

Responding with lifesaving support



A Somali woman carries her baby from a plane after being evacuated to safety from Tripoli, Libya, to Rome, Italy.

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During 2019, UNHCR and its partners responded to the needs of 16.7 million displaced people affected by multiple and simultaneous emergencies worldwide. By mobilizing financial, human and material resources, and facilitating partnership engagement, UNHCR responded to refugee and IDP emergencies, providing protection and assistance despite challenging security environments.

Given the scale of needs, UNHCR activated six new emergencies involving eight countries, including four L3 and four L2 emergencies. These included three refugee emergencies, and three IDP emergencies—one of which was the response to the natural disaster and displacement caused by Cyclone Idai—during which UNHCR boosted its preparedness and response capacities. The Office also continued responding to emergencies activated in the previous year. However, the pace of emergency deployments did slow, as emergency declarations in 31 countries were deactivated throughout the year.

In 2019, 22 operations reported a high risk of new or escalated refugee or IDP situations in the High Alert List for Emergency Preparedness (HALEP), UNHCR's internal global repository of preparedness information.

UNHCR completed the Preparedness Package for IDP emergencies (PPIE), which is aligned with the Preparedness Package for Refugee Emergencies (PRRE) and the IASC's Emergency Response Preparedness Approach. The PPIE reaffirms UNHCR's commitment to engage more consistently, predictably and sustainably in situations of internal displacement, as called for in the revised IDP Policy issued in September 2019.

During the decentralization and regionalization process, UNHCR reviewed its emergency preparedness and response procedures.

It was decided to keep centralized management of emergency deployments, including UNHCR's Emergency Management Team and Emergency Response Team (ERT) rosters, ensuring overall coordination and fast decision making when deploying additional human resources to and between regions.

Roles and authorities for emergency preparedness remained within the operations, with support and oversight by the regional bureaux, whereas Headquarters continued to set preparedness standards and provide global analysis and technical support, while engaging in inter-agency preparedness work. The strategic and analytical capacities of the bureaux were reinforced. New thresholds governing procurement and asset management were introduced, and the seven regions increased their supply management capacity. In addition, work began on a new emergency stockpile in Panama City to serve emergencies in the Americas, bringing UNHCR's global emergency stockpiles to eight.

This chapter outlines UNHCR's emergency response in 2019 and its coordination of principled, comprehensive and prompt high-quality lifesaving interventions. It highlights the progress made, and challenges faced, in meeting the most urgent humanitarian and protection needs of refugees and IDPs, as well as those of the communities hosting them.

In this chapter

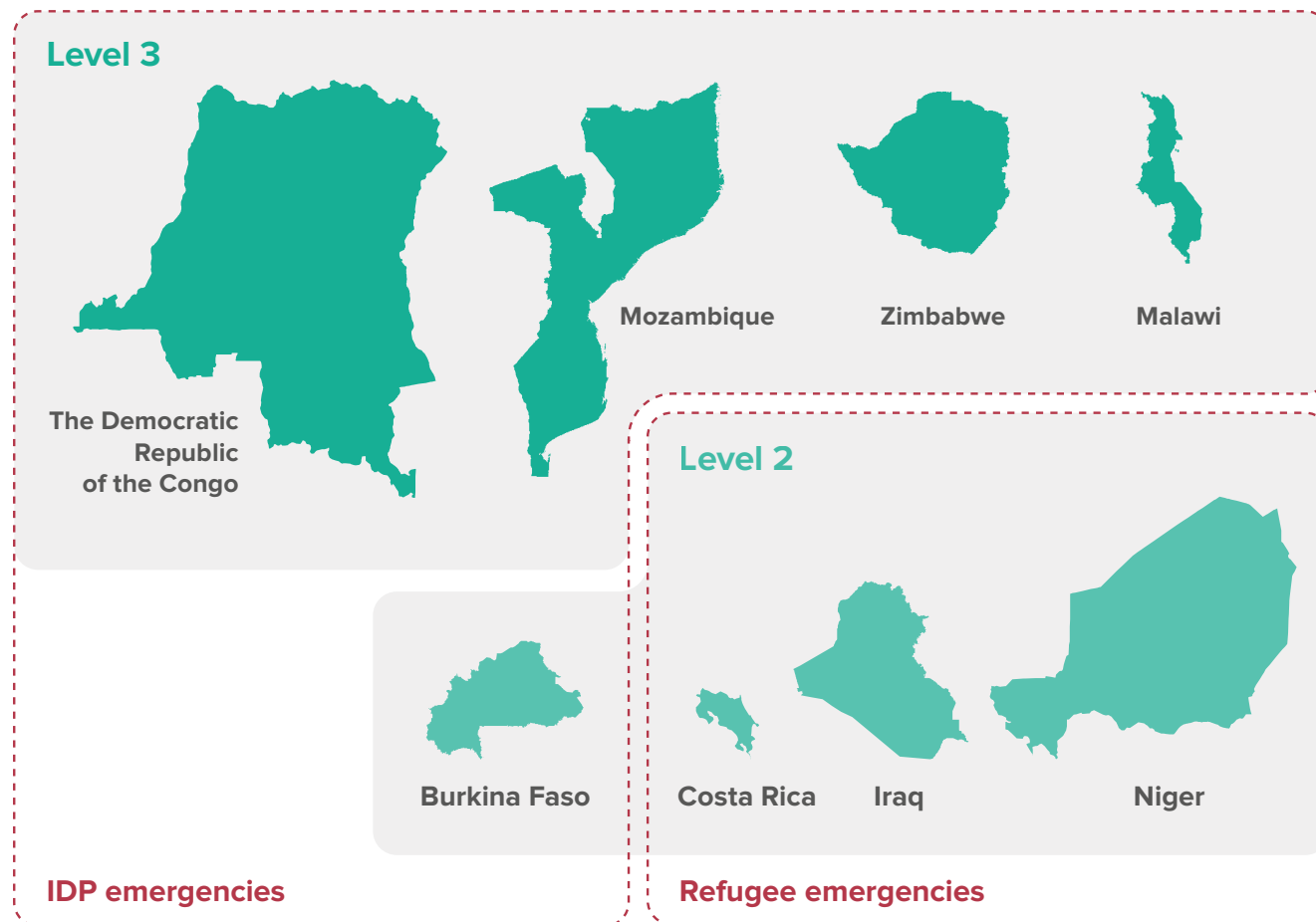
- Emergency preparedness and response
- Global supply management
- Prevention and response to sexual and gender-based violence
- Cash assistance
- Public health
- Nutrition and food security
- Water, sanitation and hygiene
- Shelter and settlements

The Preparedness Package for Refugee Emergencies



Emergencies

UNHCR activated six new emergencies affecting eight countries in 2019



167 UNHCR emergency staff deployed

102 Emergency standby partners deployed

1,094 UNHCR staff & partners trained in emergency preparedness and response

7 Global stockpiles were used to deliver CRIs

8 Emergency airlifts, fulfilling **122** Requests

Tents
10,480

Solar lamps
114,505

Plastic sheets
452,390

Kitchen sets
250,935

Thermal blankets
1,052,905

Buckets
261,813

Jerry cans
305,376

Sleeping mats
751,269

Mosquito nets
431,345

EMERGENCY PREPAREDNESS AND RESPONSE



Eight tons of humanitarian aid arrives at Beira, Mozambique, for distribution to survivors of Cyclone Idai.

Preparing for an emergency requires risk monitoring and preparation, including scenario-based contingency planning. In 2019, UNHCR activated six new emergencies involving eight countries, including four L3s (the Democratic Republic of the Congo (DRC), Malawi, Mozambique and Zimbabwe) and four L2s (Burkina Faso, Costa Rica, Iraq and Niger). These activated countries included five IDP emergencies (Burkina Faso, the DRC, Malawi, Mozambique and Zimbabwe) and three refugee emergencies (Costa Rica, Iraq and Niger).

As some emergencies stabilized in places like Bangladesh and Uganda, and with the deactivation of emergencies in 31 countries,

the pace of emergency deployments slowed in 2019. UNHCR facilitated 269 deployments compared to 420 in 2018, including 167 UNHCR internal staff, and 102 external staff working for emergency standby partners.

Most staff deployed (161 or 60%) lent vital support to UNHCR's refugee responses, while most of the others (103 or 38%) joined efforts to help IDP responses, with 2% in roving roles. In addition, UNHCR's Emergency Management Team spent 1,779 days on emergency missions and 747 days providing functional support to UNHCR operations. More than half of these emergency deployments (54%) were to 14 countries, including: Burkina Faso,

Cameroon, Colombia, the Republic of the Congo, the DRC, Libya, Mozambique, Niger, Nigeria, South Sudan and the Bolivarian Republic of Venezuela.

UNHCR signed one new standby agreement with the Danish Emergency Management Agency (DEMA) and updated two agreements with the Swedish Civil Contingencies Agency (MSB) and IrishAid. At the end of 2019, the recorded annual in-kind contribution from the 18 emergency standby partners stood at nearly \$7 million. The Office also signed memorandums of understanding for cooperation on emergency response with EMERCOM—the Russian Federation’s Ministry for Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters—and

with AFAD—Turkey’s Disaster and Emergency Management Authority. New frame agreements with iMMAP, REACH and CANADEM strengthened UNHCR’s capacity to quickly deploy quality information management experts, particularly to IDP operations worldwide.

There were 22 operations which reported a high risk of new or escalating refugee or IDP situations in the HALEP, with 81% prepared for the risk. New contingency plans were prepared for 23 country operations. There were 345 UNHCR and partner staff trained on emergency management and who participated in inter-agency emergency exercises and workshops.

Working with standby partners on emergency preparedness and response

Partnership is critical for effective emergency preparedness and response. In 2019, UNHCR maintained 17 active emergency response partnerships:

- Bundesanstalt Technisches Hilfswerk
- CANADEM
- Danish Refugee Council
- Department for International Development, United Kingdom of Great Britain and Northern Ireland
- Directorate for Civil Protection and Emergency Planning of Norway
- Dutch Surge Support Water
- Emergency.lu, Luxemburg Ministry of Foreign Affairs
- iMMAP
- IrishAid
- International Humanitarian Partnership
- Norwegian Refugee Council
- RedR Australia
- Save the Children Norway
- Swedish Civil Contingencies Agency
- Swiss Agency for Development and Cooperation
- Veolia Environment Foundation
- White Helmets Commission

In the course of 2019, three new emergency response partnerships were established:

- Danish Emergency Management Agency
- Turkey’s Disaster and Emergency Management Authority
- Russian Federation’s Ministry for Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters

In 2019, UNHCR completed the Preparedness Package for IDP emergencies, which is aligned with the Preparedness Package for Refugee Emergencies and the IASC Emergency Response Preparedness Approach. The tool reflects UNHCR’s aim to engage more consistently, predictably and sustainably in situations of internal displacement, in both its coordination and operational roles.

Field security

UNHCR’s security workforce, made up of 88 international and more than 250 national security professionals, ensured security and safety were integrated as normal functions of the Office’s operations and activity. In addition to responding to 311 security incidents, UNHCR’s security workforce also supported managers and staff on 12 critical incidents in 2019, coordinating with the UN Department of Safety and Security in New York and government personnel.

Maintaining a robust training programme remained key to field security work. In 2019, 749 UNHCR and partner staff were trained on security-related topics, including

the Security Management Learning Programme and Women’s Security Awareness Training. UNHCR also adapted service delivery to the new, decentralized organizational model, focusing on effective field support through the new empowered regional bureaux. In addition, UNHCR was represented in key forums, such as the Inter-Agency Security Management Network, and it participated in developing IASC and UN guidance on civil-military coordination.

Constraints and unmet needs

Key gaps identified in emergency preparedness included staffing capacity, stalled discussions with host governments regarding their willingness and approach to receive refugees, and technical expertise in areas such as site planning, supply and cash preparedness.

The diverse locations of the emergencies requiring UNHCR deployments meant multiple languages (French, Spanish and English) and profiles were needed, despite limited resources. This required more staff time and effort, both from UNHCR and its partners.

Preparedness Package for IDP Emergencies



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UPS Foundation transports critical supplies to refugees



In 2019, the UPS Foundation supported UNHCR through emergency funding to provide core relief items to affected populations in the DRC, and through in-kind air charter flights to Malawi, Niger and Somalia to deliver lifesaving supplies such as blankets, emergency shelter and sleeping mats.

Since 2010, the UPS Foundation has been a leading UNHCR corporate partner, contributing funds, services and expertise in transportation, supply chain logistics and communications to support refugees and displaced people across the globe.



GLOBAL SUPPLY MANAGEMENT



UNHCR dispatches aid and shelter supplies to Bardarash camp in Duhok, Iraq, for Syrian refugees fleeing the north-east of the Syrian Arab Republic.

UNHCR provided timely, cost-effective support when responding to new and ongoing emergencies, dispatching \$30 million-worth of emergency core relief items from seven global stockpiles to 23 emergency-affected countries. The top five recipients of this assistance were the DRC and Yemen (900 tons each), and Ethiopia, Nigeria and South Sudan (500 tons each). Global stockpiles were used during eight emergency airlifts, fulfilling 122 requests. In addition to the seven global stockpiles in Accra, Amman, Copenhagen, Douala, Dubai, Nairobi and Kampala, work began on an eighth stockpile in Panama City.

UNHCR's supply chain provided reliable and efficient service delivery to new and ongoing emergencies and field operations throughout 2019. By merging the procurement, supply and logistics teams,

UNHCR developed a responsive, agile service that allowed more efficient decision making. This was important given UNHCR's newly-decentralized structures, and in a year when procurement requests increased from \$1.1 billion to \$1.14 billion, including \$803 million in the field and \$337 million in Headquarters. UNHCR also provided contract administration services for 296 global frame agreements with international suppliers for a wide range of relief items, supplies and services.

In 2019 UNHCR managed 5,150 vehicles under the centralized global fleet system—a 23% increase compared with 4,165 vehicles in 2018.

To boost its supply and delivery capacity, the Office collaborated with partners and sister UN agencies and remained an active

member of the High-Level Committee on Management, the UN's Procurement Network and the Common Procurement Activities Group. Collaborative procurement activities also continued via the United Nations Global Marketplace and other stakeholders. Inter-agency partnerships also grew as UNHCR made greater use of the opportunity to piggyback on the common procurement of UN country teams. The Office also participated in the UN Global Sustainable Transport Working Group and took the first steps towards greening UNHCR's supply chain through the United States Agency for International Development-led, multi-institutional effort to reduce packaging waste in aid delivery.

The UN Secretary-General remained committed to reforming the business practices of the United Nations. The Business Innovation Group (BIG), which is one of the United Nations Sustainable Development Goals' Results Groups, has been tasked with achieving greater effectiveness and efficiency by harmonizing back office functions, expanding common premises and mutually recognizing policies across different UN agencies and organizations. In 2019, UNHCR prioritized BIG participation, supporting 29 common office projects to reach the BIG target on common premises and facility services.

UNHCR organized inter-agency auctions to responsibly dispose of light vehicles. Seven sister UN agencies participated, as did three other humanitarian organizations. As part of its offer for fleet management services, UNHCR also developed a pilot carpool project in Lebanon, in coordination with other UN agencies. The service developed a project to optimize fleet size and cost performance through a carpooling business model that may also be of interest within the BIG concept.

Enhancing the supply chain, UNHCR introduced several automated processes, and Power BI-based key performance indicator reports revolutionized its big data analyses. For more efficient supply chain planning and forecasting, UNHCR successfully rolled out Demantra (a demand management and supply chain management tool) to more than 20 additional operations covering more than 90% of the inventory value for further distribution in 2019. The service provided supply chain-related, back office support with updated user guidelines, resolving more than 3,000 incidents.

Beyond guaranteeing efficient delivery, UNHCR helped deploy skilled workers to emergencies and conducted 451 functional clearances for supply positions worldwide, to ensure a broader range of more qualified and diverse UNHCR supply staff.

Constraints and unmet needs

Throughout the year, supply structures needed continuous strengthening in terms of numbers of staff, their grade and access to up-to-date training and learning opportunities, so staff could effectively deal with ongoing and emerging crises.

New emergencies in the Americas and other places lacking established global stocks presented a challenge in terms of effective coverage. UNHCR coordinated through the new regional bureaux to explore how new stocks and fleet hubs could be established.

Road safety remained an area of concern. UNHCR worked to reduce the incident rate, both directly and through the Inter-Agency Steering Committee implementing the UN Road Safety Strategy.

PREVENTION AND RESPONSE TO SEXUAL AND GENDER-BASED VIOLENCE



An internally displaced Congolese woman talks to UNHCR in Tshikapa, in the DRC. "While fleeing, I travelled for four days and nights. The militia killed two people in my group, and me and the other women were raped by one man after another."

2019 RESULTS

45,557 reported SGBV incidents for which survivors received psychosocial counselling compared to **47,857** in 2018



3,308 reported SGBV incidents for which survivors received legal assistance compared to **4,699** in 2018



6,745 reported SGBV incidents for which survivors received medical assistance compared to **9,613** in 2018



34 displacement situations in which UNHCR sought to improve community involvement in the prevention of SGBV and the protection of survivors compared to **35** in 2018



50 displacement situations in which known SGBV survivors received appropriate support compared to **44** in 2018



Sexual and gender-based violence (SGBV), predominantly perpetrated against women and girls, remained a serious human rights

violation and public health problem. It affects all people of concern to UNHCR in all locations and situations.

In 2019, UNHCR expanded its SGBV prevention, risk mitigation and response work, including at the outset of emergencies. This was largely thanks to the Safe from the Start initiative, a joint United States of America-UNHCR partnership launched in 2014 that was designed to prevent and respond to SGBV among people of concern, promote multi-sectoral risk mitigation strategies, and ensure SGBV prevention and response programmes were mainstreamed at the onset of an emergency as a lifesaving intervention.

Under Safe from the Start, UNHCR deployed senior SGBV staff to Brazil, Cameroon, Chad, Djibouti, Ethiopia, Nigeria, Mozambique, Sudan, Uganda, Yemen and Zambia, six of which—Cameroon, Ethiopia, Nigeria, Sudan, Uganda and Yemen—had large IDP populations. An evaluative review, using UNHCR data, found these experts helped more than double the coverage (25% to 59%) and efficiency (35% to 82%) of SGBV programming.

To ensure quality case management systems, referral pathways and SGBV services were in place, UNHCR worked with national and local partners. In Lebanon, for instance, national standards for case management were raised when 438 case workers, supervisors and government staff completed a peer-to-peer coaching programme. In 2019, 2,885 UNHCR staff also completed an SGBV e-learning course. Emergency deployments to refugee and IDP operations meant 1.2 million additional people of concern had benefited from expanded SGBV-relevant medical referral systems since 2014.

UNHCR worked to prevent SGBV and encourage refugee and IDP women's participation in decision-making processes,

focusing on combatting unequal gender norms that legitimize violence against women and girls. For example, in Nigeria, UNHCR and partners reached around 45,000 IDPs through the Zero Tolerance Village Alliance model, which propelled community action against SGBV through community groups, peer-to-peer support and campaigns. They implemented SASA!, a community-led SGBV prevention programme addressing root causes by engaging men and boys, as well as religious, community and traditional leaders in Bangladesh, Ethiopia, Iraq, Kenya, Lebanon, Libya, Malaysia, Pakistan, Rwanda, Sri Lanka, Turkey, Uganda, the United Republic of Tanzania and Yemen. Assessments found a positive effect on attitudes towards power dynamics in relationships and gender norms.

UNHCR improved community involvement in SGBV prevention and protection of survivors in 24 refugee situations, as well as seven involving IDPs and three involving returnees. Working with communities, the Office implemented prevention programmes and awareness-raising initiatives addressing the root causes of gender-based violence, which brought changes in behavior and social norms.

Furthermore, UNHCR supported SGBV survivors in 50 situations, involving refugees (43), IDPs (six) and returnees (one). More than 55,600 SGBV survivors had better access to medical, psychological, social and legal services, and the Office promoted inclusive services for all survivors, including women, girls, men, boys and other at-risk groups.

UNHCR's multi-sectoral approaches to SGBV risk mitigation were strengthened in Asia and the Pacific, the Middle East and North Africa, and East Africa by implementing the IASC Guidelines for integrating

Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action



WHERE IS THE MONEY?



gender-based violence interventions in humanitarian action, which outline responsibilities for addressing SGBV and the practical steps humanitarian sectors should take to reduce risk in their relevant area. By the close of 2019, 414 UNHCR staff in 12 national and four regional cohorts had boosted their knowledge of risk mitigation by completing UNHCR's learning programmes. The Office also produced national action plans on SGBV risk mitigation. In Bangladesh, for example, UNHCR installed 2,500 streetlights, distributed 86,706 shelter locks, and issued 107,000 refugee households and 10,700 host community families with liquid petroleum gas canisters, thereby reducing the risks associated with firewood collection, a task that often falls to women and girls.

A UNHCR policy on the prevention, risk mitigation and response to gender-based violence (GBV), developed in 2019 and due for release in 2020, draws extensively on UNHCR's GBV work and will institutionalize and consolidate progress made by UNHCR and its partners.

Constraints and unmet needs

A recent study by the IRC and Voice found that SGBV funding accounted for just 0.12% of all humanitarian funding, representing one third of what was requested. Available funding did not meet needs or reach necessary targets or protection outcomes. The study found lifesaving services, such as clinical care for SGBV survivors and female-only safe spaces, continued to be significantly underfunded and deprioritized in humanitarian responses. This means the needs of millions of women and girls caught in crisis are not being met.

Early and effective SGBV programming saves lives and money. Having dedicated staff with SGBV expertise, particularly from the onset of emergencies, improves survivors' access to services and reduces SGBV risks. However, resource constraints meant that dedicated staff remain limited across UNHCR, which in turn restricted the systematic prioritization of lifesaving SGBV services and programming.



Asylum-seeker in Greece speaks out about the violence that upended her life

Virginie Laure, a woman in Cameroon, was attacked and raped by a group of strangers. Now seeking asylum in Greece, she is raising her voice to help others. The Greek charity Diotima works with UNHCR to help survivors like Virginie learn about their rights and access medical and legal services. But with victims often reluctant to come forward, the biggest hurdle to that work can be identifying them in the first place.

"There is a huge stigma around sexual violence generally, but especially about rape. But survivors are now coming forward. Somehow, they overcome it."
—Adamantia Lambouka, a psychologist working with Diotima.



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CASH ASSISTANCE



Aziza Ibish, a Syrian asylum-seeker living in Greece, shops in the municipal market. Thanks to UNHCR's cash assistance programme, she has more choice in how she covers her daily needs.

2019 RESULTS

\$650 million in cash assistance was distributed compared to **\$568 million** in 2018



100 country operations implemented cash-based interventions compared to **93** in 2018



5,000 UNHCR staff trained in cash assistance compared to **3,800** in 2018



80% of UNHCR's cash assistance was disbursed electronically compared to **65%** in 2018



Cash assistance brings a measure of dignity and predictability to people of concern. In line with its Grand Bargain commitment to double the use of cash as a proportion of its assistance by 2020, UNHCR has delivered some \$2.4 billion in cash assistance since 2016 in more than 100 countries. Cash assistance now

exceeds in-kind assistance. In 2019, some \$650 million was distributed—a 13% increase on 2018 expenditure and a 50% increase since 2015 (\$325 million).

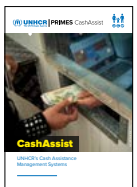
UNHCR used cash for a range of purposes, including protection, basic needs, education, shelter, health, livelihoods and winterization.

UN agencies
Common Cash
Statement



Most of the cash (95%) was multi-purpose, meaning it was disbursed without restriction. This allowed refugees and others of concern to choose how to meet their own needs. Evaluations demonstrated that cash prevented displaced people from resorting to negative coping strategies, such as child labour, selling or exchanging sex, early marriage or premature return to conflict zones. It also enhanced gender equality and women’s empowerment. UNHCR research in Ecuador, Lebanon and Morocco indicated that access to cash could render women and girls less vulnerable to sexual exploitation, too. In Lebanon, female cash recipients reported feeling stronger, more equal and more independent, thanks to the control cash gave them to meet their most pressing needs.

CashAssist



Cash assistance required a shift in mind set by UNHCR. Staff at all levels needed access to e-learning and face-to-face training, as well as guidance, implementation modalities and lessons learned. Since 2016, UNHCR has trained some 5,000 of its own and partners’ staff on cash assistance. More than 1,000 people were trained in 2019 alone, with a network of 100 cash experts established across UNHCR’s operations.

UNHCR’s Refugee
Livelihoods
and Economic
Inclusion:
2019-2023 Global
strategy



Pursuing collaborative cash delivery mechanisms to ensure efficiencies in aid remained a cornerstone of UNHCR’s cash institutionalization strategy. A common cash facility clause was implemented in 45 countries and the High Commissioner endorsed the Common Cash Statement—reaffirming UNHCR’s commitment to provide cash through a common cash system used in crises globally to avoid

parallel systems among operational agencies or duplicate financial instruments, based on the identification of “shared business needs” across agencies. UNHCR implemented the Common Cash Statement in seven priority countries and through global systems and guidance development, along with OCHA, UNICEF and WFP. The system is to be collectively owned, jointly governed, have clear and predictable roles, responsibilities and arrangements, and be available to multiple partners (including those outside the United Nations). Implementation built on existing good practices, such as LOUISE in Lebanon, the Common Cash Facility in Jordan and the Greece Cash Alliance. Among other achievements, UNHCR, UNICEF and WFP launched the Guidance for Collaborative Procurement for Humanitarian Cash Transfers and developed a minimum core data set for vulnerable populations.

To ensure accountability to populations affected by displacement, UNHCR developed CashAssist, a cash management system that ensured cash transfers were made to refugees, IDPs and others of concern in a timely, efficient and accurate manner while avoiding duplication and minimizing fraud. By the end of 2019, CashAssist had been rolled out in 10 operations, with the roll out to another 50 planned in the coming two years.

UNHCR quadrupled its use of cash assistance for livelihoods programming too, increasing from 18 to 54 countries. Cash was an integral element of UNHCR’s forthcoming “Refugee livelihoods and economic inclusion: 2019-2023 Global strategy”.

The Office increasingly leveraged its cash assistance to promote financial inclusion and facilitated refugees’ access to formal bank and mobile money accounts in countries such as Cameroon, the DRC, Ethiopia, Iraq, Niger, Jordan, Kenya, Rwanda, Uganda and Zambia.

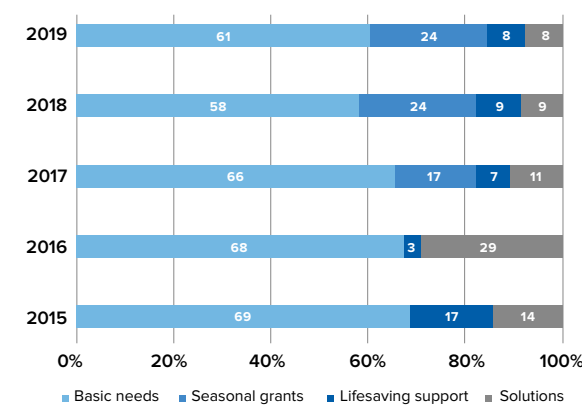
Most of UNHCR’s cash assistance (80%) was electronically disbursed, meaning vulnerable populations could access funds via their mobile phone or bank accounts. In addition, in line with the objectives of the Global Compact on Refugees and building on the World Bank’s IDA18 regional sub-window for refugees and host communities initiative, UNHCR leveraged its cash assistance to align with national social protection systems. Most recently, for instance, the Governments of Cameroon and Chad allowed refugees to access their national social safety nets.

Constraints and unmet needs

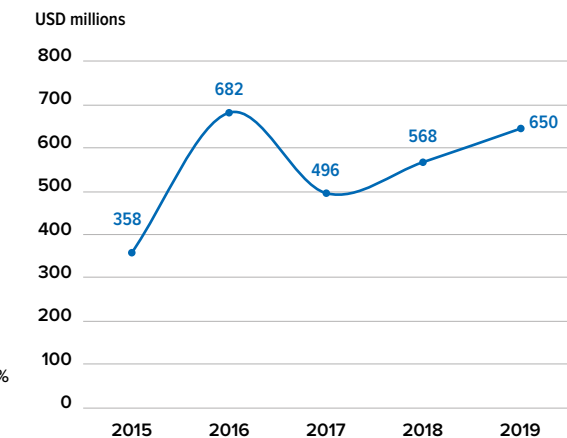
While cash was an efficient form of aid that gave beneficiaries the power to prioritize their own spending, UNHCR analysis in nine countries revealed just 4% of interviewees could meet their basic needs with the cash assistance they received. Nearly half (47%) said the assistance met just half of their basic needs. As a result, many engaged in negative coping mechanisms, such as pulling children out of school, begging, onward movement or child labour. While it remained an efficient way to provide assistance, there was not enough cash available for it to meet people’s basic needs in a long-term and sustainable way.

Targeted assistance was crucial to ensuring the most vulnerable families were reached. UNHCR is therefore working with partners on common targeting approaches and developed joint guidance with WFP.

CASH ASSISTANCE BY SECTOR | 2015-2019



CASH ASSISTANCE | 2015-2019



 PUBLIC HEALTH



Manirakiza, a 25-year-old refugee from Burundi, and her baby, Irakoze, at Kalobeyei health clinic in north-west Kenya.

2019 RESULTS

0.3
under-5 mortality rate
(per 1,000 people a month)
compared to **0.3** in 2018



0.12
crude mortality rate
(per 1,000 people a month)
compared to **0.13** in 2018



93.5%
of births were attended
by skilled personnel
compared to **94.4%** in 2018



UNHCR remained committed to refugees, IDPs and host communities accessing health services. In 2019, it supported access to primary health care, including sexual and reproductive health and nutrition services in 46 countries. It delivered HIV prevention and treatment, as well as reproductive health programmes within a framework of public health, protection and community development.

UNHCR's aim was for people of concern to be included in national health policies and

systems. In 2019, it supported countries in making that happen. For instance, the Islamic Republic of Iran continued to provide access to 92,000 refugees through its national health insurance scheme, while seeking to increase the number of most vulnerable enrolled. Rwanda also made significant progress, enrolling 12,000 refugees in its national health insurance scheme.

To advance access to quality health care and related data, UNHCR rolled out

iRHIS—its new integrated refugee health information system—in 18 countries hosting refugees in camps, including the DRC, Ethiopia, Iraq and Yemen. More than 7.3 million registered consultations took place across 179 sites. UNHCR and partners conducted quality of care assessments in 71 sites or camps and 148 health facilities in Bangladesh, Chad, Djibouti, Ethiopia, Jordan, Kenya, Malawi, Rwanda, Somalia, South Sudan, Sudan and Uganda using the balanced scorecard. The scorecard was designed to assess care quality in primary health care facilities. The average country scores ranged between 70% and 89%, well above the moderate range of 60%. Results were available immediately, allowing decisions to be made on capacity and other gaps at health facilities.

UNHCR continued its mental health and psychosocial support (MHPSS) to people of concern, including by training 26 Bangladeshi psychologists working with Rohingya refugees on interpersonal therapy for depression. The integration of mental health into primary health care continued in Burundi and Zambia, where 49 primary care staff in refugee settings were trained as part of the Mental Health Gap Action Programme. In the last five years, 1,133 partner staff in 14 countries completed the training, significantly improving access to mental health services for refugees and host populations. In addition, UNHCR remained an active member of the IASC MHPSS Reference Group and supported MHPSS efforts for IDPs through its Protection Cluster.

A UNHCR initiative to improve non-communicable diseases care for people of concern saw approximately 300 health staff from 12 countries receive training and support introducing treatment

protocols. These included participants from UNHCR, NGOs and government partners in countries such as Burundi, Cameroon and Ethiopia. UNHCR worked with the Centres for Disease Control and Prevention and national tuberculosis programmes to assess the challenges facing urban refugees and asylum-seekers needing health care in Cameroon and South Africa.

Despite systems being inadequately equipped to meet their needs, and discrimination from some health care workers, most refugees could access HIV tests. Refugees were also confident they could get tuberculosis treatment in the health care system and stay in the country after a tuberculosis or HIV diagnosis.

UNHCR developed a comprehensive approach to improving access to national systems for people of concern, which included greater partnership and coordination with national authorities and partners, translation services in health care facilities, translating information material into refugees' languages, sensitizing health care workers to refugees' needs and ensuring refugees' contact information was updated at each appointment.

In 2019, two-thirds of preventable maternal deaths and nearly half (45%) of newborn deaths occurred in countries affected by recent conflict, natural disaster or both. The majority (94%) of live births occurred with the assistance of skilled health personnel. The under-five mortality rate improved slightly, with one in 3,000 children under five dying.

In 2019, a UNHCR project in refugee-hosting regions of Cameroon, Chad and Niger, saw 29 health centres and district hospitals receive training,

iRHIS, UNHCR's integrated refugee health information system



equipment, supplies, monitoring and community outreach to improve the quality and uptake of maternal, newborn and family planning services.

Constraints and unmet needs

Although UNHCR focused on expanding service delivery for refugees through existing national systems and strengthening access for refugees and host populations, including refugees in national health care systems will take years.

In the meantime, during emergencies, UNHCR must mobilize timely and quality public health support for people of concern. When national services are available, they often require considerable support,

including medicines and medical supplies, equipment, training and human resources. Furthermore, refugees' impact on national delivery systems should be assessed early on and monitored as the situation unfolds.

Humanitarian-specific responses, such as vaccinations, screening for acute malnutrition and prioritized interventions are still needed to minimize avoidable morbidity and mortality.

Gaps remained in 2019 in services such as palliative care; high-impact elective surgeries, such as for blindness-preventing cataract surgery; treatment for hepatitis B and C through national programmes; adolescent, maternal and newborn care; and integrated mental health services.

Working towards refugees' and IDPs' access to quality disease prevention and care services

Malaria, HIV and AIDS, and tuberculosis (TB) present unique risks to refugees and IDPs. High levels of mobility, poor living conditions, exposure to violence and less access to health services are all contributing factors. The Global Fund to Fight AIDS, TB and Malaria remained a vital support to ensure refugees and IDPs could access quality disease prevention, treatment and care services.

UNHCR and the United Nations Foundation (UNF) reviewed how refugees and IDPs were included in Global Fund applications between 2002-2019. The global results and downloadable scorecards for each eligible country were discussed with the Global Fund, to be shared with UNF partners. As part of the review and annual public health report, the team also analyzed how refugees benefit from country grants. The scorecards will help encourage national programmes to include refugees, IDPs and surrounding populations in proposals for the next three-year funding cycle (2021-2023).



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NUTRITION AND FOOD SECURITY



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Two refugees working with the standardized expanded nutrition survey team in Pamir camp, South Sudan, take a blood sample from a four-year-old Sudanese refugee to screen for anemia.

2019 RESULTS

61% of surveyed sites in which levels of acute malnutrition were acceptable (<10%) compared to 2018 levels: **48%**



6% of surveyed sites in which anemia levels were acceptable (<20%) compared to 2018 levels: **5%**



23% of surveyed sites in which levels of stunting were acceptable (<20%) compared to 2018 levels: **32%**



74% of surveyed sites met the UNHCR target (≥70%) for the rate of exclusive breastfeeding compared to 2018 levels: **61%**



While malnutrition causes vary, food insecurity is a significant contributing factor among refugee and IDP populations, particularly for children. Malnutrition is a major challenge to protection and threatens development gains. UNHCR focuses on tackling it in all its forms, stressing the need for a multi-sectoral approach to nutrition and food security.

The collection and use of good quality data is pivotal to decision-making and targeted responses. The Standardized Expanded Nutrition Survey, known as SENS, was updated in 2019. It aligns with international standards; with Sustainable Development Goal (SDG) 2 (end hunger, achieve food security and improved nutrition and

promote sustainable agriculture) and the nutrition targets of SDG 2.2, which aims to end all forms of malnutrition by 2030; and with indicators and methodologies from agencies such as UNICEF and WFP.

UNHCR ensured robust methodologies for all nutrition surveys undertaken in 77 sites across 13 countries, 91% of which were in Africa, predominantly in East and Central Africa, to ensure the accuracy of data generated. It sought to prioritize the effects of rising malnutrition when funding and designing programmes for country operations. To make the data more accessible to other sectors and partners, the UNHCR SENS dashboard was developed, providing a comprehensive overview of all data and allowing analyses of nutrition and food security trends.

UNHCR's SENS dashboard



The information from nutrition surveys conducted in 13 countries during 2019 highlights the extremely precarious nutrition situation of refugee populations, notably in Ethiopia, Nigeria and Sudan. All forms of childhood malnutrition are at concerning levels. High stunting—indicative of longer-term nutritional deficits—was present in almost 50% of sites; high anemia in almost 70% of sites; and global acute malnutrition (GAM) standards exceeded the 10% threshold in 39% of the sites monitored.

With malnutrition representing a significant concern for refugee populations, improving the prevention of undernutrition and micronutrient deficiencies, and managing existing malnutrition cases, was a priority and challenge in 2019. In addition to treatment, UNHCR focused on preventing malnutrition in collaboration with other sectors. Poor infant and young child feeding (IYCF) is a major driver of malnutrition and, while exclusive breastfeeding levels among UNHCR operations are improving, complementary feeding indicators remain poor. The IYCF framework, which outlines the practical steps each sector can take to mitigate malnutrition, was rolled out at new sites in seven operations, including in Uganda and the United Republic of Tanzania, with further roll out planned for 2020.

Lastly, UNHCR conducted a comprehensive five-day nutrition and food security training session in Nairobi for public health and nutrition staff with 28 staff from 10 operations. Specialists from the region, including from other agencies, shared their expertise, which promoted synergies between various sectors and agencies. This training was the first to be held by UNHCR since 2011.



Taking steps to fight child malnutrition in refugee camps

“la Caixa” Banking Foundation supports innovation for tackling the issue of child malnutrition in Ethiopia through the MOM Project.

The IYCF framework has been implemented for the first time in an emergency context, resulting in a substantial reduction in child mortality in Gambella camp, while global acute malnutrition was nearly halved in Gambella and Melkadida camps.

In October 2019, the international conference “Building innovative partnerships: tackling child malnutrition and achieving sustainable developments goals” was organized in Barcelona, involving experts and stakeholders from the public and private sectors, providing innovative ideas for sustainable solutions.



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Nutrition services scale up in Bangladesh

In Bangladesh, following the influx of almost 1 million refugees in 2017 to the Cox's Bazar district, levels of GAM in the Kutupalong refugee camp were well above the emergency levels ($\geq 15\%$) at 24.3%, with stunting and anemia also exhibiting extremely high prevalence.

In response, local and international actors ramped up efforts to reduce the overcrowded conditions by massively scaling up the extension areas. Efforts were also multiplied to ensure refugees had access to regular food distributions and to expand community management of acute malnutrition practices.

This improved enrolment and use of nutrition services.

While in 2018 only 27% of eligible children were enrolled in treatment programmes for severe acute malnutrition, this figure increased to 78% in 2019. Promotion of appropriate IYCF was also scaled up, with pregnant and lactating women receiving counselling while mother-to-mother support groups were established in communities to enhance the adoption of IYCF and health practices in the first 1,000 days of life.

Constraints and unmet needs

Refugee food security continued to deteriorate in many protracted situations where UNHCR operates, particularly in Africa. This was most concerning in contexts where drought was coupled with limited livelihood opportunities.

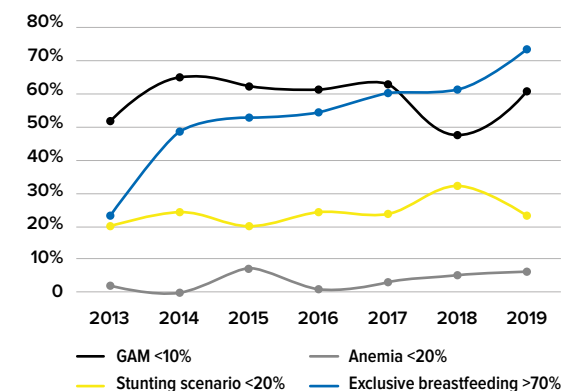
Refugee food security is largely dependent on humanitarian food assistance provided by WFP. Funding shortfalls resulted in basic needs not being met in Cameroon, Chad, Ethiopia, Malawi, Kenya and South Sudan, among others. To deal with these challenges, refugees often put themselves at great risk leaving camps to search for income or livelihoods. Some migrated to mining areas. Women often took their children to the fields for weeks at a time, resulting in a break in access to health centres providing malnutrition prevention and treatment services and school.

The nutritional impact of food insecurity contributed to detrimental effects on the growth and development of refugee children at the most critical window of opportunity between conception and

two years of age. Stunting levels increasing in 2019 could be a physical manifestation of this.

UNHCR and WFP collaborated to address resource challenges by shifting from providing assistance to all, to targeting those most in need, increasing biometric verification in food assistance distribution, and jointly fundraising for additional support.

% OF SURVEYED SITES MEETING THE NUTRITION INDICATOR TARGETS 2013-2019



WATER, SANITATION AND HYGIENE



Somali refugees collect water from a waterpoint in Hagadera camp, Dadaab, Kenya. UNHCR provides water to more than 200,000 refugees there and 19 of these boreholes operate on a solar photovoltaic-diesel hybrid system.

2019 RESULTS

21 liters of potable water on average available per person per day in 24 refugee situations compared to **20 liters** in 26 refugee situations in 2018



17 average number of people of concern per drop-hole compared to **22** in 2018



1,755 average number of people of concern per hygiene promoter compared to **1,200** in 2018



30 average number of people of concern per shower/bathing facility compared to **31** in 2018



UNHCR's WASH dashboard



In 2019, approximately 8.1 million people accessed water and sanitation services thanks to UNHCR support. Effective monitoring helped UNHCR address inequalities, enhance its accountability to affected populations, and mitigate financial and reputational risks.

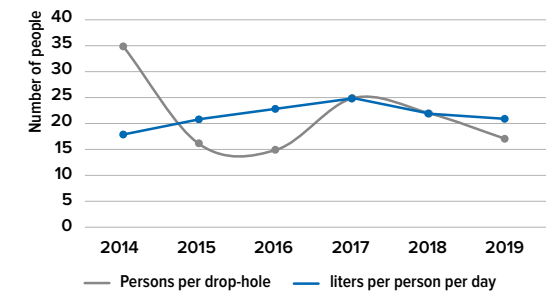
In September 2019, the Office launched the WASH dashboard, providing access to live WASH data from 144 refugee camps and settlements in 29 countries on 4.3 million refugees. It also installed smart meters, allowing it to study the WASH situation in any camp. The meters helped reveal

disparities across UNHCR operations. In some countries, such as Iraq, refugees and IDPs had their own household toilet, while in other operations such as Kepembele camp in the Republic of the Congo, as many as 110 people shared one toilet.

Monitoring is key to addressing inequalities, enhancing UNHCR's accountability to affected populations, and mitigating financial and reputational risks to UNHCR. Smart monitoring technology was piloted in Iraq, Kenya, Rwanda, Uganda, and the United Republic of Tanzania, allowing UNHCR and partners to ensure service standards were maintained by tracking water trucking operations, the performance of water distribution networks, water levels in boreholes, and water quality.

UNHCR also invested in cost-effective and environmentally-sustainable technologies, such as urine-diverting dry toilets that

WATER SUPPLY AND SANITATION SERVICES 2014-2019



require little maintenance in hot and dry climates. Rapid groundwater assessments were rolled out in Sudan (White Nile), Uganda (Adjumani, Bidibidi, and Kyangwali), and Zimbabwe (Tongogara) to increase the probability of finding water when drilling boreholes and the yield of finalized wells, and substantially reduce the costs for sustainable water supply systems.



Working together to help refugee children stay healthy



UNHCR partnered in 2019 with Lifebuoy, a soap brand owned by the multinational company Unilever, to improve hygiene conditions for Syrian refugees in Lebanon, with the aim of reaching 10,000 refugee mothers through Lifebuoy's "Mum's Magic Hands" handwashing behaviour change programme. Through a combination of financial investments in water and sanitation programmes, a donation of 50,000 bars of soap, and working together to co-create new Mum's Magic Hands materials, the project ensured refugee mothers and children had the information and resources they needed to stay healthy.



In addition, 50 UNHCR WASH staff learned how to operationalize the Global Compact on Refugees at training sessions, particularly how to ensure WASH services are sustainable for refugees and host communities. Specific tools in the training included: the global solar water initiative; tools to reduce the maintenance costs of water supply; real-time monitoring of WASH systems to improve effectiveness; and a suite of tools on applied hydrogeology and rapid groundwater potential mapping to improve the overall lifespan of WASH infrastructure.

In addition, 10 people were selected for an in-depth field training on applied hydrogeology and solar water pumping in order to build capacity for planning and constructing sustainable water supply systems.

Constraints and unmet needs

Gaps in UNHCR's technical expertise remained. Only one region had WASH technical staff in 2019 and there were 17 operations with WASH expenditure but no technical WASH staff. In addition, and most importantly, the budget did not meet emergency needs, let alone ensure longer-term service sustainability. In 2019, only 28% of the requested funding for WASH was allocated. UNHCR often operates in remote areas without pre-existing infrastructure. Establishing sustainable water and sanitation systems remained costly and takes significant time.

Sustainable infrastructure requires a larger cash injection from the outset; therefore, the Office faces the dilemma of targeting more people with emergency facilities or fewer with sustainable facilities.

Full solarization of water supply systems in refugee camps

In 2019, solarization took place for three boreholes in Zambia, two water supply systems in Chad, one water supply system in Sudan, while full solarization was achieved for the water supply systems in northern Iraq's refugee camps.

Nonetheless, there were still more systems that run on fossil fuel than on solar power. To intensify UNHCR's efforts to become carbon neutral, solarizing camp and settlement water supply systems was identified as a key component of the UNHCR Clean Energy Challenge, announced at the Global Refugee Forum in 2019. An overview of solarized boreholes and those running on alternative power can be found on the UNHCR borehole database.



SHELTER AND SETTLEMENTS



Nor Kalam, 25, helps to prepare bamboo logs for chemical treatment at Kutupalong camp, Bangladesh. Bamboo treatment brings more sustainable housing to camps.

2019 RESULTS

219,000 people of concern lived in refugee housing units compared to **143,101** in 2018



27,880 transitional shelters were provided to people of concern compared to **16,457** in 2018



86,426 households received cash grants for rental accommodation compared to **93,942** in 2018



9,516 long-term/permanent shelters provided to people of concern compared to **11,849** in 2018



94,488 emergency shelters provided to people of concern compared to **161,603** in 2018



Adequate shelter and settlements provide refugees and IDPs with the space they need to live safely and as part of a wider community. The Office improved the quality and type of shelter options, providing emergency shelter to more than 116,527 people of concern, while

139,400 people of concern benefited from transitional shelter. However, mounting displacement meant at least half of emergency shelter needs went unmet.

To improve the living conditions of 76,000 refugees and IDPs, 15,198 refugee housing units (RHUs) were deployed to

Cash for shelter programme



15 operations. The majority (70%) went to operations in Africa, and the remainder to the Americas, Asia and the Pacific, and the Middle East and North of Africa. Globally, 219,000 people of concern were living in RHUs by the end of 2019 and, reflecting UNHCR's commitment to engage decisively and predictably in situations of internal displacement, 90,200 IDPs were living in a RHU by year's end, with a third of RHUs set aside for IDPs. With Better Shelter, UNHCR trained 450 additional staff, partners and people of concern in RHU assembly and safety standards across 15 operations.

Throughout the year, UNHCR pursued comprehensive responses, which promoted progressive shelter solutions. The aim was a more permanent solution for people of concern, including IDPs in Burkina Faso, the Democratic Republic of the Congo (DRC), Iraq and the Syrian Arab Republic. People of concern received a holistic package of assistance that supported them to transition from emergency to more durable shelter and settlement solutions.

To improve emergency preparedness and response, UNHCR developed revised shelter strategy templates and checklists to facilitate a prompt and efficient response. For example, in Bangladesh, the response evolved from a transitional shelter-only approach to a multi-faceted one, also incorporating emergency upgrades and hazard preparedness, reflecting the dynamic nature of the conditions in Bangladesh where multiple shelter options are required.

UNHCR humanitarian settlements should promote local development and the inclusion of people of concern, so settlement profiling tools were developed with UN-Habitat. These allowed UNHCR to rapidly obtain information that could

inform decision-making and sustainable investments in settlements housing people of concern. Settlement profiles were also developed for Ethiopia (Kebri Beyah) and Uganda (Nakivale).

At the onset of emergencies, UNHCR deployed experts and increased its use of new technology and cash to improve shelter response, with cash assistance as an effective way to ensure people of concern had shelter. UNHCR scaled up cash assistance for immediate shelter needs, with 17 operations implementing cash for shelter programmes, including for IDPs in Burkina Faso, the DRC, Iraq, Somalia and Ukraine. Globally, households could buy shelter construction materials using cash grants (27,387) or vouchers (722); buy shelter-related core relief items using cash grants (7,524); or use cash grants to rent accommodation (86,426).

The technical capacity of staff, partners and people of concern was strengthened through comprehensive training sessions organized for 20 national shelter and settlement planners from 17 countries. UNHCR also facilitated peer-to-peer learning and opportunities to share lessons learned, and outlined ways to implement the "Master Plan" approach to settlement planning.

Aligned with institutional priorities for better data when implementing technical programmes, the settlement information portal (SIP) continued to grow and connect with other UNHCR information databases, including the cash assistance dashboards, the WASH portal, the health facility balanced scorecard, HALEP and emergency deployments dashboards, as well as the UNHCR operational portal. The SIP now contains more than 4,000 documents, ranging from AutoCAD

files to shelter strategies, drawing templates, guidelines, construction guidance, site planning reference, settlement maps and RHU guidelines. The SIP dashboard is a comprehensive community of practice, which also allows a more in-depth technical monitoring of sectoral activities in 690 settlements, covering both IDP and refugee contexts.

Constraints and unmet needs

Insufficient funding, mounting or prolonged displacement, the growing impact of climate variability, difficult access to affected populations, limited technical capacity and challenging political environments, all remained significant barriers to UNHCR meeting the shelter needs of people of concern.

In Burundi, for example, UNHCR supported refugees and asylum-seekers living in

camps, including through sensitization activities and by providing shelter kits and materials. However, increased numbers of refugees arriving from the DRC saw funding diverted from the much-needed rehabilitation of existing shelters and infrastructure towards the construction of neighborhoods to accommodate new arrivals. As a result, only 6,595 people of concern received shelter support instead of the 10,000 intended, and only 1,530 shelter kits were distributed instead of the 2,000 that were originally planned.

In Myanmar, UNHCR and partners continued to prioritize reconstructing temporary shelters in camps hosting Rohingya. However, limited funding for shelter and the rapid degradation of temporary shelters (built to last two years) caused by local weather conditions meant that only 380 of the 800 communal shelters targeted for reconstruction could be rebuilt.

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Rohingya refugee volunteers work to avert monsoon damage in Bangladesh



Volunteers were at the forefront of a drive to protect residents of the sprawling refugee settlements as the cyclone and monsoon season approached.

While humanitarian agencies strengthened essential infrastructure and pre-positioned relief items in the settlements, the shift in emergency planning is towards a community-centred approach.

Volunteer community outreach members went house-to-house, spreading information and awareness about how families can better protect themselves and their shelters. At the same time, UNHCR focused on improving the fragile and densely-crowded refugee

settlements, building kilometre after kilometre of roads, steps and bridges. Drainage, water and sanitation systems and upgraded shelters were installed and built, tie-down kits and plastic tarpaulins distributed to families, and emergency items pre-positioned.

