

Progress to date and Impact

- UNHCR has further increased its support to governments in key sectors such as health, water and hygiene to strengthen national infection prevention and response capacity.
- To address growing levels of anxiety in communities, UNHCR is enhancing existing Mental Health and Psychosocial Support (MHPSS) mechanisms and developing new ones for refugees, internally displaced people and other persons of concern.
- Since more than 61% of refugees live in urban environments where local authorities, mayors, city administrators and their local partners are at the forefront of providing protection and assistance, UNHCR contributed to the [Live Resource Guide for Municipal Migrant and Refugee Sensitive COVID-19 Responses](#) by the Mayors Migration Council. The guide contains examples of city actions to serve refugees and migrants during the COVID-19 crisis including a concrete working checklist of city policy actions.

Gaps and Challenges

- UNHCR remains vigilant about potential COVID-19 cases among refugees, internally displaced and other persons of concern, with few cases reported so far among persons of concern in Europe, East Africa, Americas, Middle East and North Africa.
- Social tensions have risen across all regions, reflecting fears of the socio-economic impact of the lockdown measures.
- Despite widespread support for the UN Secretary General's call for a global ceasefire, conflicts and violence continue in various countries around the world, while in some countries tensions have escalated further.
- The number of people fleeing conflict or violence but remaining within their own countries has reached an all-time high, according to a [report](#) published on 28 April by the Internal Displacement Monitoring Centre (IDMC). In the Sahel region alone, there has been a 33% increase of internally displaced people since January 2020. The spread of COVID-19 is likely to have an even greater impact on the situation of [internally displaced people](#), as health systems, e.g. in [Yemen](#), are already strained.



Strengthen and support health care and WASH services

In line with WHO's COVID-19 Strategy Update, UNHCR

continued to work with partners to strengthen health services in those areas where displaced populations reside. In addition to the delivery of core items in line with the WHO priority list, UNHCR focused on ensuring adequate capacity for health management, the provision of isolation wards and staffing of partners, based on expected estimates of infection rates and available and projected capacities needed to manage camps or referral facilities.

Wherever possible, water supply is constantly being expanded and access to health services further negotiated. To date, UNHCR organised seven global webinars to guide operations in public health preparedness and response to COVID-19 and has trained frontline workers and community volunteers on hygiene promotion and awareness of COVID-19 symptoms and preventions. In Lebanon, for example, UNHCR is bolstering the capacity of Lebanon's health facilities through covering 100% of the cost of polymerase chain reaction (PCR) tests for refugees and is expanding existing medical wards with additional beds and intensive care unit beds, as well as staffing support and required equipment and disposable materials.



Ramp up cash assistance, reinforce shelters, provide core relief items in congested urban and camps settings and improve self-reliance

Since the start of the crisis, 106 countries have adopted new social assistance schemes or other types of networks to protect the most vulnerable. As non-citizens are normally excluded from these types of schemes,

UNHCR has, in line with the Global Compact on Refugees (GCR), advocated the inclusion of refugees in national social assistance schemes. Through short term cash grants, it is ensured that refugees and internally displaced people can meet their basic needs and respond to threats of eviction - which in one country examined has increased from 5 % before the pandemic to 40 % in April 2020.

UNHCR continued with the establishment, rehabilitation and expansion of isolation areas in several countries, among them Burundi and Lebanon and assisted the Ethiopian government and partners with the decongestion of IDP settlements in Ethiopia where sheltering conditions continue to undermine the preventative actions being undertaken.



Strengthen risk communication, community engagement and protection case management, including protection monitoring and registration

Maintaining continuity and quality in the provision of essential assistance and services, including protection services, in the face of the restrictions introduced to prevent the spread of the virus requires measures for rapid innovation, making full use of the rich capacities and established networks both within communities of persons of concern and within host communities. Prior to the COVID-19 crisis, UNHCR and partners have already invested in innovative communication mechanisms, reaching millions of people. By expanding and intensifying its established communication with communities, UNHCR has responded to communication needs globally and has so far collected best practices from over 100 locations. A wealth of evidence points to the importance of systematic,

meaningful community engagement in communication of risks, prevention and treatment during outbreaks. [A recent analysis by UNHCR MENA](#) shows the impact this has had. UNHCR has outlined the principles for its community engagement in its 'Age, Gender and Diversity' policy which highlights four key areas: participation and inclusion, communication and transparency, feedback and response and learning and adaptation.

Education



Experience from school closures in response to other disease outbreaks has shown that the most vulnerable children are at the greatest risk of not returning to school, and that adolescent girls are often most affected. The Malala Fund's report ([Girls, education and COVID-19](#)) estimates that if dropouts follow the same rates as post-Ebola, around 10 million more secondary school-aged girls could be out of school because of COVID-19. Applied to refugee girls globally, up to 3 million more are projected to drop out.

Across the world, UNHCR operations have worked with partners, governments and other stakeholders to ensure that disruptions to learning are kept to a minimum. By maintaining a strong focus on education during this period, UNHCR hopes to prevent a relapse in the achievements of access to quality education and to sustain the protective impact of education for the most vulnerable.

UNHCR has produced a compilation of some emerging practices from its operations that focus on efforts to ensure the continuation of learning during disruptions to education arising from the COVID-19 pandemic. [The document](#) outlines a variety of different actions taken by UNHCR operations that include community mobilisation and dissemination of information about available opportunities to refugee communities, the variety of efforts taken to support access to distance learning programmes, and efforts to ensure the continuity of support services such as cash-grants and teacher incentives.

Regional Updates

Middle East and North Africa (MENA)

With the beginning of Ramadan, traditions across the MENA region are being adapted to the current situation. This also affects many refugees and internally displaced people who, under the exceptional circumstances of the COVID-19 crisis, are among those celebrating the holy month of Ramadan. Although strict curfews remain in place, governments in some countries, including Jordan, Iraq, Syria and Turkey, announced slight modifications to curfews, with longer opening hours for public movements.

In countries that have been ravaged by conflict, such as Syria and Yemen, the medical infrastructure and services are weakened and the support by UNHCR and its partners is needed more than ever. In light of these ongoing conflicts and tensions in the region coupled with mounting needs caused by the COVID-19 pandemic, it will be important that UNHCR can continue its regular programming activities, alongside the implementation of additional activities focused on preventing and mitigating the effects of COVID-19.

In addition, the socio-economic impacts of the pandemic are increasingly felt amongst the

internally displaced, refugees and asylum-seekers and disadvantaged host communities. In Turkey for example, UNHCR's counselling line, which offers direct and personal advice to people of concern, received almost 19,000 calls since mid-March. Over one-third of all calls were related to financial concerns as a result of the impact of COVID-19. Similar trends have been observed across the region, including in Egypt, Israel, Algeria, Lebanon, Jordan and Iraq.

UNHCR has been putting in place several measures to mitigate the socio-economic effects of COVID-19, including adjusting vulnerability criteria that is used to determine who receives cash assistance, to ensure that families impacted by COVID-19 are not further marginalized. Cash assistance is also being used as part of COVID-19 prevention measures, helping families purchase basic hygiene items.

Asia and the Pacific

UNHCR accommodated a group of 382 Rohingya refugees who were rescued at sea on 15 April in quarantine facilities. Separately, the 202 Rohingya people whose boat stranded in Malaysia in early April have been medically examined and are now also in quarantine.

While urging for greater coordination and responsibility-sharing by states at the central/regional level, UNHCR operations in Asia-Pacific are advocating with their government counterparts for rescue and disembarkation of the remaining vessels still reported to be at sea, highlighting the grave immediate risk this poses to the men, women and children on board. Predictable disembarkation and safe pathways for refugees in distress strengthen public health by ensuring that whatever the manner of arrival, people go through appropriate health screening. It

safeguards prevention measures rather than risking that people will instead seek clandestine points of entry without going through proper quarantine procedures.

Throughout the region, UNHCR scaled-up its health and WASH response, by delivering a total of 820,000 surgical masks to Bangladesh, 600,000 bars of soap to Indonesia and India and a consignment of 110,000 N95 masks and 3,500 medical gowns for Iran.

West and Central Africa

The humanitarian situation especially in the central Sahel region continues to deteriorate with armed groups increasing their pressure. Conflict is fueling more displacement and exacerbating poverty, chronic food insecurity and competition for scarce resources. There is also serious concern that the COVID-19 pandemic may fuel the conflicts as a result of the impact of the pandemic on the economy, livelihood, education and governance. The measures to prevent the rapid spread of the COVID-19 pandemic in the Sahel adds to the challenge for UNHCR and partners to access, assist and protect over three million refugees and internally displaced people, representing a 15 percent increase since January 2020.

Besides the immediate protection and security implications, COVID-19 is likely to contribute to food insecurity in the Sahel. Adding to the combined effects of conflict and displacement, the recent increase in climatic shocks such as recurring droughts and crop pests (locust outbreaks) has dramatically disrupted the crop and livestock production. With humanitarian relief efforts hindered by COVID-19, parts of the region are at high risk of sliding into famine within the next few months. According to WFP's 2020 edition of [The Global Report on Food Crises](#), some 5.5 million people will face food

insecurity in the Sahel by June 2020, up from over 2.4 million at the same time last year representing a 128% increase.

UNHCR is scaling up its response through a new regional strategy aimed at supporting governments of the G5 Sahel countries in catering to the needs of affected populations, including the forcibly displaced persons and people at risk of statelessness.

East and Horn of Africa and the Great Lakes

Across the region, UNHCR has appealed for special measures to be put in place, to allow for asylum-seekers to be screened, quarantined and admitted, and for UNHCR to be granted access to areas hosting refugees such as the Yida transit centre in South Sudan, where continued registration of new arrivals is still possible.

Although several hundred hand washing facilities, soap and – alone in Puntland – over 4,000 hygiene kits have been distributed, the supply of WASH materials remains a concern. In-country prices are increasing, and availability is decreasing across the region with difficulties getting some goods across borders.

Restriction on movements as a preventative measure for COVID-19 has led to an increase in the level of sexual and gender-based violence (SGBV), which can be observed in several countries in the region. UNHCR and partners have introduced measures to mitigate the impact. In Uganda, for example, the inter-agency Feedback, Referral and Resolution Mechanism (FRRM) helpline is operated as a call centre with agents speaking 15 different languages. It has a network of partners and UNHCR focal points who receive referrals from the FRRM system and respond to the queries or requests received. Since mid-March 2020, the FRRM helpline has seen an upward trend in

the number of calls and queries received, which was anticipated, and measures have been put in place to respond adequately. A database of COVID-19 related standard Q&A was compiled, and additional protection personnel, trained on SGBV, were appointed to the helpline to provide counselling to survivors of SGBV. With the limited presence of UNHCR and partner personnel on the ground and restrictions in in-person contacts, the helpline has become one of the main two-way feedback channels that is available to refugees during this period.

Southern Africa

Flooding on 16 -18 April in South Kivu Province in the DRC resulted in the death of 25 people, more than 40 injured, and significant damage to houses, WASH and health infrastructure. UNHCR is working with local authorities and partners to immediately assist the nearly 80,000 people displaced by the flooding, including refugees and internally displaced populations. The destruction may worsen health and WASH conditions and undermine COVID-19 prevention activities and heighten the risk of cholera, which is endemic to the area.

Due to movement restrictions and curfews, livelihoods of refugees, internally displaced people and other vulnerable populations have been disrupted and some persons of concern have resorted to negative coping mechanisms to make a living, such as collecting firewood outside refugee camps, placing pressure on the environment and exposing woman and girls to sexual abuse, potential conflict with host communities and attack by wild animals. In an effort to promote hygiene and income generation, refugees are producing facemasks in a number of countries in the region. In South Africa, for example, UNHCR has established a direct referral system and assisted around 300 refugees and asylum-seekers in Western Cape to access the provincial food relief programme,

and is training community leaders in communication, conflict resolution and preventing SGBV to combat the social impact of the COVID-19 crisis. UNHCR is also advocating for refugees and asylum-seekers to have access to special COVID-19 grants announced by the government as part of a stimulus package to keep the economy running and to assist people who have lost their livelihoods or whose self-reliance has been affected.

Europe

The European Parliament issued a [resolution](#) for EU-coordinated action to combat COVID-19 after its meeting on 17 April. UNHCR welcomes the resolution, which calls for full respect of the 1951 Convention and European asylum law, and for reception of asylum-seekers in appropriate conditions and with medical support, particularly in Greece. The Parliament also adopted a package of budgetary measures for the COVID-19 response, including EUR 350 million for Greece to address challenges arising from migration.

Furthermore, the Council of Europe issued a [declaration](#) in 20 April calling on parties to the Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) to refer to its standards and recommendations as a source of guidance for governmental action during the pandemic. The declaration also stresses the importance of ensuring that asylum-seeking and refugee women have access to information and support services.

The declaration comes at a crucial time, since movement restrictions and reduced capacity of service providers present added challenges for survivors of sexual and gender-based violence (SGBV) to report and receive services needed. Across the region, country offices are monitoring how to prevent and respond to

heightened SGBV risks. France, for example, has taken steps to reinforce protection from and prevention of domestic violence. Cases of SGBV can be signaled to a 24-hour hotline and to pharmacies. In Spain, an extension of the contingency plan against SGBV in the context of COVID-19 adopts additional measures for victims of human trafficking, sexual exploitation and women in sex work.

Americas

The availability and provision of adequate shelter is a major concern in the Americas. With increasing numbers of people left homeless, and the capacity in numerous shelters capped in response to COVID-19 prevention measures, providing access to alternative accommodations is crucial.

UNHCR, in cooperation with partners and governments, is working to step up interventions that provide persons of concern with adequate shelter options. Adaptive measures include the provision of additional shelters such as hotels and rental apartments for temporary accommodation, the creation of reception and access control spaces in existing camps, isolation areas, as well as steps to avoid overcrowding and allow for social distancing.

Domestic violence, extortion and pressure from gangs and criminal organizations have also spiked in the Americas during the pandemic. In this context, the situation within deportation centers, migratory detention centers and informal settlements remains critical.

While a number of countries throughout the Americas and the rest of the world have closed their borders and restricted movement to contain the spread of COVID-19, Mexico has continued to register new asylum claims from people fleeing brutal violence and persecution,

helping them find safety. By designating the registration of new asylum claims an essential activity, Mexico has ensured that people receive protection from being forced to return to their countries of origin, where their lives may be in danger, as their cases are processed.

This is just one example how long-standing principles of international refugee law can be upheld even as governments take measures to protect public health. UNHCR is helping Mexico's refugee office, COMAR to move to remote registration and processing of asylum claims. UNHCR has also supported the

Mexican authorities to release asylum-seekers from migration detention centres. This has become even more critical given the danger that COVID-19 poses for detainees. The recent announcement by Mexican immigration authorities to release all detained migrants and asylum-seekers is therefore a welcome step.

Coordination and partnerships

UNHCR has continued to engage with sports-focused organizations and entities in COVID-19 response. UNHCR and the International Olympic Committee have been giving a voice to refugee athletes on the IOC Refugee Athlete Scholarship Programme, through each organization's social media channels. The athletes have been producing content to support the sports-watching public to stay fit at home whilst sharing messages of hope and solidarity. UNHCR has also engaged with professional footballers [Alphonso Davies and Asmir Begovic](#) on media and fundraising activities to highlight the challenges that the world's refugees face during the COVID-19 pandemic and raise funds for UNHCR's response. Sports partners such as the Scott Foundation coaches across continents and many others have worked quickly to adapt their programmatic responses, to explore the use of online tools and to develop new approaches for a socially distanced world, providing much needed structured activities for refugee children and youth.



[UNHCR Covid-19 data portal](#)



UNHCR launched its COVID-19 data portal this week. The portal serves as a central point of information on UNHCR's COVID-19 response for partners, media and other external users. It includes global guidance, sitreps and links to other UNHCR COVID-19 related sites. Financial and donor reports will continue to be available on Global Focus.

Workforce and capacities

UNHCR provides measures for the safety and welfare of the workforce during this global health crisis, including activated teleworking arrangements. To ensure continuity of certain services while some of UNHCR's activities are reduced due to movement restrictions, UNHCR is conducting a general effort to adjust some activities towards strengthening community-based protection mechanism and

enhancing the capacity and self-reliance of refugee and internally displaced communities should the COVID-19 crisis intensify and limit UNHCR's operational access for a prolonged period.

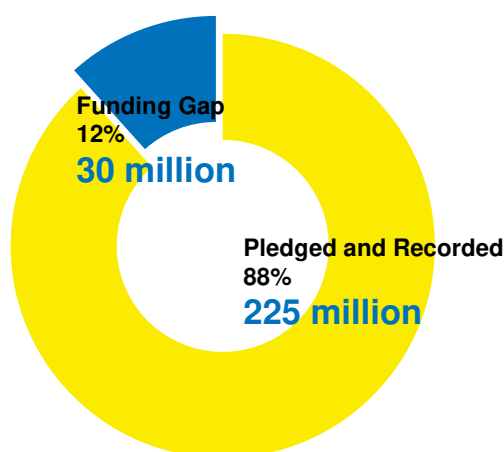
Securing medical supplies and personal protective equipment (PPE) has proven challenging for several operations given fractured global supply chains. Due to the anticipated delays in receiving medical supplies through international procurement, countries are also seeking to procure PPEs locally while waiting for the international supply.

Financial Information

On 25 March, the UN Secretary General launched the COVID-19 Global Humanitarian Response Plan. UNHCR seeks USD 255 million to boost preparedness, prevention and response activities to address the immediate public health needs of refugees and host communities prompted by the spread of COVID-19. More detailed information on UNHCR requirements within the GHRP was shared in a revision of the 10 March initial UNHCR appeal, which is available through the below link. The amount presented in the appeal does not represent the magnitude of UNHCR's engagement to support governments' efforts in responding to COVID-19 pandemic. The Global Humanitarian Response Plan, which is coordinated by UNOCHA, is currently being updated. UNHCR reached out to all partners involved in inter-agency refugee response plans to update and reprioritize these plans. The funding requirements will increase in accordance with partner consultations and the evolving situation.

USD 255M

Requested for UNHCR's COVID-19 response globally until the end of the year:



Unearmarked contributions to UNHCR's 2020 programme:

Sweden 76.4M | Norway 41.4M | Netherlands 36.1M | Denmark 34.6M | United Kingdom 31.7M | Germany 25.9M | Private donors Spain 20M | Switzerland 16.4M | Private donors Republic of Korea 10.5M

Contributed without restrictions on its use, unearmarked funding allows UNHCR critical flexibility in how best to reach refugees and other populations of concern who are in the greatest need and at the greatest risk.

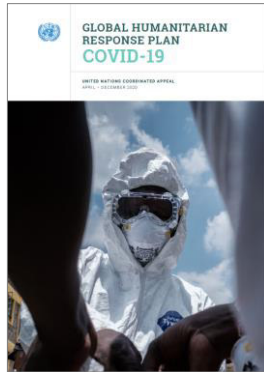
Total contributed or pledged to the COVID-19 appeal:

USD 225M

Including:

United States	\$64.0M
Germany	\$38.0M
European Union	\$28.7M
United Kingdom	\$24.8M
Japan	\$23.9M
Denmark	\$14.6M
CERF	\$6.9M
Canada	\$6.4M
Ireland	\$3.3M
Sweden	\$3.0M
Sony Corporation	\$3.0M
Finland	\$2.4M
Education	\$1.8M
Cannot Wait	
Qatar Charity	\$1.5M
Australia	\$0.8M
Private donors	\$0.5M
Portugal	\$0.1M
Liechtenstein	\$0.1M

More information:



[Global Humanitarian Response Plan COVID-19](#)
(launched 25 March 2020)



[Global Focus COVID-19 Situation page](#)
(including UNHCR's Coronavirus emergency appeal and sitreps)



[UNHCR News Releases](#)



[UNHCR Stories](#)



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Specific country examples

El Salvador

Under the protection cluster led by UNHCR, organizations have been monitoring the quarantine centers hosting deported persons, as well as the situation in communities across El Salvador. UNHCR is finalizing support for two safe houses, administered by the Directorate of Attention to Victims and Forced Migration, that will shelter deported people with protection needs after they leave the quarantine centers.

Peru

In response to a request from Peru's National Institute of Civil Defense, UNHCR coordinated the delivery of 5,000 food kits to vulnerable families in Lima with the Office of the Resident Coordinator, IOM, WFP and OCHA. The kits benefited an estimated 15,000 people of concern.

Lebanon

In Lebanon, UNHCR is committed to funding the temporary expansion of six government hospitals and one private hospital, all seven being part of the UNHCR contracted hospital network since the beginning of the Syria crisis. These expansions will contribute to enhancing the hospitals' response capacity to treat COVID-19 infected patients, including refugees, through the provision of 285 additional hospital beds, and 39 additional ICU beds in the initial phase.

Mali

In Mali, UNHCR is supporting the "Digital Communication" sub-commission of the One-UN COVID-19 communication plan, which will be implemented in line with Mali's communication plan and will involve awareness-raising campaigns through media, influencers, and other communication material and content.

Niger

In Niger, with the support of GIZ, UNHCR and the Government can give Malian refugees access to land in an urbanized site where Nigerien families will be settled as well. For 4000 vulnerable households among the refugee and host population, a social house is part of the package.

Democratic Republic of the Congo

Refugees in the Bele and Meri refugee settlements in the DRC have begun making their own handwashing devices called "tippy taps" using recycled materials. UNHCR ran a two-day training on how to use basins, jerry cans, plastic bottles and other materials to make the taps.

Ukraine

In Ukraine, a Government resolution came into force, to strengthen the protection of social rights of IDPs and setting forth the procedures for the provision of social benefits for the duration of the quarantine period. This initiative is a positive step towards the implementation of the law adopted on 17 March, which introduced the automatic prolongation of social benefits for IDPs during the quarantine measures.

Turkey

In Turkey, a survey was conducted by phone, reaching out to 1,500 refugees and asylum-seekers in 20 provinces to understand the impact of COVID-19 on their situation. Over half of the respondents reported having lost their jobs and the majority of the workplaces where they had been working have closed due to COVID-19. Close to half of the respondents stated they had to sell household appliances to cope with the economic situation.

Jordan

In Jordan, basic needs assistance for close to 33,000 families for April and May commenced in early April. To ensure large gatherings are avoided and social distancing measures are implemented, a daily staggered list has been developed mapping the families' residence to the closest ATM with a maximum of 50-60 individuals per ATM. Based on this, the accounts are unfrozen on a daily basis and text messages are sent to the beneficiaries requesting them to access ATMs.

Afghanistan

Working closely with IOM and the protection cluster along the borders with Iran and Pakistan, UNHCR Afghanistan has deployed a mobile monitoring tool to gain better understanding of movements and to share information about COVID-19. UNHCR is also supporting the Government at border points to conduct registration and health briefings, manage large

South Sudan

In South Sudan, the government-led Task Force has been engaged in discussions with internally displaced populations to build confidence in the government's measures to prevent and prepare for COVID-19.

Kenya

The Kenya Institute of Curriculum Development (KICD) has provided UNHCR with recorded lessons that will be aired through camp-based radio stations. The recorded lessons will minimize the need to develop lessons locally, enabling teachers to focus on supporting students remotely.

Zimbabwe

In Zimbabwe, UNHCR, in partnership with WFP and Terre des Hommes, established mechanisms to ensure physical distancing and other preventative measures during food distribution in the Tongogara Refugee Camp. The sites are designated with specific times for distribution and the personnel involved in distribution wears gloves and masks. Community health workers ensure social distancing, manage entrance/verification points and screen temperatures using handheld thermometers.

Bangladesh

In Bangladesh, the Health and Protection sectors are working together on the potential introduction of shielding measures for aged persons by establishing camp zones accommodating this age group and their caregivers, with limited exposure to the rest of the population. Community consultations have been held with aged persons, caretakers and community leaders, and UNHCR plans to pilot this approach with a small group of refugees to further inform the decision-making and design for the project.