UNHCR AGE, GENDER AND DIVERSITY ACCOUNTABILITY REPORT 2017
Being disabled doesn’t define me, what I am, who I am or what I can do ... People don’t realize how hard we’re all trying to rebuild our lives from zero. I’d say to them: Try to get to know us. There’s more inside us and inside you than everyone thinks.

Adolescent Syrian refugee
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UNHCR Age, Gender and Diversity Accountability Report 2017
EXECUTIVE SUMMARY

The United Nations High Commissioner for Refugees (UNHCR) recognizes that differences between people, whether actual or perceived, can play a central role in determining a person’s experiences, opportunities, capacities and needs prior, during and after displacement.

At the heart of UNHCR’s Age, Gender and Diversity (AGD) approach is the idea that persons of concern are able to enjoy their rights, irrespective of their age, gender, socio-cultural background, religious beliefs, ethnic background or other characteristics, and that programmes and interventions are decided and designed with them, with a view to building on their strengths and capacities.

All UNHCR staff regardless of their grade, function and responsibility are required to implement the AGD approach throughout their work, ensuring the inclusion and participation of persons of concern (PoC) at all stages of the operations management cycle.¹

The 2017 AGD Accountability Report presents the activities undertaken by UNHCR to implement the AGD approach. It is structured around the key challenges that were reported by diverse groups of concern during participatory assessments, and provides examples of promising practices and innovative projects that were implemented by UNHCR and partners to overcome these challenges.

The various age, gender and diversity groups reported a number of challenges, some of which are common across populations, while others are specific to a group of persons of concern. The challenges highlighted in this report are not exhaustive and only provide a snapshot of the most common issues, as reported by persons of concern during various consultations.

¹ UNHCR has recently issued a new AGD policy which updates the 2011 AGD policy and incorporates core actions to strengthen commitments to women and girls as well as UNHCR’s accountability to all persons of concern. A new structure for AGD reports will therefore be introduced in 2019 which will begin measuring progress against the core actions set out in the new policy. The updated AGD policy is available at: http://www.refworld.org/docid/5bb628ea4.html.
SOME OF THE MAIN CHALLENGES REPORTED ARE:

Gender, cultural and societal norms limit meaningful participation in community and decision-making structures – a common issue reported by most AGD groups.

Limited services, weak referral systems, lack of staff with case management expertise, under-reporting due to fear of social stigma and discrimination, isolation and cultural stigma of persons with disabilities hamper effective and timely response to sexual and gender-based violence (SGBV) and sexual exploitation and abuse – a priority issue for women, lesbian, gay, bisexual, transgender and intersex (LGBTI) persons, minorities and indigenous persons, persons with disabilities and children.

Restrictive gender roles, domestic responsibilities and limited options for child care, limited economic opportunities, linguistic barriers, lack of formal training or qualifications, limited mobility and access to resources hamper equal access to safe and sustainable livelihood opportunities – highlighted by women, older persons, persons with disabilities and youth.

Limited access to services for health and basic needs – a challenge for women, persons with disabilities and older persons.

WAY FORWARD

In response to the challenges identified by operations in the AGD reporting, the following measures are under consideration:

1. To improve our capacity to identify groups and individuals at heightened risk, such as minorities and indigenous persons, LGBTI persons, older persons, and persons with disabilities, innovative approaches and existing successful practices – such as community outreach volunteers or the use of specific identification tools at registration – will continue to be promoted across UNHCR operations, namely through technical support missions, communities of practice and the annual AGD report.

2. To have a better understanding of the diverse needs of persons of concern and in compliance with the updated 2017 AGD Policy, UNHCR will invest further in data collection – broken down by age, sex and diverse characteristics. Existing methods of data collection to disaggregate data are being strengthened, including but not limited to biometric registration. Better analysis based on disaggregated data will support identification of effective solutions that advance gender equality and counter discrimination against different population groups such as persons with disabilities. Qualitative data will also be used to build the evidence base on needs and capacities within communities and will improve tailored responses which consider the many characteristics of each person of concern. This will also be one of the key requirements for the ongoing revision of the results-based management (RBM) system.

3. The updated AGD policy will be implemented with a particular focus on building and supporting the resilience and capacities of communities, families and individuals.
Importantly, UNHCR operations will pay particular attention to better recognizing the contributions of older persons and persons with disabilities, among others, in other words, they are not passive recipients of assistance, but are valuable resources and can be strong community leaders. As such, their skills and capacities will be made more explicit in operational planning and delivery.

Community ownership and accountability to affected people will be strengthened by better involving persons of concern in the development and implementation of programmes and by systematically using information from feedback and participatory assessments.

To increase women’s participation in leadership structures, UNHCR operations will prioritize accompanying measures such as easing women’s domestic burden through building stronger community support structures and raising awareness among displaced and host communities about equal roles for women and men within society. More programmes are needed that assist in positively transforming gender relations which include impact assessments and continuous input from women of concern on how to improve protection and assistance services.

AGD approaches constantly need to be reinforced and mainstreamed across UNHCR programmes and activities, with the support of international and local partners to improve the response to protection challenges faced by diverse groups of concern. Building capacity of staff and partners continues to be important to counter discrimination and ensure equal access to services.

Opportunities arising from the Comprehensive Refugee Response Framework (CRRF) and the Global Compact for Refugees must be leveraged, as well as linkages with various new and existing actors in refugee and humanitarian settings.

Stigma and discrimination within the community and by service providers – a challenge for persons with disabilities, LGBTI persons, minorities and indigenous persons.

Reluctance to come forward due to previous experiences of violence and discrimination, social and cultural stigma and isolation, limiting inclusive and confidential identification – for persons with disabilities and LGBTI persons.

Social and cultural norms, discriminatory legislation, language barriers, lack of effective birth registration systems, restrictions to the right to be registered (at birth) for displaced populations impede access to national identity registration and documentation procedures for minorities, indigenous persons and children. Women also experience difficulty in obtaining nationality rights on par with men.

Separation from parents or care-givers limits access to protection and solutions for unaccompanied and separated children (UASC), while restrictive gender roles, economic hardship, insufficient educational infrastructure and capacity, language barriers and unfamiliarity with the curriculum in host countries contribute to limited access to quality and safe education for children and youth.
CHAPTER 1: INTRODUCTION

The Age, Gender and Diversity Accountability Report presents the key trends and protection challenges for UNHCR operations and actions taken throughout 2017 to ensure that women, girls, boys and men of concern, from diverse backgrounds, have equal access to protection, assistance and solutions. All UNHCR staff are responsible for understanding age, gender and diversity (hereafter AGD) considerations and integrating them into their work, recognizing that traits such as age, sex, sexual orientation and gender identity, disability and belonging to a minority or indigenous group shape a person’s experience, capacities and protection needs. The 2011 UNHCR AGD Policy guides UNHCR staff in ensuring the equal participation of all refugees, asylum-seekers, internally displaced persons (IDPs), stateless people and returnees in all phases of the operations management cycle. Systematically applying an AGD approach and supporting community engagement throughout the operations management cycle is critical to achieving Accountability to Affected People (AAP) and to delivering effective protection and solutions for all persons of concern."
In March 2018, UNHCR updated the AGD Policy to further advance the notion of “putting people first”, as outlined in UNHCR’s strategic directions. The updated policy builds on UNHCR’s existing commitments, lessons learned, and achievements in the areas of AGD inclusion, gender equality and accountability to persons of concern. It also consolidates UNHCR’s existing commitments to AGD and AAP, as well as the High Commissioner’s five commitments to women and girls, recognizing that these complement and build upon one another. The policy recognizes UNHCR’s need to work with other actors, including governments, to address inequalities and to help build environments conducive to the enjoyment of rights and the self-reliance of persons of concern. While the findings of this report date to a period before the issuance of the updated AGD policy, the promising practices and examples of work presented in the different chapters also reflect the areas of engagement presented in the updated policy and indicate the direction in which UNHCR is moving.

This report highlights the recurrent protection needs identified by women, men, boys and girls of concern during participatory assessments and consultations, and the steps taken by UNHCR operations together with persons of concern to address them. The report will look at the following groups of persons of concern:

- Women;
- Persons with disabilities;
- Older persons;
- LGBTI persons;
- Minorities and Indigenous groups;
- Children; and
- Youth.

The primary data used for this report is the mandatory AGD narrative reporting submitted by UNHCR country operations, regional offices and headquarters, as part of the year-end annual reporting. The information is submitted through UNHCR’s RBM tool, Focus. One other element of the AGD reporting is the reporting on indicators. Each year, operations select a number of indicators from the set of indicators in the RBM framework, which best correspond to each specific situation. This allows operations to adapt programmes and change the indicators reported as the context changes. However, this makes year-to-year comparison challenging. This report uses the term “situation” to refer to the situation of a specific population group representing persons of concern within a UNHCR operation who share common needs, including refugees, asylum-seekers, IDPs, stateless persons and returnees, and/or persons of concern in various geographical locations within a country/region. There can be multiple “situations” in one operation. UNHCR monitors each situation in order to adapt its response and therefore one operation may report on the same indicator twice or more. This report compiles and analyses AGD reporting from a total of 72 country operations, 16 regional offices and six headquarters divisions covering around 300 “situations”.

Headquarters have also provided information in addition to AGD reporting, such as internal mission reports, briefing notes, donor reports, staffing statistics and different project updates. The AGD reporting at the operational level is based on data collected from persons of concern during participatory assessments, various consultations and through monitoring activities. In addition, the report draws on other UNHCR and partner publications that describe UNHCR’s AGD activities in 2017. Unless otherwise cited, all information included in this report is derived from UNHCR's 2017 reporting.

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4 The six areas of engagement as presented in the updated AGD policy are: (1) AGD-inclusive programming; (2) Participation and inclusion; (3) Communication and transparency; (4) Feedback and response; (5) Organizational learning and adaptation; and (6) Gender equality and commitments to women and girls.
CHAPTER 2: IMPLEMENTING THE AGD APPROACH

This chapter discusses the key trends that emerged from UNHCR operations’ reporting on women, persons with disabilities, older persons, LGBTI persons, minorities and indigenous persons, children and youth. It presents the protection needs that were identified during participatory assessments and consultations, and highlights examples of how these were addressed by UNHCR operations together with persons of concern and in collaboration with other stakeholders and partners. It should be noted that these groups are not homogenous, and that each person has a unique multi-layered identity, which, depending on the context, can either enable or hinder access to rights, protection and assistance.

MAP: PROMISING PRACTICE HIGHLIGHTED IN THIS REPORT FROM VARIOUS UNHCR OPERATIONS
AAP Systems*

* All examples of engaging with and including different groups in the communities we work with are a demonstration of our efforts to being accountable to affected people. AAP systems reflects instances where these efforts were implemented in a systematic manner.
2.1 Women

KEY TRENDS THAT EMERGED FROM THE ANALYSIS OF UNHCR’S WORK WITH WOMEN IN 2017:

1. The impact indicator “% of active female participants in leadership/management structures”, was reported for 66 refugee and IDP situations, of which 66 per cent showed satisfactory levels of female participation (over 35% of active female participants in leadership/management structures, see Figure 1).

2. From the 125 refugee, IDP and returnee situations that reported on the impact indicator “Extent to which known SGBV survivors receive appropriate support”, 63 per cent showed an improvement. In addition, 74 refugee, IDP and returnee situations reported on the impact indicator “Extent to which community is active in SGBV prevention and survivor-centred protection”, of which 76 per cent reported an improvement.

“[…] they [women of concern] wished to be able to choose what project they will initiate, and be part of the planning discussions […] instead of fitting into an existing livelihoods project […] that isn’t conducive for the skills or interests that they have.”

UNHCR Ghana

UNHCR operations conducted participatory assessments and focus group discussions with women of concern of all ages. Despite the reported levels of female participants (see figure 1), one of the main challenges cited by women was low participation in decision-making and leadership. Exposure to SGBV, a lack of livelihood opportunities and the inability to access quality medical services, including for sexual and reproductive health, were all cited by women as barriers to the full enjoyment of their rights.

Participation and Leadership

UNHCR is committed to ensuring that women and girls participate on equal terms in management and leadership structures as well as decision-making processes (e.g. in camp management committees and neighbourhood associations). Some operations reported parity in leadership structures, such as UNHCR Kenya, which reported an increase from 35 per cent to 50 per cent of female representation on committees. A major reason this has been possible is because of the development of inclusive spaces that encourage women’s participation. Women, often in challenging socio-cultural and political contexts, access these spaces and participate with the purpose of voicing their challenges, needs and capacities, and with the aim that they can influence decision-making and resource allocation. This has been possible through the development of leadership and management structures that are context-specific. For example, single sex meetings, safe spaces, individual interviews, home visits and focus group discussions, amongst others. A one size fits all approach is to be avoided, with these leadership and management structures and decision-making processes developed based on knowledge of social norms, traditional practices and the economic and political status of the displaced communities, including that of women in the community.

Significant challenges remain not just in terms of equal participation, but also in terms of making this participation meaningful. Predominant amongst the challenges are societal constraints that limit the participation of women and girls in decision-making processes and leadership/management structures. This means that UNHCR and its partners must invest heavily and consistently in gender equality awareness raising within communities. To ensure representation, UNHCR has established a quota for women’s representation in leadership and management structures and decision-making processes as a strategic tactic in achieving the goal of equal participation. However, this alone does not guarantee effective participation nor does it ensure that challenges raised by women will be addressed or prioritized during the resource allocation process. Additionally, while the practical gender needs of women may, at some level, be addressed through these processes, e.g. access to water or healthcare, which fall within women’s socially defined roles, it does not necessarily bring attention to women’s status in society, the unequal distribution of power, nor does it...
facilitate any positive transformation in gender roles. Addressing gender inequalities and changing people’s attitudes requires sustained action and investment over the long term, and is everyone’s responsibility.

Consultations revealed that barriers to women’s participation were also related to the burden of activities, including domestic chores and income generation activities women have to perform. For example, operations in UNHCR Tajikistan and UNHCR Uganda reported low participation of women in volunteer leadership structures, as most of them had to pursue income-generating activities or had other competing responsibilities which limited their availability.

To overcome some of these barriers, UNHCR operations engaged women of concern in leadership training, management training and community sensitization activities, including the establishment of community spaces for women and their children. UNHCR Tanzania engaged female refugees in town hall meetings and community representative meetings to strengthen their participation in leadership structures. Community elections were held and, by the end of the year, female representation in leadership structures had increased to 50 per cent. UNHCR Operations in Cameroon and Mauritania have established child-friendly spaces and pre-school centres, while in India the operation integrated Rohingya children in government-run day-care centres to ease the domestic burden and encourage women’s participation in camp activities.

UNHCR Malaysia provided training and channelled resources to strengthen the capacity of women to actively participate in the community and leadership structures. This resulted in 131 refugee women taking up community leadership positions, with six of them heading community-based organizations. Similarly, UNHCR Zambia, along with its implementing partners, strengthened women’s engagement in community activities by providing opportunities for them to develop leadership skills. Members of the Great Lakes Women Refugee Association in Zambia and other female refugee leaders were trained in community mobilization, legislation and case management. These leaders later rolled out the trainings to five communities, reaching out to both refugees and host population.

UNHCR Turkey and its partners created opportunities for engagement of women and continued to support women’s committees in camps, as well as the establishment of Syrian women’s committees in urban areas. These committees focused on raising awareness on women’s rights, including SGBV prevention and response, with committee members disseminating information on education, civil registration, rights and assistance. The committees furthermore helped promote participation, empowerment and ownership of activities among refugee women through open discussions about problems and solutions.

As gender equality requires the engagement of all community members, UNHCR India and partners worked with the Rohingya refugee community to sensitize them on women’s rights and the positive impact of women’s active involvement. This included awareness sessions with men and boys on the protection challenges faced by women, trainings, focus group discussions and various events organized for 16 Days of Activism against Gender-Based Violence. Safe spaces were created to strengthen women’s groups to confidentially discuss protection issues such as domestic violence, women’s and girls’ education and child marriage. Further, Rohingya women served as outreach volunteers to sensitize the wider community on social protection issues. As a result, the operation reported a two-fold increase (21% to 46%) of Rohingya women in leadership structures.

**Figure 1: Female Participation in Leadership Structures**

* Active participation occurs when women participate in all meetings and discussions and have equal authority to men, including in decision-making. Leadership structures refer to any structure fully or partially comprising persons of concern, which seeks to represent the interests of a given population of persons of concern and influence decisions which will affect them.
Sexual and Gender-Based Violence

Exposure to SGBV was highlighted in all regions, with persons of concern facing SGBV in countries of origin, during transit and while seeking asylum. The protection needs of SGBV survivors include immediate medical attention and psychosocial counselling. In many contexts women and men living in poverty are exposed to increased risk. For instance, some resort to sex work or work in unsafe conditions where they face sexual harassment, physical abuse and even sexual violence. All forcibly displaced and stateless persons are at risk of SGBV: women and girls, men and boys, adolescents and youth, persons with disabilities, minority and indigenous peoples, as well as people with diverse sexual orientations and gender identities are impacted by SGBV. UNHCR has worked to develop the capacity of all staff to address SGBV, for example, by recently launching a Training Package on specific aspects of SGBV, such as working with male survivors of sexual violence.⁵

Some operations reported challenges responding to the needs of SGBV survivors, including limited services, weak referral systems and a lack of staff with specific expertise for case management. Victims’ fear of social stigma and discrimination also led to under-reporting of SGBV incidents. To address these challenges, UNHCR has engaged with partners to strengthen linkages with local actors and has improved the response to SGBV survivors by providing safe shelters and access to legal and medical support, including psychosocial services. For example, the Americas region established the Regional Safe Spaces Network, to promote detection of and response to SGBV, as well as to other serious violations of human rights that occur throughout the displacement continuum and across international borders. The network comprises UN and non-governmental organizations, national institutions, civil society, community volunteers and associations working in Guatemala, Mexico, Costa Rica, Venezuela, and Colombia. Network members developed common tools to provide a minimum package of services under harmonized standards, including multi-country case management, legal aid, medical care, mental health and psychosocial support (MHPSS), safety, shelter, basic needs, as well as communicating information about these services to displaced communities.

In Lebanon, UNHCR collaborated with the International Rescue Committee (IRC) to enhance outreach and provide mobile SGBV prevention and response services in five districts.⁶ The aim of the project is to provide information and strengthen case management for SGBV survivors and women at risk. It targets women and girls whose movements are restricted due to social or physical barriers. The mobile services include psychosocial support, case management, referrals to service providers, life-skill training, age-appropriate support groups and dedicated activities for adolescent girls.

With the aim of mobilizing community members to combat SGBV, operations such as UNHCR Brazil used an innovative approach that recognizes the role of art and sports in creating societal change. UNHCR, together with a local partner, engaged 20 refugee men in discussion groups on gender violence and masculinity using rap music as a facilitation tool. As a result, the group produced a music video on gender-based violence, race relations, and the importance of men engaging in SGBV prevention and response.

By applying a community-based approach, operations, such as in the Central African Republic created referral mechanisms that strengthened a community-based response to SGBV. UNHCR trained volunteer groups and equipped refugee leaders with mobile phones to help link survivors to services. The volunteer groups refer survivors to services and ensure continuous follow up. Community-complaint mechanisms were developed which improved referral of SGBV cases, ensuring that survivors receive appropriate medical, psychosocial and socio-economic support.

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Livelihoods

Women consistently reported access to livelihood as a major issue limiting their economic independence. Women recognized the impact of meaningful and decent employment on solving their protection concerns. However, lack of such opportunities can push women to work in informal sectors, where they are exposed to heightened risks, including sexual harassment and abuse. Operations such as Costa Rica and Tajikistan also identified a link between the lack of identity documentation, lack of proof of nationality and livelihoods, limiting women’s employment opportunities as well as their access to services and inheritance rights to land. Identifying root causes and raising awareness on such linkages is necessary in developing a response. For example, UNHCR Costa Rica, as part of the UN Country Team Gender Inter-Agency Group, organized events to advocate and start actions on those issues during the 16 Days of Activism against Gender-Based Violence.

Recurring barriers to access work and decent working conditions that female persons of concern face include:

- Restrictive gender roles and disproportionate domestic responsibilities;
- Limited economic opportunities in forced displacement contexts, including legal restrictions on accessing such opportunities;
- Linguistic barriers;
- Lack of formal training and qualifications;
- Limited options for child care; and
- Restrictions on women’s freedom of movement and access to resources.

In response to these challenges, operations have worked with partners to provide educational opportunities, vocational training, support to establishment of businesses, creating safe spaces for children and cash-based interventions (CBIs). In countries such as Argentina, Burkina Faso, Costa Rica, Ecuador, Egypt, Mozambique, Sudan, Zambia and Zimbabwe, UNHCR implements livelihood activities employing the Graduation Approach which
is a time-bound, sequenced livelihoods intervention. The Graduation Approach has proven effective in supporting people living in extreme poverty and other high-risk populations, including female-headed households, to achieve sustained income. Operations have also provided cash assistance to female-headed households and women at risk. In Burkina Faso material support is provided to women of concern for income-generating activities. Continuous monitoring of activities and focus group discussions revealed that through the support received, women can provide for their families and are less likely to resort to negative coping mechanisms.

In refugee settings, artisan work is often used for economic empowerment but also serves as a form of therapy for women, as they come out of isolation by participating and creating bonds that help them heal. The Market Access, Design and Empowerment of Refugee Artisans (MADE51) initiative aims to meet the economic needs of women of concern by modernizing traditional skills and building business acumen. By partnering with social enterprises, refugee artisans are linked with retail brands and buyers who can source and support the product lines, which resulted in the development of refugee-made product lines in 11 countries for market-testing at the Maison et Objet trade show in Paris.

UNHCR operations have engaged in several initiatives to create and sustain livelihood opportunities for women of concern. UNHCR India supported two women-led livelihood initiatives: one provided support to a group of Afghan refugee women to establish a catering business, which also included training in professional cookery. The business sold its products via food kiosks at local fairs. The other initiative supported a catering group comprised of Somali women with the development and production of brochures and pamphlets, training in business development and group dynamics, as well as financial support to set up stalls at events. In addition, ten female self-help groups were given help in strengthening their saving habits by training them in repayment modes and the utilization of funds. The savings accumulated from these self-help groups enabled some refugee women to take loans to establish or strengthen their businesses.

To understand the impact of programme delivery and ensure effective services, UNHCR Ecuador conducted a mixed-methods research on the outcomes of CBIs in addressing SGBV as part of the Graduation Approach. Respondents overwhelmingly felt that the model helped to reduce their risk of exposure to violence and contributed to increasing their personal resilience and self-esteem. They noted that poverty and financial uncertainty can trigger violence in the household, so that cash has functioned as a protective factor. Research from this study supports the theory that cash transfers made to women within one household lead to wider positive welfare outcomes for the entire family. The research also found cash has a greater preventive effect when complemented with services such as psychosocial support, financial literacy training and training on rights.

In Syria, where the crisis has changed the social role of women within family structures and increased their exposure to different protection risks, UNHCR and partners have focused on providing livelihood opportunities to women to empower them, build their capacities and self-esteem, promote community ownership and thus reduce the effects of harmful coping mechanisms. UNHCR helped rehabilitate two vocational training schools benefiting around 30 female students and offering courses on welding, electrical maintenance, car maintenance, information technology, plumbing and carpentry. The office also supported other livelihood initiatives through the provision of plastic sheets and seeds for greenhouses, as well as live poultry, poultry cages, and other supplies necessary for poultry production.

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7 UNHCR Livelihoods Unit in the Division of Programme Support and Management, e-mail message to author, 7 May 2018.
9 Made51 countries are Afghanistan, Burkina Faso, Egypt, Jordan, Kenya, Lebanon, Malaysia, Pakistan, Rwanda, Tanzania and Thailand.
Access to Quality Medical and Sexual and Reproductive Health Services

Women face particular health risks in the context of forced displacement and statelessness. High rates of maternal and infant mortality, unwanted pregnancies, and health risks associated with human immunodeficiency virus (HIV) and sexually transmitted infections (STIs) are the result of limited access to adequate sexual and reproductive health care facilities. For example, focus group discussions conducted with women of concern by the regional office in South Africa revealed how they face challenges in accessing health care. These discussions emphasized that interrelated protection gaps expose women to a number of risks, including HIV and acquired immunodeficiency syndrome (AIDS). Some operations also reported lack of female medical staff as a challenge. For example, UNHCR Bangladesh reported that registered women in camps felt uncomfortable accessing health services, because of the lack of female doctors and nurses. Language barriers and unfamiliarity with available community resources were also some of the issues raised in accessing health care. The operation advocated with partners, resulting in the successful recruitment of female staff and Rohingya speakers.

A significant but often overlooked issue faced by over 26 million displaced girls and women is the ability to privately, safely and comfortably manage their monthly menstruation. A longstanding commitment made by UNHCR to refugee women and girls has been the provision of sanitary materials as standard practice. UNHCR has collaborated with the IRC and Columbia University on a project supported by Research for Health in Humanitarian Crises (R2HC). This project, menstrual hygiene management (MHM) in emergencies, aims to improve the guidance available to humanitarian responders to incorporate MHM into their programming during emergencies.

UNHCR continues working to ensure the provision of quality medical, sexual and reproductive health services by supporting local actors for referrals and services. Operations also collaborate with partners to develop

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BOX 1: ADDRESSING GENDER DISCRIMINATION AND STATELESSNESS

UNHCR’s #IBelong Campaign to End Statelessness and its Global Action Plan to End Statelessness specifically target the problem of gender discrimination in nationality laws, which is a leading cause of statelessness globally. Women can be left stateless if their nationality status is dependent on that of their male spouse. Where women are prevented from conferring their nationality, their children and spouses can also be left stateless. During 2017, after persistent campaigning, Madagascar and Sierra Leone amended their nationality laws to allow women to confer nationality on their children on an equal basis as men. This brought the total number of countries that discriminate on this issue in their nationality laws down from 27 to 25.

In 2017, UNHCR supported a number of regional initiatives that sought to address gender discrimination in nationality laws. In West Africa, further to the Abidjan Declaration of the Economic Community of West African States (ECOWAS) on Eradication of Statelessness, adopted by ECOWAS Member States in 2015, the same States adopted the legally binding Banjul Plan of Action, in which they committed to ensuring that women and men have equal rights to confer nationality on their children. In October, the 12 Member States of the International Conference of the Great Lakes Region also signed a Declaration on the Eradication of Statelessness and an accompanying Plan of Action, which commits those States to ensure all have equal rights to acquire, change and retain their nationality, and to confer their nationality on their children and spouses. Also, in October 2017, the League of Arab States (LAS) conference on strengthening women’s nationality rights produced an Outcome Statement that promotes gender equality in the acquisition, change, retention or conferral of nationality, leading to the LAS Ministerial Declaration on Belonging and Legal Identity in February 2018. The Ministerial Declaration calls for gender-equal nationality rights in all countries in the region, as well as for all children to enjoy their right to a legal identity. These initiatives are already spurring momentum for law reform in countries such as Liberia, Sudan and Togo.


and implement best practices and guidance on improving support to persons of concern. This includes engaging community volunteers to publicize available services and to help identify cases. In 2017, the Inter-Agency group responded swiftly to manage the new influxes of refugees in Angola and Zambia, to provide the minimal initial services package (MISP) for reproductive health. This included support to survivors of sexual violence and essential HIV services, such as the continuation of antiretroviral (ART) treatment and other essential prevention and care activities, including the availability and distribution of condoms. In Uganda for example, the operation’s response to the HIV epidemic in the region also focused on prevention of mother-to-child transmission: 98 per cent of the 60,063 pregnant refugee women newly enrolled in the antenatal clinic received HIV tests, and 93 per cent of infants exposed to HIV were given ART therapy within 72 hours of birth.

Working with local actors and creating linkages are important factors in improving access to quality medical, sexual and reproductive health services. UNHCR Uganda has prioritized SGBV prevention and response, establishing systems for identifying and referring SGBV cases. This includes carrying out safety assessments and engaging communities in prevention and response with capacity building and awareness raising. The operation provided medical care for rape and sexual assaults, as well as trainings to improve staff capacity to deliver services for survivors. Overall, it is estimated that UNHCR supported services for the clinical management of sexual violence in 27 countries.

In Nepal, to improve access to psychosocial services for women of concern, UNHCR’s partner provided training in psychosocial counselling for government health staff, following which two hospitals planned to pilot projects in 2018 for psychosocial support services. Additionally, UNHCR ensured that pregnant women and nursing mothers received a nutritional allowance and were offered care by national health services, with some deliveries taking place in public health hospitals under the National Safe Motherhood Programme.

Refugee children also benefited from immunization services provided by local health facilities.

Working with partners on new methods of outreach has improved the spread of information and access to sexual and reproductive health services. UNHCR Israel collaborated with a local non-governmental organization (NGO) to train 11 Eritrean women as sexual and reproductive health outreach volunteers. A community centre run by a local NGO will be used as a space for the women to provide family planning consultation services, previously a taboo subject for this community.

### 2.2 Persons with Disabilities

The impact indicator “% of persons of concern with disabilities who receive services for their specific needs” was reported on for 103 refugee, asylum-seeker, IDP and returnee situations. Of these, 35 achieved the satisfactory range, reporting 80 per cent or above of persons with disabilities receiving services for their specific needs.

In line with the commitment made at the 2017 World Humanitarian Summit, UNHCR operations strengthened linkages with organizations of persons with disabilities, in order to improve inclusion and participation.

> The best way to fight misconceptions is for people to see you engaged in life. When they see me teaching … they begin to understand that I’m not defined by my disability.

A Syrian refugee with visual impairment who teaches music in Azraq camp – Jordan.

Operations reported that the most commonly cited challenges that persons with disabilities face relate to timely identification; discrimination – often resulting in exclusion from decision-making and community activities; violence; exploitation and abuse; and

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15 The thresholds for the indicator “% of persons of concern with disabilities who receive services for their specific needs” are: 80 per cent or above, satisfactory; 79–40 per cent, needs improvement; below 39 per cent, unsatisfactory. Of the total 103 situations that reported on this indicator, 10 were IDP situations including Bosnia and Herzegovina, Cameroon, the Democratic Republic of the Congo, Libya, Nigeria, Serbia, South Sudan, Syrian Arab Republic and Ukraine.
access to services such as health care and income-generating activities.\textsuperscript{16}

Identification

Under-identification of persons with disabilities is a major challenge highlighted by UNHCR operations. Lack of adequate data on persons with disabilities also limits the capacity of UNHCR to monitor equal access to assistance and to analyse protection risks. Due to cultural stigma, persons with disabilities may be kept hidden by their families. They are often not identified during registration and other data collection and needs assessment processes. Those who have been displaced many times, who live in dispersed urban settings, who are isolated in their homes, or with less visible impairments (such as those with hearing, visual, Intellectual and psychosocial disabilities) are particularly at risk of being overlooked. Children with disabilities may be at particular risk of not being registered at birth, which exposes them to further protection risks, such as statelessness. A number of operations, such as UNHCR Bangladesh, highlighted the impact which under-identification of persons with disabilities has on their ability to access services, including specialized services to address their specific needs. The operation advocated with national authorities to facilitate equal access to medical care for persons with specific needs, as well as supporting partners to increase access to such services, for example, by conducting home visits.

A number of operations have been working with local disability actors to strengthen inclusion of persons of concern with disabilities. Based on consultations with persons with disabilities, UNHCR Greece started an innovative project with a local partner to integrate refugees with disabilities in their work by increasing advocacy for their inclusion in operational programming and by training partner staff on their identification, as well as on promoting access to protection and assistance. To complement this, UNHCR improved the capacity to respond to the needs of those identified through a pilot programme providing community-based support arrangements.

\textsuperscript{16} UNHCR understands persons with disabilities to include those who have long-term physical, mental, intellectual or sensory impairments, which hinder their participation in society on an equal basis with others. This highlights that disability does not reside in an individual, but is contextual and is the result of interaction between societal and individual factors. See UN Convention on the Rights of Persons with Disabilities (2006) at: https://bit.ly/3ivfGUB.
Similarly, in **UNHCR Malaysia**, the office trained 54 NGOs on the identification and assessment of persons at heightened risk, including persons with disabilities as well as management of the referral system. UNHCR continues to support and provide guidance to these NGOs and, as a result, the operation recorded a 51 per cent increase in the identification of persons with specific needs in comparison to 2016 and consequently an increase in case referrals.

Many operations focused on enhancing timely identification of persons with specific needs through registration and other data collection processes. Challenges to identification of persons with disabilities include that identification is currently based largely on visual cues and self-identification, rather than on a consistent and non-stigmatizing approach to data collection. Challenges are exacerbated by a prevailing medical model approach to disability, with a focus on impairments. UNHCR organized a number of webinars for staff which presented guidance and examples of good practice in identification of persons of concern with disabilities. UNHCR also worked with partners to develop and integrate improved identification systems and pilot identification tools, such as the Washington Group set of questions (WGQ), into registration processes. For example, as part of the Inter-Agency Disability Task Force, **UNHCR Jordan**, in collaboration with Handicap International, trialled the WGQs during home visits to at-risk households under the Vulnerability Assessment Framework.

**UNHCR Mauritania** focused on identifying persons with specific needs by improving outreach programmes through continuous registration at the UNHCR centre and through home visits. In urban areas, the office has introduced a specific needs identification form for registration and protection staff to use to increase identification and assist with providing referrals and follow-up. In camps, the operation provided staff at the registration centre with training on the "Heightened Risk Identification" tool, which was systematically used during the biometric identity management system roll-out. At the registration centre, persons with specific needs are prioritized for expedited registration and protection services.

### Partnerships with community-based structures

Working with community-based structures is another valuable way of improving outreach and identification of persons with disabilities. UNHCR harnesses community strengths and builds capacity to identify persons with specific needs through community volunteers conducting home visits and engaging with community organizations. By linking up with service networks and providing support to access these networks, UNHCR recognizes that improved identification is an entry point to improved access to protection. For example, **UNHCR Ethiopia** promoted the participation and inclusion of persons of concern by collaborating with the refugee central committee, women’s associations, associations of persons with disabilities and youth associations. These community structures assisted with the identification of persons in need of material and other support, such as vocational training and livelihoods.

Engaging with people from both displaced and host communities who face similar challenges, stigma and discrimination can serve as a bridge between the two communities and help build cohesion and support networks. **UNHCR Ukraine** has collaborated with the National Assembly of Persons with Disabilities (NAPD) and with local organizations of persons with disabilities to strengthen the inclusion of persons with disabilities from both displaced and host populations. For example, UNHCR worked together with NAPD to build the capacity of local authorities to promote inclusion of persons with disabilities. This was done in collaboration with another local initiative to systematically improve inclusive education in schools attended by IDP children with disabilities. Capacity-building activities included technical assistance by providing equipment and trainings as well as renovating school buildings to improve accessibility.

Using a community-based approach to protection is one of the most effective ways to address the needs of those most at risk in the community. Realizing this, **UNHCR Bangladesh** and partners worked with community groups to increase community awareness about the social inclusion of persons with disabilities. As a result, some of these groups have implemented

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projects to improve the well-being of persons with specific needs, including persons with disabilities. For example, based on identified needs, two small-scale projects were initiated to repair the roads and improve access for persons with disabilities, pregnant women and children. The operation also recruited community outreach members to conduct home visits to share information on services and to assist with identifying persons with specific needs at heightened risk who need assistance.

When empowered and given the opportunity, persons with disability serve as a very strong resource. It is therefore critical that they are involved not only in identifying risks faced by their families and communities, but also in finding solutions and contributing to the decisions that affect them. For example, UNHCR Zimbabwe collaborates with an organization of persons with disabilities to regularly conduct meetings, campaigns and home visits to all persons with disabilities in the camp. The results of discussions feed into UNHCR’s implementation and monitoring activities. One example is establishing a sign language club with 20 members at the early childhood development centre to make education more inclusive and increase participation of persons with disabilities.

To mainstream AGD and improve programming interventions, UNHCR has promoted and sustained dialogues with strategic partners. This included engaging the International Disability Alliance (IDA) in the process towards the Global Compact on Refugees. Briefings were arranged through various and inclusive channels to inform disability actors about the CRRF and Global Compact on Refugees. In addition, a consultation on CRRF was organized between disability actors such as IDA and civil society actors. UNHCR also consulted with Inclusion International to share their knowledge on supporting decision-making and mitigating the risk of financial exploitation for persons with intellectual disabilities, also maintaining regular contact with the European Disability Forum to discuss the circumstances of refugees with disabilities in Europe. As part of the Special Olympics Cyprus National Games, a Unified Sports pilot project was implemented that engaged around 15 refugee youth from a reception centre with 30 Special Olympics Cyprus athletes. The refugee youth included boys and girls from Syria, Somalia, Yemen, Iraq and many other countries. By strengthening partnerships with these organizations, UNHCR works to ensure the inclusion of persons with disabilities in operational planning and programme implementation.

Discrimination and Violence, Exploitation and Abuse

In situations of forced displacement, persons with disabilities may face a heightened risk of violence, exploitation, and abuse as well as high levels of stigma. Persons with disabilities are not a homogenous group: they face many forms of discrimination depending on their intersecting diversity factors. They are often excluded from participating in planning and programming interventions, which means that their protection needs are often not met.

Responding to the discrimination and stigma experienced by persons with disabilities requires a good understanding of the nature of the harm, its causes and consequences and the groups most at risk. This can only be achieved if continuous dialogue with persons with disability is maintained. For example, UNHCR Cameroon targeted persons with disabilities with participatory assessments and focus group discussions and UNHCR Central African Republic organized regular home visits by protection teams. In UNHCR Yemen, the operation consulted with the Committee of Persons with Disabilities and used individual and group consultations to identify the risks faced by persons with disabilities, ensuring their capacities and priorities are incorporated in planning processes.

19 The Special Olympics work on the inclusion of persons with intellectual disabilities, with a focus on sport but also healthcare and early childhood education matters. They have recently been engaged in initiatives to promote connections between refugee and host community youth through sport. See www.specialolympics.org.
Discussions revealed that one of the causes of the high risk of SGBV is the superstitions and beliefs in the community. For example, UNHCR Rwanda reported a widespread misconception about the ability to acquire magical powers by having sexual intercourse with a person with disability. Clearly, preventing and mitigating such risk requires targeting and eliminating such beliefs. Realizing that persons with disabilities are at high risk of SGBV, many operations have ensured that their SGBV prevention and response strategies include specific measures to protect this group. For example, UNHCR Niger works with partners to implement a five-year SGBV strategy, which includes the protection of persons with disabilities against SGBV in refugee camps. In UNHCR Nepal, the office conducted SGBV awareness-raising sessions for refugees, including persons with disabilities, local authorities and the host population.

Inclusion in Services and Programmes

Operations have reported that persons with disabilities face barriers to access services because of the way services are delivered, for instance lack of outreach, inaccessible information or staff attitudes. These barriers could be exacerbated by broader factors such as geographical isolation as well as by intersecting factors such as gender. UNHCR and partners must understand these barriers, including those affecting access to national programmes and services, and must work to eliminate them. UNHCR is shifting away from an approach that focuses on specific needs in isolation and rather aims to implement a twin track approach to ensure access to services (i.e. mainstreaming) while also providing specific support to persons with disabilities. The following examples illustrate how UNHCR and partners are implementing a twin track approach to promoting access to services.

Participatory assessments in UNHCR Mali revealed that persons with disabilities and older persons are affected by poverty more severely than the rest of the population, including due to barriers to accessing existing livelihoods programmes. In UNHCR Ethiopia, persons with disabilities reported limited access to education, due partly to untrained teachers, and faced barriers in accessing services. To better understand
such structural barriers, the operation carried out accessibility audits in several camps and identified a number of actions. In UNHCR Italy, UNHCR was successful in lobbying for the Ministry of Labour and Social Insurance to extend access to the government’s disability schemes to refugees.

As a result of continuously engaging with persons of concern with disabilities, UNHCR has taken steps to adapt its interventions and programmes to be more inclusive. This included efforts to engage the community and strengthen community-based protection interventions. UNHCR Lebanon promoted participatory approaches, such as the Solidarity Initiatives, which provide communities with the financial capacity to deliver self-managed solutions while enhancing social cohesion between refugees and hosts. Within this framework, a workshop was conducted with persons with disabilities and humanitarian actors which led to the formulation of a set of recommendations to cope with current gaps and challenges faced by persons with disabilities in accessing services, focusing on protection, basic assistance and food, health, shelter and education.

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UNHCR Kenya supported persons with disabilities from both displaced and host communities by strengthening community-based rehabilitation programmes and ensuring their active involvement. Examples of activities include providing training to caregivers of older persons with psychosocial disabilities on appropriate support care; training host communities to produce assistive and mobility devices and supporting children with cerebral palsy through playgroup therapy sessions to enhance their physical and social skills. This has improved relations between the host communities and persons of concern, in addition to increasing the social inclusion of persons with disabilities.

UNHCR operations have also worked to ensure the availability of quality and inclusive services for persons with disabilities. For example, UNHCR Somalia and a local partner provided persons with disabilities with wheelchairs and crutches and referred cases to medical and rehabilitation centres. UNHCR Egypt initiated a special programme for persons with disabilities, which has benefited around 1,000 refugees with disabilities. They were supported through individual needs assessment, counselling, referrals to services and home-based care. 67 persons received assistive devices and over 450 persons received spectacles, while 55 children with disabilities completed a physiotherapy rehabilitation programme.

In order to increase ability to provide needed services through various means, UNHCR organized a webinar on CBIs as protection solutions for persons with disabilities, with a view to enhancing their self-reliance and helping them meet their basic needs. The webinar was attended by 70 participants and included an interactive discussion on CBIs.

2.3 Older Persons

- Of the 65 refugee, asylum-seeking, IDP and returnee situations that reported on the impact indicator “% of older persons of concern who receive services for their specific needs”, 27 reported achieving the satisfactory range of 80 per cent or above.22
- UNHCR operations have facilitated access to health for older persons by strengthening referrals with partners and national services, as well as providing assistive devices such as wheelchairs and hearing aids.

I want to learn, now that the opportunity is in front of me! ... We all have a great opportunity and I am so inspired seeing all the people who have come here and chosen to learn.”

Older refugee woman from El Salvador who left school at the age of eight but is now getting back into the classroom 64 years later.

Operations reported that the most commonly cited challenges that older persons faced are related to access to services including health and nutrition services; inclusion in family and community support structures; participation in livelihood opportunities and access to pension benefits.23

22 Of the total 65 situations that reported on this indicator, four were IDP situations in South Sudan, Sudan, Syrian Arab Republic and Yemen.
Access to services

Older persons are often perceived to have mainly primarily health-related needs, which can undermine their access to livelihood programmes, SGBV prevention and response and child protection (where they are caring for children). In situations of forced displacement, older persons often face barriers to access humanitarian assistance. They are often isolated in their homes due to limited mobility and lack of support networks. As families become separated, many older persons are forced to take on new roles as caregivers for grandchildren or other dependent family members, further isolating them from traditional support networks.

During displacement, the contributions of older persons are often unrecognized, and they may come to be viewed as a burden within their families and communities. However, older persons often serve as community leaders and transmitters of knowledge, culture and skills. They are valuable resources for guidance and advice, contributing to peace and reconciliation measures. UNHCR’s Policy on Older Refugees recognizes the capacities and important roles of older persons, and seeks to support their contribution to their families and communities in situations of forced displacement.

UNHCR Syria improved outreach and delivery of services through the home-based care attendant programme. A group of community outreach workers were trained to deliver relevant services to older persons within the IDP communities, especially those who are isolated and without family and community support. Older persons were also included in recreational activities, psychosocial activities and awareness sessions. UNHCR has also partnered with HelpAge to ensure planning, design and implementation of interventions are inclusive of older persons and consider their specific needs.

Based on feedback received from older persons of concern, UNHCR has updated programme planning to deliver services according to their needs. UNHCR Chad responded to concerns highlighted by older persons living in remote villages by setting up Social Mutual Aid Committees in the camps to strengthen

the protection of older persons and persons with disabilities, for example through ensuring their inclusion in food distributions. Similarly, UNHCR Ukraine prioritized outreach to persons with specific needs in rural areas, as these groups often remain without any assistance for extended periods. Under this programme, older persons and their households received in-kind assistance. In UNHCR Zimbabwe, the operation facilitated the construction of shelters and arranged for a specialist nurse and physiotherapist to conduct weekly visits at the local clinic, which improved the quality of medical care given to older persons of concern.

Older persons may be more hidden in the community or humanitarian actors may not be sensitized to issues of aging. An assessment with older persons from UNHCR Syria revealed that they were largely not targeted in humanitarian programming. Older persons are particularly at risk of malnutrition in humanitarian contexts. However, nutrition programmes rarely target older persons. For example, in UNHCR Syria, nutrition programmes and psychosocial support targeted mainly children. In addition, many older persons spoke about the need for psychosocial support, while some service providers expressed concerns over the nutrition status of particularly at-risk older persons. Furthermore, older persons may have difficulty reaching food distribution points, queueing for long periods of time or transporting food rations back to their home. UNHCR promotes measures to ensure equal access to assistance by older persons, including through home delivery of food items, use of cash-based initiatives and other options.

Targeted medical support was provided where refugees are not able to access the services they need. For example, UNHCR Sri Lanka targeted older refugees to receive aids such as wheelchairs, walkers, knee-guards, glucometers, blood pressure monitoring devices, adult milk formula and hearing aids. UNHCR also facilitated linkages to charitable organizations and private-sector donors for additional assistance.

### Participation and Outreach

Participatory assessments and face to face interactions continue to be one of the most successful ways to engage with older persons, giving them the opportunity to share their views and make recommendations to enhance protection and services in the community. Supporting community groups for older persons and enhancing outreach through community outreach volunteers strengthens two-way communication and dissemination of information about services, and also helps with early identification of at-risk persons. During consultations in 2017, older persons of concern reported feelings of social exclusion and loneliness, especially those without extended family support. In Bangladesh, they wished to be more actively engaged in decision-making processes and to be considered for livelihood programmes to help them support their families. In Malawi, older persons wished to be identified more quickly. They also suggested that a mapping of livelihood opportunities would more readily enable them to contribute to the community.

To ensure improved outreach, UNHCR and partners need to set up several different channels which can be accessible by most people in the community. In UNHCR Myanmar, lack of field access to the IDP population was a challenge. Since communication, especially with women and older persons, primarily relied on face-to-face encounters, the limited field access resulted in gaps in understanding the concerns and risks faced by those groups. UNHCR overcame this challenge by engaging key informants in the community to report on protection concerns and advocated with partners and cluster members to use participatory approaches and establish multiple communication channels. UNHCR Malaysia ensured communication with older persons of concern is taking place through various channels, including through information hubs and community meetings. In Nepal, the operation maintained contact through counselling services as well as home visits. This ensured timely dissemination of information, and successful identification and referrals for those with specific needs.

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UNHCR recognizes the positive role of older persons in supporting each other as well as other members of the community. In UNHCR Greece, older refugees at the Nea Kavala site established a network of experienced women providing care, support and advice for pregnant female heads of households. Similarly, in UNHCR Lebanon, older persons engage as outreach volunteers and are active at the community centre, where they organize and participate in activities such as life-skills sessions. In UNHCR India, community-run older persons’ clubs received cash grants under a community-run project and were provided a space for activities by UNHCR’s partner. In addition, UNHCR and its partners supported linkages with youth clubs, which improved active engagement by both groups.

Livelihoods and Pension Benefits

While many displaced older persons contribute to household income, they often report discrimination in accessing work opportunities, both on the basis of age and status as “outsiders”. During participatory assessments, older persons of concern stressed the need for income-generating activities to maintain their self-reliance. Lack of livelihood opportunities limits their access to housing, health and ability to meet other basic needs. Older persons in UNHCR Syria pointed out that most livelihoods programmes had a cut-off age of 58.29

During displacement, older persons often lose their economic and physical assets, and in some contexts, do not have access to national pension and social welfare systems. Even where refugees are included in national systems, older refugees have reported being unable to access pension rights. Older refugees, asylum-seekers and IDPs, particularly women, often also face discrimination in access to housing, land and property rights. With limited economic resources or legal protection, and separation from family and social networks, older displaced persons may lack access to safe and secure housing, placing them at heightened risk and undermining their dignity.

Despite significant challenges in this area, UNHCR is committed to enhancing equal access of older persons to their rights. This includes advocating with government officials for their inclusion in local services, as well as providing older persons with material assistance or Cash Based Assistance if considered the most effective way to facilitate access to assistance or services to older persons. In UNHCR Brazil, a milestone in 2017 was the Brazilian Supreme Court’s decision on immigrants’ entitlement to access the Continuous Financial Benefit, a social assistance grant offered by the Brazilian Government to persons over 65 years old and persons with disabilities. This decision represents an important step in the inclusion of asylum-seekers and refugees in national policies and comes as a result of longstanding advocacy by UNHCR and its partners.

Other operations such as UNHCR Kazakhstan continue to advocate for the inclusion of persons with disabilities and older persons in the government’s welfare systems, such as the provision of retirement pensions and allowances, while in the meantime providing targeted assistance to these groups to ensure they are protected and that their basic needs are met. UNHCR Nepal used findings from participatory assessments, focus group discussions and individual interviews to adapt UNHCR livelihood programmes to also cater for persons with specific needs including older persons. This included shifting towards delivering livelihoods support to individuals, based on skills, capacity and willingness. In other operations like UNHCR Thailand, Cash Based Initiatives were considered an effective means to contribute to the livelihoods of older persons and support their access to basic needs.

2.4 Lesbian, Gay, Bisexual, Transgender and Intersex Persons

Discrimination, stigma and isolation faced by LGBTI persons have a severe impact on their ability to come forward and access protection services that address their specific needs.

UNHCR is committed to protecting the rights of all persons of concern, irrespective of their sex, sexual orientation and gender identity, and has engaged in building the capacity of staff and partners through trainings on identification and protection for LGBTI persons of concern.

UNHCR operations expanded their collaboration with local and international partners to raise awareness and strengthen capacity to protect and seek solutions for LGBTI persons.

“...It has been impossible to identify and include LGBTI persons because the national and religious backgrounds from which they come from do not accept them and therefore they have learned to blend in and do not present visibly as a particular social group.”

UNHCR Office in Africa

The assessments of operations³⁰ revealed that the most commonly cited protection challenges faced by LGBTI persons of concern are difficulties in identifying them due to their fear of making themselves visible, as well as stigma and discrimination arising from both their own communities and the host communities where they live, which negatively impacts their safety and security. Operations also reported that low staff and partner capacity in understanding the protection issues of LGBTI persons of concern limit the protection and solutions provided to them.

³⁰ This section limits identifying operations by name to maintain confidentiality as far as possible.
Identification and Outreach

LGBTI persons face discrimination and are at risk of violence including SGBV in their home countries, during transit as well as in countries of asylum. In the latter their risks are aggravated as many lack legal status, access to support networks and are confronted with general hostility towards refugees and other displaced persons.

Confronted with previous experiences of violence and discrimination, LGBTI persons of concern are reluctant to be identified as LGBTI persons. Operations, primarily in Africa as a whole as well as the Middle East and North Africa (MENA), reported that LGBTI persons of concern were reluctant to come forward and share their concerns or seek protection out of fear of being the target of discrimination, including violent attacks due to exposure as an LGBTI person within the community. This fear is also present among LGBTI persons of concern in countries of asylum where LGBTI rights are respected and openly exercised. In such circumstances, many LGBTI persons of concern continue to hide their sexual orientation and gender identity out of fear of exposure in their own community.

For operations, as reported by one office in the MENA region, the under-identification of LGBTI persons due to social stigma and fear of exposure impedes their inclusion in participatory assessment exercises resulting in a lack of appropriate interventions that address their needs.

To address under-identification, UNHCR operations implemented reception and/or registration measures that specifically targeted LGBTI persons of concern. These include ensuring that registration forms are gender neutral and do not assume a particular sexual orientation. This also entails the creation of “safe spaces” such as secure waiting areas and special registration time slots for LGBTI persons.

One operation in the MENA region increased its efforts to systematically identify LGBTI refugees and include them in focus group discussions. The operation used UNHCR’s asylum procedures to systematically identify LGBTI refugees and displayed posters in interview rooms and waiting areas promoting UNHCR as a safe space for LGBTI individuals. This enabled a confidential and welcoming environment for LGBTI persons of concern to discuss their sexual orientation and gender identity with staff. Other means of identification included weekly protection interviews that were open to all refugees, protection request letters received by the operation, protection interviews conducted by a partner NGO and daily interactions with refugees by social workers and other outreach efforts. As a result of these efforts, the operation reported a 36 per cent increase from the previous year in the number of LGBTI refugees who self-identified.

Other operations have also undertaken efforts to improve staff capacity to identify LGBTI persons, despite the challenging context of some operations. For example, one operation in the MENA region conducted staff trainings to improve identification and referral of LGBTI persons of concern, in addition to implementing standard operating procedures (SOPs) and fast-track arrangements with specialized services for persons with specific needs, including LGBTI cases that require immediate intervention. Similarly, one operation in the Americas provided training on the protection concerns of groups at risk, with specific sessions on the protection of LGBTI persons. This included training and sensitization of local authorities on the identification and referral of LGBTI persons of concern with specific needs.

LGBTI persons also reported lack of trust towards service providers including asylum services based on experiences of discrimination against them and maltreatment by personnel of such services who lack understanding for their concerns and needs.

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Another operation in Europe conducted training on improving the protection of displaced LGBTI persons, including the promotion of HIV prevention. The training led to the establishment of a referral pathway with a network of LGBTI NGOs. In addition, a regional unit continued monitoring refugee status determination (RSD) applications and training of eligibility officers to ensure that LGBTI persons are not discriminated against in their applications. The operation conducts ongoing advocacy with the authorities on RSD quality, and offers support to deal with backlog and quality issues associated with the process. Targeted and comprehensive support, including psychosocial services, is needed to address trauma and stress, exposure to SGBV, homophobia as well as the daily discrimination and harassment that LGBTI persons face. This support was implemented by an operation in Africa under the Youth Initiative Fund in order to increase the participation of LGBTI youth asylum-seekers and refugees and address their psychosocial needs. Various activities were implemented as part of the project, such as sports, dance, music and theatre benefitting a total of 66 LGBTI youth. Participants fed back that these activities cultivated a sense of community amongst LGBTI refugees and asylum-seekers of different nationalities who had previously reported feeling isolated and lonely. By sharing stories, challenges and successes, participants felt a sense of relief resulting from the similarity of their experiences, which also enabled them to adopt coping mechanisms. This project also enhanced the dissemination of information for LGBTI refugees by identifying LGBTI refugee community leaders, in order to provide information on available services from partners, how to access these services and tips for personal security. Referral mechanisms were also strengthened through the identification of persons with specific needs by these community leaders and their referral to services provided by UNHCR and partners.

Protection and Solutions

Same-sex relationships are criminalized in many countries where UNHCR operates and communities are often hostile towards LGBTI persons, increasing their risk of falling victim to homophobia and hate crimes. One operation in Africa reported that most government officials in that region do not consider claims based on sexual orientation and gender identity to fall under the 1951 Convention on Refugees. This leads to persons of concern concealing the real basis of their claims and in many cases not benefiting from international protection. In addition, operations reported how LGBTI persons are often victims of discrimination and are at risk of trafficking, sexual exploitation and abuse during flight and transit. In the MENA, Asia and Pacific regions, focus group discussions with LGBTI refugees revealed that they face various forms of SGBV, including physical violence and harassment.

Camps and community collective shelters continue to be some of the places where LGBTI feel most unsafe. During participatory assessments in one operation in the Americas, LGBTI persons of concern in migrant shelters reported facing discrimination for their sexual orientation, gender identity and refugee status. To respond to such situations, UNHCR operations have procedures in place to relocate individuals facing safety and security problems. For example, one operation in Africa transfers LGBTI persons of concern who face security problems in the camps to urban settings. One operation in the MENA region reported that it put such measures in place coupled with other means of support, such as cash support and access to livelihood opportunities. These additional measures, particularly cash support for safe shelter, are important to ensure that relocated LGBTI persons of concern are not forced into adopting unsafe coping mechanisms, such as sex work, but instead that their safety and security is ensured through additional measures.

In many situations, the main solution for LGBTI persons of concern facing discrimination and other risks remains resettlement. Nevertheless, operations also worked to support their local integration through targeted protection interventions and assistance as

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32 Ibid.

well as inclusion of LGBTI persons of concern in all programmes and activities.

For example, one operation in the Americas reported that LGBTI persons experience discrimination and cannot find work opportunities. In response, UNHCR and partners actively explored livelihood solutions and built networks with employers through the local federation of LGBTI companies.

Staff and Partner Capacity

LGBTI persons also reported lack of trust towards service providers, including asylum services, based on experiences of discrimination against them and maltreatment by personnel of such services who lack understanding of their concerns and needs. For example, one of the regional units in Europe reported that LGBTI organizations have raised concerns that only certain narratives of LGBTI asylum applications are accepted and that applicants are often discriminated against for being unable to articulate their claims and for not having a local partner to support them. A regional unit in the Americas region reported that, in some countries, homosexuality can be used to bar entry to LGBTI refugees and asylum-seekers. One of the operations in the Americas held participatory assessments that included specific sessions for women and LGBTI refugees to voice their concerns with government officials.

Service providers need to be aware of the specific concerns of LGBTI persons and their fears, which are based on previous experiences of discrimination and violence from community members and service providers alike. In response to this, one operation in Europe conducted awareness-raising sessions with a local organization and shared good practices for the reception and handling of LGBTI asylum-seekers, especially on the issue of confidentiality. Another operation in Europe has expanded its partnership with local LGBTI organizations and has provided trainings on sexual orientation and gender identity for over 250 NGO staff in order to build an alliance network and enhance services for LGBTI persons of concern.

In the Americas, operations have leveraged opportunities to build the capacity of different actors working on protecting LGBTI persons. For example, one operation established a technical working group on SGBV with the United Nations Population Fund (UNFPA), IOM and other actors, including civil society partners and local authorities. The activities of the technical group were expanded to also address the SGBV-related concerns of LGBTI persons. Activities included capacity building of local stakeholders and establishing referral pathways to different services which were also accessible to LGBTI persons. This operation has also worked with the justice system to ensure groups at risk, including LGBTI persons, can enjoy their rights. Another operation in the Americas worked with the Office of the Ombudsperson for Women and Gender to devise a methodology which is tailored to identify the protection risks of LGBTI persons, in order to develop suitable protection strategies and measures. The LGBTI protection risks toolkit was finalized and published and will be used by all regional offices of the Ombudsperson, thus giving visibility and eliciting an institutional response to the specific needs of LGBTI persons of concern.

Effective protection requires that staff receive appropriate training, that operations create safe spaces where LGBTI persons feel comfortable to come forward, addressing areas of risk for LGBTI persons, establishing referral pathways and improving the quality of services that address their specific needs. The LGBTI training package developed by UNHCR and the International Organization for Migration (IOM) addresses these points and trains staff to work with LGBTI persons of concern in a respectful and effective manner. In 2017, a revised edition of the training package was made publicly available. In addition, UNHCR developed a formal LGBTI Learning Programme, Working with LGBTI Persons in Forced Displacement. The programme was piloted through two cohorts, one global and the other targeting the Americas.

Based on feedback received from LGBTI persons, two operations in the MENA region have worked to improve UNHCR’s staff response to the needs of LGBTI persons of concern. One operation conducted a training session targeting registration staff on “Serving

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with Respect” and also produced a plan to systematize awareness on LGBTI-related issues in the workplace. The International Day against Homophobia, Biphobia and Transphobia (IDAHOT) served as an opportunity to raise awareness among staff on sexual orientation and gender identity to ensure a respectful and safe environment for both LGBTI staff and refugees. One operation has developed fast-track, confidential and specialized SOPs for LGBTI persons at risk, and has created a network of trained staff to identify and respond to concerns raised by LGBTI persons of concern.

In cooperation with UNHCR’s Global Learning Centre, an operation in Africa conducted a workshop on LGBTI persons of concern, which targeted local human rights organizations. UNHCR staff were also trained on protection issues concerning intersex, transgender and gender non-conforming persons of concern, while the capacity of RSD staff in processing sexual orientation and gender identity refugee claims was also strengthened. A good response to the issues faced by persons of diverse sex, sexual orientation and gender identity requires a recognition that LGBTI persons’ needs are not identical and that each group may have specific protection concerns which need to be addressed differently.

At a global level, UNHCR developed a Training of Trainers on “Working with LGBTI Persons in Forced Displacement and the Humanitarian Context” which was delivered to its second cohort in 2017. These participants went on to implement the UNHCR/IOM training package at both local and regional levels.

### 2.5 Minorities and Indigenous Peoples

1. UNHCR operations also deliver protection and solutions for minorities and indigenous peoples. In 2017, 16 situations selected the indicator “% of persons of concern from minorities or indigenous groups who receive services for their specific needs.” In seven of the 16 situations, 80 per cent or more persons of concern from minorities or indigenous groups received services that addressed their specific needs, while in three situations 40 to 79 per cent of such persons did so.35

2. UNHCR continued to make efforts to include the voices and concerns of groups belonging to national or ethnic, religious and linguistic minorities in the implementation of all activities by conducting participatory assessments with them and facilitating their participation in decision-making structures.36

“One of the challenges is the strengthening of a diversity approach to better address the needs of diverse ethnic groups seeking protection in the country.”

UNHCR Ecuador

UNHCR operations report that persons of concern belonging to ethnic, linguistic, religious or indigenous groups often face an additional set of risks related to their language, customs, community organization structures and culture because displacement may threaten their ability as a community and as individuals to preserve them. There are three challenges that persons of concern belonging to minority groups and indigenous peoples face across operational settings and geographical locations: discrimination and marginalization mainly due to linguistic differences, accessing national identity registration and documentation services as well as participation and inclusion.

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35 Because of the limited reporting on minority and indigenous peoples, the trends presented in this section should not be viewed as representative of global trends. Of the total 16 situations that reported on this indicator, one was an IDP situation.

36 In this section, “minority” refers to ethnic, religious or linguistic groups, fewer in number than the rest of the population, whose members share a common identity. “Indigenous” refers to peoples who generally have a historical continuity with societies that developed on their territories before invasion or colonization. For more detailed definitions of these and other relevant concepts see: UNHCR, Need to Know Guidance: Working with National or Ethnic, Religious and Linguistic Minorities and Indigenous Peoples in Forced Displacement (Geneva: UNHCR, 2011). Available at: http://www.refworld.org/docid/4ee72a222.html.
Discrimination and Marginalization

Operations report that minority groups and indigenous peoples face discrimination in the places they seek refuge and face challenges to integrate and access public services, such as health care and livelihood opportunities. As a result, they often live isolated in secluded areas and children are unable to integrate into local education systems. UNHCR operations are working to provide the special support needed for minority groups and indigenous peoples to ensure their inclusion and address marginalization, particularly through strengthening outreach mechanisms to minority and indigenous groups.

To improve social inclusion for minority and indigenous groups, operations have increased efforts to gather better information on their needs. UNHCR Venezuela conducted needs assessment exercises and looked particularly at the needs of displaced indigenous peoples. Consolidated results were used to inform UNHCR’s planning and intervention design and were also shared with partners and services providers to help adapt their services to the specific needs of indigenous peoples, thus facilitating their social inclusion by eliminating barriers to accessing local services.

UNHCR Pakistan has enhanced its outreach to minority ethnic groups by using community outreach workers. The aim is to engage the members of minority communities in focus group discussions, to facilitate this by overcoming language barriers and to identify persons with specific needs for key informant interviews to improve understanding of the particular protection risks of the minority group. Other operations such as the regional UNHCR operation in South Africa used a multi-functional team approach to engage with vulnerable groups including those belonging to national or ethnic, religious and linguistic minorities. The aim was to understand their situation and needs from different perspectives and to design interventions that address the identified needs in a more comprehensive manner, using the expertise of different functions and embedding interventions in the overall operational response.

Similarly, UNHCR Brazil conducted a profiling activity with displaced indigenous communities to gather reliable information on the challenges faced during displacement and for local integration, which revealed that these groups had difficulty accessing health services, educational and livelihood opportunities. In response, an inter-agency project was developed to train indigenous persons to work as community health
agents. UNHCR’s advocacy efforts and strategic partnerships also led to referrals of children and pregnant women from an indigenous group for medical monitoring at local health care providers. In collaboration with implementing partners, UNHCR also organized awareness-raising and prevention activities on HIV/AIDS within shelters and increased registration and documentation of indigenous persons, particularly children, to facilitate their access to health services. In other areas, the operation has managed to enter into partnerships to establish projects that provide educational and livelihood opportunities to displaced women and children belonging to indigenous groups.

In other operations, many different minorities co-exist and the specific needs of each must be reconciled. For example, in UNHCR Ecuador and UNHCR Mauritania, the operations include representatives of various ethnicities in participatory assessments. Consulting with different minority groups on their needs and ensuring that community representation structures reflect the diversity of those displaced has enabled UNHCR Mauritania to ensure that the shelter programme facilitates peaceful coexistence of all groups in the camp. These activities have been essential to collect information on the protection risks and challenges faced by the different groups and have facilitated the active involvement of persons of concern in the design and monitoring of UNHCR’s activities. Similarly, through projects supported by UNHCR Ecuador, the office ensures direct and regular contact with refugees from various ethnic groups and invests in increasing community outreach by strengthening the roles of social workers, community promoters and local volunteers.

UNHCR Ukraine provided specific educational and developmental support to minority children, to foster social inclusion and increase the overall wellbeing of the community. It also implemented projects and initiatives proposed by displaced minority communities themselves. Similarly, the regional UNHCR office in Bosnia and Herzegovina has implemented a project for the educational inclusion of internally displaced children. This involved preparing children for enrolment in local schools, identifying those of age for enrolment in the compulsory pre-school preparation programme and working with parents, counselling them on the importance of education for their children. During these activities, the families were also taught various social skills to help them integrate within the local community.

**Access to National Identity Registration and Documentation**

During participatory assessments with minority groups and indigenous peoples in operations where such groups exist, it emerged that a lack of locally recognized identity documentation puts persons of concern belonging to minority and indigenous groups at risk of harassment by local authorities and prevents them from accessing local services. In some cases, the absence of interpreters at reception centres means that minority groups are not able to receive information on how to obtain documentation due to language barriers, leaving them in constant fear of deportation. UNHCR operations have therefore developed responses that include provision of support to and advocacy interventions with relevant authorities to ensure access to registration and documentation for these groups.

UNHCR Brazil addressed a major challenge in 2017 regarding the low level of documentation impeding access to rights and services for children from an indigenous group. To remedy this situation, UNHCR supported the Public Prosecutor’s Office in issuing a legal opinion with recommendations on the registration of indigenous children. Similarly, UNHCR Costa Rica continued supporting the National Civil Registry Office with implementing the Chiriticos Project, where outreach workers go to remote areas where indigenous and transnational migrant families work in the agricultural sector, supporting them in obtaining documentation. In a related context, UNHCR Colombia supported a meeting between several transnational indigenous groups to plan a campaign for the recognition of dual citizenship for indigenous peoples whose ancestral territory overlaps national borders. This would benefit indigenous people from Venezuela crossing into Colombia seeking access to food, services and rights as well as Colombian indigenous people returning from Ecuador. UNHCR Colombia also partnered with local actors to promote an ethnically suitable return and relocation process and trained other regional affiliated organizations on the process.

In Japan, participatory assessments highlighted that women from a religious minority community had limited access to services due to lack of transport, lack of knowledge of the local language and unstable legal statuses. In response, UNHCR facilitated the establishment of language programmes by female
instructors and the provision of transport, in addition to making arrangements for interpreters to be present during RSD interviews facilitating this access to legal documentation.

Participation and Inclusion

Persons of concern belonging to minority and indigenous groups are often excluded and specific efforts must be made to ensure their participation and inclusion. UNHCR operations work towards increasing the engagement and participation of minority groups and indigenous peoples by implementing activities that directly target these groups and facilitate their inclusion in all interventions implemented.

For instance, **UNHCR India** has made efforts to ensure that women across locations, nationalities and ethnic groups are equally and meaningfully engaged in decision-making structures, by organizing women’s groups to address community protection and assistance concerns. The operation provided Afghan minorities with a separate forum, after they expressed the need for such a platform to discuss issues related to domestic violence and livelihoods without facing discrimination from other displaced groups. This facilitated better organization of the group and thus their opportunity to participate meaningfully and on an equal footing with other women in other decision-making structures. In other operations, such as in **UNHCR Colombia**, access to government SGBV registration systems for local NGOs, civil society and community-based organizations working with displaced persons belonging to minority and indigenous groups is restricted. This prompted UNHCR to adapt the Gender-Based Violence Information Management Systems to the local context by ensuring that the software has a differentiated approach and captures the specific characteristics and needs of groups from diverse backgrounds, including minority and indigenous groups as well as persons with disabilities, and persons with diverse sexual and gender identities.

In **UNHCR Malaysia**, 30 youth from various minority communities were engaged in activities to strengthen community-based protection, which increased their participation and empowered adolescent girls. Supported by the Youth Initiative Fund, these groups received trainings on topics such as gender, the importance of education and children’s rights, after which they conducted awareness-raising sessions with youth and their parents in community-based learning centres. The operation noted that adolescent girls from these communities were initially shy to engage; however, the awareness-raising sessions empowered them to participate confidently, including in sports activities. UNHCR staff and teachers from the learning centres also engaged with parents from these communities to advocate for the inclusion of girls in community activities. The operation also conducted SGBV sensitization trainings with community leaders from two different ethnic minority groups and involved the community in raising awareness for prevention and response to SGBV. Through **Safe from the Start** funding, the operation partnered with a local organization to train community leaders from minority groups on SGBV prevention and response, especially on shelter, case management and awareness raising. As a result, three community-based organizations strengthened existing community referral mechanisms and developed SOPs and other material for SGBV activities and programmes. These community-based organizations carried out 17 awareness-raising campaigns, which enabled 785 refugees to access SGBV-related information and services. To address a recognized need for temporary safe housing, the operation also supported a local refugee community-based organization to establish a community transitional home that provides safe housing and rehabilitative services for refugee women and children affected by SGBV.
2.6 Children

In 2017, almost 40 per cent of 71 UNHCR situations who reported on best interest procedures (BIP) maintained or increased the proportion of UASC covered by best interest processes.

UNHCR has worked with implementing partners to mainstream the rights of children in national systems, including access to education.

Out of 53 refugee and IDP situations that reported in this area, around 96 per cent showed improvements in non-discriminatory access to national child protection systems and social services.

I couldn’t read, and my parents couldn’t teach me because they are illiterate too. Now I can teach my parents and all my little sisters and brothers. My parents are so proud of me, I’m so happy that I can read. Now I can finally dream of my future.

Sudanese refugee girl living in Doro refugee camp in South Sudan.37

Across UNHCR operations, children, including UASC, face significant challenges. The three most common protection risks for children of concern are lack of access to education, exposure to abuse, neglect, violence and exploitation and lack of birth registration.

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Access to Education

Providing access to education is a major challenge especially as children grow older, with lower attendance rates for secondary than for primary school. For example, refugee children told UNHCR Angola that lack of documentation stops them from finishing primary education and going on to secondary school. A focus group discussion held by UNHCR Tajikistan with persons of concern revealed that refugee boys often stop their schooling to earn money to support their family, especially where there are food shortages, while girls often stop schooling early to take care of younger siblings while parents work and to help with domestic chores. Schools in a number of operations continue to be inaccessible for children with disabilities while many focus group discussions revealed that children face discrimination and harassment which leads to drop outs. Overcrowded classrooms, underqualified teachers, lack of teaching and learning materials and inadequate water, sanitation and hygiene facilities are also contributory factors. Similarly, language barriers and unfamiliarity with the curriculum in host countries make it hard for displaced children to enrol and remain in school, particularly for those at higher levels of primary school.38

To address these constraints UNHCR, in collaboration with the Global Partnership for Education, supported 22 country programmes to develop and implement national education policies, programmes and practices that ensure students from both refugee and host communities can access quality education through the national system.39 For example, UNHCR Brazil, in collaboration with a local partner, continued a project on the education of refugee children which provided individual support for them and their families on learning pathways and integration into the school environment. This included counselling on educational possibilities and providing support to access educational programmes. Children and parents reported that the project had a positive impact on their educational outcomes by improving their Portuguese language skills and their integration into the school community. The office also supported local authorities to develop information leaflets for persons of concern on access to education. The Amazonas State Secretary of Education published a specific normative resolution regulating the enrolment of persons of concern in public schools, following successful advocacy by UNHCR and its partners.

The inclusion of refugee children in national education systems is also supported by UNHCR through partnerships with global and regional bodies that help develop a favourable environment for refugee children to enter and remain in school.40 For example, UNHCR supported the Regional Meeting of Ministers of Education of Latin America and the Caribbean, as well as the Ministerial Sustainable Development Goal 4 Regional Forum for Eastern Africa.41 At both these events, states made commitments and formulated key priorities to include refugees in national education systems at regional and country levels.

UNHCR operations have also worked towards improving the quality of education by upgrading school structures and providing material support, in addition to organizing trainings for teachers. For example, UNHCR Bangladesh addressed concerns about the low quality of education and parents’ struggle to support their children’s studies in a number of camps by repairing and improving school facilities and at the same time advocating with the Government for the inclusion of refugee children in national education systems. UNHCR Sudan developed income-generating activities with a parent–teacher association which helped parents to pay school-related expenses. Based on recommendations from children and adolescents, UNHCR South Sudan built additional classrooms, distributed learning materials and school uniforms to refugee students and undertook initiatives to enhance teachers’ professional skills through in-service training, including computer literacy sessions. Innovative techniques such as peer-to-peer teacher trainings, or lecturers observing teachers in schools and providing feedback, have led to an increase in qualified teachers from 1 per cent in 2016 to 7 per cent in 2017.42

39 Ibid.
40 Ibid.
41 Ibid.
42 Ibid.
Reporting also indicated that gender-related barriers make it harder for girls of concern to access educational opportunities. Due to restrictive gender roles, girls are often taken out of school to perform household chores or married off to reduce living expenses.43 Again, participatory assessments with different communities in UNHCR Uganda revealed that one of the challenges to girls’ education was that when resources were limited, families often prioritized boys’ education over girls. Social traditions and conventions also hinder access to education for girls of concern, where, for example, child marriages are a common occurrence and there is a belief that girls do not need to be educated. Operations such as UNHCR Mali have also reported that child marriage is a negative coping mechanism for families to prevent SGBV and pregnancy outside marriage. UNHCR Iraq held consultations with girls of concern, where one of the key concerns raised was the fear of sexual harassment and violence. Palestinian girls in particular felt they were being targeted for harassment based on their accents. To address these challenges, the operation and its partners supported an extensive network of community-based committees and outreach volunteers to engage in work on child protection and SGBV issues. A total of 553 volunteers from IDP camps and host communities were selected and trained in identification, core concepts of child protection and SGBV as well as safe referrals to specialized service providers. Awareness-raising sessions were held for over 75,000 refugees and IDPs which resulted in the establishment of eight community centres to offer inclusive gender and age-sensitive information and services for girls, women, boys and men.


Figure 3: Primary and Secondary Education Enrolment Rates for Children and Refugee Children*
In UNHCR Chad, despite refugee children having access to the national education system, operations reported low attendance rates and an increase in school drop-outs. To understand the reasons, the operation conducted an evaluation of the education sector in camps in the South. This revealed that the national strikes earlier in the year had discouraged parents from paying school fees. Furthermore, individual assistance and targeted food distribution had been reduced, forcing some parents to put their children to work. In some cases, families had spontaneously returned home. In response, the operation and other stakeholders organized awareness-raising campaigns in refugee locations on the importance of education. UNHCR and its partners have also increased livelihood opportunities for families, with the aim of improving access to education. The national government is committed to educating refugee and local children together; for example, supported by the Global Partnership for Education, the Ministry of Education trained more than 800 refugee and Chadian teachers. These teachers were then deployed to areas around Lake Chad where they could teach 8,500 children, including children from refugee, displaced, returnee and host communities.

In UNHCR South Sudan, the operation addressed the challenge by going from house to house to conduct awareness-raising activities, back-to-school campaigns and increased the activities of girls’ clubs to promote education for girls. As a result, 10 School Management Committees were established and strengthened, with the clear goal of promoting girls’ education by creating safe learning environments and enhancing community leadership with the increased participation of Parent Teacher Associations. 12 trainings were provided to improve the capacity of Parent Teacher Associations and School Management Committees to engage communities on educational issues.

Abuse, Neglect, Violence and Exploitation

Displaced and stateless children are often at heightened risk of abuse, neglect, violence and exploitation due to the traumatic experiences of flight, as well as the difficult circumstances in which they often find themselves – with or without their families – in host countries or areas. In 2017, operations reported that children at risk are exposed to serious protection concerns including physical, sexual and emotional violence in homes and communities, as well as xenophobic violence and bullying in schools. In many cases, these risks are less visible and harder to address in urban settings. In recognition of the essential role that children and communities play in their own protection, UNHCR operations promoted community-based strategies to prevent and respond to violence as well as supporting non-discriminatory access to national child protection systems and social services. Some offices, such as UNHCR Belgium and UNHCR Sweden, also highlighted the need for psychosocial support, due to the traumatic events children have endured on the migratory route. In other locations, such as UNHCR South Sudan, girls of concern revealed having to resort to sex work to meet needs. Negative coping mechanisms such as survival sex have serious and long-term implications for the health and well-being of girls. In UNHCR Mali, interviews with young returnees during participatory assessments indicate that many children are at risk of association with armed groups, due to growing insecurity in many areas, poverty and limited access to schools.

To respond to these protection risks, operations have focused on providing child-friendly spaces, and supporting children and adolescents by mobilizing the community to respond to their protection needs. Promising practices submitted under the Urban Refugee Children Innovation Challenge in 2017 included practices from UNHCR Iraq where the operation is working with partners to develop a “Peer Counsellors” programme. The programme identifies a group of children as “natural counsellors”, to act as a source of emotional and social support for other children within their peer networks. This group is trained in basic counselling, conflict resolution, referral and relationship-building skills. Another practice from UNHCR Colombia is the Radio Kids Reporters.
Club which involves displaced children in producing radio programmes in their communities. It empowers young people to learn about their rights, strengthen their self-respect and develop their leadership and communication skills while communicating messages about local services and peaceful coexistence.

**UNHCR Ethiopia** has involved children and adolescents throughout the operations management cycle, through the establishment and close involvement of the Child Parliament and Youth Association. Child committees have also received training on child protection-related issues, the available services and the referral pathway. These community-based structures have monthly meetings with partners to provide feedback on protection issues in the camps, monitor progress and propose actions for solutions. The child-led committees and clubs participate in identifying protection issues, including school drop-outs, child marriages and female genital mutilation. As a result of these activities, field offices in the region have started to revise and update their child protection strategies, which are aligned with the national child protection and SGBV strategies.

**UNHCR Bangladesh** is increasing the provision of child-friendly spaces for children to participate in recreational projects and activities that reinforce psychosocial support. The operation addresses child protection issues through preventative and remedial actions, with special attention being given to adolescent boys (who are either idle or engaged in child labour) and girls (facing restrictions on movement). The operation has expanded its partnership to provide remedial services such as case management, referrals and psychosocial support. Preventative measures focus on changing behaviour by raising awareness and building the capacity of community structures, such as child protection committees, and other local stakeholders involved in child protection. In addition, the operation built the capacity of children’s clubs to become peer groups for awareness raising and has established a safe space for young girls to engage with each other as a form of psychosocial support.

As recognized in the New York Declaration for Refugees and Migrants, refugees increasingly live in urban environments, and need support through a multi-stakeholder approach. Funding from the United States Government Bureau for Population, Refugees and Migration has enabled UNHCR to conduct research on the impact of living in urban areas on refugee children and their families. As a result, UNHCR has identified ‘5 Key Investments to Protect Urban Refugee Children’, which is a holistic response to strengthen the resilience of urban refugee children, families and communities. The Key Investment Areas, as identified by UNHCR, are to encourage children’s own protection skills, support families to care for children, strengthen community support mechanisms, facilitate access to child protection systems and services and ensure minimum refugee-sensitive child protection services.

**Unaccompanied and Separated Children**

Children separated from their parents and families because of conflict, disaster or population displacement, or because of economic or social reasons, are at an increased risk of violence, abuse, exploitation and neglect. Protection risks faced by UASC include detention, sexual violence and abuse, smuggling, trafficking and sexual exploitation, psychological distress, limited access to education and recreational activities as well as financial dependency. In 2017, UNHCR operations employed innovative, community-based approaches, including working with refugee outreach volunteers and para-social workers to reinforce community-based care for UASC. There was also a focus on the identification and referral capacity of child protection committees, children’s clubs and staff working in safe spaces and drop-in centres. UNHCR continued to advocate with and support governments to strengthen their best interest procedures and the identification and registration of children at risk. For example, in **UNHCR Brazil**, participatory assessments with UASC highlighted concerns with shelter solutions, once

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45 Ibid.
they have reached the time or age limits for staying in public shelters, as well as difficulties in accessing documentation, which in turn hinders their access to public services such as education.

UNHCR operations use a comprehensive case management approach, guided by the Best Interests Procedure, to ensure that UASC, as well as other children at risk, receive targeted support and durable solutions in their best interests. To address protection risks for UASC, operations have provided them with identity documentation and services such as family tracing. For example, UNHCR India strengthened safeguards that are in place to conduct best interest assessments (BIAs) for children in family reunification and voluntary repatriation processes. UNHCR Mauritania has introduced specific needs identification guidelines to better identify UASC and their needs, as a result of which BIAs were conducted according to UNHCR standards and UASC were assisted with cash, food, accommodation and school fees.

UNHCR operations also partner with other actors to ensure protection for UASC. The regional UNHCR office in Argentina initiated a joint project with the Comisión Nacional para Refugiados (CONARE) and the National Public Defence Office,50 to provide legal representation and advice to UASC. UNHCR also actively promoted the inclusion of protection safeguards for UASC in the national refugee/migration legislations under debate. This resulted in the inclusion of an age-sensitive approach in the recently adopted Legislative Decree on Migration in Peru, which includes protection principles for migrant children. UNHCR Serbia has entered into a partnership with a local think-tank and the Ministry of Labour, Employment, Veteran and Social Affairs, to collaborate on a project to strengthen the protection of refugee children.51 The aim of the project is to strengthen the effectiveness of guardians and improve the general protection of refugee children through the identification, recruitment, training, supervision and monitoring of cultural mediators. In 2017, a training curriculum was developed and 19 guardians and seven cultural mediators were trained. UNHCR Colombia assessed the situation of unaccompanied and separated children rejected at the border in coordination with the Public Defender’s Office, to ensure that these cases are referred and monitored by them. UNHCR has established a BIA form for UASC and children at risk, which has been shared with partners and field offices to better identify and follow up on urgent cases. UNHCR works closely with the local child protection institution to assist the identification and protection of Venezuelan children arriving in the country, and advocates to be part of the BID process.

Operations also conduct home visits to address the protection concerns of children, as in UNHCR Zimbabwe, where child protection committees are trained to closely monitor UASC placed in foster care. UNHCR Nigeria, in collaboration with the children’s desk in the Ministry of Women, formed a foster committee. Members of this committee were provided with training in order to establish fostering procedures, guidelines for foster families as well as monitoring and supervision to prioritize children’s safety.

**Access to Birth Registration**

Having an effective birth registration system in place is an important first step to ensuring the protection of children.52 However, during emergencies, civil registration systems may be destroyed or inoperable. Additionally, a host State may decide to restrict the right to be registered at birth for refugees, other displaced children or stateless persons. Participatory assessments revealed that a majority of children of concern do not have birth registration, constituting a huge risk of statelessness. Lack of documentation also hinders their ability to exercise their rights, including access to education, and contributes to their fear of detention or deportation. Children whose births are not registered and who lack proof of their age are more vulnerable to marginalization, discrimination, abuse and associated protection risks such as child marriage,

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50 UNHCR is a member of the National Refugee Commission (CONARE) with voice and no voting right. See UNHCR, UNHCR Argentina Factsheet January 2017. (Geneva: UNHCR, 2017). Available at: https://bit.ly/2OWajXz.

51 UNHCR Europe Bureau, e-mail message to author, 8 May 2018.

child labour, forced recruitment and trafficking.\(^{53}\) In 2017, approximately 49 per cent of reporting operations issued over 80 per cent of children under 12 months with birth certificates.\(^{54}\)

Operations have undertaken activities to increase the provision of birth registration to children. For example, in the Democratic Republic of the Congo, UNHCR strengthened the capacity of its local partner to deliver birth certificates. The operation collected data on the number of children who receive birth certificates under regular procedures, disaggregated by sex, in order to strengthen its data collection for different groups and improve the delivery and quality of programmes and interventions. UNHCR Nigeria implemented a large-scale intervention to provide birth certificates to IDP and returnee children, which benefited around 102,801 children of concern. The children will be able to receive national identity documentation, which will further strengthen their legal protection and access to services. Additionally, the operation is working with the National Identity Management Commission to issue national identity cards. UNHCR Nepal improved access to birth certificates and increased refugee children’s participation in social protection initiatives in the host community, for example, by awareness raising and participating in trainings to enhance child-friendly governance by the municipal level child network, which also is responsible for refugee children. These initiatives moved forward through the Social Protection Task Force, chaired by the Deputy Mayor, and through communicating and networking with government authorities. Children’s community-based organizations in the camp directly liaised with the host community to strengthen this synergy. UNHCR Lebanon and its partners use various approaches to make Syrian refugees more aware of birth registration.\(^{55}\) The operation has developed a joint procedure with the Ministry of Social Affairs to ensure that the composition of refugee families registered with UNHCR is updated as new births occur. To increase outreach and assist families, individual counselling is offered to parents. Families at risk that are in need of immediate assistance are referred to UNHCR’s legal partners, who advise and assist them to complete the various steps of registration at hospitals, municipal offices or civil registry offices. Additionally, the operation coordinates and partners with a variety of stakeholders to ensure that all communities receive support for birth registration. Humanitarian partners, outreach volunteers, health personnel and Syrian community groups are all involved in raising awareness and identifying cases where assistance is needed.

Last year, UNHCR published a Good Practices Paper on Action 7 of the Global Action Plan to End Statelessness 2014–2024, on ensuring birth registration for the prevention of statelessness.\(^{56}\) The paper highlights examples of how UNHCR and its partners have addressed provision of birth registration to children of concern. For example, in Jordan, the Government has established dedicated civil registration offices and mobile services in the country’s refugee camps, allowing for services to be directly available to persons of concern.


2.7 Youth

UNHCR operations continue to work with refugee and host community youth to implement the Seven Core Actions for Youth that came out of the 2016 Global Refugee Youth Consultations.

UNHCR has encouraged the participation of the youth population by establishing and supporting Youth Committees and Youth Parliaments and empowering them to design and implement projects with support from the Youth Initiative Fund.

UNHCR continues to support educational and employment opportunities for youth including through the Albert Einstein German Academic Refugee Initiative (DAFI) scholarship fund and other innovative projects undertaken in collaboration with partners. In 2017, the number of youth of concern who benefited from the DAFI scholarship fund was around 6,723, of whom 41 per cent (2,776 students) were female.

A concerted investment in education and livelihoods opportunities is required to give talented refugee youth a chance in life and make their way to successful lives out of camp and in new societies.

UNHCR Regional Office in Pretoria

In their reporting, operations established that common protection challenges for youth included engagement and participation in the provision of protection, identification of solutions, as well as access to higher education opportunities and employment.

Engagement and Participation

Youth are seldom consulted and are often unable to fully participate in decision-making, which results in their talents, energy and potential remaining largely untapped, also leading to significant protection concerns for young people themselves. Operations reported concerns raised by youth in relation to discrimination and lack of youth-friendly spaces. Lack of inclusion in community structures leads to youth being uninformed and having limited access to timely data, which impacts their ability to make informed decisions. For example, engagement with youth and UASC in UNHCR Greece and UNHCR Sweden revealed that they did not understand the lengthy asylum procedures and were anxious about the outcomes of family reunification and relocation processes. In UNHCR Malaysia and UNHCR Rwanda, operations held discussions with youth where it emerged that they felt uninformed on safe sex practices. In Rwanda, youth in camp settings did not want to discuss sexual and reproductive health matters with the health workers, as they were often members of the refugee community. Throughout operational reporting, youth have expressed the desire to be engaged and participate in decision-making and the provision of protection and solutions through community centres, youth committees and other youth-run structures.

UNHCR Zambia identified eight youth to be part of weekly Child Council activities led by a local partner, representing the refugee community among local children. The council members act as ambassadors and advocate for issues that are pertinent to them and their peers such as on HIV/AIDS, drugs, homelessness, suicide and abuse. In addition, based on recommendations from the 2016 Global Refugee Youth Consultations, UNHCR facilitated the formation of a youth group, called “Cooperation for Refugees and Vulnerable Children”. This is a refugee youth-led initiative, comprising 30 members aged between 15 and 25, which includes both refugees and Zambian nationals. The group identified three core issues that it addressed: advocating for documentation for youth, combating discrimination in schools and promoting peaceful coexistence. A

UNHCR’s efforts to tackle the issue of gender discrimination in nationality laws also help to combat childhood statelessness, as it is children that are most affected when women are prevented from conferring their nationality on an equal basis as men. Childhood statelessness can also be prevented if States include safeguards in their nationality laws to ensure that children who would otherwise be stateless that are born on their territory, and abandoned children whose parents are unknown, acquire the nationality of the State in which they are born or found.58 To encourage positive action by States in this respect, UNHCR published a good practices paper on ensuring that no child is born stateless, which highlights examples from countries such as Chile, Finland and Kenya. Childhood statelessness can also be prevented by ensuring universal birth registration.59 On its own, lack of birth registration does not usually mean that a person is stateless or even at risk of statelessness. However, possession of a birth certificate helps to establish entitlement to nationality. Specific groups may face particular problems when it comes to birth registration, such as children born outside marriage, nomadic populations, children of non-citizens including refugees and migrants in an irregular situation. To encourage positive State practice in this area, UNHCR published a good practices paper on ensuring birth registration for the prevention of statelessness, which highlights examples from countries such as Bosnia and Herzegovina, Jordan and Thailand.60 A number of UNHCR operations worked with governments and civil society groups in countries such as Chad, Chile, Lebanon, Kenya, Nepal and Nigeria to improve access to birth registration for refugees and other groups vulnerable to risks of statelessness.

Addressing childhood statelessness is also the focus of the UNHCR and the United Nations Children’s Fund (UNICEF) Coalition on Every Child’s Right to a Nationality, which was launched at the end of 2016.61 The Coalition aims to develop, expand and strengthen international co-operation to combat the hidden problem of child statelessness. It works to ensure that no child is born stateless, eliminate laws and practices that deny children nationality on discriminatory grounds, remove gender discrimination from nationality laws, improve birth registration to prevent statelessness and encourage States to accede to the UN Statelessness Conventions. In 2017, the Coalition’s membership expanded to include more than 40 NGOs and six UN Agencies. UNICEF and UNHCR worked together in a dozen countries, including Albania, Norway, the Philippines and South Africa, to develop joint strategies to address childhood statelessness.

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61 See UNHCR & UNICEF, Coalition on Every Child’s Right to a Nationality. Available at: https://bit.ly/2h3yjqL.
In **UNHCR Afghanistan**, interactions with youth returnees revealed that they wanted a social space where they could have the opportunity to participate in decision-making. In response to this, innovative programmes such as the Youth Excellence Action Hubs or the CODE4FUN initiative, contributed to women and youth empowerment by addressing SGBV. CODE4FUN provided an opportunity for students to improve their creative skills by providing a safe, secure and adolescent-friendly space, where girls and boys can learn and communicate. In addition to teaching coding skills to develop mobile applications (for iOS and Android) on child protection, education and the environment, the programme focuses on enhancing students’ self-esteem and confidence through interactive sessions on interpersonal, leadership and teambuilding skills.

**UNHCR Turkey** supported a project designed and implemented by a refugee youth group in line with the overarching priority of enhancing social cohesion. Led by a group of 20 Syrian, Iraqi and Turkish youth, the project directly benefited approximately 230 participants through its activities under the Youth Discussion Forum and Summer Camp. These included weekly meetings to discuss problems and devise solutions in relation to language barriers, violence against women, child marriages, discrimination, integration, access to medical and basic services and freedom of expression. A stakeholders meeting was organized by the youth to present the project outcomes, which included government officials, donor representatives and civil society actors. The project represented a unique occasion for identifying, developing and utilizing youth capacities, also facilitating youth networking and information sharing. It was a means to introduce them to humanitarian actors in the field and provided them with the space to take the initiative and actively engage in advocating for equal rights and improved services for refugees.

In **UNHCR Venezuela** a youth committee was set up which restored a community soccer field where sports are now practiced regularly in a violence-free environment, and where girls and boys can interact. With the support of community members, the youth group organized brigades for the cleaning of river banks and removal of debris and weeds. Youth members were trained on early warning and emergency management to respond to flooding of the La Grita River. The training improved the youth group’s capacity to manage community emergencies and also enhanced their communication and leadership skills. The project improved the youth’s social esteem, since, having assumed leadership responsibilities within the community, they are recognized as important social actors.

**Access to Higher Education**

UNHCR recognizes that supporting higher education contributes to solutions and post-conflict reconstruction; promotes social, economic and gender equality and empowers refugee communities. In addition to teaching refugee adolescents and youth skills to live productive, fulfilling and independent lives, participation in education enhances protection outcomes. Educational opportunities provide youth with a safe space to interact with their peers and mentors, which can mitigate against protection risks such as child marriages and child labour. Access to higher education fosters critical reflection and social responsibility, increases students’ social capital through connecting them with like-minded people, provides them with knowledge about social and political structures, builds skills necessary to process and communicate information and expands opportunities for engagement.

However, despite their potential, young persons of concern are greatly disadvantaged in accessing higher education, as well as technical and vocational training. Operations reported that inability to pay school fees was one of the limitations to accessing secondary and tertiary education. Other concerns raised by students included discrimination in schools and harassment on the way to and from school. Lack of money to buy school supplies, limited availability of text books and poor infrastructure in schools were also repeatedly highlighted as major concerns. Due to limited slots in schools and vocational programmes many youth, particularly in camp settings, are left idle.

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64 UNHCR, **Missing Out: Refugee Education in Crisis.** (Geneva: UNHCR, 2016). Available at: [http://www.unhcr.org/57d9d01d0](http://www.unhcr.org/57d9d01d0).
To improve access to higher education for young women, UNHCR Pakistan provides cash assistance to female students in grades 9-12 of secondary school in refugee villages in Balochistan. Sensitive to the unique cultural constraints placed on girls in the area, UNHCR has developed separate girls-only classrooms with female teachers and separate latrine facilities for women were put in place. Additionally, schools are located within two kilometres of the refugee villages, which allows girls to walk to school in groups rather than take public transport.65

In UNHCR Japan, under UNHCR’s Youth Initiative Fund, a group consisting of Japanese and refugee youth implemented a study-support project for Syrian refugee youth and adolescents who had recently arrived. Project activities included study-support sessions to improve their Japanese language skills and academic performance. These study-support sessions strengthened relations with the host community, as the youth formed a bond with each other. To strengthen their capacity, the youth group underwent teacher trainings on Japanese language teaching methods. As a result, the youth were empowered to organize stakeholder meetings with local communities and refugee parents, to raise awareness on the importance of education and to encourage the use of study-support services. The project published a job encyclopaedia to help refugee adolescents and adults understand the Japanese job market. Other activities under this project included fieldtrips to places of interest, to encourage the Syrian community’s understanding of local culture. Syrian students and their mothers were able to participate in events such as cooking classes, local drum lessons and local festivals.

UNHCR has collaborated with partners to facilitate access to higher education, through connected learning programmes66 such as Connected Learning in Crisis Consortium, in collaboration with the University of Geneva (InZone).67 These programmes offer connected learning opportunities of face-to-face and online courses, which benefited 7,000 refugee students in 11 countries in 2017. In addition, UNHCR has partnered with the Vodafone Foundation to establish 30 Instant Network Schools in the Democratic Republic of the

Congo, Kenya, United Republic of Tanzania and South Sudan. The Instant Network Schools integrate new technologies such as interactive digital technologies in learning and teaching environments, which has improved the quality of education by transforming the classrooms into innovative learning hubs. In 2017, around 62,500 refugee youth and 865 teachers benefited from these services.

For example, UNHCR Jordan diversified pathways for post-secondary education for youth through increased scholarships under DAFI, and by facilitating access to connected quality learning through InZone, with over 40 students participating in various InZone initiatives. Classroom sessions are held in a computer lab funded by UNHCR and its partner, Care International, enabling tutors and students to interact remotely. Apart from the computer lab, students use mobile devices to study and can access material on USB keys, when the internet is down. Tutor groups have also been set up on WhatsApp. Furthermore, a group of female and male refugee youth started a camp magazine called “Heartbeat of the Camp” to document community initiatives and success stories.

In addition to improving access to education for adolescents and youth, UNHCR has implemented Accelerated Education Programmes, which are specifically designed for over-age adolescents and youth, including out-of-school children. Accelerated Education Programmes are flexible, age-appropriate programmes that are run in an accelerated timeframe to provide learners with certified competencies for basic education. UNHCR has successfully coordinated the activities of the Accelerated Education Working Group (AEWG) by providing leadership, guidance and direction. In 2017, the AEWG activities included piloting, field testing, modification, finalization and launch of the AEWG guidance materials, as well as developing the learning agenda to strengthen the evidence base for accelerated education and the roll-out of workshops. In addition, UNHCR has partnered with UNICEF and the UK Department for International Development (DFID) to develop the first Humanitarian Education Accelerator. The goal of the project is to understand how to transform good pilot projects into scalable initiatives for refugees and displaced communities worldwide.

UNHCR has continued to support refugee youth to pursue their educational aspirations under DAFI. This initiative provides scholarships for refugee students to access higher education in their host countries so that they can build a better future for themselves and their communities. The DAFI programme intends not only to benefit the students, but also to create positive effects for their communities by fostering employability and employment as well as supporting students to meaningfully engage in their communities. In 2017, the number of students benefiting from the DAFI scholarship programme increased by 45 per cent from 2016. Over 6,700 refugee students were supported, with the addition of 13 new countries, bringing the grand total to 50 countries. Furthermore, 3,500 refugee students accessed Connecting Learning blended online courses, which combine digital learning with traditional classroom teaching. This enabled access to education for refugees from Afghanistan, Chad, Iraq, Jordan, Kenya, Malawi, Rwanda, Sri Lanka, Sudan and Thailand. In addition, in 2017, UNHCR implemented the Youth Education Programme in Kenya, Pakistan, Rwanda and Uganda. The goal of this programme is to offer innovative educational opportunities to secondary and post-secondary school students.

68 Ibid.
Employment and Work

In the Global Refugee Consultations held in 2016, refugee youth expressed that there are limited job opportunities available to them. Throughout operational reporting for 2017, they highlighted lack of vocational training opportunities. For example, engagement with the youth in UNHCR Djibouti revealed that adolescent girls are sent to work by their families, which puts them at risk of abuse and sexual exploitation, with possible unwanted pregnancies and rejection from the community as a consequence. Participatory assessments with youth revealed that they are worried about access to professional trainings and higher education that is not supported by UNHCR. Interviews with displaced youth in UNHCR Somalia revealed a high rate of unemployment, as many had not had formal or informal educational opportunities. They reported doing heavy work under exploitative conditions, for example in construction-related work. Many of them could not afford transport to town, forcing them to walk long distances to urban centres, where there are limited job opportunities.

In response to these challenges UNHCR Mauritania has targeted youth and adolescents with specific activities such as small-scale vocational trainings on market gardening, provision of literacy programmes and initiatives encouraging petty trade so that they do not remain idle in the camp. In urban areas, the operation continues to implement micro-credit projects for youth, in partnership with a local NGO. UNHCR’s partner also provided training developed by the International Labour Organization on employability and entrepreneurial culture, financial education, introduction to accounting, marketing and commercialization to 131 youth, while 222 youth received vocational training on tailoring, welding, carpentry, catering, auto mechanics and electrical maintenance. As a result, 48 youth (23 female and 25 male) have developed their own projects, while six (two female and four male) have been recruited to work in humanitarian organizations.

UNHCR Brazil launched the first Young Professionals Programme in partnership with local private companies. The project provided livelihood and vocational training courses to participants and referred them to paid internship opportunities offered by private companies. The operation intends to expand this project to other regions and has already started to liaise with potential partners in Roraima and Amazonas State.

Other operations have worked to provide livelihood opportunities to youth of concern which also give them the opportunity to integrate within the local community. UNHCR Tajikistan implemented a pilot project with Sheraton Hotel which specifically targets youth from both the refugee and the local community. The apprenticeship programme has been planned in a way to encourage collaboration and peaceful coexistence between refugee youth and the host community. It offers experience in the hospitality and tourism sectors and provides certificates upon completion. Overall, 10 apprentices have benefited from this programme with three having secured jobs after completing the training. To ensure sustainability, the operation has involved the Adult Education Centre at the Ministry of Labour, Migration and Employment to implement the programme in cooperation with other local actors.

UNHCR Uganda implemented a project under the Youth Initiative Fund by improving access to safe and sustainable energy sources that will reduce environmental degradation and provide youth with livelihood opportunities by building their capacity and skills through trainings on agroforestry. 510 youth from refugee and host communities affected by environmental degradation were targeted and divided into groups. These groups organized community sensitization and mobilization activities to gain community support to work together to establish and manage tree nurseries. To enhance the sustainability of the project, the group started producing liquid soap and shampoo as an alternative source of funding.

77 UNHCR, Asia and the Pacific Bureau e-mail message to author, 7 May 2018.
UNHCR strives to ensure, to the extent possible, the appropriate inclusion of the expressed priorities, needs, capacities and views of persons of concern in protection and solutions interventions, and to hold itself accountable to persons of concern for organizational decisions and the actions of its personnel.79

Accountability to Affected People (AAP) can be understood as the responsible use of power in humanitarian action, combined with effective and quality programming that recognizes the dignity, capacity and abilities of communities of concern.

At the World Humanitarian Summit held in May 2016, far-reaching commitments were made by humanitarian actors, including through the Grand Bargain which promotes greater coherence, efficiencies, transparency and accountability on the part of key humanitarian aid organizations and donor countries. In particular, the Grand Bargain’s Participation Revolution commitment aims to build systematic links between feedback from persons of concern and corrective action to adjust programming.

UNHCR recognizes that responsible and effective programming that has a positive impact on women, men, girls and boys of concern requires that our primary accountability be to the people that we serve. To this end, the updated AGD Policy 2018 will drive progressive change toward fuller inclusion of displaced and stateless persons’ perspectives and more effective, accountable responses to their identified needs. The policy includes UNHCR’s framework on Accountability to Affected People (AAP), which advances UNHCR’s Strategic Directions

2017–2021\textsuperscript{80}, which emphasise “putting people first” and commit us to: holding ourselves accountable to the people we serve in all aspects of our work, ensuring that confidential feedback mechanisms are in place and ensuring that our programmes and activities take account of diverse ethnic, gender and other identities. This is further reflected in the New York Declaration for Refugees and Migrants and the CRRF, which calls for a people-centred approach, with a particular emphasis on the protection and empowerment of women, children and persons with specific needs.

UNHCR’s AAP framework is made up of four key areas: (i) Participation and Inclusion; (ii) Communication and Transparency; (iii) Feedback and Response and (iv) Organizational Learning and Adaptation.

The core actions in the AAP framework commit UNHCR staff to:

- Draw on the rich range of experiences, capacities and aspirations of refugee, displaced and stateless women, men, girls and boys.
- Be accountable to the people we serve, and to listen and respond to their needs, perspectives and priorities.\textsuperscript{81}

\section*{3.1 Accountability to Persons of Concern}

Throughout this report, examples have been given of how UNHCR operations ensure accountability to persons of concern in operational planning and implementation. Examples of UNHCR’s work towards implementing the framework on AAP, as included in the updated AGD Policy are:\textsuperscript{82}

\subsection*{Participatory and Inclusion}

Participatory methodologies enable persons of concern to take part in the identification of priorities and the planning and implementation of appropriate protection, assistance and solutions programmes. Women, men, girls and boys, including those from marginalized groups such as persons with disabilities and persons with diverse sexual orientations and gender identities, need equal opportunities to participate. UNHCR operations have made consistent progress in facilitating the participation of persons of concern by using innovative means to ensure their inclusion through participatory assessments, consultations, and evaluations. These range from employing interactive techniques by trained professionals to ensure the participation of children, to organizing community outreach volunteers and multi-functional teams to reach vulnerable groups of persons of concern who may be more marginalized and isolated, such as persons with disabilities or older persons. Community inputs in these assessments influence annual country operations plans.

For example, UNHCR Costa Rica has established a Monitoring, Evaluation and Communication Unit (UMEC) to ensure that persons of concern participate in planning and programming processes. This will contribute to monitoring the CRRF implementation progress. As part of UMEC’s strategy, a permanent call centre will be created to allow persons of concern to share their stories, concerns, protection/integration gaps and barriers to access rights. This will ensure that all persons of concern can participate fully irrespective of their status and/or conditions and that their opinions are taken into consideration during the planning and delivery processes.

UNHCR Ethiopia works in close collaboration with Somali refugees to ensure their meaningful engagement in all areas of life in the camp, including providing the space for them to be key actors in their own protection. Refugees’ governance structures are well organized in the camps, from the central level through the Refugee Central Committee (RCC), to the zones and blocks with zonal and block leaders and focal points for different technical areas. Coordination between refugees and other key stakeholders, such as UNHCR and the Governmental Administration for Refugee and Returnee Affairs, is systematized through the participation of RCC members in all inter-agency working group meetings at camp level as well as monthly meetings in the regional capital.


\textsuperscript{81} Ibid.

\textsuperscript{82} UNHCR, Policy on Age, Gender and Diversity. (Geneva: UNHCR, 2018). Available at: http://www.unhcr.org/5aa13c0c7.pdf.
Communication and Transparency

Persons of concern must be provided with accessible, appropriate communication channels for accurate and up-to-date information flow to and from UNHCR so as to be informed of their rights, responsibilities and entitlements, kept aware of protection and assistance programmes as they evolve, and be able to hold humanitarian actors accountable. As an example of this, in 2017, UNHCR developed "easy to read" versions of key documents, including the New York Declaration for Refugees and Migrants. This format is designed to improve access to information for people with intellectual disabilities and also benefits other population groups, such as those with low literacy or speakers of minority languages. Effective two-way communication with persons of concern can also help to manage expectations about what UNHCR can and cannot deliver,83 in addition to enabling dialogue with communities on their needs, capacities and their desired outcomes.

Including stakeholders in programme planning and implementation processes ensures better protection, and UNHCR operations have been working with partners to implement multiple outreach approaches. For example, in UNHCR Iraq, with a view to enhancing two-way communication and improving access to feedback and complaint mechanisms, an information desk was piloted in 2017. This helped to disseminate information to over 4,000 refugees and IDPs, while 729 of them received specific responses to their feedback about the available services.

Operations have also leveraged innovative ways to increase community outreach with the use of hotlines, call centres and other platforms such as WhatsApp groups or social media. In UNHCR Lebanon, around 8,000 focal points for refugees and partners are connected through the UNHCR WhatsApp communication tree, which disseminates information to approximately 60,000 families. Local outreach volunteers, including refugees, also manage four closed Facebook groups, which have a combined 160,000 followers.

UNHCR operations have taken steps to maintain continuous dialogue with persons of concern and to communicate in ways that are contextually appropriate and accessible for all groups of concern. For example, in UNHCR Rwanda, after consultations with persons of concern in urban and camp settings, the operation drafted SOPs for communication with persons of concern and expanded existing communication mechanisms. Based on community preferences, a WhatsApp broadcast network and a bulk SMS system were established to provide information on services and opportunities that may be relevant to them. Complaint boxes were also set up in all locations and centralized, dedicated email addresses were opened to submit reports or queries on protection and resettlement, or to confidentially report fraud, corruption or protection from sexual exploitation and abuse (PSEA).

Another innovative measure for communication and transparency was carried out by UNHCR Bangladesh. A community outreach member initiative was launched to provide refugees with individualized lifesaving information, reaching those who could not otherwise access traditional information channels. The operation implemented recommendations made by refugees during engagements, for example, by establishing information points at strategic locations, which improve access to camp-related information and allow complaints to be raised safely through complaint boxes, which display the number of a hotline.

Feedback and Response Systems

UNHCR’s commitment in this regard is to ensure that all formal and informal communications from persons of concern, both positive and negative, will inform protection and assistance programming, and that corrective action is taken as appropriate. The dignity and value of persons of concern and their right to be heard is affirmed by actively seeking their views, their feedback and any complaints.

This requires systems through which persons of concern can safely and confidentially communicate with UNHCR and partners, with confidence that corrective action will be taken. Country operations around the world employ a variety of methods to...

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83 UNHCR, 72nd Standing Committee Meeting, Update on Age, Gender and Diversity, EC/69/SC/CRP.11 (29 May, 2018). Available at: https://bit.ly/2yEnGkO.
collect and respond to such feedback from different groups in the community.  

UNHCR Argentina has organized specific mechanisms to facilitate participation, consultation and feedback by the refugee population through teams of social workers under UNHCR’s local programmes. These social workers provide appropriate counselling and have specific referral mechanisms to relevant service providers.

UNHCR Jordan has set up a helpline to provide information to refugees and asylum-seekers about the available services and to receive updates on their cases. The helpline also serves as a forum to collect complaints and answer inquiries about urgent protection problems. The helpline team provides basic counselling, monitors trends in refugee protection and provides public awareness to urban refugees. The helpline has a total of 15 agents responding to refugees’ queries and uses a Refugee Assistance Information System, called the Ticketing System, as its database of feedback received. The helpline has a voice menu which transfers the caller to the requested query theme and a ticketing system for each caller that traces the subject of the call and the follow up action to be taken.

### Learning and Adaptation

UNHCR’s commitment to AAP, and fulfilment of the above core actions, will only move the organization forward if we learn from our continuous engagement with communities and adapt our country level programmes and organization level strategies to respond to input from communities. The ultimate goal of Participation and Inclusion, Communication and Transparency, and Feedback and Response is to create the conditions in which policies, strategies and programmes are informed by, designed and adapted to the needs and capacities of persons of concern, as articulated by them. For example, in UNHCR South Sudan, persons of concern highlighted the need to

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**85** Ibid.
improve the quality of education. In response, UNHCR developed training programmes, including sessions on computer literacy, to increase the number of skilled teachers and improve minimum standards.

### 3.2 Protection from Sexual Exploitation and Abuse

UNHCR has zero tolerance for sexual exploitation and abuse and highlights the importance of staff upholding PSEA policies and the UNHCR Code of Conduct. As part of its mandate to lead the implementation of PSEA in UNHCR, the Ethics Office has coordinated and contributed to various activities focusing on PSEA and the management of risk, including the integration of PSEA in the Administrative Instructions on Detailed Planning and Budgeting for 2018.

To provide support to PSEA focal points in the field, the Ethics Office created a “Community of Practice” on Yammer in May 2017. Moderated and facilitated by the Ethics Office, this platform gives over 200 focal points the opportunity to share their best practices, lessons learned and materials developed. Moreover, the platform has helped the Ethics Office to initiate dialogue on PSEA amongst bureaux and offices and to increase the field ownership of the debate on how the organization can best implement PSEA.

In terms of awareness raising and outreach activities, the Ethics Office has created “no excuse” UNHCR pocket cards in English, French, Spanish and Arabic to be carried by all staff members as emphasized by the Deputy High Commissioner. Containing key information about PSEA and where to report allegations, the cards were distributed to all UNHCR personnel in the field and at Headquarters during the 16 Days of Activism against Gender-Based Violence in November and December 2017. Beyond that, various posters and flyers were updated and translated and the Ethics Office PSEA Intranet page revamped.

UNHCR operations have also made efforts to communicate UNHCR’s PSEA policy to persons of concern and to establish appropriate mechanisms for reporting. For example, UNHCR Ethiopia has set up complaint mechanisms throughout most of the operation, especially for PSEA concerns. The roll-out of these mechanisms included workshops with refugees to understand the context and explain PSEA. UNHCR Greece has approved internal SOPs on PSEA with designated and trained focal points. Additionally, implementing partners who provide accommodation to asylum-seekers have been trained on PSEA prevention, as well as site management support actors and partners. UNHCR has also led the Inter-Agency task force on PSEA and developed inter-agency SOPs, which include focal points and communication and reporting mechanisms. UNHCR Afghanistan has intensified its efforts to ensure zero tolerance of Sexual Exploitation and Abuse (SEA) in the operation and field offices. This was achieved by developing an operational PSEA strategy and work plan and ensuring all staff complete the mandatory PSEA online course. Additionally, the operation established a PSEA focal point network composed of the PSEA Advisory Board, the PSEA technical team and PSEA focal points in each field office. It also conducted a two-day workshop for all PSEA focal points. The office promoted communication and transparency by publishing PSEA pocket cards in English and Dari and distributing them to all UNHCR staff and partners. In addition, the UN Country Team launched a gender and sexual harassment online survey in Afghanistan. This was to collect information and data on perceptions of gender attitudes and behaviours, as well as the organizational response to gender issues and sexual harassment within UN agencies. Results revealed that sexual discrimination, harassment and/or violence was experienced by 6 per cent of men and witnessed by 7.5 per cent of men in the UN, compared to 22 per cent and 24 per cent of women respectively.

The Ethics Office’s 2017 PSEA training activities focused on the development of a UNHCR PSEA e-learning course, which was launched in August 2017 and has been declared mandatory for all staff by the Deputy High Commissioner. As of 31 December 2017, 9,870 UNHCR personnel had completed the e-learning, available in English, French, Spanish and Arabic.

As part of its training activities, PSEA continues to be an integral part of the Code of Conduct refresher sessions. All UNHCR country operations were called upon to hold a Code of Conduct refresher session and include in it case-studies and discussions on PSEA. As
a result of the increased focus on PSEA in the Code of Conduct refresher sessions 2016 and 2017–2018, the Ethics Office registered an increase in PSEA related queries from staff members, including demands for information and training material, from 16 requests in 2016 to 45 in 2017. Field operations also include PSEA in the code of conduct. For example, UNHCR Iraq supported its operations and partners in strengthening PSEA policies and reporting mechanisms by providing technical support and trainings on the Code of Conduct and PSEA mechanisms. UNHCR established an internal SOP to provide guidance and direction on the procedures to be followed in reporting allegations, suspicions and concerns about sexual exploitation and abuse in addition to implementing field-level action plans. All UNHCR staff have been trained on PSEA concepts, principles and reporting. Additionally, around 500 partner staff have received training on PSEA, including the police and national authorities. Complaint boxes have been installed across all camps to facilitate reporting by displaced persons. Furthermore, the operation is a member of the UN Inter-Agency PSEA In-Country Network, which set up a UN National Plan of Action on prevention and response to sexual exploitation and abuse.

3.3 Senior Management

All UNHCR staff are accountable to persons of concern and must ensure the integration of the AGD approach into their work. However, senior managers are responsible for translating the AGD Policy into action in all phases of the UNHCR operations management cycle. As also emphasized in UNHCR’s Strategic Directions 2017–2021, senior management has taken steps to strengthen linkages with international and local actors, as well as to strengthen the protection response to persons of concern.

The High Commissioner continued his commitment to uphold the values of the International Gender Champions, a network of leaders working to generate momentum at the highest levels for the promotion of gender equality. The UNHCR Senior Management Group on Inclusion, Diversity and Gender Equity, led by the Deputy High Commissioner, met several times during the year to oversee the implementation of recommendations from the Framework for the Future report. The Assistant High Commissioner for Protection continued his strong engagement on AGD in 2017 and 2018, most notably by overseeing and guiding the development and issuance of the updated
AGD policy in March 2018. He engaged closely with Member States to ensure that AGD considerations were mainstreamed throughout the global compact on refugees, and launched UNHCR’s commitments to improving our engagement with displaced persons with disabilities during the Global Disability Summit in London in July 2018. The Assistant High Commissioner convened the annual senior-level meeting on SGBV and PSEA, and issued video statements, advancing AGD, including on the Campaign on Tackling Bias and Raising Awareness on Inclusion and for the celebrations on International Women’s Day. He further facilitated relevant round table discussions and side events in 2017 and 2018, and met with key UN counterparts to discuss AGD-related protection issues and further collaboration, including the Special Representative of the Secretary-General (SRSG) for Children and Armed Conflict, Virginia Gamba, and the SRSG on Sexual Violence in Conflict, Pramila Patten and the UN Secretary-General’s Envoy on Youth, Jayathma Wickramanayake. In leading the Annual Programme Review (APR) for the field, the Assistant High Commissioner for Operations ensured the inclusion of safeguarding measures for persons of concern against gender-based violence and sexual abuse and exploitation into regional and country operations plans. In doing so the Assistant High Commissioner for Operations prioritized measures that enable adequate prioritization of response to the protection and assistance needs of groups at heightened risk. The implementation of the AGD approach was advanced during missions undertaken by the Assistant High Commissioner for Operations; for example, in Bangladesh where a particular focus of the missions was on survivors of sexual violence, girls and women exposed to survival sex or child trafficking. Similarly, a Mission to Brazil focused on addressing xenophobia experienced by persons of concern belonging to indigenous groups and strengthening initiatives to provide shelter/accommodation and other services to this group.

ENGAGING IN ADVOCACY

Encouraging the inclusion of the rights of women, children, persons with disabilities, older persons, LGBTI persons and minority and indigenous persons in national legislations. For example, UNHCR Chad has advocated with the government to facilitate refugees’ access to public universities. This resulted in the signing of several memoranda of understanding with public universities to allow refugees to access education under the same conditions as locals.

BUILDING AND STRENGTHENING PARTNERSHIPS

In line with the commitments made at the World Humanitarian Summit and UNHCR’s Strategic Directions 2017–2021, UNHCR operations have reported on collaborating with international and local actors to improve protection response services to persons of concern. For example, UNHCR Mauritania coordinated with state services, government and NGO partners, as well as other UN agencies, to organize participatory assessments with refugees and identify their main needs, capabilities and solutions. Additionally, in UNHCR Nigeria, the operation initiated a joint project with the National Human Rights Commission and the IRC. The project focused on capacitating community-based leadership to build sustainable self-protection mechanisms for affected communities. Community-based protection committees were established to identify, develop, implement and monitor community action plans.
Under the AGD Policy, UNHCR is committed to developing and strengthening staff capacity and competency in AGD analysis. It also commits to allocating human and financial resources to making the AGD approach standard practice and to achieve a positive impact on persons of concern.

This chapter focuses on how UNHCR addresses gaps on a continuous basis through the provision of additional guidance and the development of new learning opportunities for staff at all levels. It highlights how UNHCR has enhanced its capacity for AGD implementation through staffing, workplace culture and the provision of good practices and trainings.

CHAPTER 4: CAPACITY

4.1 Training

Through UNHCR’s online learning platform, Learn and Connect, UNHCR staff have access to blended learnings and e-learnings. In 2017, 549 UNHCR staff completed the “Age, Gender and Diversity Approach” course, while more than 3,500 staff completed the mandatory UN courses on “Prevention of Workplace Harassment, Sexual Harassment, and Abuse of Authority in the Workplace” and “Prevention of Sexual Exploitation and Abuse”. UNHCR also provides staff with opportunities for face-to-face and group trainings on the AGD approach.

UNHCR developed an e-learning on disability, which will be available to all UNHCR personnel, partners, government institutions and the broader humanitarian community in 2018. Additionally, in partnership with IOM, UNHCR released an LGBTI Protection Learning programme. To increase training capacity, an LGBTI Training of Trainers became a formal learning programme. To date, 22 UNHCR staff and 24 IOM staff have become certified trainers and
initiated or planned trainings in their regions. UNHCR also supported several country operations to develop action plans on disability-inclusive programming, for strengthening protection of persons with disabilities.

Recognizing that women face different security threats than men, UNHCR’s Field Security Service and Staff Welfare Section, together with the World Food Programme, ran a Training of Facilitators for Women’s Security Awareness Training (WSAT) in which 12 female security advisors (international and national) and three regional female staff welfare officers participated. Roll-out of the training began in 2017 in South Sudan and Chad where the women who were trained delivered the two-day training, together with an experienced WSAT facilitator. This will be rolled out in 2018 in all countries where the Training of Facilitators participants are from, with a view to expanding the training to other countries. Within the United Nations Security Management System, it has been agreed that WSAT is run by women for women, as other security trainings do not specifically or sufficiently address the security challenges that female staff face and many, particularly female, national security colleagues may feel uncomfortable raising security concerns in their respective locations. WSAT allows women to collectively share experiences and propose security risk management measures that may not already be recognized in their respective locations. One of the modules covered in the training is sexual harassment and harassment in the workplace. Gender inclusion in security management continues to be a theme in workshops for security advisors of the organization. In 2017, the focus was on immediate response and providing the initial psychological first aid when a member of the workforce reports gender-based violence, ensuring respect and empathy and provision of appropriate support in a non-judgemental manner.

A few examples of UNHCR AGD-related training conducted in 2017 are:

- **UNHCR Senegal** has promoted AGD coordination among countries in its area of responsibility, through specific trainings for all staff and associates on community-based protection, LGBTI persons and child protection. UNHCR staff from the West Africa region also participated in the Community Services Regional Training.

- **UNHCR Mexico** facilitated capacity building by engaging staff in the SGBV Training of Trainers; the Child Protection Learning Programme; SGBV Case Management Training and the LGBTI Learning Programme. Staff also attended capacity-building opportunities offered by external actors, for example on children’s rights, through workshops by UNICEF and a local partner as well as an LGBTI workshop facilitated by the IOM.

- **UNHCR Afghanistan** integrated its SGBV interventions with activities on peaceful coexistence, protection monitoring, persons with specific needs and child protection management projects on livelihoods. UNHCR actively participated in the SGBV sub-cluster as a core member to promote interventions that improve prevention, referral and response mechanisms. This includes advocating with relevant actors to ensure that returnee and IDP women enjoy the same rights as the local population. The operation also provided basic training on identifying, preventing and responding to SGBV to UNHCR staff, implementing partners and the displaced and returnee communities. UNHCR utilized the 16 Days of Activism against Gender-Based Violence which included topics on women’s rights, the law on the elimination of violence against women, basic health issues, family planning and harmful traditional practices. The sessions also targeted community leaders and especially religious leaders to ensure that they contributed to disseminating key messages within the community.
4.2 Guidance and Good Practices

UNHCR is also continuously working towards developing, updating and disseminating practical guidance and good practices, to build staff and partner capacity on AGD.

The following are some examples of UNHCR’s work in this area for 2017:

- The regional office in Senegal continues to advocate with government actors and partners to increase access to essential public services for persons of concern and to incorporate AGD mainstreaming. This has resulted in the integration of child protection and SGBV SOPs and strategies into existing national systems.

- **UNHCR Greece** has produced internal guidance on feedback and complaints systems for partners providing accommodation to persons of concern and trained their staff on the implementation of these accountability mechanisms. UNHCR also launched the website “help.unhcr.org” to provide key information to asylum-seekers and is in the process of developing feedback mechanisms within this tool.

- The **regional unit in Italy** used conclusions and opinions gathered from persons of concern to feed into recommendations to the Government of Spain, which were also shared and discussed with relevant authorities. The document included a strong AGD component and stressed the need to consult with persons of concern and increase approaches contributing to their empowerment, in addition to establishing mechanisms for identifying the specific needs of persons of concern and ensuring proper referral. The document also recommended the establishment of SGBV and PSEA SOPs that include prevention and response mechanisms and Code of Conduct sessions for staff.

- The **MENA Bureau** published a regional study on promising practices in promoting gender equality through humanitarian programming in countries with refugee response plans, which includes innovative approaches to strengthening engagement with and protection for LGBTI persons of concern, among others. The MENA protection service also worked closely with key operations to develop a protection-sensitive approach to identifying and responding to persons of concern with age-related protection needs. A regional community-based protection guidance...
is also used to integrate approaches, enhance accountability and AGD sensitivity in protection programming across the region. In addition, the MENA protection service contributed to the Syria Crisis Education Information Management Package, which contains a coherent list of Education in Emergencies indicators and elaborate guidance on activities and calculation methods to break down education data by age, gender and disabilities, promoting alignment with national data collection and management systems.

### 4.3 Staffing and Workplace Culture

UNHCR is taking steps to achieve gender balance and diversity among its staff and operations, including:

- **Development and dissemination of strategies and frameworks**

  UNHCR continues to implement and make progress on the recommendations from the Framework for the Future: Gender Equity, Diversity and Inclusion in Staffing. In 2017, a new recruitment and assignments policy was developed after organization-wide consultations. The policy and administrative instructions incorporate considerations for ensuring the support of gender equity and geographical diversity; special measures to achieve gender parity goals and increased opportunities for national staff to convert to international positions. The Challenge Team for Inclusion and Diversity and the UN-GLOBE Coordinator were appointed at the start of 2017 and provided a resource for constructively addressing the challenge as well as informed input to the new policy. UN-GLOBE is a staff group representing LGBTI staff members of the UN system and its peacekeeping operations. The Challenge Team comprises diverse members of the workforce drawn from across the organization to contribute different perspectives to help create a shift towards a more inclusive culture.

Towards the end of 2017 UNHCR developed a Gender Parity Action Plan in line with the Secretary General’s direction to achieve gender parity across the UN, committing to achieving gender parity by 2021 in international professional grades. In addition, it is working towards increased gender balance amongst national staff as well as greater overall geographical diversity.
Strategic workforce analysis with a focus on AGD

A comprehensive analysis of the workforce by functional area was completed and included a focus on age, gender and diversity, including language skills. Following this, a series of meetings between the divisional management teams contributes to strategic workforce plans that include a focus on gender and diversity. Improvements providing more specific information on trends by region and by country were made to the internal online Gender and Diversity Dashboard, which is accessible to all UNHCR staff.

Developing a more inclusive and enabling work environment

The results of the 2016 Inclusion survey helped to inform the decision to make “Inclusion, Diversity and Unconscious Bias” the theme for the 2017–2018 mandatory Code of Conduct Refresher sessions. Thirty facilitators attended, and facilitation guides and workshop materials were developed and shared on the intranet. The Ethics Office, supported by the Inclusion, Diversity and Gender Equity Senior Advisor, provides ongoing support for the roll-out and integration of the materials into various learning vehicles across the organization. For example, in Colombia, a session on Inclusion, Diversity and Unconscious Bias was added to the Conflict Management Training and was delivered to the whole operation (around 150 colleagues) in Spanish. The same was delivered in English in the Turkish operation to about 500 colleagues. Also, core management and leadership programmes have content that strengthens inclusion by focusing on the themes of unconscious bias, cultural orientation as well as communication and working styles.

Leadership from senior and executive management

The UNHCR Senior Management Group on Inclusion, Diversity and Gender Equity, led by the Deputy High Commissioner, met several times during the year to oversee the implementation of recommendations from the Framework for the Future report. In addition, the High Commissioner continued his commitment to uphold the values of the International Gender Champions, a network of leaders working to generate momentum at the highest levels for the promotion of gender equality. He also attended a training session on LGBTI Inclusion organized by UN-GLOBE and hosted by the UN Office at Geneva.

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Figure 5: Ratio of Female and Male UNHCR Staff in 2017

![Ratio of Female and Male UNHCR Staff in 2017](image)

Figure 6: Percentage of female and male UNHCR staff in 2017 by grade

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87 Data as at December 2017. UNHCR, Division of Human Resource Management, e-mail message to the author, 30 April 2018.
CHAPTER 5:
CONCLUSION AND WAY FORWARD

5.1 Conclusion

This report analyses UNHCR’s progress towards implementing the AGD Policy. It presents key trends concerning challenges and the activities undertaken by UNHCR to provide protection and solutions to diverse women, girls, boys and men of concern. While UNHCR has made progress with institutionalizing and mainstreaming the AGD policy and AAP, gaps still remain which are reflected in the way forward.

UNHCR recognizes that to address these challenges, it is crucial to develop an effective response by putting persons of concern at the centre of operational planning and delivery. Thus, the vision behind the updated AGD policy released in March 2018 is to improve AGD mainstreaming by setting out areas of engagement that represent and strengthen UNHCR’s commitments to AAP and women of concern. The updated policy will be implemented throughout UNHCR’s operational management cycle and includes 10 mandatory core actions. UNHCR will continue to revise and develop tools to improve implementation of the updated AGD policy, for example through capacity-building initiatives for UNHCR and partner staff, such as government and civil society actors. By applying the core actions throughout all operations and engaging with a broad range of actors, UNHCR is working towards the greater inclusion of all persons of concern, which will lead to more effective and accountable responses to their needs.

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UNHCR, 72nd Standing Committee Meeting, Update on Age, Gender and Diversity, EC/69/SC/CRP.11 (29 May, 2018). Available at: https://bit.ly/2yEnGkO.
5.2 Way Forward

In order to address the crosscutting challenges that were identified by operations in the 2017 AGD reporting, the following actions are considered:

1. To improve our capacity to identify groups and individuals at heightened risk, such as minorities and indigenous persons, LGBTI persons, older persons, and persons with disabilities, innovative approaches and existing successful practices – such as community outreach volunteers or the use of specific identification tools at registration – will continue to be promoted across UNHCR operations, namely through technical support missions, communities of practice and the annual AGD report.

2. To have a better understanding of the diverse needs of persons of concern and in compliance with the updated 2017 AGD Policy, UNHCR will invest further in data collection – broken down by age, sex and diverse characteristics. Existing methods of data collection to disaggregate data are being strengthened, including but not limited to biometric registration. Better analysis based on disaggregated data will support identification of effective solutions that advance gender equality and counter discrimination against different population groups such as persons with disabilities. Qualitative data will also be used to build the evidence base on needs and capacities within communities and will improve tailored responses which consider the many characteristics of each person of concern. This will also be one of the key requirements for the ongoing revision of the results-based management (RBM) system.

3. The updated AGD policy will be implemented with a particular focus on building and supporting the resilience and capacities of communities, families and individuals.

4. Importantly, UNHCR operations will pay particular attention to better recognizing the contributions of older persons and persons with disabilities, among others, in other words, they are not passive recipients of assistance, but are valuable resources and can be strong community leaders. As such, their skills and capacities will be made more explicit in operational planning and delivery.

5. Community ownership and accountability to affected people will be strengthened by better involving persons of concern in the development and implementation of programmes and by systematically using information from feedback and participatory assessments.

6. To increase women’s participation in leadership structures, UNHCR operations will prioritize accompanying measures such as easing women’s domestic burden through building stronger community support structures and raising awareness among displaced and host communities about equal roles for women and men within society. More programmes are needed that assist in positively transforming gender relations which include impact assessments and continuous input from women of concern on how to improve protection and assistance services.
7. AGD approaches constantly need to be reinforced and mainstreamed across UNHCR programmes and activities, with the support of international and local partners to improve the response to protection challenges faced by diverse groups of concern. Building capacity of staff and partners continues to be important to counter discrimination and ensure equal access to services.

8. Opportunities arising from the Comprehensive Refugee Response Framework (CRRF) and the Global Compact for Refugees must be leveraged, as well as linkages with various new and existing actors in refugee and humanitarian settings.