

## Tools and Guidance

The below documents can be found on the intranet page for [Alternatives to Camps](#)<sup>1</sup> and <http://www.urbangoodpractices.org>.

- **UNHCR Global Strategy for Public Health 2014-2018:**<sup>2</sup> Provides the direction for public health, food security and nutrition, HIV and reproductive health and water, sanitation and hygiene services in 2014-2018.
- **UNHCR's Principles and Guidance for Referral Health Care:**<sup>3</sup> Offers practical principles and guidance on how to plan and implement a country level health referral scheme for refugees and others of concern.
- **A Guidance Note on Health Insurance Schemes for Refugees and other Persons of Concern to UNHCR:**<sup>4</sup> Provides guidance on how to make health insurance accessible to refugees.
- **Household Access and Utilization Survey (HAUS):**<sup>5</sup> Allows UNHCR to monitor trends in how urban refugees access and utilise health services over time in urban settings and the effectiveness of health information, education and communication messaging.
- **Ensuring Access to Education<sup>6</sup> and Health Care<sup>7</sup> in urban areas:** Provides guidance on education and health care in urban areas with a focus on mainstreaming refugees into existing structures.
- **Education Briefs:**<sup>8</sup> *Brief 4: Mainstreaming Refugees in National Education Systems*<sup>9</sup> provides basic guidance on inclusion of refugees into national school systems, including advice on actions to take if the legal and/or policy framework does not allow refugees access to the national system.
- **UNHCR Education Strategy 2012-2016:**<sup>10</sup> Sets the direction for education in 2012-2016.
- **Innovating in Education:**<sup>11</sup> Up-to-date information on UNHCR and partner innovation in education, including Skype in the Classroom, Connected Learning and Ideas Box.

For more tools and guidance for health and education, please visit the [Alternatives to Camps intranet page](#)<sup>12</sup>.

1 <https://intranet.unhcr.org/intranet/unhcr/en/home/policy-and-guidance/dpsm/unhcr-policy-on-alternatives-to-camps/alternatives-to-camps--making-it-work--good-practice-and-guidanc.html>  
2 <http://www.unhcr.org/520f12d26.html>  
3 <http://www.unhcr.org/4b4c4fca9.html>  
4 <http://www.unhcr.org/4f7d4cb1342.html>  
5 [https://www.google.ch/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0CCEQFjAAhUKewj4rT51rJAHWGwXQKb95Ceg&url=https%3A%2F%2Fdata.unhcr.org%2Fsyrianrefugees%2Fdownload.php%3Fid%3D7111&usq=AFQjCNH8rhMqo43KW3VvYgcvDNXalRCA&sig2=5CnhHkVjGw7\\_DbZ2lsFopp](https://www.google.ch/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0CCEQFjAAhUKewj4rT51rJAHWGwXQKb95Ceg&url=https%3A%2F%2Fdata.unhcr.org%2Fsyrianrefugees%2Fdownload.php%3Fid%3D7111&usq=AFQjCNH8rhMqo43KW3VvYgcvDNXalRCA&sig2=5CnhHkVjGw7_DbZ2lsFopp)  
6 <http://www.unhcr.org/4ea9552f9.html>  
7 <http://www.unhcr.org/4e26c9c69.pdf>  
8 <http://www.unhcr.org/cgi-bin/text/vtx/search/?page=&comid=560be1de6&cid=49aea93ae2&scid=560be09a6&keywords=ed-brief>  
9 <http://www.unhcr.org/560be1493.html>  
10 <http://www.unhcr.org/5149ba349.html>  
11 [http://innovation.unhcr.org/labs/learn-lab/#\\_ga=1.145570036.1378745568.1446313739](http://innovation.unhcr.org/labs/learn-lab/#_ga=1.145570036.1378745568.1446313739)  
12 <https://intranet.unhcr.org/intranet/unhcr/en/home/policy-and-guidance/dpsm/unhcr-policy-on-alternatives-to-camps/alternatives-to-camps--making-it-work--good-practice-and-guidanc.html>

## Call for Good Practices

If your operation is engaging in successful practices regarding adapting service delivery in light of alternatives to camps, we invite you to share it with us to help improve situations across the organization by sending an e-mail to [hqatc@unhcr.org](mailto:hqatc@unhcr.org).

## More Information

Please contact [HQPHN@unhcr.org](mailto:HQPHN@unhcr.org) (health) and [HQEDUC@unhcr.org](mailto:HQEDUC@unhcr.org) (education) for more information on adapting service delivery.



An Afghan refugee receives basic health care. The new health insurance scheme will help the seriously ill and the vulnerable.  
UNHCR / Z. Soleimani

contact info: [hqatc@unhcr.org](mailto:hqatc@unhcr.org)



Through the Alternatives to Camps Series, UNHCR provides key guidance, useful approaches, tools and good practices to support the implementation of the key actions outlined in the *Policy on Alternatives to Camps*. The Series also includes a call for sharing your good practices.



Tanzania/ UNHCR/  
Brendan Bannon/ 2009

# Alternatives to Camps Making It Work

## GOOD PRACTICE AND GUIDANCE SERIES



### Key Action #3 Adapting Service Delivery

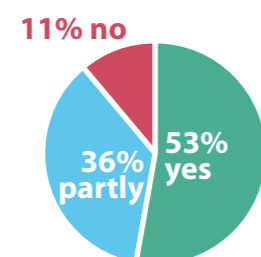
#### THE POLICY SAYS

The implementation of the *Policy on Alternatives to Camps* requires UNHCR to adapt service delivery in areas such as education, public health, nutrition, water and sanitation to support alternatives to camps and needs of refugees living in host communities. This calls for operations to phase out parallel delivery systems in favour of mainstreaming into national, local and community-based systems and structures. It also calls for the development of new models and approaches, such as the use of mobile teams, enhanced referral mechanisms, enrolment of refugees in health insurance schemes and expanded access to public education, host country universities and distance learning programmes.

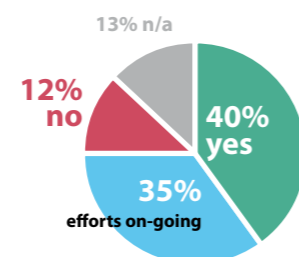
# The Diagnostic Tool for Alternatives to Camps

The *2015 Global Results of the Diagnostic Tool for Alternatives to Camps*<sup>1</sup> suggest that UNHCR has made progress in ensuring access of refugees to the health care and education systems in the host countries but that we have some work ahead.

Refugees integrated into national health care systems



Refugees integrated into national education systems



<sup>1</sup> <http://www.unhcr.org/5548c33b6.html>

## Key Tips and Actions

Please find below some key tips that can help you to implement **Key Action #3 on Adapting Service Delivery**, together with the other key actions of the *Policy on Alternatives to Camps*, in a comprehensive and mutually reinforcing way.

### ADVOCATE

- Advocate that public health and education services for refugees are made sustainable by integrating them within the national public system, whenever feasible.
- Leverage global and national commitments to the Sustainable Development Goals,<sup>1</sup> as well as national legal and policy frameworks to advocate for inclusion of refugees in national systems.

### ALIGN

- Where parallel services in camp settings are necessary due to policy or geographic barriers, ensure that services align as closely as possible with national systems and standards.
- Ensure that refugees are benefitting equally to nationals for essential free packages of services, if available in the country (e.g., vaccination, maternal and child health care, HIV programmes, tuberculosis and malaria).

### PARTNER

- Partner with a wide range of actors, especially governments and relevant line ministries, development partners, bilateral donors and other UN agencies to reach an integrated approach. Support under partners to adapt to mainstreamed programming.
- Promote the capabilities of refugees who participate in meeting health challenges in their communities to allow these principles to be fully realized.

### PLAN

- Engage in national sector development planning mechanisms to ensure refugee coverage in annual and multi-year sector plans. This is especially important for education as UNHCR now has an opportunity to advocate for inclusion of refugees on the basis of commitments to education for refugees under Sustainable Development Goal 4<sup>2</sup>.
- Assure expert assessment prior to planning integration strategies for health, WASH and education, as well as for health insurance schemes with support from DPSM and DIP.
- Health Insurance is not a requirement for refugee integration in national health care programmes.
- Ensure relevant programming to support successful inclusion of refugees in national schools, such as language classes, teacher training, academic support, social cohesion activities, etc.
- Commit to multi-year planning and programmatic changes related to health and education integration and/or transformation into alternative financing models.

<sup>1</sup> <http://www.un.org/sustainabledevelopment/>

<sup>2</sup> <http://www.un.org/sustainabledevelopment/education/>

## Highlights from the Field

### EDUCATION PROJECT IN RWANDA

In Rwanda, UNHCR developed the Inclusive Refugee Education Management Programme in collaboration with the Ministry of Education, the Ministry of Disaster Management and Refugee Affairs, UNICEF, national NGOs and INGOs. The goal was to improve the educational programming for both refugee children in camps and host community children through greater delivery of education in the local public schools.

Key activities included monitoring student learning achievement, providing psychosocial services to students, teacher training and mentoring, strengthening of Parent Teacher Associations and the construction of additional school infrastructure. The outcome provided free public education for refugee children that is certified, transferable and monitored with government-funded teachers and material support for all students. The social integration of refugees within the public school contributed to improved national teacher capacity, student enrolment, attendance and performance.

### ACCESS TO NATIONAL HEALTH INSURANCE SCHEMES IN GHANA AND IRAN

In Ghana, UNHCR with the Ministry of Health developed a three-year plan designed to enrol refugees into the national health insurance programme. The plan enables refugees to access health services in similar ways to nationals while improving service structure. UNHCR invested in the upgrade of the healthcare facilities to ensure that the national standards are met. The health facilities are handed over to service providers that are registered with the Ghana Health Services.

In 2011, UNHCR launched the Health Insurance Scheme (HISE) with the government of the Islamic Republic of Iran under a contract with a local private insurance company. HISE aimed to provide coverage and access to health care for vulnerable refugees identified through a series of pre-determined criteria. Today, the agreement has been expanded to allow the approximately 1 million registered Afghan and Iraqi refugees to benefit from the national health insurance scheme.

### SYRIAN REFUGEES IN EGYPT'S NATIONAL HEALTH PROGRAMMES

In 2012, the Government of Egypt issued a Ministerial decree by the Ministry of Health (MOH) that enables Syrian refugees to access to MOH health services. Encouraged by this decree, UNHCR engaged a plan to integrate the Syrian refugees into national primary health care services. Through the two-phased strategy developed by UNHCR, Syrian refugees targeted by the programmes, exceeding 133,000 persons, were enabled to access the same national primary health care services as provided to Egyptians at a nominal fee, including birth registration, free full routine vaccinations and free access to essential drugs.

Coordination with MOH and UNHCR's health partners ensured consistent and transparent messaging to the Syrians refugees. Several barriers still exist to the utilisation of services by the poorest refugees. UNHCR supports these refugees in accessing the regular national health services and monitors access and utilisation of the services through the *Household Access and Utilization Survey (HAUS)*, which ensures support for refugees who cannot afford the fees.

Somali refugee children attend class in a UNHCR-supported school in Ethiopia. UNHCR/ J. Ose / June 2012

