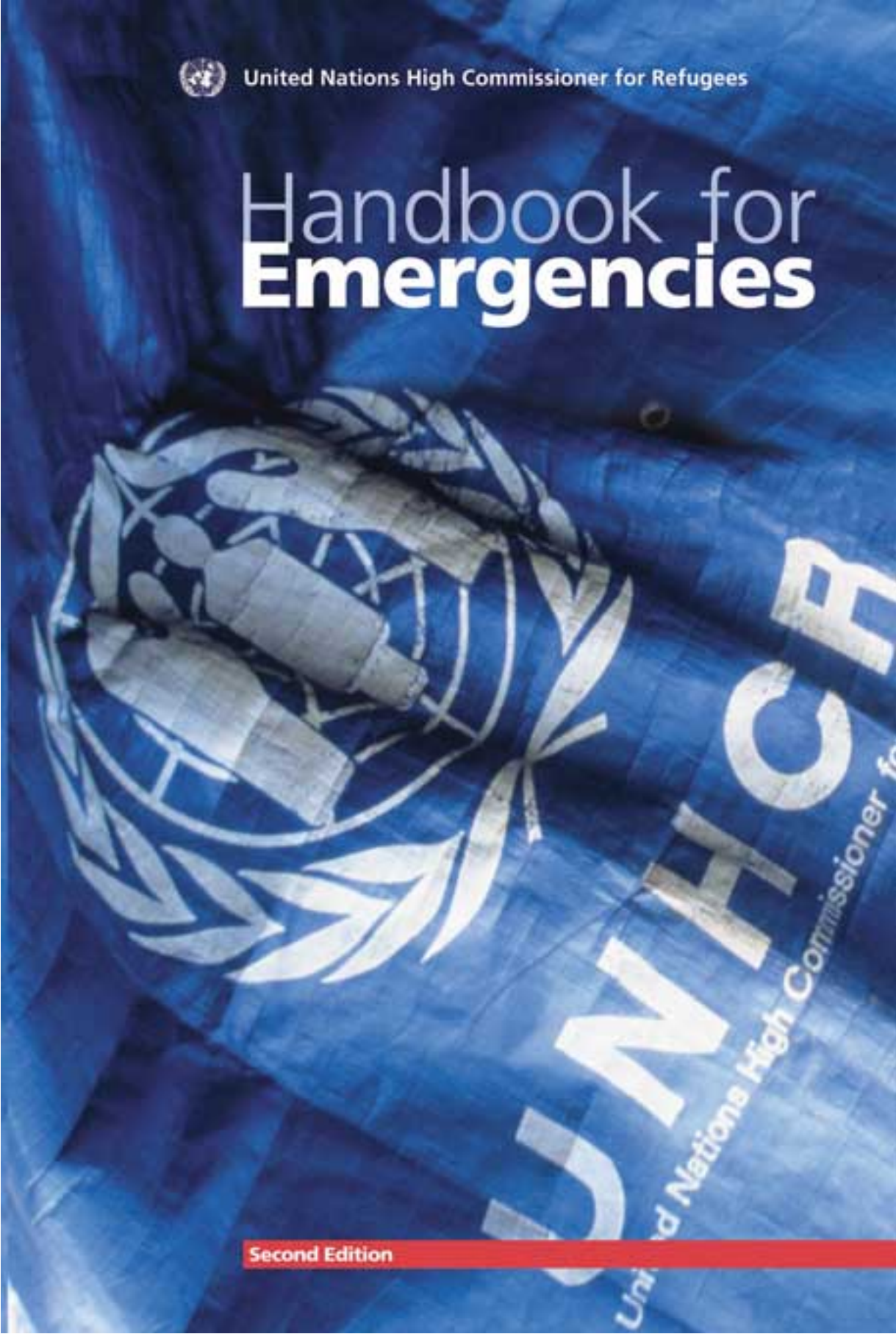
United Nations High Commissioner for Refugees
Handbook for
Emergencies
UNHCR
Second Edition

United Nations High Commissioner for Refugees

Handbook for Emergencies

Second Edition

Using the Handbook

Chapters may be located quickly by using the key on the contents page. Particular subjects may be located by using the index. The handbook is structured as follows:

Section One

summarizes UNHCR's mandate of international protection and the aim and principles of emergency response;

Section Two

deals with emergency management;

Section Three

covers the vital sectors and problem areas in refugee emergencies, including health, food, sanitation and water, as well as key field activities underpinning the operations such as logistics, community services and registration. The chapters in this section start with a summary so that readers, who might not need the full level of detail in each of these chapters, can understand the basic principles of the subject quickly;

Section Four

gives guidance on the support to field operations, primarily administration and staffing;

The Appendices

include UNHCR's *Catalogue of Emergency Response Resources*, which set out what resources can be immediately deployed, and how and when. The appendices also include a "Toolbox" which gathers, in one location, the standards, indicators and useful references used throughout the handbook.

In addition to the *Catalogue of Emergency Response Resources*, another key companion reference is the *Checklist for the Emergency Administrator* to which is annexed many of the essential UNHCR forms, policy documents, and guidelines referred to in this handbook, which are necessary for the administrator setting up a new office. Another key companion reference is the *UNHCR Manual* – this is valid at time of going to press; however, chapter 4 of the *Manual* dealing with programme and project management is due to be updated and replaced by the *Operations Management System Field Manual*.

**Any part of this handbook may be copied or adapted,
provided that the source is acknowledged.**

Handbook for Emergencies

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Introduction

Effective emergency preparedness and response has been a major priority of UNHCR throughout the decade. In 1991, during my first field mission as High Commissioner, I witnessed the sudden and dramatic exodus of hundreds of thousands of Kurdish refugees from their homes in Iraq to Turkey and the Islamic Republic of Iran. Since then, the Office has responded to a long list of massive outflows.

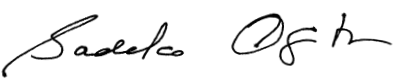
These crises have caused widespread human suffering and put great demands on our Office, prompting us to develop an effective and speedy response mechanism. We have established a revolving internal roster that ensures the deployment of UNHCR staff within 72 hours. Standby arrangements with external agencies for rapid deployment of their staff have also been created. We have devised and implemented staff training, as well as specific management tools to maintain our readiness to respond quickly and effectively to emergency situations. To address humanitarian needs urgently, a centralized stockpile of goods has been assembled, which includes governmental packages of humanitarian assistance.

Having dispatched over 300 missions throughout the world since 1992, the office now has in place a solid emergency response model, an achievement for which we can all be proud. Undoubtedly, this model will face further challenges as grave human displacements continue to occur. However, this pattern is changing from the humanitarian emergencies of the early nineties. Arising more frequently now are scattered crises, often of a relatively smaller scale and with limited international visibility. Conflicts are mostly internal and more localized, although external involvement continues to play an important role. Those forced to flee their homes, as well as the humanitarian workers assisting them, are increasingly targeted by the warring factions. On the positive side, improved communications, even in some remote locations, have enhanced our ability to operate. In addition, UNHCR has worked under new cooperative arrangements with other humanitarian agencies or even governmental institutions, including military forces.

This revised and updated Handbook provides useful guidance as our Office continues to cope with the swift and increasingly dangerous nature of fresh displacement. It stresses the importance of pre-emergency planning, as well as planning throughout every stage of a crisis. It focuses on setting coordination priorities, as well as contingency and operational planning. Important information has also been included regarding staff safety and working with military personnel, as well as a section addressing the issue of how to cope with personal stress.

Reflected in this edition is the dedication and experience of field staff and specialists both within the office and from partner organizations, which spans the last 17 years since the original UNHCR Handbook was first published. I would like to gratefully acknowledge what is an exemplary group effort.

This Handbook will assist colleagues to meet the challenges ahead as we cope with the changing nature of emergencies. It should serve as a reminder that displacement crises require carefully prepared and well managed responses that optimize the unique strength and capacities of various groups and organizations. As we face these new challenges, let us look forward to fine tuning this response model that our Office has worked so hard to establish.



ABBREVIATIONS

Organizations

DPKO	Department of Peace-keeping Operations
FAO	Food and Agriculture Organization of the United Nations
IASC	United Nations Inter-Agency Standing Committee
ICRC	International Committee of the Red Cross
IFRCS	International Federation of the Red Cross and Red Crescent Societies
ILO	International Labour Organization
MCDU	Military and Civil Defence Unit of OCHA
OAU	Organization of African Unity
OCHA	Office for the Coordination of Humanitarian Affairs
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
UNSECOORD	United Nations Security Coordinator
WFP	World Food Programme
WHO	World Health Organization

Other Abbreviations

DO	Designated Official
ABOD	Administrative Budget and Obligation Document
DSA	Daily Subsistence Allowance
ERC	Emergency Relief Coordinator
GIS	Geographical Information Systems
IDP	Internally Displaced Persons
IOM/FOM	Inter-Office Memorandum/Field Office Memorandum
NGO	Non-governmental Organization
MT	Metric tonne
SITREP	Situation Report

UNHCR's Mission Statement

UNHCR, the United Nations refugee organization, is mandated by the United Nations to lead and coordinate international action for the world-wide protection of refugees and the resolution of refugee problems.

UNHCR's primary purpose is to safeguard the rights and well-being of refugees. UNHCR strives to ensure that everyone can exercise the right to seek asylum and find safe refuge in another state, and to return home voluntarily. By assisting refugees to return to their own country or to settle in another country, UNHCR also seeks lasting solutions to their plight.

UNHCR's efforts are mandated by the organization's Statute, and guided by the 1951 United Nations Convention relating to the Status of Refugees and its 1967 Protocol. International refugee law provides an essential framework of principles for UNHCR's humanitarian activities.

UNHCR's Executive Committee and the UN General Assembly have also authorized the organization's involvement with other groups. These include people who are stateless or whose nationality is disputed and, in certain circumstances, internally displaced persons.

UNHCR seeks to reduce situations of forced displacement by encouraging states and other institutions to create conditions which are conducive to the protection of human rights and the peaceful resolution of disputes. In pursuit of the same objective, UNHCR actively seeks to consolidate the reintegration of returning refugees in their country of origin, thereby averting the recurrence of refugee-producing situations.

UNHCR offers protection and assistance to refugees and others in an impartial manner, on the basis of their need and irrespective of their race, religion, political opinion or gender. In all of its activities, UNHCR pays particular attention to the needs of children and seeks to promote the equal rights of women and girls.

In its efforts to protect refugees and to promote solutions to their problems, UNHCR works in partnership with governments, regional organizations, international and non-governmental organizations. UNHCR is committed to the principle of participation by consulting refugees on decisions that affect their lives.

By virtue of its activities on behalf of refugees and displaced people, UNHCR also promotes the purposes and principles of the United Nations Charter: maintaining international peace and security; developing friendly relations among nations, and encouraging respect for human rights and fundamental freedoms.

1

Aim and Principles of Response

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Definition and Aim

1. The majority of UNHCR's operations begin as a result of an emergency caused by a sudden influx of refugees[1]. The organization and procedures of UNHCR reflect this; much of UNHCR's normal work is in effect an emergency response. There are, however, situations that are clearly exceptional. This handbook addresses the needs of such situations.

Definition of

2. The distinction is one of degree: a definition of a refugee emergency for the purposes of UNHCR and this handbook might be:

> **any situation in which the life or well-being of refugees will be threatened unless immediate and appropriate action is taken, and which demands *an extraordinary response and exceptional measures.***

3. What is important is less a definition than the ability to recognize in time the development of situations in which an extraordinary response will be required of UNHCR in order to safeguard the life and well-being of refugees.

4. Much of the handbook is concerned with guidelines on the protection and material assistance likely to be needed when large numbers of refugees cross frontiers to seek asylum i.e. an emergency caused by a sudden influx of refugees.

5. Such emergencies are, of course, not the only situations which demand an extraordinary response of UNHCR. Equally swift action will be required in other types of emergency. For example, an emergency can develop in an existing operation, such as when events suddenly place in danger refugees who had previously enjoyed asylum in safety (discussed in chapter 2 on protection). It can also erupt during the final phase of an operation as in the case of a large-scale repatriation (discussed in chapter 19 on voluntary repatriation). In addition there are complex emergencies, which are humanitarian crises involving the competence of more than one UN agency (see chapter 7 on coordination for a full definition). The general guidance provided in this handbook will be useful to these types of emergencies as well.

[1] *For convenience, "refugee" is used in this handbook to refer to all persons of concern to UNHCR. The different categories of persons of concern, including refugees, are defined in chapter 2 on protection.*

Aim

The aim of UNHCR's emergency response is to provide protection to persons of concern to UNHCR and ensure that the necessary assistance reaches them in time.

Responsibilities

Governments and UNHCR

6. Host governments are responsible for the security and safety of, assistance to, and law and order among refugees on their territory. Governments often rely on the international community to help share the burden, and UNHCR provides assistance to refugees at the request of governments.

The statutory function of providing international protection to refugees and seeking permanent solutions for their problems is however, always UNHCR's responsibility.

7. The role of UNHCR in emergency operations is primarily to protect refugees. UNHCR assists and complements the work of the government by acting as a channel for assistance from the international community, and by coordinating implementation of the assistance. Whatever the organizational manner in which UNHCR provides emergency assistance in response to a government request, UNHCR is responsible for ensuring that the protection and immediate material needs of the refugees are met in an effective and appropriate manner.

UN Organizations

8. The material needs of refugees are likely to cover sectors for which other organizations in the UN system have special competence. In particular, the World Food Program (WFP), with which UNHCR has established a close partnership, provides the major part of the emergency food needs of refugees. In recognition of each organization's comparative advantages and skills, and with the aim of giving consistency and predictability to the relationships between them, UNHCR has concluded Memoranda of Understanding (MOUs) with a number of UN organizations. These MOUs also cover issues related to emergency preparedness and response, such as joint contingency planning, joint assessments and development of standards and guidelines, as well as programme implementation. Notable among these are the MOUs with WFP, the United

Nations Development Programme (UNDP) and the United Nations Children's Fund (UNICEF), which are contained in Appendix 3. UNHCR has also signed MOUs with the United Nations Population Fund (UNFPA), the United Nations Development Fund for Women (UNIFEM) and the World Health Organization (WHO).

9. Responsibility for coordinating the response of the UN system to a refugee emergency normally rests with UNHCR.

10. The UN body charged with strengthening the coordination of humanitarian assistance of the UN to complex emergencies is the Office for the Coordination of Humanitarian Affairs (OCHA)[2], through coordination, policy development and advocacy. Complex emergencies are defined and discussed in more detail in chapter 7 on coordination.

Non-Governmental Organizations

11. Large numbers of non-governmental organizations (NGOs) provide assistance to refugees in emergencies. These organizations often act as UNHCR's operational partners. The division of responsibilities is determined by the implementing arrangements agreed between them, the government and UNHCR regardless of whether funding is from UNHCR or elsewhere. This is discussed in more detail in chapters 7 and 8 on coordination and implementing arrangements.

Other Organizations

12. A number of other organizations also act as operational partners in the provision of assistance to refugees in emergencies. In particular, the International Committee of the Red Cross (ICRC), the International Federation of Red Cross and Red Crescent Societies (IFRCS) with the National Red Cross and Red Crescent Societies, have long provided such assistance. The ICRC mandate requires a high degree of operational neutrality and independence, which sometimes limits their participation in coordination mechanisms and the exchange of information between them and other organizations.

13. Other operational partners could include inter-governmental organizations, for example the International Organization for Migration (IOM). The objective of IOM is to ensure the orderly migration of persons who are in need of international migration assistance. IOM works subject to the agreement of both (or all) the states concerned with the migration. IOM has worked closely with UNHCR, notably by assisting with voluntary repatriation.

The Refugees

14. Beyond the right to international protection under the Statute of UNHCR and under the 1951 Refugee Convention and 1967 Protocol, all refugees, as indeed all persons, have certain basic human rights. These are enshrined in the Charter of the United Nations and in the Universal Declaration of Human Rights: the fundamental right to life, liberty and security of person; protection of the law; freedom of thought, conscience and religion; and the right to own property. Refugees have the right to freedom of movement. However, it is recognized that, particularly in cases of mass influx, security considerations and the rights of the local population may dictate restrictions.

15. Refugees and displaced persons also have, of course, responsibilities towards the country where they have sought refuge. These are set out in Article 2 of the 1951 Convention: "Every refugee has duties to the country in which he finds himself, which require in particular that he conform to its laws and regulations as well as to measures taken for the maintenance of public order." The civilian nature of refugee status must be respected.

Defining Responsibilities

16. All those involved, both inside and outside the UN system, should have clearly defined responsibilities within a single overall operation. This can be achieved through the establishment of an appropriate coordinating structure at various levels to ensure that duplication of effort and gaps are avoided. In certain situations, the coordinating role of UNHCR may need to be more direct and operational, both in planning and executing the emergency response, and in providing expertise in specific sectors.

Principles of Response

Introduction

17. Whatever the framework of responsibility for a particular refugee emergency, certain principles of response are likely to be valid. Many of these are common themes in the chapters that follow.

[2] This was formerly known as the Department of Humanitarian Affairs (DHA).

18. By definition, the needs of a refugee emergency must be given priority over other work of UNHCR. This is essential if the aim of ensuring protection and timely assistance to refugees is to be met. Leadership and flexibility are required of UNHCR in an emergency.

Get the Right People to the Right Place at the Right Time

19. The single most important factor in determining whether or not sufficient emergency assistance reaches the refugees in time will probably be the people involved in organizing and implementing the operation.

Enough UNHCR and implementing partner staff of the right calibre and experience must be deployed to the right places, and equipped with the authority, funds, material and logistical support needed.

No amount of expertise and experience can substitute for organizing ability, flexibility, a readiness to improvise, ability to get on with others, ability to work under pressure no matter how difficult the conditions, tact, sensitivity to other cultures and particularly to the plight of refugees, a readiness to listen, and, not least, a sense of humour.

Ensure the Measures are Appropriate

Identify Needs

20. An appropriate response in the provision of protection and material assistance requires an assessment of the needs of refugees that takes into account not only their material state and the resources available, but also their culture, age, gender and background and the culture and background of the nationals in whose country they are granted asylum. The provision of protection and of essential goods and services must be provided to refugees in ways which actually meet their needs.

Be Flexible and Respond to Changing Needs

21. What is appropriate will vary with time. In the early stages of a major emergency special measures that rely heavily on outside assistance may be necessary. However, as a general principle, the response should draw to the extent possible on local resources, materials and methods, and should, for example, avoid regimented refugee camps. Solutions that can be readily implemented with existing resources and simple technologies should be sought.

Identify Standards

22. It is an important responsibility of UNHCR to determine with the government and operational partners the standards of assistance that are appropriate. This requires expertise in a number of disciplines. The guidelines in Section III of this handbook suggest general considerations, to be modified in light of the circumstances of each emergency. Appendix 2 (Toolbox) also contains standards. What is to be decided for each sector is the correct level of total assistance from all sources.

23. As a general principle, the standards of assistance must reflect the special needs of the refugees based on their condition, physical situation and experiences. At the same time account must be taken of the standards planned for and actually enjoyed by the local population.

24. If the standards have been correctly determined, they cannot later be lowered without harm to the refugees. The refugees must, for example, receive a minimum basic food ration. Outside contributions required to reach the standards will, however, naturally be reduced as the refugees become more self-reliant.

Always Remember the Longer Term Objectives

25. A final general principle in considering the appropriateness of measures is that, from the start, resources must be divided between immediate needs and action aimed at longer-term improvements and the prevention of problems. For example, resources must be devoted to general public health measures as well as to the treatment of individual diseases, which will include many that could be prevented by better water and sanitation. Emergency assistance is to be allocated to the maximum extent possible to activities which will be of lasting benefit, thus keeping any relief phase as short as possible.

26. From the beginning of an emergency, and even during preparations for an emergency, planning must take into account the post emergency phase as well as the envisaged durable solutions.

Involve the Refugees and Promote Self-reliance

27. In order to ensure that the assistance provided to refugees is appropriate, the refugees must be involved from the outset in the measures taken to meet their needs. In addition, all

components of the operation must be planned in such a way as to promote their self-reliance. Obvious as this principle is, the pressures of an emergency often make it easier to organize an operation from the outside for, rather than with, those whom it is to benefit.

28. If the emergency operation involves the refugees in this way from the start, its effectiveness will be greatly enhanced. Furthermore, such an approach will allow the refugees to maintain their sense of dignity and purpose, encourage self-reliance and help avoid dependency. In emergencies, refugees are often regarded as helpless and passive recipients of external assistance. In the long term this sets a pattern of dependency. Refugees must be encouraged to help themselves by using their own skills and resources from the beginning of an emergency.

It is important to encourage refugee participation at all stages of planning and implementation.

29. Refugees are often most able to help themselves, and thus be least reliant on outside assistance, if they are not grouped together in highly organized camps, but rather reside in small, less formal groups.

30. The interests and needs of specific groups of refugees, particularly vulnerable ones, are better cared for and such efforts are more sustainable if community support and involvement is harnessed right from the start. In addition, refugee involvement helps ensure that the emergency response addresses social, human and emotional needs, and goes beyond the provision of material relief.

Be Aware of Social and Economic Roles

To plan and manage an emergency response effectively, the social and economic roles of refugee women, men and children must be properly analyzed and understood to see how these roles will affect and be affected by, planned activities [3].

31. It is essential to understand socio-economic factors when planning and implementing the emergency response to avoid unintentionally depriving some refugees of the benefits of assistance. This is often true for women, children, the elderly and the disabled. UNHCR pays particular attention to the needs of these groups, especially in emergencies. It is important that the basic needs of vulnerable groups (physically, mentally, or socially disadvantaged) are met. Thus in the ning and implementation of an emergency response, vulnerable groups must be identified and monitored systematically to ensure that they are not further disadvantaged. If necessary, special measures should be taken to meet their particular needs.

32. Even in an emergency, refugees are likely to have some form of representation, through a community or group organization.

It is important to find out exactly what kind of leadership structure exists.

It is also through an effective use of their representation that refugees' rights can be better promoted. However, be aware that leaders may sometimes not be representational, or may have an agenda or objectives which could have adverse consequences on other refugees.

Do Not Treat Issues in Isolation

33. In all stages of an emergency, the problems and needs of refugees must be seen comprehensively, and sector-specific tasks be set within a multi-sectoral framework, since action in one area is likely to affect others. For example the real solution to a health problem might be found in improving the water supply. Ensure the correct balance in resource allocation between the different sectors.

A multi-sectoral approach must be a fundamental feature of an emergency response.

Ensure Environment is Considered at an Early Stage

34. Similarly, issues which are cross-cutting in nature should not be neglected. This is often the case with issues concerning vulnerable groups, children, women, and the environment. Environment concerns must be taken into account from the earliest stage. In an emergency involving large-scale population displacements, some environmental damage is unavoidable. Such damage can have an adverse effect on the health and well-being of the refugees and their host community. The emergency phase is therefore, a critical time to institute measures which limit environmen-

[3] *In UNHCR this method for assessment and planning is known as "People Oriented Planning", and discussed in detail in* A Framework for People-Oriented Planning in Refugee Situations Taking Account of Women, Men and Children, *UNHCR, Geneva 1992*

tal degradation. Environmental problems created at this stage become increasingly difficult and costly to redress. Every effort should be made to prevent, or at least minimize, irreversible environmental impacts caused by the emergency response activities and the presence of refugees.

Work for Durable Solutions

35. When an emergency occurs, actions taken at the very outset can have important longer-term consequences. Clear and consistent policies from the beginning will have an important long-term effect. Similarly, the immediate response of the international community to a major influx of refugees must take into account the ultimate aim of promoting a durable solution to the problem. This requires that the response both encourages the self-reliance of the refugees and reduces prolonged dependency on outside relief, and that it does nothing to prevent the promotion of a long-term solution as soon as possible.

36. As a general principle, the best solution is voluntary repatriation. Where this is not possible, assimilation within the country of asylum (local settlement) is in most circumstances preferable to assimilation within another country (resettlement), particularly for large groups and in cases where resettlement would take place in a cultural environment alien to the refugees. There may, however, be situations in which resettlement is the only way to ensure protection.

Monitor and Evaluate the Effectiveness of Response

37. Whatever the nature of the emergency, the action required of UNHCR is likely to vary with time and as circumstances change.

It is essential that the effectiveness of the response be kept constantly under review and action adjusted as necessary and in time.

This will require sound monitoring, reporting and evaluation systems, including indicators, to detect deterioration or change, and also a continuous review of the aims of UNHCR's assistance, both in terms of bringing the emergency to an early end and for the promotion of a durable solution.

38. Such monitoring must also ensure that the funds provided voluntarily to UNHCR by governments and others are being used to the best advantage. This is inherent in the principle of appropriate response. It should be borne in mind that whatever funds may be available in the early stages of an acute humanitarian emergency, the passage of time will produce financial constraints. Thus it is important that actual and potential donors see that the action proposed is indeed essential, and that its impact is effective.

2

Protection

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Introduction

UNHCR's Mandate

1.

UNHCR's fundamental responsibilities are to:

i. Provide international protection to refugees;

and

ii. Seek permanent solutions for their problems.

2. The need for international protection arises from the fact that refugees, unlike ordinary aliens, no longer have the protection of their home country. International protection is a temporary substitute for the protection normally provided by States to their nationals abroad until the refugee can again benefit from national protection.

In an emergency it must first be established that the persons endangered are of concern to UNHCR and thus entitled to protection.

3. The legal basis for securing this protection, the aim of protection, and the means to provide it, must be clearly understood. This chapter addresses these questions.

Legal Instruments

4. All UNHCR staff must be familiar with the key international instruments covering the protection of refugees. Of fundamental importance are the following:

i. Statute of the Office of the United Nations High Commissioner for Refugees;

ii. 1951 Convention Relating to the Status of Refugees and its 1967 Protocol;

iii. 1969 Convention Governing the Specific Aspects of Refugee Problems in Africa of the Organization of African Unity (OAU);

iv. 1984 Cartagena Declaration on Refugees, and 1994 San Jose Declaration.

5. Annex 1 lists these and other relevant international instruments and their main purpose(s).

6. Refugees enjoy basic human rights set out in instruments such as the Universal Declaration of Human Rights, and other instruments listed in Annex 1, as well as the rights they have as refugees which are described in the various refugee instruments.

Refugee Definition

7. A refugee is defined as:

any person who is outside his/her country of origin and who is unwilling or unable to return there or to avail him/herself of its protection because of:

i. a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion;

or

ii. a threat to life or security as a result of armed conflict and other forms of widespread violence which seriously disturb the public order.

Whether a person is a refugee is not dependent on formal recognition, but on the fact of meeting the definition of refugee.

Protection in Emergencies

8. On the spot presence and quick action are generally crucial to the attainment of UNHCR's objectives, particularly where there is danger of refoulement or abuses such as arbitrary detention or mistreatment.

The aim of international protection in emergencies is to:

i. Ensure admission and at least temporary asylum;

ii. Prevent forcible return ("refoulement");

iii. Ensure refugees are treated according to basic human rights standards.

Admission and Non-refoulement

9. The first and most urgent priority is to ensure refugees' right to asylum is respected, and to ensure they are not forcibly returned (refouled).

Non-refoulement

10. Of cardinal importance is the principle of non-refoulement. This principle is set out in Paragraph 1 of Article 33 of the 1951 Convention which states that:

> "No Contracting State shall expel or return ("refouler") a refugee in any manner whatsoever to the frontiers of territories where his life or freedom would be threatened on account of his race, religion, nationality, membership of a particular social group or political opinion".

Non-refoulement includes not rejecting or turning away a refugee at the border, as well as not returning him/her subsequent to admission to a country where he/she could face persecution.

11. The 1951 Convention provides for very limited exceptions to the principle of non-refoulement of refugees, namely, for those reasonably regarded as a danger to the security of the country where they are, or for those who, having been convicted by a final judgement of a particularly serious crime, constitute a danger to the community of that country.

12. The principle of non-refoulement has found specific expression in a number of international instruments adopted at the universal and regional levels.

13. Because of its fundamental and universally accepted character, the principle of non-refoulement has been recognized as a principle of customary international law, and hence binding on all states.

Non refoulement is a principle of international law and binding on all States irrespective of whether or not they are party to the 1951 Convention or other international refugee instrument.

Admission

14. Asylum seekers must be admitted to the state in which they seek refuge, without discrimination as to race, religion, nationality, political opinion or physical incapacity. The Universal Declaration of Human Rights states that:

> "Everyone has the right to seek and to enjoy in other countries asylum from persecution".

15. The General Assembly, on adopting the UNHCR Statute, called on governments to cooperate with the High Commissioner in the performance of his/her functions by, admitting refugees to their territories.

16. Refugees may not be able to meet normal immigration requirements because of their flight. The 1951 Convention obliges states not to penalize refugees for having entered their host country without the legally required formalities.

Status Determination

17. Refugees may be recognized either on the basis of "prima facie" group determination, or following individual status determination.

18. At the outset of an emergency when asylum-seekers arrive in large numbers over a short period of time, it is often impractical to resort to an individual determination of refugee status for each member of the group. In most emergencies those seeking refuge may be of concern to UNHCR, and the Statute calls for action on their behalf. When protection is clearly an urgent humanitarian need, the benefit of the doubt has to be accorded at least until a considered opinion is available.

In the case of mass influx, the aim is to secure treatment in accordance with universally recognized humanitarian principles not necessarily directly linked to the legal status of those in need. Speed of intervention to secure protection is thus the first priority.

19. In such circumstances, UNHCR and states usually resort to refugee status determination for the entire group based on their knowledge of objective conditions in the country of origin. Every member of the group is thus considered a refugee *prima facie*, i.e. a refugee in the absence of evidence to the contrary.

Persons Excluded From Refugee Status

20. Certain persons do not fall under the High Commissioner's competence and are excluded from protection. These are persons with respect to whom there are serious reasons for considering that they have committed a crime against peace, war crimes (e.g. torture or execution of prisoners), crimes against humanity (e.g. genocide), serious non-political crimes (e.g. murder or rape) outside the country of refuge, or acts contrary to the purposesof refuge, or that they have been guilty of acts contrary to the purposes and principles of the United Nations.

21. Headquarters must be informed immediately of such situations and as a rule, criteria for decisions on exclusion should be taken in consultation with Headquarters. Note that asylum seekers can be given prima facie recognition as refugees on a group basis, but can only be excluded from refugee recognition on an individual basis.

UNHCR and States' Responsibilities

22. The High Commissioner's universal protection responsibilities have been placed on him/her by the General Assembly (Statute of UNHCR). The exercise of the international protection function by UNHCR is not dependent upon a request by the government concerned.

23. In countries that are parties to the relevant legal instruments, UNHCR's protection function is facilitated. The 1951 Convention obliges States which are parties to the Convention to cooperate with UNHCR in the exercise of its functions and in particular to facilitate UNHCR's duty of monitoring the application of the Convention's provisions. The 1969 OAU Convention contains a similar clause.

24. Even when an emergency occurs in a country not party to the relevant international instruments, some of the principles embodied in the Convention are considered customary international law and hence are binding on all states. Foremost amongst them is the principle of non-refoulement. In addition, the moral strength and standard setting value of the conclusions of UNHCR's Executive Committee (EXCOM) is not limited to states which are members of the Executive Committee (see chapter 9 on external relations for more details on EXCOM members).

Basic Refugee Standards

25. A set of internationally recognized basic standards of treatment applicable in refugee emergencies has been agreed[1].

a) Refugees and asylum seekers should not be penalized or exposed to any unfavourable treatment solely on the ground that their presence in the country is considered unlawful; they should not be subjected to restrictions on their movements other than those which are necessary in the interest of public health and public order;

b) They should enjoy the fundamental civil rights internationally recognized, in particular those set out in the Universal Declaration of Human Rights;

c) They should receive all necessary assistance and be provided with the basic necessities of life including food, shelter and basic sanitary and health facilities; in this respect the international community should conform with the principles of international solidarity and burden-sharing;

d) They should be treated as persons whose tragic plight requires special understanding and sympathy. They shoud not be subjected to cruel, inhuman or degrading treatment;

e) There should be no discrimination on the grounds of race, religion, political opinion, nationality, country of origin or physical incapacity;

f) They are to be considered as persons before the law, enjoying free access to courts of law and other competent administrative authorities;

g) The location of asylum seekers should be determined by their safety and well-being as well as by the security needs of the receiving State. Asylum seekers should, as far as possible, be located at a reasonable distance from the frontier of their country of origin. They should not become involved in subversive activities against their country of origin or any other State;

h) Family unity should be respected;

i) All possible assistance should be given for the tracing of relatives;

j) Adequate provision should be made for the protection of minors and unaccompanied children;

k) The sending and receiving of mail should be allowed;

l) Material assistance from friends or relatives should be permitted;

m) Appropriate arrangements should be made, where possible, for the registration of births, deaths and marriages;

n) They should be granted all the necessary facilities to enable them to obtain a satisfactory durable situation;

o) They should be permitted to transfer assets which they have brought into a territory to the country where the durable solution is obtained; and

p) All steps should be taken to facilitate voluntary repatriation.

Temporary Protection

26. Some countries adopt a narrow definition of the term "refugee" which does not encompass those persons who are fleeing from armed conflict (such persons are considered refugees within the definition contained in, for example, the OAU Convention). In countries with a narrow definition, the term "temporary protection" has been used to describe protection extended to categories of persons clearly in need of international protection, but in respect of whom recognition as refugees would

[1] These were adopted by UNHCR's Executive Committee in 1981, Conclusion No 22.

present difficulties, either because they would not fall under the narrow definition, or because individual status determination would not be practical in view of the numbers of persons involved.

27. The basic elements of temporary protection include:

i. Admission to the country of refuge;

ii. Respect for basic human rights, with treatment in accordance with internationally recognized humanitarian standards (e.g. those basic refugee standards listed above);

iii. Protection against refoulement;

iv. Voluntary repatriation when conditions in the country of origin allow. Persons admitted to a country under a temporary protection scheme generally are not provided access to the full range of benefits accorded to individuals who are recognized as refugees.

Initial Actions

Introduction

28. The legal basis on which UNHCR intervenes to secure the protection of refugees is contained in the instruments mentioned above. Frequently the practical course of action to be adopted is, however, of more concern than the legal instruments themselves.

Often protection depends less on the fine print of a statute and more on swift appropriate action by UNHCR field staff.

29. In order for UNHCR to effectively discharge its protection mandate, the staff of the organization must have free and unhindered access to all refugees and asylum seekers irrespective of their location.

30. It should be borne in mind that action taken at the outset of an emergency may have significant long-term consequences, both for continued protection, including perhaps for other groups of refugees within the country, and for the promotion of durable solutions.

Rapid Deployment, Continuing Presence and Free Access

31. The first priority is rapid deployment of staff.

A continuing UNHCR presence with direct and unhindered access to refugees should be established in the area concerned for as long as required.

Free access and continuing presence are the vital practical support to ensuring UNHCR's mandate. Sufficient female staff must be present as this will help ensure that women refugees can express protection problems, and that these problems are recognized and dealt with appropriately.

Assessment

32. Good protection requires good information. UNHCR staff, often together with local officials, should visit all points of influx and refugee locations to gather information from refugees regarding the issues and questions set out in Annex 1 to chapter 5 on initial assessment (in particular those relating to who the refugees are, where they are from, why they have fled and identification of vulnerable groups). In addition, the refugees should be asked about the situation along the flight route and any problems encountered upon entering the country of refuge.

33. Sources of information must be developed and direct communication with contacts established in the field to ensure that UNHCR is quickly informed of any new influx or protection problem. Such open lines of communication are especially important for border regions which are remote from the capital, where UNHCR may not yet have a local presence.

34. Potential sources of information include:

❏ Asylum seekers themselves;

❏ Local or central government authorities;

❏ Community and religious leaders;

❏ National and international NGOs;

❏ ICRC, if present;

❏ Other UN and international organizations;

❏ National (particularly local language) and international news media.

35. If possible the central authorities should participate in fact finding missions, as this reduces the risk of misunderstanding between UNHCR and the central authorities and between the central and local authorities.

Ensuring Respect for Non-refoulement

36. The best way to ensure respect for the principle of non-refoulement and basic human rights is to create awareness among national authorities at all levels. In a crisis situation, it may not be possible to provide formal training, but in daily contacts with camp autho-

rities, local authorities, army personnel and border officials, the principle of non-refoulement must be made clear. Give concrete examples to the authorities of what can happen to a refugee who is returned: it can mean loss of life. Awareness may also need to be raised in the local population – the media may provide a forum – and public opinion can be an important influence.

Ensuring an Understanding of UNHCR's Mandate

37. The basis for UNHCR's concern and involvement should be explained in as practical terms as possible. Local officials may not know of UNHCR's mandate, nor of the assistance which UNHCR may already be giving elsewhere in the country.

The approach should stress that the work of the High Commissioner is of an entirely non-political character and is strictly humanitarian and social.

Border Presence

38. Develop good contact with border authorities and monitor cross border movements: this also helps provide contact with the refugees, and gives information about what is happening in the country of origin as well as potential problems in border crossings on both sides of the border. If it is not possible for staff to be present at all border crossing points on a permanent basis, each crossing point should be checked frequently.

39. Any protection problems relating to the admission or treatment of refugees at the border should be brought immediately to the attention of the competent authorities in the host country and any other country involved, for urgent remedial action.

Location of Refugees

40. Refugees should be accommodated sufficiently far away from the borders of the country of origin to avoid security problems.

Maintaining Contact with Local Authorities

41. At both the local and central level, there must be assured access at all times to those officials whose decisions will affect the refugees' situation. Establish who they are, contact them and if possible request home telephone numbers and other means of communication so that if a protection problem arises it can be brought to the right official's attention at once. Refoulements often take place very rapidly.

42. The most senior local official directly responsible should be approached and requested to allow (at least temporary) asylum. In some cases this may be the local military commander for a region.

43. NGOs may be able to advise on the local infrastructure and decision-making process, and influential local personalities, such as community or religious leaders, may be helpful.

44. Local authorities should be kept informed of demarches UNHCR has made or intends to make in the capital – these should not only be the demarches of a political or formal nature, but also those covering practical and assistance aspects of the programme.

Protection and Assistance

45. Protection and material assistance should be planned as complementary parts of a single UNHCR operation. Assistance cannot be provided without assured asylum and without life-sustaining material assistance, protection alone will not preserve the lives and well-being of the refugees. There should be an early indication that UNHCR's intervention may result in material assistance – in other words, that the granting of asylum and meeting of immediate needs will not be a burden on local authorities' budgets. Field Officers must receive early guidance contained in section III on the extent to which commitments on material assistance may be given, in order to communicate this information with local authorities. If the influx consists of additional asylum seekers clearly belonging to a group already assisted by UNHCR, a firm assurance of material assistance within the means available is usually given. Although the link between such assistance and protection responsibilities is self-evident to UNHCR, it should be borne in mind that the connection is not necessarily so clear to local or central authorities.

Registration

46. A registration exercise should be conducted at the earliest possible stage of an emergency operation (for more details see chapter 11 on population estimation and registration).

Women and Children

47. Refugees, and in particular women and children, travelling alone or in small groups in

remote border areas, are very vulnerable to extortion, abuse and sexual violence. A proactive approach is needed to ensure that protection needs are met.

UNHCR considers a child to be:

> **a person below the age of 18 years, unless, under the law applicable to the child, majority is attained earlier,**

as defined in the Convention on the Rights of the Child.

Note that gender-related persecution can be considered a ground for recognition under the definition of refugee.

UNHCR's Guidelines on the Protection of Refugee Women, and Refugee Children: Guidelines on Protection and Care (see key references) are essential reading for those designing a protection programme. More information on the procedures noted below is contained in section III of the Handbook, in particular chapter 10 on community services.

48. Prevent protection problems for refugee women and children through good programme design in all sectors, including:

- ❏ Obtaining a good knowledge of the population profile, especially the breakdown by sex and age;
- ❏ Preserving the original family and community structures;
- ❏ Consulting women on the design of the assistance programme, in particular on the design of the refugee camp and on the commodity distribution system;
- ❏ Locating services so as not to expose refugee women to additional risk when using them;
- ❏ Providing lighting in the camp especially along paths to latrines;
- ❏ Ensuring an adequate number of women staff, particularly protection, community services and health staff;
- ❏ Forming security patrols among the refugees themselves having the protection of women as a priority;
- ❏ Providing training for police and military personnel on the rights of women and children, especially in circumstances where there is a heavy military or police presence;
- ❏ Initiating tracing as soon as possible. Appropriate measures must be taken for identification, documentation, tracing, interim support and family reunion of separated children (see chapter 10 on community services for more information on unaccompanied children);
- ❏ Providing structured activities and primary schools for children (this can be important as a protection tool as it can help reduce recruitment into armed forces);
- ❏ Targeting assistance to remove the need for child labour;
- ❏ Issuing birth certificates. Birth registration may be a prerequisite for obtaining nationality, enrolling in school and may be a vital tool for tracing. It can also be important in preventing military recruitment and other forms of exploitation.

Help Children by Helping the Family; Support Women to Preserve Family Unity.

The single best way to promote the protection, well-being and safety of children is to support their families.

Actively work to preserve family unity. Measures to promote the health and physical security of refugee women can help prevent separation of mother and child. A family, whose members have become separated or who are under serious stress, puts children at particular risk. Give priority to helping parents and other child care-givers meet the needs of their children. Also, recognize the parents' own needs. Families may need assistance in using their own coping techniques and rebuilding their support networks. Make every effort to preserve or reconstitute family help networks. Family groups wishing to live together should be helped to do so.

Monitoring and Reporting

49. Once immediate protection is secured, arrangements must be made to monitor the situation and ensure continuing respect of the rights of the refugees.

50. Immediate, clear and regular reports of developments, action taken and intended to be taken are important, whether from the Field Officer to the Head of Office or from the latter to Headquarters. Guidance must be requested as necessary and Headquarters level interventions recommended as appropriate. See Annex 3 to chapter 8 on implementing arrangements, for a standard situation report.

51. A prerequisite for intervention with a government, or for mobilization of international support, is accurate situation reporting.

Field staff at the site, anxious to provide immediate help, must remember that unless information gathered locally is shared, its usefulness is limited.

Formalizing Arrangements and Written Demarches

52. Any temporary or ad hoc agreements with the authorities should be formalized, as for example that covering the local UNHCR presence. Reference should be made to protection and durable solutions in any formal exchanges governing the provision of material assistance.

53. As a general rule, a written demarche should be made as soon as possible to the central authorities at the highest appropriate level. This level, and the form of the demarche, will be determined by the nature of UNHCR's presence in the country. A demarche by a newly arrived mission would normally be addressed to the Minister of Foreign Affairs (or perhaps Interior; the advice of UNDP and/or embassies should be sought). The communication might:

i. Refer to the information available to UNHCR on the influx or problem (qualifying it as necessary: the government will often know more than UNHCR);

ii. State UNHCR's view that persons involved are or may (as applicable) be of concern to the High Commissioner;

iii. Refer to the government's protection responsibilities;

iv. Request (confirm understanding, express gratitude for, etc.) assurances that persons will be granted (at least temporary) asylum (if appropriate: pending determination of status and longer-term arrangements);

v. Offer, where persons are found to be of concern to UNHCR, commitment in principle to provide material assistance (for example, "every effort" formula).

54. The text of representative level demarches should be communicated to Headquarters at once both for information and in order that they may be shared with the permanent mission and/or referred to in any subsequent Headquarters level demarches. Likewise, the texts of the latter should of course be shared at once with the field.

55. Representatives should immediately recommend action at the Headquarters level if they are in doubt that their interventions alone will secure protection.

56. New oral and written demarches must be made if there are any grounds for concern that protection is still not adequately assured (refoulement, abduction, arbitrary detention, mistreatment, abuse of women and children etc.). Complementary action at the local level should both closely monitor developments affecting protection, and concentrate to the extent possible on assisting the authorities to meet the practical problems of the influx.

Public Relations

57. In certain circumstances tensions in relations between neighbouring countries may make it necessary to stress even at the local level that the granting of asylum is a purely humanitarian act.

Emphasize that the granting of asylum is purely humanitarian and therefore not a hostile act, and that UNHCR's presence and involvement may help reduce tension.

58. Particular attention should be paid to briefing other UN organizations and the diplomatic community, especially those interested governments whose influence may be able to facilitate protection (for example, by an early indication of support for UNHCR and/or of intent to contribute financially to the UNHCR operation).

59. Visits by national and international media and the diplomatic corps may help achieve a broader appreciation of UNHCR's protection function. The position to be taken with regard to the media will depend very much on the circumstances and whether or not publicity would help protect persons of concern to UNHCR. Close coordination within the various levels of UNHCR is necessary. Where UNHCR is already represented, previously established good contacts with the locally based (and especially local language) media may prove a valuable source of information and is useful in advancing an understanding of UNHCR's role. General guidance regarding media relations is provided in chapter 9 external relations.

Physical Safety of Refugees

Introduction

60. Even after they have been admitted to a country of refuge, refugees may still face serious threats to their safety. In emergencies, some basic human rights are particularly

threatened and will need to be specially protected by law as well as by action. These threats may originate from the country of origin or of asylum or from groups among the refugees themselves.

Camp Security

61. Threats of military attacks originating from the country of origin may be reduced by locating or relocating camps or settlements a reasonable distance from the border (see chapter 14 on site planning). In addition the authorities of the country of asylum may have to increase their military presence in the border area and around refugee settlements. However, military presence inside refugee camps or settlements should be avoided.

62. In the country of refuge, threats to physical safety of refugees (refoulement, unlawful detention, sexual violence, etc.) may emanate from officials dealing with the refugees.

The authorities of the country of asylum must be made aware of the fact that they retain primary responsibility for security and must ensure the safety and well-being of refugees.

63. Corrective action is in the hands of the authorities and must be taken resolutely. UNHCR must maintain contact with the refugees and the authorities to ensure that there is adequate response.

64. Criminal attacks and banditry against refugees should be addressed by civil authorities and security forces of the host country in close cooperation with UNHCR and the refugee community.

65. In situations where armed individuals are part of the refugee population, UNHCR should encourage the screening of the whole population and the separation of refugees from armed individuals, as well as their disarmament.

66. In all cases of military and police presence, general measures as described in paragraph 48 such as awareness campaigns and training for protection of the rights of refugee women and children are important in order to prevent sexual violence against them.

67. In cases of internal conflicts among the refugee population UNHCR should initially encourage a mediation by the refugee community. If this fails, UNHCR should request the authorities of the host country to resolve the conflict.

Reducing Tension Between the Refugee and the Local Community

68. In situations which may give rise to tension and conflict between the refugee community and the local population, the following measures may be considered in addition to action to address the specific causes of the problem:

i. Arranging regular meetings between the representatives of the refugees and the leaders of the local community;

ii. Sensitizing the local population to the plight of the refugees through local media (programmes on radio and TV, articles in newspapers) and community leaders;

iii. Sensitizing refugees to local customs and traditions;

iv. Ensuring that sufficient assistance is mobilized so that the presence of refugees does not impact negatively on scarce local resources;

v. Benefiting the local community through improvements in infrastructure in the areas of water, health, roads, etc.

69. As a measure of protection, UNHCR staff should encourage and support the organization of the refugee community and ensure its involvement alongside local authorities and communities, in all aspects of the administration of the refugee settlement. Women and adolescents should be included in such organizations, particularly those dealing with issues affecting their security. Other actions should include UNHCR presence in refugee camps and special training in international refugee standards and norms for all officials dealing with refugees.

Physical Safety in Areas of Conflict

70. International humanitarian law[2] provides protection to civilians including refugees in situations of armed conflict. In non-international conflicts (i.e. internal armed conflict but not police operation), all parties to the conflict are bound by the 1949 Geneva Conventions to respect all persons not taking an active part in the hostilities, and in particular:

i. To treat them humanely and without distinction as to race, religion, sex, birth, wealth or any other similar criteria;

[2] *The four Geneva Conventions of 1949 and their two Additional Protocol of 1977 deal with protection of civilians in armed conflicts.*

ii. To refrain from violence to life and person;

iii. Not to take hostages;

iv. To respect personal dignity;

v. Not to pass sentences or carry out executions without due process of law;

vi. To collect and care for the wounded and sick.

71. The International Committee of the Red Cross (ICRC) is the agency charged with supervising the implementation of international humanitarian law in situations of armed conflict. In most situations of armed conflict or civil strife, the ICRC offers its services to all parties to assist victims and ensure the protection of civilian populations – including, where applicable, refugees and other displaced populations – as well as detained combatants.

72. UNHCR staff should seek the cooperation of the ICRC, wherever it is present, and benefit from its expertise in dealing with state and non-state parties alike in situations of armed conflict.

Operations in Areas Controlled by Non-state Entities

73. In situations of civil strife or internal armed conflict, particular difficulties may arise from the fact that UNHCR's interlocutors are not states or regular armed forces answerable to states, but insurgent groups and other non-state entities. UNHCR may have no choice but to deal with these groups as they exercise de facto control over a refugee population. It will be important to highlight the impartial, non-political and humanitarian role of UNHCR and to exercise public pressure in order to convince these groups of the importance of adhering to humanitarian and refugee law. However, when dealing with these groups, UNHCR should not imply, through any of its actions or correspondence, a formal recognition of these non-state entities by the United Nations.

Forced Recruitment

74. Another protection issue likely to arise where refugees find themselves in or near a conflict zone is that of forcible recruitment of refugees by one or more parties to the conflict. In confronting this issue, UNHCR staff must remember – and remind the authorities – that:

i. The civilian character of refugee camps and settlements must be preserved and respected in all circumstances. Therefore recruitment of any age group for military and paramilitary purposes is unacceptable;

ii. Recruitment by force may amount to cruel, inhuman or degrading treatment, which is prohibited in all circumstances;

iii. Recruitment and direct participation in hostilities of minors under 15 years of age is prohibited, and UNHCR advocates the non-involvement of all children under 18, whether they are required to participate directly in hostilities or to perform support tasks;

iv. Where refugees are forced or coerced to return to their country of origin to fight, this is tantamount to refoulement, which is prohibited in all circumstances.

Combatants

75. UNHCR is not competent to intervene on behalf of combatants. Combatants placed hors de combat (sick, wounded, shipwrecked and prisoners of war) are primarily protected by international humanitarian law, and fall under the competence of the ICRC.

76. An ex-combatant may qualify as a refugee if a well-founded fear of persecution can be established, and if there are no serious reasons for considering that the person should be excluded[3].

77. Finally, note that simply because a person is carrying a weapon does not mean that he/she is a combatant – in some societies, carrying weapons e.g. knives, is traditional.

Emergencies as a Result of Changes in Government Policy

78. A special type of protection emergency can occur as the result of a sudden change, for whatever reason, in government policy towards persons of concern to UNHCR already on its territory. Those affected may include both persons known to UNHCR and recognized as refugees, and others who have hitherto neither formally requested asylum nor made themselves known to UNHCR, but who may nevertheless fall within the High Commissioner's competence.

79. The action to take in protection emergencies of this type will vary greatly in each case and only very general guidance can be given. Accurate information, a UNHCR pres-

[3] *See Note on the Application of Exclusion clauses, IOM/83/96 FOM/93/96, UNHCR, 1996.*

ence where needed, and a clear and consistent policy in defence of the rights of the refugees will always be required. The guidelines that follow must be modified as necessary in light of the actual situation. Some of the considerations discussed in the previous sections may also be relevant.

80. UNHCR should immediately try to identify and if possible establish a list of persons who are, or may be at risk but were not previously known to UNHCR staff. This list must be constantly updated. Sources of information include the diplomatic community (some persons may approach or even seek asylum in embassies), the ICRC, the national Red Cross or Red Crescent society, churches and NGOs. Care should be taken to ensure the confidentiality of individual cases when establishing contacts with Embassies. Early identification, and, if possible registration of, these new cases by UNHCR can often be a very important source of protection.

81. UNHCR must maintain (or in the case of a new régime establish) close and continuing cooperation with the authorities. If the country has acceded to the relevant international instruments, these obligations remain binding, whatever new policies may be adopted. If the country is not a party to any of the refugee instruments, the Statute and universal instruments must be invoked.

82. The government is, of course, responsible for the physical security of the refugees. Every effort must be made to encourage the government to protect refugees, particularly during any periods of civil tension. The immediate aim is that refugees should be able to remain in safety in their present country of asylum. Respect of the principle of non-refoulement is of paramount importance.

83. There may be circumstances in which movement of the refugees to another country is necessary as a last resort. Such moves are quite different from large-scale resettlement as a durable solution. They may be necessary either as a result of a direct request from the government or where no other way of protecting the refugees exists. Immediate approaches to potential countries of asylum must be made at both local, embassy, and Headquarters levels. Receipt of resettlement offers may have an important influence on the government's attitude towards the refugees. Operational partners must be identified. In addition to locally-based NGOs, the assistance of the ICRC (for example, with travel documents) and the International Organization for Migration (IOM) may be sought.

84. In extreme and tense situations where refugees lives were threatened, there were cases where some form of "safe Haven" for refugees have been established. However, UNHCR's experience with "safe havens" demonstrated that refugees often could not be provided with adequate protection and continued to be exposed to high risks. It is therefore not recommended to formally establish "safe havens".

Other Persons of Concern to UNHCR

85. In addition to refugees as defined by the relevant international instruments (see paragraph 7 above), UNHCR has also been empowered to extend protection to the following categories. Refugees, as well as the categories of persons described below, are often referred to as "persons of concern to UNHCR".

Returnees

86. Returnees are refugees who return voluntarily to their country of origin and who formally cease to be refugees as soon as they cross the border. UNHCR has been entrusted by the UN General Assembly to protect and assist returnees, both during the journey and once back in the country of origin and to facilitate finding durable solutions to their problems.

Stateless Persons

87. A stateless person is a person who is not considered as a national by any country. The Universal Declaration of Human Rights states that everyone has a right to a nationality and no one should be arbitrarily deprived of his/her nationality or of the right to change his/her nationality. The main international instruments dealing with statelessness are listed in Annex 1. UNHCR has been designated as the body which can assist stateless persons in presenting their claims to appropriate authorities, and in providing technical and advisory services to states on the preparation and implementation of nationality legislation.

Internally Displaced Persons (IDPs).

88. IDPs can be broadly defined as persons who have been forced to flee their homes suddenly or unexpectedly in large numbers

[4] *See: UNHCR's Role with Internally Displaced Persons, IOM87/97, FOM 91/97, UNHCR, 1997.*

as a result of armed conflict, internal strife, systematic violations of human rights or natural or man-made disasters and who are within the territory of their country.

Considerations Regarding UNHCR Involvement with IDP's.

89. The main requirements for UNHCR's involvement with the internally displaced[4] are :

i. A specific request from the UN General Assembly, the Secretary General or other competent principle organ of the UN;

ii. The consent of the concerned state or other relevant entity;

iii. The relevance of UNHCR's expertise to assist, protect and seek solutions for internally displaced persons in the particular situation;

iv. The availability of resources for the activities in question.

Criteria for Involvement

Certain situations may demonstrate the usefulness of UNHCR's involvement. These are situations which present a clear link with activities UNHCR undertakes in fulfillment of its mandate, for example where internally displaced populations are, or are likely to be, mixed with returnee populations, or where the same causes have produced both internal displacement and a refugee flow, or where there is a risk of cross-border expansion of the internal displacement. Where the link with mandated activities is not present, UNHCR may consider involvement with IDPs to attenuate the causes of internal displacement and contribute to conflict resolution through humanitarian action.

Measures to Assist IDPs

Measures to assist IDPs are broadly similar to those used for refugees. However, by definition, IDPs remain within their own country, and it is the national laws of that state which provide the framework for their protection and rights, rather than specific international legal instruments. Universal human rights instruments, of course, also apply to IDPs.

The presence of UNHCR staff and the staff of other international organizations in the areas where IDPs have sought safety has proven helpful in encouraging authorities and parties to the conflict to respect national laws and universal human rights.

Durable Solutions

From the outset of an emergency, UNHCR must bear in mind the ultimate objective of refugee protection: to help refugees to overcome displacement and achieve a solution whereby national protection is re-established and they will no longer be refugees.

Voluntary Repatriation

90. Most large scale refugee emergencies are eventually resolved through the voluntary repatriation of refugees once the danger they have fled from has been removed or significantly reduced. See chapter 19 on voluntary repatriation.

Local Settlement

91. Local settlement means assimilation within the country of asylum. In the case of prolonged conflicts, refugees often at least de facto integrate into the host society. It is important in such situations that they should have official status in the country of asylum, a starting point for which should be recognition as refugees under the 1951 Convention.

Resettlement

92. Resettlement (meaning assimilation within another country) should be considered when refugees cannot repatriate or cannot settle in the country of first asylum, or are at risk in their country of refuge. The decision to resettle is taken when there is no other way to eliminate the danger to the legal or physical security of the persons concerned. Resettlement under the auspices of UNHCR is strictly limited to mandate refugees who have a continued need for international protection.

Emergency Resettlement

93. Emergency resettlement can be considered where there is:

i. An immediate threat of refoulement to the country of origin;

ii. An immediate threat of expulsion to another country from where the refugee may be refouled;

iii. A threat of arbitrary arrest, detention or imprisonment;

iv. A threat to physical safety or human rights in the country of refuge analogous to that under the refugee definition and rendering asylum untenable.

94. Categories of refugees who can be considered for emergency resettlement include: survivors of violence and torture, refugees with serious medical conditions which cannot be treated in the country of asylum, women-at-risk, children and adolescents. Priority attention should be given to those refugees with acute legal and physical protection needs such as women-at-risk, and unaccompanied children for whom a determination has been made that resettlement is in their best interests.

Emergency Resettlement Procedures

95. Emergency resettlement must be used selectively and on the basis of a thorough and objective assessment of both refugee status and urgency of removal. Emergency resettlement is undertaken when the immediacy of security and/or medical threat faced by the refugee necessitates the person's removal from the threatening conditions within a few days, or even within hours. For the sake of simplicity a notional limit of a maximum of five days is understood.

96. The following information should be sent to Headquarters immediately:

i. Full name, date of birth, place of birth, sex, nationality and ethnic origin;

ii. Detailed status determination analysis;

iii. Whether accompanied by family (if so, size);

iv. Details, as per (i), of each family member to accompany the candidate;

v. Explanation of the need(s) for resettlement;

vi. Justification for emergency categorization, and required time-frame for departure;

vii. Whether valid travel documents are held by all the refugees concerned;

viii. In case of medical emergency: diagnosis, prognosis, current condition of refugee (and family members if relevant), and whether an escort is needed;

ix. Recommendation on countries of resettlement and reasons, including third country links.

97. Detailed data in a duly completed Resettlement Registration Form (RRF) with supporting documentation must follow as soon as possible.

98. The RRF can be obtained from the Resettlement and Special Cases Section at Headquarters. This is the section of the Division of International Protection that is responsible for processing emergency submissions. In addition, the Section helps coordinate and support the resettlement of difficult protection and special needs cases. It should be contacted for advice.

99. Additional information may be found in the UNHCR Resettlement Handbook.

Key References

Collection of Conclusions on the International Protection of Refugees adopted by the Executive Committee of the UNHCR Programme, UNHCR Geneva, 1995.

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Handbook for Determining Refugee Status, UNHCR, Geneva 1979.

International Legal Standards Applicable to the Protection of Internally Displaced Persons, UNHCR, Geneva, 1996.

Refugee Children: Guidelines on Protection and Care, UNHCR, Geneva 1994.

Refworld CD-ROM, UNHCR, Geneva, (updated regularly).

Sexual Violence Against Refugees: Guidelines on Prevention and Response, UNHCR, Geneva, 1995.

UNHCR Resettlement Handbook, UNHCR, Geneva, 1997.

UNHCR's Role with Internally Displaced Persons, IOM 87/97, FOM91/97, UNHCR, Geneva, 1997.

International Instruments Concerning Refugees		
Short Name	**Full Name**	**Description**
1951 Statute	Statute of the Office of the United Nations High Commissioner for Refugees.	The Statute of the High Commissioner's office, adopted by General Assembly Resolution 428 (V) of 14 December 1950. This sets out UNHCR's function and responsibility to provide international protection and to seek permanent solutions to the problem of refugees. It serves as UNHCR's constitution and includes a definition of persons who are of concern to the H.C. The mandate has been modified over time through subsequent General Assembly and ECOSOC resolutions.
1951 Convention 1967 Protocol	1951 Convention Relating to the Status of Refugees, and 1967 Protocol Relating to the Status of Refugees.	An international treaty which is binding upon the signatory states. It sets out the responsibilities of states which are parties to the Convention vis-à-vis refugees on their territories, and sets out the obligations of the refugees.
OAU Convention	OAU Convention governing the specific aspects of refugee problems in Africa (Organization of African Unity, Addis Ababa, 1969).	A regional complement to the 1951 Convention and 1967 Protocol. It contains an expanded refugee definition as well as provisions on safe and peaceful asylum, burden-sharing and voluntary repatriation.
i. Cartagena Declaration ii. St. Jose Convention	i. Cartagena Declaration on Refugees, 1984. ii. American Convention on Human Rights, "Pact of San Jose, Costa Rica", 1969.	Non binding declarations which have greatly influenced regional policies on refugees and asylum seekers, and contain an expanded refugee definition.
Excom Conclusions	Various conclusions on international protection adopted by UNHCR's Executive Committee.	Contain important guidance to States and UNHCR.
Related Instruments		
The UN Charter	The Charter of the United Nations, 1945.	Places certain general obligations on member states of the United Nations of particular relevance to UNHCR's international protection function.
Universal Declaration of Human Rights	Universal Declaration of Human Rights, 1948.	Universal instrument setting out the basic human rights of all persons, including refugees.
Convention Relating to the Status of Stateless Persons	Convention Relating to the Status of Stateless Persons, 1954.	Grants a recognized status to stateless persons who are lawful and habitual residents. Similar to the 1951 Convention Relating to the Status of Refugees.
Convention on the Reduction of Statelessness	Convention on the Reduction of Statelessness, 1961.	Contains measures to ensure that persons do not become stateless.

Covenant on Civil and Political Rights	International Covenant on Civil and Political Rights 1966.	Obliges states which are parties to the Covenant to respect and ensure the rights set out in the Covenant to all individuals (within the state's territory and jurisdiction), without distinction such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.
Convention Against Torture	Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment 1984.	Includes the principle of non-refoulement.
Convention Relating to the Rights of the Child	Convention Relating to the Rights of the Child, 1989.	A comprehensive code of rights for all children (defined as 18 years or under).
Geneva Conventions and additional protocols	Geneva Convention Relating to the Protection of Civilian Persons in Time of War (Geneva, 1949).	Covers the treatment of civilians in time of war, including refugees.
Declaration on Territorial Asylum	United Nations Declaration on Territorial Asylum, 1967.	Includes the principle of non-refoulement.
Final Act of the United Nations Conference on the Status of Stateless Persons, 1954	United Nations Conference on the Status of Stateless Persons.	Includes the principle of non-refoulement.

3

Emergency Management

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Introduction

1. There is no single blueprint for refugee emergency management; each refugee emergency is unique. However, experience shows that emergencies tend to evolve according to certain recognizable and documented patterns.

Good emergency management relies on knowledge of these patterns and of the effective measures to deal with them.

Emergency situations do not necessarily result in tragedy. The chance of this occurring will be greatly reduced if the emergency is well managed from the stage of preparedness onwards.

2. While emergency management shares many of the characteristics of good management in general, there are a number of distinguishing features:

i. The lives and well-being of people are at stake;

ii. Reaction time is short;

iii. Risk factors are high and consequences of mistakes or delays can be disastrous;

iv. There is great uncertainty;

v. Investment in contingency planning and other preparedness activities is crucial;

vi. Staff and managers may be under particularly high stress because of, for example, security problems and harsh living conditions;

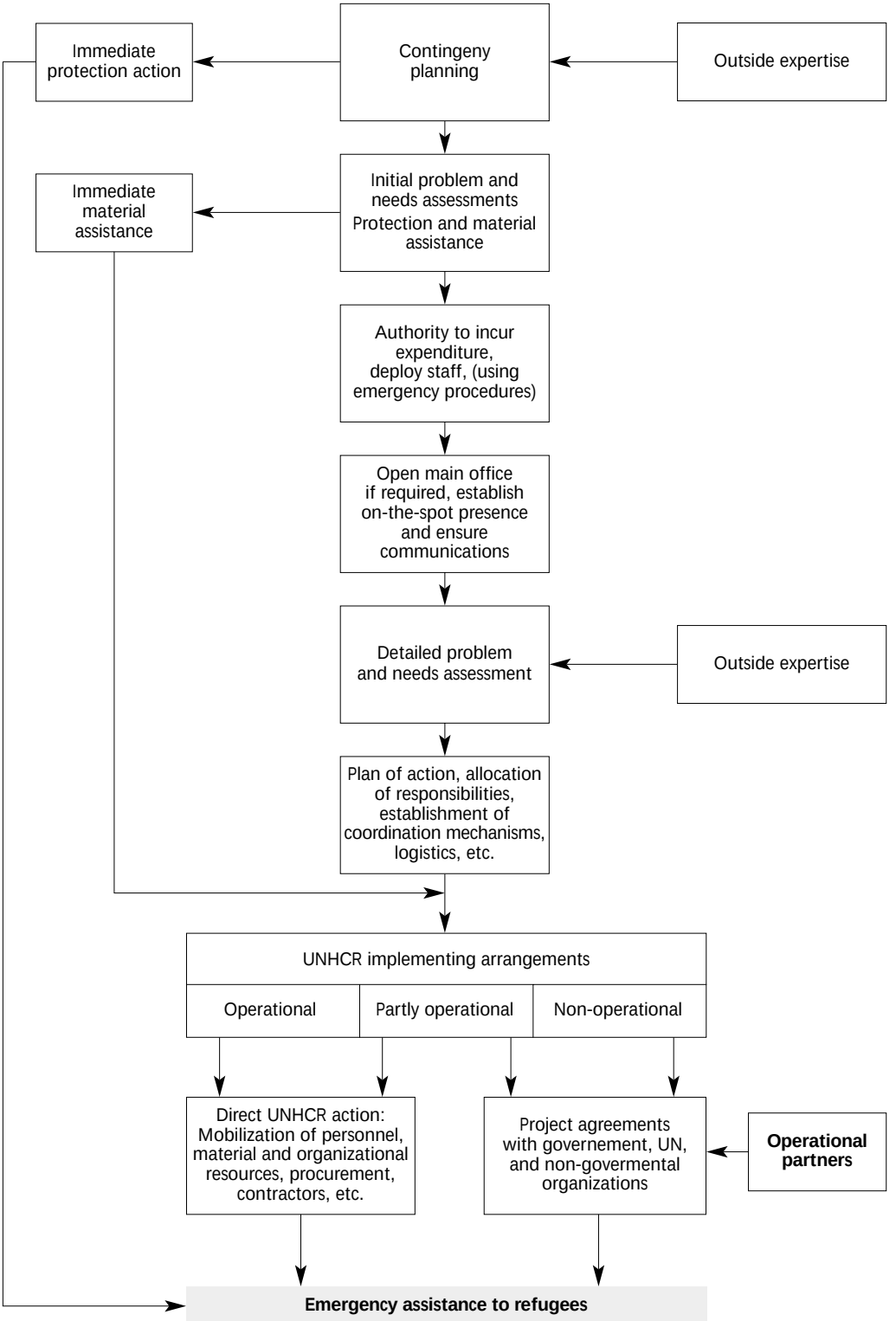
vii. There is no single obvious right answer.

Organization of this Section

3. This section of the handbook (chapters 3 to 9) is structured to reflect the phases of emergency preparedness and response. Firstly, the preparedness activities of contingency planning and early warning are dealt with (chapter 4), followed by initial needs and resources assessment and immediate response (chapter 5). Operations planning, coordination and site level organization are dealt with in chapters 6 and 7. Next, implementing arrangements are discussed, including procedures for operations implementation and control (chapter 8). Finally, chapter 9 on external relations covers relations with the host government (including establishing a formal presence in the country of operations), relations with the donor and diplomatic community and handling media interest. Note that certain activities cut across the phases of emergency preparedness and response. This is particularly the case with external relations, coordination, and planning.

4. Figure 1 shows some of the considerations discussed in this section in diagrammatic form, in particular in relation to emergency response. The response activities of problems and needs assessments, operations planning, implementing arrangements and programme formulation are all very closely related. Some aspects treated separately may be indivisible in practice, and there is no single correct order or way in which an emergency operation should be formulated (but it must conform to established UNHCR procedures governing project submission and control).

Figure 1 – Considerations in Emergency Management



Capacity and Resources

5. Emergency management can be defined as:
the organization of capacities and resources to meet threats to the lives and well-being of refugees.

6. Preparing for and responding to refugee emergencies are tasks which require the availability of the right resources at the right time as well as the capacity to use these resources effectively.

7. Capacity is the internal organizational capability which includes planning, staffing, structure, systems, procedures, guidelines, information flow, communication, decision-making and administrative support. Resources are the financial and human resources, relief materials, support equipment, tools and facilities.

8. If capacity is weak, then the emergency response is likely to be weak, even if resources are adequate.

Strong capacity can sometimes alleviate resource shortfalls by making more effective use of limited resources.

9. Capacity is an aspect of emergency management which is sometimes not given adequate priority. Resources are often given more emphasis during both the planning and operational stages since they are a more tangible element. But it is capacity that determines the quality of an emergency response. A well-capacitated organization is more likely to be able to mount a credible and effective operation, attracting the necessary resources.

10.

Effective emergency management requires that the development and use of capacity be accorded correct priority throughout the different phases of an operation.

While much of the required capacity must be pre-existing, capacity can also be developed during an operation.

The Key Emergency Management Functions

Introduction

11. Certain management functions are essential throughout a refugee emergency.
These are:

- ❏ Leading;
- ❏ Planning;
- ❏ Organizing and coordinating;
- ❏ Controlling.

12. These will be required of UNHCR as an organization and also from individuals, at all levels, within UNHCR.

If these functions are not being performed then it is likely that there will be serious deficiencies in the management of the emergency operation.

They always remain the responsibility of the person in overall charge of the operation, though they may be delegated to other staff.

Leading

13. This can be defined as:
the process of creating and communicating a vision for the emergency operation, and providing a clear strategic direction for actions even in situations of great uncertainty and risk.

14. Successful management requires leadership; subject to the role of the government, leadership may be the most important single contribution of UNHCR to the emergency situation. Leadership requires that once decisions are reached, they are properly implemented. This discipline is essential in emergencies when there is often no time to explain the considerations involved. As far as possible, those directly concerned should contribute to decisions that affect them, but final responsibility rests with the UNHCR officer in charge.

Planning

15. This can be defined as:
setting in place the process of assessing the situation, defining immediate objectives and longer term goals and the activities to accomplish them.

16. Planning is vital both before and during an emergency, and operations planning must be based on detailed needs and resources assessments.

Organizing and Coordinating

17. This can be defined as:
establishing systems and mechanisms to achieve a given objective, and coordinating people and organizations so that they work together, in a logical way, towards the common objective.

18. It involves selecting, training and supervising staff, assigning and clarifying roles and responsibilities of all those involved, and structuring communication and information flow. In an emergency, coordinating is a crucial aspect of organizing.

Delegation of Authority and Responsibility

19. Emergency management should be organized so that responsibility and authority are delegated to the lowest appropriate level, and should be exercised as close to the operation or beneficiaries as is practical. Clear and unambiguous lines of authority and reporting should be established and communicated to all staff.

20. The management structure should be organized so that accountability for actions, including management decisions, is clear. Those who make a decision should be those with the appropriate level of knowledge to enable them to make that decision and should be responsible for ensuring its implementation and follow up (including monitoring). The involvement of unnecessary layers of management, and unnecessary numbers of people, in decisions as well as in responsibility for implementation, confuses and diffuses accountability. Ambiguity and lack of simplicity in the definition of responsibilities also slows action.

Controlling

21. This can be defined as:
monitoring and evaluating performance in comparison with plans and initiating changes where necessary.

22. Note that the key management functions are important not only during emergency response, but also in the preparedness phase, although their relative importance in each phase may vary. Organization and coordination mechanisms, for example, should be developed during contingency planning.

Stages in Refugee Emergency Operations

23. The table below depicts one model of activities as they may occur in refugee emergencies. It is important to understand that the stages and activities of a refugee emergency operation could overlap, or occur simultaneously.

24. A final phase of an emergency operation is the transition from emergency response to longer-term support (care and maintenance) and durable solutions (voluntary repatriation, local integration and resettlement). The time spent providing emergency relief should be kept to a minimum, and planning and implementation should always take account of the longer term. The importance of the balance between short term and long term is seen in a number of the vital sectors.

Stage	Typical Activities
Emergency preparedness	• Prevention; • Early warning; • Contingency planning; • Development of emergency response systems; • Generation of support among potential host and donor governments; • Provision of stand-by resources; • Pre-positioning of supplies; • Training.
Emergency response	• Problem, needs and resources assessments; • Resource mobilization; • Handling donor relations and media interest; • Operations planning; • Implementation and coordination; • Monitoring and evaluation; • Transition to the post emergency operation.

25. Assisting governments in seeking durable solutions for the problem of refugees is a mandated function of UNHCR. Durable solutions must always be kept in mind, starting at the contingency planning stage. It is in this period that choices are made concerning how, how much, and for how long, aid will be delivered. These choices often have repercussions on the prospects for durable solutions that last long after the emergency has ended.

Emergency Preparedness

26. The best way to ensure an effective emergency response is by being prepared. Emergency preparedness can be defined as:
planning and taking *action* to ensure that the necessary *resources* will be available, in time, to meet the foreseen emergency needs and that the *capacity* to use the resources will be in place.

27. The scope of emergency preparedness is broad and the activities at that stage can be undertaken at the global, regional and country levels.

The preparedness measures should enable an organization to respond rapidly and effectively to an emergency.

28. At the global level, UNHCR maintains centrally a range of stand-by emergency response resources. These resources have been developed on the basis of past experience in emergencies. They include staff support, human and financial resources, operational support items and services, and a centrally managed emergency stockpile. The resources are available for deployment at short notice to any area where the need arises. They ensure a minimum and predictable level of global preparedness for emergencies. Moreover, there are also training activities available which can be used for capacity building.

29. For details of these resources, see the Catalogue of Emergency Response Resources, Appendix 1.

30. Contingency planning reduces the lead time necessary to mount an effective response and is a crucial tool to enhance the capacity to respond.

At the country and regional levels, early warning and contingency planning are the key preparedness measures.

31. The contingency planning process (see chapter 4) will allow the identification, in advance, of gaps in resources. A realistic plan may encourage donors and others to provide the missing resources.

32. Contingency planning helps predict the characteristics of the impending emergency – it increases the institutional analytical capacity which can be drawn upon should an emergency occur. It also helps identify the additional preparedness activities which may be required. These may include development or restructuring of the UNHCR organization in the country, emergency staffing, stockpiling, pre-positioning supplies and training. Priority should be given to activities requiring longer lead times.

Emergency Indicators

33. An emergency may start with a sudden large influx of refugees, with several thousand persons crossing a border, causing a highly visible life threatening situation. More often however, the onset of an emergency is not so dramatic or obvious, and a situation requiring an extraordinary response and exceptional measures may develop over a period of time. It is therefore essential to be able to recognize if a situation exists (or is imminent) which requires an emergency response, and what are the likely key characteristics (see table 1).

34. The following indicators are measurable and are therefore commonly used as thresholds above (or below) which an emergency situation clearly exists, or to signal whether a situation is under control and whether there is a need for urgent remedial action. The most important of these indicators is the mortality (or death) rate (see chapter 14 on health for information on how to calculate the mortality rate. More details of the other indicators are given in the respective chapters and in Appendix 2 Toolbox).

Table 1 – Emergency Indicators

Indicator	Emergency Levels
MORTALITY RATE	**> 2 per 10,000 per day**
Nutritional Status of children	> 10% with less than 80% weight for height
Food	< 2,100 calories/person/day
Water Quantity	< 10 litres per person per day
Water Quality	> 25% of people with diarrhoea
Site Space	< 30 sq. meters per person (this figure does not include any garden space)
Shelter space	< 3.5 sq. meters per person

35. Other indicators may not be so easily quantifiable but may be just as critical, for example, the presence of a physical threat to the refugees or to the standards of human rights which they enjoy. In particular, threats of refoulement should be considered as an indicator of a need for an emergency response.

Emergency Response

36. Emergency response can be defined as: **immediate and appropriate action to save lives, ensure protection, and restore the well-being of refugees.**

37. Once safe asylum is assured, the priority of emergency management will be life saving activities. Timely and rapid problem, needs and resources assessments will help confirm or identify areas where gaps still exist from the contingency planning stage, both in terms of expertise and resources required.

38. Identification of problems requiring-specialist expertise is essential. Most refugee emergencies will require, in addition to protection specialists, one or more technical experts to coordinate the crucial technical sectors, such as health, food, nutrition, sanitation, water, shelter and infrastructure.

Key References

A Framework for People-Oriented Planning in Refugee Situations Taking Account of Women, Men and Children, UNHCR, Geneva, 1992.

Contingency Planning – A Practical Guide for Field Staff, UNHCR, Geneva, 1996.

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4

Contingency Planning

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Introduction

1. Contingency planning can be defined as: **A forward planning process, in a state of uncertainty, in which scenarios and objectives are agreed, managerial and technical actions defined, and potential response systems put in place in order to prevent, or better respond to, an emergency.**

2.

It is important to consider contingency planning as a planning process from which a contingency plan is drawn.

The planning process involves a group of people or organizations working together on an ongoing basis to identify shared objectives and define respective responsibilities and actions.

3. Contingency planning is a pre-requisite for rapid and effective emergency response. Without prior contingency planning much time will be lost in the first days of an emergency. Contingency planning builds organizational capacity and should become a foundation for operations planning and emergency response.

When to Plan

4. In most cases field workers will know simply from experience and good knowledge of the current situation when it is prudent to plan.

5. There is no rule as to when to start contingency planning – except that, when in doubt, develop a contingency plan.

It is better to plan when it is not needed than not to have planned when it was necessary.

Early Warning

6. Early warning signs of a potential critical event should trigger a contingency planning process. Early warning is the collection, analysis and use of information in order to better understand the current situation as well as likely future events. The particular focus is on events which might lead to population displacement. Early warning can come from a wide range of sources: governments, local population, political leaders, media, academia, refugees, international and national organizations.

7. The collection and analysis of early warning information should be integrated into the routine work of UNHCR offices. Regular monitoring and reporting, in a consistent format, is an important means to ensure that trends and patterns are recorded and that any changes indicating population displacements are spotted.

8.

Where early warning information indicates the threat of a refugee emergency, contingency planning should be started automatically.

9. The most common emergency threat for UNHCR is a new influx or sudden increase in a refugee population. However, contingency planning should also take place in the midst of an existing operation. For example, contingency plans may be needed for a possible renewed influx, a natural disaster affecting a camp, an epidemic, an attack on a camp, violence in a camp, sudden spontaneous repatriation, or a security threat to staff or premises. In these situations the realities of the ongoing operation are well known, but contingency plans must be made for future developments for which one needs to be prepared.

Planning as a Process

10. Planning is an ongoing activity; the planner needs to constantly assess the situation and adjust objectives and courses of action to take account of developments.

11. A static contingency plan is soon out of date and breeds a false sense of security. By reviewing and updating planning measures regularly, the preparedness measures in place can be kept appropriate and adequate.

12. One of the most important contributions of the contingency plan to emergency response often comes from the process itself: identifying working partners, their capabilities and resources, developing a working relationship with them and coming to a common understanding of the issues, priorities and responsibilities.

The capacity of the actors to respond in an emergency will be enhanced by their previous involvement in the contingency planning process.

13. Both contingency planning and operations planning set strategic and sectoral objectives and develop an action plan to achieve these objectives. The major difference between the two is that contingency planning involves making assumptions and developing

the scenarios upon which planning is based, while in operations planning, the starting point is known, and the planning will build on needs and resources assessments.

Figure 1 – Differences between Contingency Planning and Emergency Operations Planning

Aspect	Contingency plan	Operations Plan
Relation to emergency event	Before	During
Scope of plan	Global or scenario based	Both strategic and specific
Partners involved	All likely partners	Operational and implementing partners only
Focus	Developing agreed scenarios	Effective and rapid response
Relationships	Developing	Utilizing
Planning Style	Consultative	Directive and consultative
Allocation	Roles	Responsibilities
Time frame	Floating, uncertain	Fixed, immediate

Meetings

14. Many pitfalls in contingency planning can be avoided by planning collectively, marshalling the widest range of local skills, and complementing these by external inputs.

Contingency planning is best achieved through a cooperative and coordinated effort wherein all concerned work together with shared objectives over a period of time.

A single meeting that produces a plan is usually insufficient and the product often inadequate. The contingency planning process therefore revolves around regular meetings and follow up.

15. The participants in the contingency planning process should include those who might be involved in the emergency response, including the government, agencies, representatives of donor governments and local organizations and expertise. Contingency planning meetings are sometimes called "roundtable" meetings to stress the importance of participation by all involved. The views of one agency may differ from others, but this will often be to the advantage of the planning process since it provides a useful forum for all assumptions to be questioned and refined. The end product is thus more realistic. While UNHCR may facilitate the roundtable, the role and importance of each participant must be respected.

16. A contingency planning meeting should produce a draft contingency plan containing the following:

i. Scenario identification;

ii. Strategic objectives;

iii. Sector objectives and activities.

Subsequent meetings should review early warning indicators, report on actions taken since the previous meeting, and update the existing plan.

17. Inputs into these meetings include specialist expertise and advice, results from field visits, and statements of agency policy. Outputs include the contingency plan, draft budgets and standby arrangements such as stockpiles.

Contingency Planning Tasks

Scenario Identification

18. Based on early warning indicators and their own experience, the participants in the planning process should develop likely scenarios. This activity is the most intuitive, yet one of the most important, since it lays the basis for all further planning. In establishing scenarios assumptions must be made. While these will be based on best available knowledge, nothing can remove the element of unpredictability.

19. The scenario is a kind of benchmark: if the influx is smaller than envisaged, the safety margin will be welcome, if it is larger, the importance of taking urgent corrective action is highlighted.

20. For scenario development:

i. Consider all possibilities (be imaginative);

ii. Settle for a limited number of options only (1 or 2 options are the norm); otherwise the planning process will be too complicated;

iii. Use the concept of either worst case scenario or most likely scenario.

Policy and Strategic Objectives

21. Planners need to have some vision of the direction of the overall operation. To the extent possible this should be a shared vision. It

is not unusual for the various partners to hold different policy approaches to a particular problem. If these cannot be reconciled, at least the differences should be known and understood by all parties. However, an effort should be made to agree on some overall principles, through establishing overall objectives for the emergency response. All activities undertaken in the plan will need to be consistent with these overall objectives.

Sector Objectives and Activities

22. This is the most detailed part of the planning process. For each sector planners should agree, in as much detail as time will permit, on:

i. Sector objectives, including standards;
ii. The main tasks;
iii. Who is responsible for implementing which task;
iv. Time frame for implementation.

Characteristics of a Good Plan

23. A good plan (whether operations or contingency) should be comprehensive yet not too detailed; it should find the right balance between covering all the important issues yet not flooding the plan with detail.

24. It should be well structured, easy to read and, importantly, easy to update. Much of the plan will be action oriented, so it should have a layout that clearly shows what needs to be done, by whom and by when.

25. It should be a living document and be constantly updated, amended and improved. It is not a document which is comprehensively revised on a schedule, but is one that is constantly in a state of change.

A short document with a clear structure will facilitate updating.

26. A contingency plan should also achieve a balance between flexibility (so it can apply to a variety of scenarios) and specificity (for key practical inputs - e.g. well positioned stockpiles). The plan must not be too directive, and yet must provide adequate guidance. It should not be expected to act as a blueprint.

27. See Annex 1 for the structure of a typical contingency plan.

Key References

Contingency Planning – A Practical Guide for Field Staff, UNHCR, Geneva, 1996.

Annex 1 – A Model Structure for a Contingency Plan

The following is a proposed structure for a Contingency Plan. It is based on a refugee influx. Adaptation will be required for different scenarios.

Chapter 1: General Situation and Scenarios

i. Background and country information
ii. Entry points
iii. Total planning figure
iv. Arrival rate
v. Reception and anticipated in-country movement
vi. Settlement arrangements
vii. Expected refugee demographic profile
viii. Emergency response trigger

Chapter 2: Policies and Overall Operation Objectives

i. Overall policy (strategic) objectives of the programme
ii. Comments on policy stance of various partners

Chapter 3: Objectives and Activities by Sector

i. Management and overall coordination; allocation of responsibilities
ii. Protection, reception, registration, security
iii. Community services
iv. Logistics and transport
v. Infrastructure and site planning
vi. Shelter
vii. Domestic needs and household support
viii. Water
ix. Environmental sanitation
x. Health and nutrition
xi. Food
xii. Education
xiii. Economic activities
xiv. Support to the operation, administration, communications, staff support and safety

Each section should include a consideration of sector objectives and outputs, needs, resources, activities, and financial requirements, existing and proposed preparedness measures, implementation responsibilities and timing.

Chapter 4: Procedures for feedback, updating and future action

Describe how the Plan will be updated and revised, who will be responsible for ensuring this, and how the information will be disseminated.

Possible Annexes

i. Maps
ii. Registration forms
iii. List of organizations or individuals participating in the planning process
iv. Agency Profiles (details of staff, resources, future intentions)
v. Gap identification charts (see chapter 6 on operations planning)
vi. Commodity specifications
vii. Draft budgets.

5

Initial Assessment, Immediate Response

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Introduction

1. Emergency assistance must be based on a sound, though rapid, assessment of the refugees' most immediate problems and needs and the resources available to meet those needs.

2. The objective of the initial problem analysis and needs assessment is to provide UNHCR with a clear and concise picture of the emergency situation, in both quantitative and qualitative terms. It should provide enough information to predict the evolution of the emergency, at least in the short term. It is the basis for decisions which affect the future of the operation.

3.

More detailed assessments will follow as the emergency develops and needs evolve: assessment never stops.

The initial and subsequent assessments are intricately linked with, and will form the basis for, operations planning. The initial assessment will also build on the contingency planning process.

4. The initial assessment should:

- ❏ Answer the questions "what is the main problem?" and "is there an emergency or not?";
- ❏ Provide sufficient information to decide whether UNHCR should be involved in the emergency response and what the scope of that involvement should be;
- ❏ Be an inter-agency initiative, but with one body providing the overall coordination. The team should include staff from UNHCR, the government and other potential partners (for example other UN agencies, NGOs). Ideally the inter-agency body used for contingency planning should provide the basis for the group carrying out a simple problem and needs assessment. Often the people carrying out the initial assessment will simultaneously be providing the initial response. Whenever possible, the assessment team should include those who will implement the emergency operation in the field;
- ❏ Be carried out quickly;
- ❏ Provide a full picture of the scope of the emergency, rather than focus on a limited area or sector (it is better to get the whole picture half right);
- ❏ Describe the people affected by the emergency (a simple demographic profile);
- ❏ Identify the coping ability of the refugees themselves;
- ❏ Identify locally available resources;
- ❏ Identify what are the most immediate priorities;
- ❏ Use agreed and appropriate standards against which needs can be measured;
- ❏ Involve the refugees, women and men, from the outset. Get to know them and understand their concerns. They are a key source of information;
- ❏ Record the sources of information collected;
- ❏ Cross-check information, not relying on only one tool (e.g. aerial surveys cross-checked by on the ground observations and interviews);
- ❏ Involve appropriate technical input;
- ❏ Use samples and surveys rather than collect too much detailed information which is difficult to analyze;
- ❏ Produce recommendations for immediate action indicating the resources needed to implement them;
- ❏ Be able to trigger an immediate and effective response;
- ❏ Have the results shared promptly and widely.

5. The assessment should, as a minimum, answer the questions in the checklist in Annex 1. This includes essential minimum information required for planning an emergency operation.

6. The initial assessment should focus on the priority life threatening problems which are usually in the sectors of protection, water, food, sanitation, shelter and health. The assessment should measure the actual condition of the refugees against what is needed for their survival and immediate well-being (expressed as "standards"). The resources at their disposal should also be assessed.

The setting of standards appropriate for the situation is an important prerequisite for needs assessment.

7. Standards provide a benchmark against which the condition of the refugees can be measured (see Appendix 2 for some of the minimum survival standards). The standards

established for emergency assistance must be consistent with the aim of ensuring the survival and basic well-being of the refugees, be fairly applied for all refugees and be respected by all involved.

8. The document *Initial Assessment in Emergency Situations: a Practical Guide for Field Staff* (see references) includes more detailed checklists for assessments, and contains practical information on principles, planning, techniques, methods, and forms. See also chapter 6 on operations planning for an example of a Gap Identification Chart, a useful tool for comparing needs and resources.

Organizing the Assessment

9. The initial assessment must be carried out on the spot as soon as it is clear that a refugee emergency may exist. The assessment must involve the government and other key actors.

10. Immediate access to the area where the refugees are located is, of course, a prerequisite. Getting the assessment underway as soon as possible requires quick, practical steps: establish a presence at or near the refugee site for first hand information, interview refugees, use other available sources of information, mobilize local expertise and resources.

11. While an organized approach is necessary, time must not be lost simply because the desired expertise is not immediately available. Where UNHCR is already present, initial action must not be delayed pending the arrival of staff with more expertise.

A quick response to obviously urgent needs must never be delayed because a comprehensive assessment has not yet been completed.

12. Planning the assessment involves setting the objectives, establishing the terms of reference and selecting team members. The assessment plan should indicate which information should be collected and the report should make clear if it was not possible to collect that information.

13. If UNHCR is not already present in the country, the assessment mission will normally be organized by Headquarters.

14. Any problem and needs assessment should start with a review of the existing background information (mission reports, media articles, situation reports, local maps). Ideally, a contingency plan would have been prepared and kept updated and would provide input for the assessment and the immediate response. UNHCR Headquarters can provide maps and geographical information from a computerized database. The maps and information can be tailored to the specific requirements of the assessment. The assessment should also include interviews with the refugees and others involved.

15. Tools commonly used in assessments are:

i. Questionnaires;

ii. Checklists;

iii. Visual Inspection.

16. A combination of tools is normally used in order to cross-check the conclusions. Questionnaires and checklists (see Annex 1 for a basic checklist) are particularly useful because they standardize the approach and force the assessors to plan ahead and decide which information needs to be collected. Visual inspections provide general information and can put into context data from more systematic assessments.

Immediate Response

17. Gathering information about problems, needs and resources on the one hand, and the establishment of standards on the other, will allow the immediate unmet needs to be determined.

The most urgent actions must be taken with whatever local material and organizational resources are available, even if the information at hand is incomplete.

18. In order to ensure urgent survival needs are met, the most important initial actions are likely to be:

i. Ensuring the capacity to act;

ii. Protection;

iii. Organizational considerations.

Ensure the Capacity to Act

19. The first priority is to provide the organizational capacity required to meet the needs of the emergency.

Enough UNHCR and implementing partner staff of the right calibre and experience must be deployed.

It may be necessary to invoke emergency procedures for the allocation of funds, implementing arrangements, food supply, local purchase, and recruitment of personnel. See Appendix 1

for details of how to access UNHCR emergency response resources. With the government, the resources of other UN organizations, particularly UNICEF and WFP, and of the NGO sector must be mobilized within the framework of a plan for immediate action.

Protection

20.

Unless the refugees' right to asylum is assured there can be no assistance programme.

Action must be taken to this end, and to ensure their security and fundamental human rights. The importance of a UNHCR presence where the refugees are located has been stressed. Specific measures may be needed, for example to meet the special protection problems and needs of groups at risk (unaccompanied children, single young girls, minorities, etc.), and to protect the refugees against arbitrary actions of outsiders and against groups within their own number who may pose a threat to their safety.

Organizational Considerations

21. UNHCR must establish a presence where the refugees are, with assured communications with the main office and with Headquarters. The organization of the necessary logistical capacity to deliver the assistance will be of critical importance.

22. The priority, once problems and needs have been assessed, will be to provide vital assistance wherever the refugees are located. There will also, however, be key organizational or planning decisions to take, some of which may determine the future shape of the whole operation. These often include the points summarized below; decisions on them should be seen as a part of the immediate response.

If such decisions go by default or are wrong they will be very difficult to correct later.

Protection and Material Assistance

The Location of the Refugees

23. This will have a major influence on protection and all sectors of assistance. If the refugees have spontaneously settled in a scattered manner, they should not be brought together unless there are compelling reasons for breaking their present settlement pattern. If they are already in sites which are judged to be unsatisfactory, move them. The difficulty in moving refugees from an unsuitable site increases markedly with time. Even if those already there cannot be moved, divert new arrivals elsewhere (see chapter 12 on site planning).

Control at the Sites

24. Determine the optimum population in advance and plan for new sites accordingly. Keep careful control of actual occupation of the site as refugees arrive, so that sections prepared in advance are filled in an orderly manner.

Numbers and Registration

25. An accurate estimate of numbers is a prerequisite for effective protection and assistance. Efficient delivery of help to all in need will require at least family registration which should be organized as soon as possible. Nevertheless the initial provision of assistance may have to be based on a population estimation rather than full registration (see chapters 11 and 13 on registration and commodity distribution).

Urgent Survival Needs

26. Meet the most urgent survival needs: food, water, emergency shelter, health care and sanitation, ensuring fair distribution:

i. *Involve the refugees* and promote their self-reliance from the start. If this is not done the effectiveness of the emergency assistance will be severely reduced, and an early opportunity to help the refugees to start to recover from the psychological effects of their ordeal may be missed;

ii. *Food.* Ensure that at least the minimum need for energy is met; a full ration can follow. Set up special feeding programmes if there are clear indications of malnutrition. Establish storage facilities;

iii. *Water.* Protect existing water sources from pollution and establish maximum storage capacity with the simplest available means. Transport water to the site if the need cannot otherwise be met;

iv. *Emergency shelter.* Meet the need for roofing and other materials from local sources if possible. Request outside supplies (e.g. plastic sheeting) if necessary;

v. *Health care.* Provide the necessary organizational assistance, health personnel and basic drugs and equipment in close consultation with the national health authorities.

Although the immediate need and demand may be for curative care, do not neglect preventive and particularly environmental health measures;

vi. *Sanitation.* Isolate human excreta from sources of water and accommodation.

27. Take steps to meet the social needs and reunite families if necessary. Surveys may be necessary to identify those in need, who often do not come forward. Tracing may be required. If groups of refugees have been separeted, they should be reunited. Special measures to ensure the care of any unaccompanied children will be a priority.

28. Once these and other priority measures are underway, begin the wider planning process.

Key References

Initial Assessment in Emergency Situations – a Practical Guide for Field Staff, UNHCR, Geneva, 1998.

Annex 1 – Checklist for Initial Assessment

This checklist is based on a refugee influx, it should be modified in the light of the actual nature of the emergency.

Who are the refugees, their numbers, and pattern of arrival

- ❏ Approximately how many refugees are there?
- ❏ Where have the refugees come from? Why?
- ❏ What is the rate of arrival? Is it likely to increase or decrease?
- ❏ What is the total number likely to arrive?
- ❏ What is the location of the arrival points and of the sites where people are settling (latitude and longitude)?
- ❏ Are the refugees arriving as individuals or in groups? Are these family groups, clans, tribal, ethnic or village groups?
- ❏ Are families, village groups and communities intact?
- ❏ How are the refugees organized? Are there group or community leaders?
- ❏ How are the refugees travelling – on foot, in vehicles?
- ❏ What is the gender ratio of the population?
- ❏ What is the age profile of the population? Can a breakdown in age be given – under five's, age 5 to 17 years, 18 years and over?
- ❏ How many unaccompanied minors are there? What is their condition?
- ❏ What was the social and economic situation of the refugees prior to their flight? What are their skills and languages? What is their ethnic and cultural background?
- ❏ Are there individuals or groups with special social problems? Are there particular groups made more vulnerable by the situation? (e.g. the disabled, separated minors or elderly people in need of support).
- ❏ What are the basic diet, shelter, and sanitation practices of the refugees?
- ❏ What is the security situation within the population – is there a need for separation between different groups, are there armed groups within the population?
- ❏ What is the formal legal status of the refugees?

Characteristics of the location

- ❏ What are the physical characteristics of the area where the refugees are located?
- ❏ What is the soil, topography and drainage?
- ❏ Is there enough space for those there and those likely to arrive?
- ❏ Is there all season accessibility?
- ❏ Can the refugees access relief assistance from where they are located?
- ❏ What is the vegetation cover?
- ❏ Will the refugees need to use wood for fuel and shelter?
- ❏ Approximately how many people already live in the local area?
- ❏ Who owns (or has usage rights on) the land?
- ❏ Is there grazing land and are there potential areas for cultivation?

- ❑ What is the actual or likely impact on the local population and what is their attitude and that of the local authorities towards the refugees?
- ❑ Are there security problems?
- ❑ What environmental factors must be taken into account (e.g. fragility of the local environment and extent to which local community relies on it; how rapidly might it be degraded by the refugees, proximity to protected areas)?
- ❑ What is the condition of the local population? If assistance is provided to the refugees, should the local population also be assisted?

Health status and basic problems

- ❑ Are there significant numbers of sick or injured persons, is there excess mortality?
- ❑ Are there signs of malnutrition?
- ❑ Do the refugees have access to sufficient quantities of safe water?
- ❑ Do the refugees have food stocks, for how long will they last?
- ❑ Do the refugees have adequate shelter?
- ❑ Are adequate sanitary facilities available?
- ❑ Do the refugees have basic domestic items?
- ❑ Is there sufficient fuel for cooking and heating?

Resources, spontaneous arrangements and assistance being delivered

- ❑ What type and quantity of possessions have the refugees brought with them?
- ❑ What arrangements have the refugees already made to meet their most immediate needs?
- ❑ What assistance is already being provided by the local population, the government, UN organizations and other organizations, is the assistance adequate, sustainable?
- ❑ Is the present assistance likely to increase, continue, decrease?
- ❑ What is the government's policy on assistance to the refugees?
- ❑ Are there any major constraints likely to affect an assistance operation?
- ❑ Has contingency planning for this type of emergency been undertaken?
- ❑ What coordination arrangements are required?

Means to Deliver Protection and Assistance

- ❑ Can effective implementing arrangements be made quickly and locally, if not, what are the alternatives?
- ❑ Is there already an identified refugee leadership with whom it will be possible to coordinate the delivery of protection and assistance?
- ❑ What are the logistical needs and how can they be met?
- ❑ Where will the necessary supplies come from?
- ❑ How will they reach the refugees?
- ❑ What storage is needed, where and how?
- ❑ Are there essential items which can only be obtained outside the region and whose early supply will be of critical importance (e.g. food, trucks?)
- ❑ What are the needs for UNHCR and implementing partner staff and staff support?

6

Operations Planning

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Introduction

1. An emergency response requires good planning. An important aspect of planning, particularly in an emergency situation, is the development of an operations plan. The "Operations Plan" is a vital management tool which should be based on a problems, needs and resources assessment. The plan should determine programme priorities, set objectives, and specify actions that need to be taken by the actors responsible for the various sectors of an operation. Specific tasks in an emergency and the parties responsible for the implementation of these tasks need to be clearly identified and a plan formulated in as clear and concrete a way as possible.

At the start of an emergency there is a tendency to postpone planning, both because information is not available and because there are obvious urgent needs which can be met piecemeal, without a plan. This tendency should be resisted.

2. The more critical the situation, the more important it is for the operations manager to find the time to take stock, determine priorities and develop a plan for what needs to be done, when, by whom and how.

3. Ideally, the operations plan should make use of the contingency planning process, partners identified, and resources prepared, as well as the plan itself. As the same principles of planning apply, the structure of the operations plan can be based on the contingency plan (also attached here as Annex 1). There are a range of additional considerations beyond what is included in the Contingency planning format, many of which will be addressed over time. However, the main differences between contingency planning and operations planning and the characteristics of a good plan are discussed in chapter 4 on contingency planning. The tasks and approach will be different primarily because of assessments – in operations planning, the starting point is known and assessments of the situation replace the contingency planning scenarios and many of the assumptions.

4. The views of the refugees should be taken into account in drawing up the operations plan. They are the single most important resource in meeting their own needs, and will have definite ideas on how this may best be done. The plan must strengthen the refugees' own resources and self-reliance and avoid creating dependency. The plan should also reflect the aim of a durable solution.

5. The operations plan must be comprehensive, identifying all problems, needs and resources whether these are met through UNHCR or by other organizations and sources of funds. Drawing up the operations plan should be a team effort. Clear direction must, however, come from the government and/or UNHCR.

The most effective operations plans are those developed by or with the people who will implement them.

6. Although the plan should be comprehensive, this should be balanced by the need to produce the plan quickly, so that in rapidly evolving emergencies the plan will not become outdated before it is finished. In addition, lengthy plans can be difficult to update. Characteristics of a good plan are discussed in paragraphs 23 to 25 of chapter 4 on contingency planning.

7.

It should be stressed that, as with contingency planning, operations planning is a process.

A plan, as a document, is not an end in itself but simply a record of the process. It should be kept updated in light of the evolving situation: implementation of the plan should be monitored and corrective action taken, and the plan should then be adjusted and revised. The operations plan must be made available to all who need it.

8. This chapter focuses on operations plans developed with partners. However, planning within the office should not be neglected – simple plans of action at each administrative or office level within UNHCR should also be drawn up, from site to Headquarters, tying in with the overall operations plan and involving the same principles: clarifying objectives, allocating responsibilities, defining activities to achieve objectives, and defining coordination mechanisms such as staff meetings (discussed in chapter 20 on administration and staffing).

Operations Planning Tasks

9. Operations planning involves the tasks set out below:

i. *Review existing plans and information in the contingency plan;*

ii. *Assess problems, needs and resources: identify critical unmet needs.*

The problems, needs and resources assessments determine what must be done, and where the priorities are. Assessment of problems, needs and resources is part of planning: plans must be updated to take account of new assessments and progress in implementation. Identify critical unmet needs using the results of the assessments and comparing these with established standards – the determination of the standards to which assistance should be delivered is of fundamental importance. The resources which are available and those which are required must also be identified. Resources includes human resources and personnel, local and international implementing and operational partner organizations, and material resources.

At the early stages of a major emergency, it is unlikely that resources will be sufficient to meet all needs, thus prioritization will be an important part of operations planning.

iii. *Set overall goals*

The overall operation and strategic goals must be clarified. All other objectives and activities should be consistent with these overall objectives. In formulating objectives, the single most important question to ask is, "What is the intended result?" Objectives should be specific, measurable, achievable and realistic, and the time frame within which they should be reached should be specified.

iv. *Clarify planning assumptions*

It will also be necessary to clarify the main constraints, planning assumptions and principles behind the emergency operation. These should be set out explicitly, including an explanation of the role, responsibilities and policies of the government, UNHCR, other UN organizations and operational partners. In addition, standard or established procedures, such as monitoring and coordination mechanisms, MOUs etc. should also be set out. Similarly, standards in various sectors and any specific guidelines necessary should be specified (where the plan includes objectives, outputs and activities on a sector by sector basis). Although these issues should have been in the contingency plan, they will need to be revisited in the light of the problem and needs assessments, and restated as necessary to new partners, so everyone is working with the same assumptions and to the same standards.

v. *Determine the courses of action to reach overall objectives (implementing arrangements)*

Consider various options to reach objectives, their advantages and disadvantages; which are flexible, which are the most efficient and effective? Choosing an option for implementing arrangements which retains flexibility is important in a rapidly changing situation. Chapter 8 on implementing arrangements discusses this in more detail.

vi. *Determine objectives and courses of action to reach objectives at sector level.*

Decide on the objectives, activities and outputs for each sector. As with contingency planning, this is the most detailed part of the plan. The organization with operational responsibility for a particular sector or site should draw up the plan of action for that sector or site.

vii. *Allocate responsibilities*

Responsibilities (both within UNHCR and between different actors in the operation), need to be clearly stated.

viii. *Determine coordination mechanisms*

Coordination mechanisms should be established between the different actors in the operation. Coordination at different geographical levels (e.g. at the site and in the capital or regional city) needs also to be assured. In a large operation, it may be necessary to have separate coordination mechanisms for sectors.

ix. *Determine monitoring mechanisms*

From the start, the management of a refugee emergency must include continuous monitoring (by measuring the indicators of performance), reporting and evaluation in order to ensure that the objectives remain appropriate as circumstances change, and the activities to fulfill the objectives are being carried out effectively.

x. *Record and disseminate the plan, monitor progress, take corrective action, and adjust and revise the plan.*

Effective Planning Guidelines for UNHCR Teams (updated in January 1999) provide more details on managing the planning process at all levels of an operation in the most effective and efficient way possible. The assumption underlying this emphasis on the planning process is that better planning processes lead to better quality results delivered on time in a cost effective manner.

Figure 1 – an example of a Gap Identification Chart

	Site 1	Site 2	Site 3
Overall site management	Agency M	Agency M	Agency R
Protection	UNHCR	UNHCR	UNHCR
Food distribution	Agency B		Agency K
Shelter	Agency B	Agency Y	
Water	Agency W		Agency W
Health		Agency H	Agency H
Etc.			

Allocation of Responsibilities

Gap Identification Chart

10. A gap identification chart is a simple but very important and useful tool to allocate responsibilities effectively and identify the critical unmet needs of the refugees site by site and sector by sector. It illustrates who is responsible for what in an operation (by site and sector) and points out gaps where a sector or site needs attention. An example is shown below – the blanks indicate "gaps" i.e. sites or sectors for which nobody has responsibility. These would need to be given priority attention. Annex 2 shows a blank chart Figure 1 shows an example that has been filled in.

Roles and Tasks

11. The roles and tasks of all involved must be clearly stated. Delay in defining responsibility usually leads to each party defining goals independently and setting their own limits of responsibility. This in turn can lead quickly to confusion, gaps and duplication. Responsibilities should be defined for each administrative level, and for both organizations and individuals. How responsibilities are allocated to individuals is discussed in chapter 20 on administration and staffing.

12. Responsibilities are allocated to different organizations in a refugee emergency primarily through organizations' mandates, international instruments and pre-existing MOUs between organizations.

13. The responsibilities and roles are defined in more detail in response to the specific needs of the refugee situation and capacities of the different parties on the ground. These are set out in implementing agreements with implementing partners, MOUs and exchange of letters with other UN agencies, and agreements with the government. If formal agreements have not yet been drawn up and the basis of cooperation remains a Letter of Intent, the definition of responsibilities contained in the operations plan is more essential than ever (see Annex 1 of the chapter 8 implementing arrangements for a format of a Letter of Intent).

14. The responsibilities of organizations delivering assistance but which are not implementing partners of UNHCR must also be defined. This may create problems, particularly where individual NGOs wish to have responsibility for a specific sector. Final authority rests with the government, and the Representative or the operations manager should consult closely with the authorities. To the extent possible, however, any conflict of interest should be resolved within the framework of a coordinating mechanism.

Annex 1 – A Model Structure for an Operations Plan
Based on the problem, needs and resources assessments

The following is a proposed structure for an operations plan. It is based on a refugee influx. Adaptation will naturally be required for different situations.

Chapter 1: General Situation

i. Background and country information;
ii. Entry points;
iii. Agreed planning figures;
iv. Arrival rate;
v. Reception and in-country movement;
vi. Settlement arrangements;
vii. Demographic profile of the refugees;

Chapter 2: Policies and Overall Operation Objectives

i. Overall policy (strategic) objectives of the programme;
ii. Comments on policy stance of various partners;

Chapter 3: Objectives and Activities by Sector

i. Management and overall coordination; allocation of responsibilities;
ii. Protection, reception, registration, security;
iii. Food;
iv. Logistics and transport;
v. Infrastructure and site planning;
vi. Shelter;
vii. Domestic needs and household support;
viii. Water;
ix. Environmental sanitation;
x. Health and nutrition;
xi. Community services;
xii. Education;
xiii. Economic activities;
xiv. Support to the operation, administration, communications, staff support and safety;

Each section should include overall sector objectives, and site by site objectives and outputs, problems, needs, resources, financial requirements, activities, implementation responsibilities and timing.

Chapter 4: Procedures for updating the operations plan

Describe how the Plan will be updated, who will be responsible for ensuring this and how the information will be disseminated.

Possible Annexes

i. Maps
ii. Registration forms
iii. List of organizations or individuals participating in the operation
iv. Agency Profiles (details of staff and resources involved in the operation)
v. Gap identification charts
vi. Commodity specifications
vii. Budgets

Annex 2 – Gap Identification Chart (blank)

	Site 1	Site 2	Site 3
Overall site management			
Protection			
Registration			
Shelter			
Water			
Health			
Nutrition			
Sanitation			
Distribution			
Other			

6 Operations Planning

7

Coordination and Site Level Organization

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Coordination

Introduction

1. Coordination can be defined as the harmonious and effective working together of people and organizations towards a common goal.

2. Good coordination should result in:

i. Maximum impact for a given level of resources;

ii. Elimination of gaps and overlaps in services;

iii. Appropriate division of responsibilities;

iv. Uniform treatment and standards of protection and services for all the beneficiaries.

3. For effective coordination appropriate approaches and structures will need to be put in place at the various levels. Coordination requires good management and clearly defined objectives, responsibilities and authority.

Coordination is not free: it has costs in terms of time and other resources needed to make it work.

Coordination of the UN Response to Refugee Emergencies

4. Within the UN system the responsibility for refugees lies with UNHCR. Therefore, when there is a refugee emergency, UNHCR is the UN organization responsible for coordinating the response of the UN system to the emergency.

Mechanisms for Coordination in Refugee Emergencies

5. Effective coordination is the result of sound management. Coordination mechanisms set up without the establishment of clear objectives and assignment of responsibility and authority will be ineffective. Coordination must be based on good information exchange, particularly with the site level, otherwise it may even be counterproductive.

6. Mechanisms for coordination include:

i. International and Regional instruments and agreements which define responsibilities and roles at the global (and sometimes regional or country) level;

ii. Memoranda of Understanding and exchange of letters with other agencies, and agreements with implementing partners and host governments, defining responsibilities and roles at the situational level;

iii. A coordinating body;

iv. Sectoral committees as necessary;

v. Regular meetings;

vi. Reporting and information sharing;

vii. Joint services and facilities, for example, vehicle repair services, communications, and a joint staff security group;

viii. Codes of conduct for organizations working in humanitarian emergencies.

7. In refugee emergencies UNHCR should take the lead to ensure effective coordination if this is not already ensured, including establishing the coordinating body.

8.

Whatever the implementing arrangements, a single coordinating body should be established for the operation – for example, a task force, commission, or operations centre.

The coordinating body will provide a framework within which the implementation of the programme can be coordinated and management decisions taken. The coordinating body should have clearly defined and well promulgated responsibility and authority.

9. The elements of a coordinating body, including membership and functions are described in Annex 1. Tips for running meetings, including coordinating meetings are given in Annex 2.

10. Where a coordinating structure does not already exist, UNHCR should, in cooperation with the government, take the lead in setting up the coordinating body and mechanism. This is a crucial component of UNHCR's leadership role. The coordinating body may be set up and chaired by the government with strong support from UNHCR, or be co-chaired by the government and UNHCR, or be chaired by UNHCR alone.

11. The membership of the coordinating body should include government ministries and departments, as well as other UN agencies, NGOs and other concerned organizations. It is important to coordinate the activity of all NGOs – whether they have entered into an implementing agreement with UNHCR or not. In a large scale emergency with a number of actors, the coordinating body could become unwieldy. However, it should still be possible to

ensure some degree of representation or participation on the coordinating body by all actors either directly, or on sectoral committees, or through close working partners who are represented on the coordinating body.

12. The coordinating body should hold regular, formal meetings during which overall progress is reviewed and plans adjusted. These meetings should be complemented by informal contacts with members of the coordinating body.

13. When required, the coordinating body should create sectoral committees, for example for health and nutrition. Such committees will be responsible for coordinating implementation in that sector and reporting back to the coordinating body. They could also play an important part in the development of specific standards for the delivery of assistance. When the operation is sufficiently large, a sectoral committee could be coordinated by a UNHCR sector coordinator.

14. A coordinating body can also be of considerable value when new agencies arrive, both in integrating their assistance in the overall programme and with practical administrative arrangements and briefing.

15. Coordination must be based on good information exchange, particularly with the site level. The framework for the organization and coordinating mechanisms at the site level is likely to broadly reflect that established centrally. To get information passed vertically between central level and site level can be as hard as getting information passed between organizations. Each organization should be responsible for ensuring that there is good communication between its staff at site level and centrally, and that important information is then passed on to the coordination body.

Coordination of the UN Response to Complex Emergencies

16. A complex emergency can be defined as: **a humanitarian crisis in a country, region or society where there is a total or considerable breakdown of authority resulting from internal or external conflict, and which requires an international response that goes beyond the mandate or capacity of any single agency and/or the ongoing UN country programme.**

17. Likely characteristics of complex emergencies include:

i. A large number of civilian victims, populations who are besieged or displaced, human suffering on a major scale;

ii. Substantial international assistance is needed and the response goes beyond the mandate or capacity of any one agency;

iii. Delivery of humanitarian assistance is impeded or prevented by parties to the conflict;

iv. High security risks for relief workers providing humanitarian assistance;

v. Relief workers targeted by parties to the conflict.

18. The Office for the Coordination of Humanitarian Affairs (OCHA), is the UN body charged with strengthening the coordination of humanitarian assistance of the UN to complex emergencies. OCHA has three main functions in this field: coordination of humanitarian response, policy development and advocacy on humanitarian issues.

19. OCHA discharges its coordination function primarily throughout the Inter-Agency Standing Committee (IASC) which is chaired by the Emergency Relief Coordinator (ERC), with the participation of humanitarian partners[1]. The IASC ensures interagency decision-making in response to complex emergencies, including needs assessments, consolidated appeals, field coordination arrangements and the development of humanitarian policies.

20. Where there is a complex emergency an individual or agency is appointed to be responsible for the coordination of the UN system response at field level – this individual or agency is designated the "Humanitarian Coordinator".

21. The decision on who to appoint as Humanitarian Coordinator is made by the Inter-Agency Standing Committee (IASC).

22. The agency appointed as Humanitarian Coordinator will depend on the nature of the emergency, and comparative existing agency capacity in the region.

23. There are four possible options which are normally used for the coordination of UN assistance in a complex emergency. These are:

[1] The full members of the IASC are OCHA (convenor), FAO, IOM, UNDP, UNHCR, WFP, UNICEF, WHO, and there are a number of standing invitees, including the Red Cross movement and NGOs.

i. *Resident Coordinator*
The Resident Coordinator is the leader of the United Nations country team and is normally the head of UNDP in a particular country. In a complex emergency, the Resident Coordinator may also be designated as the Humanitarian Coordinator.

ii. *Lead Agency*
One of the UN agencies may be selected to coordinate and this is often the agency which provides the majority of the assistance;

iii. *Humanitarian Coordinator*
If the emergency is of considerable size a Humanitarian Coordinator may be appointed distinct from the office of the Resident Coordinator and lead agency. The Humanitarian Coordinator normally phases out once the emergency reaches recovery phase and any residual tasks are returned to the Resident Coordinator;

iv. *Regional Humanitarian Coordinator*
If the emergency affects more than one country a Humanitarian Coordinator having regional responsibilities may be appointed.

Role of UNHCR and Other UN Agencies in a Complex Emergency

24. In complex emergencies involving refugees, UNHCR will be responsible for protection and assistance activities on behalf of the refugees. UNHCR may also be appointed lead agency, and therefore be responsible for the coordination of the UN response.

25. Whether or not UNHCR is lead agency, the UNHCR Representative remains directly responsible to the High Commissioner on all issues related to the UNHCR country programme as well as policy matters and issues related to UNHCR's mandate.

The protection of refugees must remain the sole prerogative of the High Commissioner.

Organization at the Site Level

Introduction

26. The framework for the organization and coordinating mechanisms at the site level are likely to reflect broadly those established centrally. However, there is one fundamental difference between the site and central levels: at the site level the refugees themselves should play a major role.

The organization of the refugee community must support and enhance their own abilities to provide for themselves.

27. A clear understanding of the aims and objectives of the emergency operation and proper coordination are even more important at the site level than centrally, for it is here that failures and misunderstandings will directly affect the refugees.

Of particular importance will be the adoption of common standards when a number of organizations are providing similar assistance.

Regular meetings of those concerned are essential. There should be an overall coordinating mechanism chaired by the government authority, UNHCR Field Officer, and/or an operational partner, and this mechanism may be complemented by sectoral committees.

28. Certain activities are interdependent or have a common component and will need particularly close coordination at site level. For example, environmental sanitation measures must be closely coordinated with health services, and the home visiting component of health care with feeding programmes and community services.

29. A rapid changeover of outside personnel can create major problems for site level coordination, though some specialists may obviously be required for short periods. The importance of continuity is proportional to the closeness of contact with the refugees. Operational partners at the site should have a standard orientation and briefing procedure to ensure continuity of action and policy despite changes in personnel.

Community Organization

30. The importance of preserving and promoting a sense of community is stressed in chapters 10 and 12 on community services and site planning. The approach to thinking about and understanding site and community organization should be from the smallest unit – the family – upwards, rather than imposed from the largest unit downwards, which would be unlikely to reflect natural or existing community structures and concerns.

31. The basic planning unit for site organization and management is likely therefore to be the family, subject to traditional social patterns, and distinctive features of the popula-

tion (e.g. numbers of separated minors, adolescent and women headed households). Larger units for organizational and representational purposes will again follow the community structure. For example, the next level up is likely to be community units of about 80 to 100 people, grouped according to living arrangements, followed by groups of communities of about 1,000 people. Different settlement services are decentralized to these different levels – e.g. water and latrines at household level, and education and health facilities at community and larger levels. The physical layout of the site will have a major influence on social organization.

Generally, the smaller the settlement the better – the overriding aim should be to avoid high density, large camps.

Community Involvement

32. The refugees must be involved in planning measures to meet their needs and in implementing those measures. The way the community is organized can help ensure that the refugees' specific skills are made use of and that the personnel for services at the site will come from the refugees.

33. There are three levels to the involvement of refugees. The first is in the overall planning and organization, for example the determination of what is the best and culturally most appropriate solution to a problem, given the constraints of the situation. This level requires that the refugees have a social organization within their community that is properly representative. As the previous social structures may have been severely disrupted, this may take time to redevelop but will be important to the success of the emergency operation and for the future of the refugees. Meanwhile, urgent action to meet evident needs must of course be taken.

34. The second level of involvement is in the practical use of the refugees' skills and resources wherever possible for the implementation of the operation. The refugees themselves should run their own community to the extent possible. Where suitably qualified or experienced refugees exist, such as nurses, teachers and traditional health workers, they must obviously be used. Where they do not, outside assistance should ensure that refugees are trained to take over from those who are temporarily filling the gap. Other services include feeding programmes, sanitation, (maintenance and cleaning of latrines, drainage, garbage disposal, vector control, etc.) construction (shelters and communal buildings) education, tracing and general administration. Note that women and adolescents often have the necessary skills but lack the confidence or language skills to come forward – an outreach programme to identify them might be necessary.

35. At the same time, other traditional skills – for example in construction or well-digging – should be harnessed. While specific measures to develop self-reliance will vary with each situation, their aim should always be to avoid or reduce the refugees' dependence on outside assistance. The more successful measures are generally those based on methods and practices familiar to the refugees.

36. The third level is the education of the community on life in their new situation, which may be markedly different from their previous experience. Public health education in such matters as the importance of hygiene in crowded conditions, mother and child care and the use of unfamiliar latrines is an example. As another example, if unfamiliar foods or preparation methods have to be used, immediate practical instruction is essential. Education and guidance of this sort are best given by the refugees themselves (including women and youth), with outside assistance.

Refugee Representation

37. Refugee settlements are not, typically, simple replicas of former community life, and large numbers of refugees may be living temporarily outside their traditional community leadership structures. However, in nearly every emergency, some refugee leaders, spokespersons, or respected elders will be present. It will be necessary to define with the community the method of choosing leaders to ensure fair representation and proper participation in both the planning and implementation of the emergency programme. The more the settlement differs from former community life, the more important this action is likely to be to the success of the programme.

However, be aware that some new power structures might emerge, for example through force, and may exercise de facto control over the population, but may not be representative.

38. The system of refugee representation should:

i. Be truly representative of the different interests and sectors of the community, and of both men and women;

ii. Include various levels of representatives and leaders to ensure adequate representation and access for individual refugees;

iii. Avoid unconscious bias, for example on the basis of language. Bear in mind that there is no reason why a refugee should be representative of the community simply because he or she has a common language with those providing outside assistance;

iv. Be based on traditional leadership systems as much as possible but provided these allow proper representation (for example, if the traditional leadership system excludes women, there should nevertheless be women representatives);

v. Be consistent with the physical divisions in the layout of the site.

Key References

A Framework for People-Oriented Planning in Refugee Situations taking account of Women, Men and Children, UNHCR, Geneva,1992.

Partnership: A Programme Management Handbook for UNHCR's Partners, UNHCR, Geneva 1996.

UNHCR Handbook; People-Oriented Planning at Work: Using POP to Improve UNHCR Programming, UNHCR, Geneva, 1994.

Annex 1 – Elements of a Coordinating Body

Each of the factors listed below would need to be evaluated against the particular context and policy of the host government. At the beginning of the operation UNHCR should secure a suitable meeting room for coordination meetings.

Membership

The nature of the coordinating body and its usefulness will be determined partly by its membership.

1. Criteria for participation:

i. Provision of direct services;
ii. Regular attendance at coordination meetings;
iii. Compliance with service guidelines and standards;
iv. Regular financial contributions to coordination mechanism.

2. Other organizations may wish to attend coordination meetings without full participation in the coordination mechanism:

i. Organizations which may choose not to fully participate, e.g. ICRC;
ii. Funding organizations and donor representatives;
iii. Public interest groups;
iv. Military forces.

Functions of the coordination body

1. Meetings.
   These may be needed at the central and the site level, and include:

i. Overall coordination meetings, which may be needed daily at the start of an emergency;
ii. Sectoral committee meetings (e.g. health, registration, water);
iii. Conferences.

2. Identification of needed services and soliciting voluntary agencies to assume responsibilities for the provision of these services.
3. Allocation of donated commodities and financial contributions.
4. Guidelines and standards for the provision of services.
5. Orientation of newly arrived agencies.
6. Orientation of incoming staff.
7. Research and documentation.
8. Support for settlement coordination committees.
9. Coordination with agencies outside the country.
10. Information sharing.
11. Fund raising.

Annex 2 – Tips on running a meeting

1. Set clear objectives for the meeting

- Why is the meeting needed and what is the expected outcome? (Communication? Problem-solving? Planning? Decision-making?)
- Who should attend the meeting?
- Should the meeting be formal or informal?

2. Prepare an agenda

- Make a written agenda with clear objectives and approximate timing for each item;
- Ensure that the agenda states why the meeting is needed;
- Make sure the agenda is realistic (not too many items) and sequence the items appropriately;
- Put the difficult, important issues near the beginning (perhaps dealing first with something quick and simple);
- Plan breaks if the meeting is more than 1 hour in length;
- Avoid mixing information sharing and decision-making in the same meeting – hold separate meetings for these functions.

3. Documentation

- Circulate a detailed agenda, list of participants and any background documentation (such as minutes of previous meetings) in advance (but not too far ahead) of the meeting, 2 to 3 days before is best;
- Indicate the time, place and duration of the meeting;
- Prepare audio-visual materials in advance.

4. Seating arrangements

- Choose a circular or rectangular table;
- Avoid a long, narrow table if possible as this makes communication more difficult;
- In an informal setting, a semicircle of chairs facing a flip chart is the best;
- Everyone should be able to see each other;
- Participants should not be too crowded or too far apart.

5. During the meeting

- Start on time;
- Have the participants introduce themselves if they do not know each other;
- Clarify the objective(s) of the meeting and review the agenda and time limits;
- Outline how the meeting will be conducted (methodology);
- Identify the rapporteur or secretary for the meeting;
- Ask the participants if they agree to the agenda and be flexible on minor changes if there is consensus;
- If applicable, review action items of previous meeting(s);
- Make sure you have everyone's attention before opening the meeting.

During the meeting the chairman or facilitator should

- Avoid getting personally involved in the discussions;
- Keep an overall view of the objective(s);
- Do not lose the thread of the argument;
- Stick to the agenda (but be flexible within agenda items);
- Ask for information and opinions;
- Summarize and reformulate key points (have the rapporteur or secretary use the flip chart to record the points as they occur);
- Clarify and elaborate where needed;
- Concentrate on key issues and stop digressions;
- Test for consensus;
- Ensure everyone gets a chance to speak;
- Assign responsibilities and deadlines for agreed tasks (action, responsibility, and date by agenda item);
- Set date, time and place for next meeting;
- Close the meeting on time, on a decided and positive note.

7. After The Meeting

- Keep a record of the meeting. It should include the following basic items:
  i. A list of the participants noting those who were invited but did not attend ("apologies" list);
  ii. The conclusions, decisions, recommendations and the follow up action required, by agenda item, with the name of the person responsible for action and time frame;
  iii. The time, date and place of the next meeting.

Note: working in small groups

Dividing the participants into small groups can be useful in large meetings (more than 12 participants), when discussions are lengthy. Depending on the subject, it can allow in-depth discussion on specific questions and possibly help to solve problems.

8

Implementing Arrangements

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Introduction

1. Appropriate arrangements to implement an emergency operation will be fundamental to its success. UNHCR has a unique statutory responsibility for the provision of international protection. However, there is no such unique statutory responsibility for the provision and distribution of material assistance to refugees, which might be carried out by other organizations – governmental, UN agencies, NGOs, as well as directly by UNHCR. There are a number of factors which will influence the implementing arrangements for assistance operations. This chapter outlines implementing arrangements and procedures in emergencies including monitoring, reporting and evaluation. UNHCR guidelines for standard procedures must be referred to for more detail.

Implementing Arrangements

2. Depending on the scale and needs of the emergency, a number of different implementing arrangements may be needed in the various sectors. One organization might have operational responsibility for health care, and another for logistics. Even within a sector, operational responsibility may have to be split up. Different operational partners might have responsibility for health care in different refugee sites or communities. In UNHCR terminology, an operating partner is an organization or agency that works in partnership with UNHCR to protect and assist refugees, and an implementing partner is an operational partner that signs an implementing agreement with UNHCR.

3.

Whenever possible UNHCR seeks to implement assistance indirectly through an implementing partner rather than directly.

The origin of this policy is found in the Statute of UNHCR. Article 1 requires the High Commissioner to seek "permanent solutions for the problem of refugees by assisting Governments and, subject to the approval of the Governments concerned, private organizations...". In accordance with Article 10, the High Commissioner "shall administer any funds, public or private, which he/she receives for assistance to refugees, and shall distribute them among the private and, as appropriate, public agencies which he/she deems best qualified to administer such assistance".

Degree of Operational Responsibility of UNHCR

4. Although UNHCR normally seeks to implement indirectly through an implementing partner, there are circumstances in which it may be necessary and/or clearly in the interests of refugees for UNHCR to assume greater operational responsibility. UNHCR's degree of direct operational responsibility will vary for each emergency situation, and also with time as the operation evolves.

5. Factors influencing the degree of operational responsibility undertaken by UNHCR, other organizations and the government include the following:

i. The government's capacity to manage the refugee emergency, because of the scale, nature, location of the emergency, and ability of existing government structures to respond;

ii. The existence and capacity of other organizations in the country, and in the sectors where assistance is most needed;

iii. The stage of the emergency. At the start of an emergency, the government itself frequently has full operational responsibility. For example, a new influx is often first assisted by the local district and provincial authorities. On the other hand, in other circumstances, it is often at the start of an emergency where UNHCR has the greatest operational responsibility because there may be no suitable operational partner immediately available within the country.

6. Where UNHCR does assume a high degree of operational responsibility, swift action is needed to ensure that the necessary personnel and expertise are available, by obtaining the rapid deployment of sufficient UNHCR staff (see chapter 20 on administration and emergency staffing). At the same time, steps should be taken to identify and mobilize other organizations to assume responsibilities in the various sectors as soon as possible.

The Operational Role of the Government

7. Whatever the implementing arrangements, overall responsibility remains with the host government, assisted by UNHCR. The government's concurrence must, in accordance with Article 1 of the Statute, be sought on the proposed implementing arrangements.

8. The government may not have the capacity to be the primary operational organi-

zation, but may play a major role in the implementation of various activities of UNHCR and donors. In this case, it is preferable to ensure that the policy arm of the government (e.g. the Ministry of the Interior) is separate from the "operational" entities, since, as recipients of UNHCR funds, the relationship with the latter is substantially different.

It is preferable that the implementation of programmes be carried out by existing line ministries – e.g. the Ministry of Health for health programmes. As a rule, new government departments should not be specifically created to respond to the refugee emergency.

Every effort should be made to resist the creation of such specialized departments.

The Operational Role of UN Agencies

9. UNHCR always retains responsibility for the protection needs of refugees, but the refugees' material needs are likely to fall within sectors for which other organizations in the UN system have special competence through their mandate, experience and capacity, e.g. WFP and UNICEF. The roles and responsibilities of UN agencies are defined through their mandates and MOUs, and situation-specific responsibilities are set out in exchanges of letters and agreements – this should avoid duplication, minimize gaps, and clarify roles on the basis of recognition of comparative advantages.

Non-Governmental Organizations

10. Where the government is not the implementing partner in a particular sector, there may be advantages to selecting a national organization or an NGO with the required capacity as a partner. National or locally-based organizations may already be delivering emergency assistance, would already have staff on the ground, and would already be familiar with the country.

11. Many international NGOs have great experience of refugee emergencies and some can deploy teams and resources at short notice, both for specific sectors and for general management. In addition to their own staff, they will also know of a wide circle of individuals with the appropriate skills and experience. International NGOs already working in the country may be strengthened by their headquarters. For instance, under the overall responsibility of the national Red Cross or Red Crescent Society, the IFRCRCS may be able to help strengthen quickly the capacity of the national society to implement the emergency operation.

12. Criteria for the selection of implementing partners may be found in Chapter 4 of the UNHCR Manual.

Implementing Procedures

Implementing procedures are subject to change. The forms, terms, documentation, procedures and references (e.g. chapter 4 of the UNHCR Manual) referred to in this section from paragraphs 13 to 31 may change from time to time. However, the basic principles should remain the same.

13. Authority to implement the activities envisaged in the operations plan must be given formally through implementing instruments. These define the conditions which govern project implementation and authorize the obligation and expenditure of funds.

14. Authority to implement is firstly delegated internally within UNHCR. This is usually given through a Letter of Instruction (LOI) which authorizes the UNHCR Representative to implement projects directly or to enter into implementing agreements with implementing partners. Based on the internal delegation of authority, implementing agreements can be signed with UNHCR's implementing partners.

Any party disbursing UNHCR funds must have a formal signed agreement with UNHCR.

The Emergency Letter of Instruction (ELOI)

15. An Emergency Letter of Instruction (ELOI) is simpler in form and procedure than a "normal" LOI and is used to delegate implementing authority rapidly to the field. It is usually sent via e-mail, fax or telex. The ELOI gives the Representative in a country where an emergency is rapidly evolving the immediate authority to incur expenditures, and to enter into agreements for project implementation with implementing partners. It is not intended to cover the entire emergency operation, but to permit a rapid response to immediate needs, pending the formulation of an assistance project based on a detailed needs and resources assessment. Thus, in order to ensure continued assistance once these funds are exhausted or the ELOI project is termi-

nated the manager of the operation should, as soon as possible, send Headquarters a detailed project proposal for the issuance of an LOI, in accordance with the procedures set out in Chapter 4 of the UNHCR Manual.

16. The minimum information which the Field Office must send to Headquarters in order that an ELOI be prepared is a budget proposal in US dollars at sector level. No project description or workplan is required.

17. Headquarters can then issue an ELOI with the following basic information:

i. Total requirements;

ii. Initial obligation level;

iii. Purpose of the expenditure (at sector level);

iv. Any time limit applicable to the expenditure;

v. Project symbol;

vi. Summary budget at sector level.

18. Actual expenditure under an ELOI must be recorded at a more detailed level (sector activity or, preferably, sub-item). It must be charged to the appropriate project under which implementation is taking place. A voucher must be completed to record every disbursement made, showing the name of the payee, the amount, the project symbol, the purpose and date of disbursement. The voucher should be signed by the payee or supported by receipted bills and sent to Headquarters with the monthly accounts.

19. In certain circumstances, the ELOI may not be necessary, as it will be possible to reallocate funds under an existing LOI.

Implementing Agreements

20. Implementation of all or part of a project may be sub-contracted to one or more implementing partners. A party disbursing UNHCR funds must have a formal signed agreement with UNHCR. The agreement must be based on the internal delegation of authority, and must comply with the terms of the authority (LOI, ELOI, etc.) and the Financial Rules. The standard clauses which must figure in any implementing agreement are described in Chapter 4 of the UNHCR Manual.

21. If the government or an international organization advances relief supplies from their own resources, UNHCR may agree in writing to reimburse them in cash or kind, provided the maximum US dollar commitment is specified and does not exceed unobligated funds available under the ELOI or other existing authority. Any such commitments should immediately be reported to Headquarters.

22. An agreement with the government covering the provision of assistance is quite separate from the administrative agreement that governs the status of the High Commissioner's representation in the country. Where this administrative agreement (often referred to as the "UNHCR Cooperation Agreement") needs to be concluded, special instructions will be given by Headquarters. See also annexes to the *Checklist for the Emergency Administrator* for examples of such agreements.

Letter of Intent

23. If the implementing partner must start providing assistance before there is time to conclude an agreement, a signed "Mutual Letter of Intent to Conclude an Agreement" can authorize the obligation of funds. This is a temporary arrangement until there has been time to develop the detail of the agreement. The letter must include certain basic clauses. Annex 1 contains a sample format for such a letter and the basic clauses.

Agreements

24. The form of the agreement will depend on the circumstances and on the identity of the implementing partner. The agreements exist in two different formats. Bipartite agreements are for projects implemented by a governmental or a non-governmental organization. Tripartite agreements are for projects implemented by an non-governmental organization and where the host government is a third signatory to the agreement. The individual signing on behalf of UNHCR should be the addressee of the ELOI or LOI. The agreement sets out the responsibilities of each party, for example the government's contributions to the programme (land, services etc.) and its undertakings on facilitating the import and transport of relief supplies (traffic and landing rights, tax and customs exemptions, etc.).

Administrative Expenditure by Implementing Partners

25. UNHCR looks to implementing partners to contribute their own resources to the refugee programme, and to develop the capacity to meet their own support costs, in particular their headquarters support costs. UNHCR recognizes, however, that certain types of support costs

could be a legitimate charge on UNHCR voluntary funds. Support costs (as opposed to operational costs) are defined in Chapter 4 of the UNHCR Manual, as are the guidelines applicable to the coverage of such costs.

Direct UNHCR Expenditure

26. In many cases, there may be a need for direct UNHCR project expenditure in addition to programme delivery, and administrative support. This might include international procurement by UNHCR, clearing, storage and internal transport expenses for contributions in-kind, and initial direct operational expenditure by UNHCR Field Officers at the refugee site.

Procurement

27. The Representative may enter into a contract (or series of related contracts[1] for the procurement of goods and services up to a certain limit (US$100,000 in 1998), without special Headquarters approval, but subject always to the appropriate authority (e.g. the ELOI) and procedures.

28. Where the Representative needs to enter into a contract (or series of related contracts) in excess of this amount, approval must be obtained either from Headquarters, or from the Local Committee on Contracts. A Local Committee on Contracts can be established when circumstances demand, for example at the beginning of an emergency where required goods and services are available locally. It can only be established with the approval of Headquarters (according to the procedures in Annex 2).

29. In all cases, the Representative must ensure that there is always due assessment of the available alternatives, including competitive bidding, before procuring any goods or services.

30. Procurement procedures are described in Chapter 4 of the UNHCR Manual, and set out in Annex 2. See also chapter 18 on supplies and transport.

Contributions In Kind

31. Contributions in kind may be made towards needs foreseen under the emergency programme. Whether these are made bilaterally or through UNHCR, their value (generally assessed on the same basis as foreseen in the budget costing) will normally be credited against the appropriate budget item, and the cash requirements through UNHCR for that item reduced accordingly. This mechanism may need to be carefully explained to the government and implementing partners. For all contributions in kind made through UNHCR, a separate project or an "in kind LOI" will be established by Headquarters for the value of the contribution. The addressee of the relevant LOI is required to provide reports from the field to Headquarters on the arrival and distribution of the contribution. Paragraph 53 of chapter 9 on external relations discusses contributions in kind received by the Field.

Monitoring, Reporting and Evaluation

32. Control of UNHCR funds by the UNHCR field office and operational partners, and monitoring and evaluation, should be in accordance with established UNHCR procedures and the relevant clauses of the ELOI or LOI. Proper project control, including the close monitoring of obligation and expenditure levels, is particularly important in an emergency because of the risk of over-expenditure and the need to reallocate under-used resources without delay.

33. Careful and close monitoring of the activities and outputs is essential. Whatever the implementing arrangements, a UNHCR presence at, or at least frequent visits by the same person to, the site of the refugees will be required.

34. Monitoring is the ongoing review of an operation or project during its implementation to ensure that inputs, activities, and outputs are proceeding according to plans (including budget and work schedules). Monitoring tracks progress towards objectives, and that progress should be analyzed and evaluated by management, who can make improvements and take corrective measures to better achieve those objectives. Monitoring can be summed up in the question: *"Are we doing the thing right?".*

35. Projects should also be evaluated to analyze the goals of the project themselves: their relevance and achievability – this can be summed up in the question *"Are we doing and have we done the right thing?".*

[1] *Related purchases are contracts entered into with one supplier within the previous 90 days which amount to $100,000 or more, not including contracts that have been approved by the Committee on Contracts.*

Sufficient information must be available to decision-makers so that the operation can be adjusted to meet changing needs or to correct shortcomings.

36. Monitoring and evaluation should not be considered as time consuming detractions from protecting and assisting refugees, but as important tools in an emergency to ensure that activities being carried out retain their relevance in rapidly changing situations, and continue to address the most urgent problems. The circumstances of refugee women and children should be specially monitored; their circumstances could and should be used as benchmarks for monitoring the effectiveness of the overall operation.

37. Reports should be in standard formats or cover standard issues, in order to ensure important information is covered but avoiding unnecessary detail. Always bear in mind the purpose of the report, and who will be reading it, keeping it concise and to the point. Energy should not be wasted on exchanging information that is not acted upon – a report that is not read and acted upon is a waste of paper and time.

38. See Annex 3 for a suggested format for a standard emergency situation report.

Situation reports should be sent as a matter of routine.

Specific reports will be required for various sectors like protection, health and community services.

39. Regular reports should be made by the implementing partner to UNHCR at field level. The reporting obligations of implementing partners must be set out in the implementing agreements. The Field must also send regular reports to Headquarters - implementing partners' reports that are forwarded to Headquarters must always be accompanied by an analysis and comments from the Representative.

Special Considerations

40. In a refugee emergency, staff may be faced with a number of questions on which the following guidance may be helpful.

Payment for the Purchase or Rent of Land Occupied by Refugees.

41. As a matter of policy, UNHCR does not buy or rent land, which the government of the country of asylum is expected to provide. Headquarter's approval is required for exceptions to this policy. Construction on the land may however be financed by UNHCR.

Payment to Refugees

42. The issue of paying refugees in cash or kind for certain assistance activities (e.g. some community services, establishing basic infrastructure and shelters) will inevitably arise. How this issue is resolved can have a crucial effect on a settlement's character.

Payment can destroy the sense of responsibility refugees feel for their welfare.

However, the absence of payment may mean that tasks essential to the settlement's well-being are either not done or have to be done by paid outside labour.

43. In the first days of a settlement's existence payment to refugees would not normally be appropriate. In this start-up phase refugees should assume their responsibility towards themselves and their fellows to participate in the establishment of their settlement. Even payment-in-kind is probably inappropriate at this stage. In addition to the unfortunate impression of creating a right to payment, it may also involve commitments which cannot continue to be met, or have to be met at the expense of the entire settlement's general ration. Problems with the supply system are almost inevitable at the beginning of a settlement's life and no group should in such circumstances get extra commodities to the direct detriment of others.

44. In the longer-term, certain types of community work frequently start to emerge as areas where standards will drop if some form of payment is not given. This is often the case with key public health services whose importance is not always correctly understood by the refugees. Before starting any payment scheme, calculate its full potential cost and ensure that the required extra funds or food are available. The continuing financial implications for a large refugee population may be considerable.

It should be borne in mind that, after payment is introduced for one type of job or for one group of workers, others will see this as a precedent.

It will be necessary to have some very clear but restrictive criteria for paid community work. The wage system introduced should not inhibit progress towards a self-reliant settle-

ment. Those agencies responsible for different sectoral services should meet the wage costs of refugees working in that sector.

45. As the refugees are already supported, remuneration levels should be well below national rates. It is important that this remuneration be fairly applied to all refugees doing broadly the same work. A major cause of discord at many refugee sites has been the payment by different organizations of markedly different rates to refugees for the same work.

A standard scale is essential.

Whether or not there are differentials recognizing different levels of skill will be a matter to decide in consultation with the refugees.

Provision of Services to the Local Population.

46. The local population should not see the refugees as a burden, because of their effect on existing local services and environment, nor should the refugees be a cause of resentment, because of benefits which may seem to accrue only to them. So activities to benefit the refugees such as maintaining or improving the local infrastructure (roads, hospitals and schools) or to look after the local environment, could help avoid or diminish resentment on the part of the local population.

47. Bilateral aid programmes and other organizations, both within and outside the UN system, should be encouraged to help affected nationals. Assistance available to refugees should take account of the conditions of nationals in the area and a flexible approach should be adopted – the principle is that provision of services to refugees should not be higher than that available to the local population.

Corruption

48. UNHCR should ensure that all concerned with the provision of assistance know clearly what UNHCR policy is regarding corruption. UNHCR is obliged by donors and by its mandate to ensure that all funds distributed by it are properly used for the benefit of refugees and all transactions must be in accordance with the Financial Rules. UNHCR should clearly specify which practices are acceptable and proper and which are not. It should also be clear that breaches of the policy will not be tolerated, and this message will be reinforced if rigorous monitoring and control are apparent to all parties.

Political and Religious Activity

49. Everyone has a right to political and religious expression: however, refugees are also obliged to conform to the laws and regulations of the host country as well as to the measures taken for the maintenance of public order. UNHCR itself is obliged to be non-political[2]. Responsibility for security and public order at the refugee site always rests with the government. To help maintain order, site planning should take into account any need there may be to physically separate any previously hostile groups among the refugees.

50. Other organizations active in the delivery of assistance may have a religious aspect in their normal work. Some are traditional partners of UNHCR, and the separation of religious and other activities is long established and well understood, but for others it may be useful to recall the basic principles. Religious activities by those outside the refugee community, where permitted by the authorities, must be clearly dissociated from the delivery of assistance and services to refugees.

No proselytizing should take place in association with the provision of services such as education, health and community services.

Key References

Partnership: A Programme Management Handbook for UNHCR's Partners, UNHCR, Geneva, 1996.

Supplies and Food Aid Field Handbook, UNHCR, Geneva, 1989.

UNHCR Manual, Chapter 4, UNHCR, Geneva, 1995 (and updates).

[2] *Para. 2 of the Statute of the United Nations High Commissioner for Refugees states: "the work of the High Commissioner shall be of an entirely non-political character; it shall be humanitarian and social..."*

NATIONS UNIES
HAUT COMMISSARIAT
POUR LES REFUGIES

UNITED NATIONS
HIGH COMMISSIONER
FOR REFUGEES

Date
Notre/Our code:

Dear

I should like to refer to our exchanges [*add details as appropriate*] concerning the implementation by [*name of implementing partner*] on behalf of the United Nations High Commissioner for Refugees (UNHCR) of a programme of emergency assistance to [*origin and number of beneficiaries*].

It is my understanding that it is our mutual intention to conclude and sign as soon as possible an agreement covering our cooperation in the above mentioned programme. This agreement will incorporate, inter alia, the attached clauses and will require [*name of implementing partner*] to report in financial and narrative form on the use of all contributions received from the High Commissioner. The conclusion of an agreement embodying these requirements is mandatory under the Financial Rules of UNHCR whenever funds are made available by UNHCR.

I should be grateful if you would confirm in writing below that this understanding is correct, and your agreement that the use of the sum of [*amount in local currency or in US dollars*], that the High Commissioner intends to make available to [*name of implementing partner*] on receipt of this confirmation, will be considered as subject to the terms of the Agreement, once concluded and signed.

[signature and title of addressee of ELOI]

I confirm that the understanding set out above is that of [*name of implementing partner*], which agrees that the use of the sum of [*amount in local currency or in US dollars*] will be considered as subject to the terms of the Agreement, once concluded and signed.

[signature and title of addressee of letter above, and date]

MANDATORY CLAUSES

Clauses governing Rate of Exchange (1.08 or 2.03), Maintenance of Financial and Project Records (3.08), Inspection and Audit (3.11 and 3.12), Audit Certificate (3.13) and Non-Liability of the High Commissioner (4.05 and 4.06) are STATUTORY REQUIREMENTS and cannot be excluded (paragraph numbers given are those from UNHCR Manual, Chapter 4, Appendix 8). These clauses are set out below:

Rate of Exchange

1.08 (if the government is a signatory to the Agreement): grant the most favourable official rate of exchange for all conversions into local currency of funds provided by the High Commissioner for the implementation of the project governed by the UNHCR Agreement;

2.03 (if an NGO is the implementing partner): apply the most favourable official rate of exchange for all transactions relating to the implementation of the project governed by the UNHCR Agreement;

Maintenance of Financial and Project Records

3.08 maintain separate project records and accounts containing current information and documentation which, **inter alia**, shall comprise:

a) copies of the UNHCR Agreement(s) and all revisions thereto;
b) payment vouchers, clearly showing the (Sub-)Project symbol, the name of the payee, the amount, the purpose and date of disbursement, evidencing all payments made and with all pertinent supporting documentation attached;
c) vouchers evidencing the receipt of all remittances, cash or any other form of credit to the project account;
d) periodic analyses of actual expenditure against the project's budget;
e) records of all financial commitments entered into during the project;
f) reports by auditors on the accounts and activities of the project;

Inspection and Audit

3.11 facilitate inspection and audit of the project governed by the UNHCR Agreement by the United Nations Internal Audit Service or any other person duly authorized by the High Commissioner on behalf of the United Nations. Should they at any time wish to do so, the United Nations Board of Auditors may also carry out an audit of the project. Audits of the project will include, **inter alia**, the examination of the project accounting records in order to determine that the charging of administrative and operational support costs to the project complies with those specified in the annexes to the UNHCR Agreement. For auditing purposes, project accounting records shall be retained for the six years following the project's termination;

3.12 facilitate visits by the High Commissioner or of any other person duly authorized by him/her to the project site(s) to evaluate the progress and achievements of the project during its period of implementation or thereafter;

Audit Certificate for Governmental Implementing Partners

3.13 submit to the High Commissioner, within three months of the final date for liquidation of commitments, an audit certificate issued by the appropriate government audit authority, together with such comments as the auditor may deem appropriate in respect of project operations generally and, in particular, the financial situation as reported by the Government;

Audit Certificate for International NGO Implementing Partners

3.14 submit to the High Commissioner, within six months of the end of the Agency's fiscal year, a copy of its consolidated audited financial statements, wherein UNHCR funding is clearly identified, issued by an independent audit authority and as presented to and endorsed by the Agency's governing body. The audit report and opinion should include such comments as the auditor may deem appropriate in respect of UNHCR funded project operations generally and, in particular, the opinion should clearly indicate that UNHCR funds were duly included in the audit;

Audit Certificate for National NGO Implementing Partners

3.15 for all UNHCR Agreements for a value of US$100,000 and above, submit to the High Commissioner, within six months of the final date for liquidation of commitments, an audit certificate issued by an independent audit authority. The audit report and opinion should include such comments as the auditor may deem appropriate in respect of project operations generally and, in particular, the financial situation as reported by the Agency to UNHCR in its final Sub-Project Monitoring Report. For all UNHCR Agreements for a value of less than US$ 100,000, UNHCR reserves the right to request an audit in accordance with Clause 3.11 above.;

Non-liability

4.05 not be liable to indemnify any third party in respect of any claim, debt, damage or demand arising out of the implementation of the project governed by the UNHCR Agreement and which may be made against the other parties to the Agreement;

4.06 not accept liability for compensation for the death, disability or the effects of other hazards which may be suffered by employees of the other parties to the UNHCR Agreement as a result of their employment on work which is the subject matter of the Agreement.

1. Introduction

1.1. The procedures applicable to the procurement of goods and/or services by UNHCR Headquarters or UNHCR offices in the field (other than contractual arrangements for the employment of staff) vary according to the US dollar value (at the prevailing United Nations rate of exchange) of the goods or services, and are described below.

1.2 For all purchases of substantial quantities of relief or other supplies by UNHCR offices in the field, Representatives should nominate a purchasing/logistics focal point with a clear line of responsibility. Local purchases will be initiated by, or at least cleared with, the purchasing/-logistics focal point. In all circumstances, including the evaluation of contracts for the supply of goods and services or consultancies, the procedures described below will apply. The term "Purchase Order" is to be read as also applying to other forms of authorization used in relation to contracts for services or corporate or institutional consultancies.

1.3 In all cases of procurement of goods and/or services, the procedures and controls applied should be in accordance with Appendix 8 of Chapter 4 of the UNHCR Manual and must provide an open, competitive, qualitative and accountable process to obtain such goods or services which meet project requirements at the lowest available cost. It is the responsibility of the addressee of the Letter of Instruction to ensure that the relevant procedures are adhered to.

1.4 All contracts entered into for the procurement of goods and/or services should ensure exemption from, or reimbursement of, all customs duties, levies and direct taxes on services and goods, supplies or any other articles imported or domestically purchased.

1.5 It is the responsibility of the Representative to ensure that each UNHCR office in the field maintains a register of all commercial contracts entered into and that a sequential number is assigned to every such contract.

1.7 **For a value of less than US$ 2,500**

A Purchase Order may be issued without recourse to formal tender, provided that funds are available under the Letter of Instruction and that at least three informal offers or prices have been considered and the best offer has been selected.

1.8 **For a value of over US$ 2,500 and up to US$ 5,000**

A Purchase Order may be issued provided that funds are available under the Letter of Instruction and that at least three informal quotations have been compared and the best offer has been selected. A written record of the quotations and the reasons for the selection must be kept.

1.9 **For a value of over US$ 5,000 and up to US$ 50,000**

A Purchase Order may be issued provided that funds are available under the Letter of Instruction and that selection has been made on the basis of at least three competitive offers obtained in response to a formal Quotation Request sent to selected suppliers inviting them to submit sealed quotations within a specified time frame. Chart 3.F and Annex VIII of the Supplies and Food Aid Field Handbook provide guidelines and an example of a Quotation Request. The Quotation Request must stipulate that all offers must be received at the UNHCR office in signed and sealed envelopes and marked with the Quotation Request number. All quotations received must remain sealed and must be kept under lock and key until the expiration of the bid deadline. All bids must be opened before a witness by the Administrative Officer or the Officer in charge of administration in the office, and must be initialled by both the person opening the bids and the witness. The witness shall be selected by the Representative and drawn from the professional or national officer categories. All formal quotations will be compared on a Tabulation of Bids form as per Annex IX of the Supplies and Food Aid Field Handbook. The recommended supplier and the reasons for selecting that supplier will be stated thereon.

1.10 **For a value of over US$ 50,000 and up to US$ 100,000**

Representatives will establish a Purchasing Committee to consider bids and to make the appropriate recommendations. The approval of Headquarters is not required. Rules and procedures concerning Purchasing Committees and their composition are set out below. In a

country with more than one Field/Sub Office, the Representative may wish to establish Purchasing Committees at different duty stations. Depending on local costs and current exchange rates, Representatives may also lower the financial limit of procurement to be considered by the Purchasing Committee. The Committee will consider quotations subject to the same conditions as set out in paragraph 1.9 above. If appropriate, the Representative and/or the Committee may wish to request specialist advice from the Programme and Technical Support Section or the Supply and Transport Section at Headquarters.

1.11 **For a value of US$ 100,000 or more**:

A submission must be made to the Committee on Contracts at Headquarters except in cases where Headquarters has authorized the establishment of a Local Committee on Contracts as described in 3 below. For submissions to the Headquarters Committee on Contracts, a minimum of four formal quotations must be requested and considered by the Purchasing Committee which will make a proposal as to the most suitable supplier to the Committee on Contracts through the relevant Desk at Headquarters. In cases where Headquarters has authorized the establishment of a Local Committee on Contracts, the latter may evaluate and decide on all bids without recourse to the Purchasing Committee. Nevertheless, in all cases, the relevant specialists in the Programme and Technical Support Section and the Supply and Transport Section must be consulted before or during the tendering and evaluation stages so as to ensure compliance with technical requirements and that prices are compatible with international market rates for the goods or services under consideration. Submissions to the Committee on Contracts should include information as shown in Chart 3.G of the Supplies and Food Aid Field Handbook. After approval by the Committee on Contracts (or a Local Committee on Contracts), a Purchase Order may be issued.

2. Purchasing Committee

2.1 Procurement of goods or services by a UNHCR office in the field for a value of over US$ 50,000 and up to US$ 100,000 must be approved by a Purchasing Committee. This Committee will also prepare proposals to the Headquarters Committee on Contracts for procurement for a value of over US$ 100,000 in cases where Headquarters has not authorized the establishment of a Local Committee on Contracts. The Purchasing Committee will be established and chaired by the Representative and will consolidate the requirements, oversee the tendering process, select suitable local suppliers and record its recommendations in writing.

2.2 The Committee will be composed of Members and alternate members designated by the Representative and drawn from the professional or national officer categories. Staff members responsible for procurement should be excluded from membership. In cases where several implementing partners require similar supplies the Representative may consider including in the Purchasing Committee staff from implementing agencies. A quorum will consist of three Members.

2.3 The staff member in charge of procurement should present a written proposal to the Purchasing Committee which will include information on the goods or services to be procured as per Chart 3.G of the Supplies and Food Aid Field Handbook. The minutes of the meeting will be taken and issued (at least in draft) within two working days after the meeting. Alternatively, particularly in an emergency, Members of the Committee may approve purchase by signature of the proposal with appropriate comments. In general, the Committee should adopt procedures similar to those of the UNHCR Committee on Contracts as set out in Annex 8.5 of Chapter 4 of the UNHCR Manual, except for the provisions concerning emergency procedures.

3. Local Committee on Contracts

3.1 In a UNHCR office in the field, the Representative may request Headquarters to approve the establishment of a Local Committee on Contracts, particularly in the early stages of an emergency operation and when required goods or services are known to be available locally or regionally. The authority to establish a Local Committee on Contracts must be obtained from Headquarters, which will normally stipulate the purpose, the geographic, time and financial limits, the necessity to apply the relevant rules and procedures and, if applicable, the necessity to consult the Supply and Transport Section or the Programme and Technical Support Section on the prices and sources of supply of commodities and/or services available in the region. The Committee will be chaired by the Representative or by a formally designated alternate, and

will be composed of at least three professional staff members. If there is no quorum, the matter will be referred to the Committee on Contracts at Headquarters. The Local Committee on Contracts will consider quotations subject to the same conditions as set out in paragraph 1.9 above.

3.2 All requests for the establishment (or the extension of the period of validity) of a Local Committee on Contracts should be sent via the Desk to the Chairman of the Committee on Contracts who will check the criteria and the justifications provided, and, if appropriate, request the Secretary of the Committee on Contracts to prepare an authorizing communication. The authorizing communication should be cleared by the relevant Regional Bureau and the Chief of the Supply and Transport Section, and be authorized by the Chairman of the Committee on Contracts. Requests for the establishment of a Local Committee on Contracts must include a full justification as well as information on the requested time and financial limits, and must also confirm that the goods or services being sought are available locally or regionally and that the requisite minimum number of professional staff would be available to act as Members of the Local Committee on Contracts. Requests must include the names of three members and three alternate members.

3.3 The Representative shall appoint a secretary to the Local Committee on Contracts to receive submissions to the Committee, to schedule meetings and secure the relevant documentation, to conduct required correspondence, to maintain the Committee's files and to prepare and distribute minutes of the Committee's proceedings.

3.4 Copies of the minutes and proceedings of each meeting of the Local Committee on Contracts, together with a Tabulation of Bids form and copies of the contracts entered into or purchase orders placed (and any amendments to these) must be forwarded to the Secretary of the Committee on Contracts at Headquarters who will present these to the Chairman and Members of the Committee on Contracts for their comments. The minutes must contain a summary of the discussion, the reasons for decisions taken, details regarding the contractor or supplier selected and the potential costs involved.

Annex 3 – Example of a Standard Emergency Situation Report (SITREP)

1. In emergencies, it is essential that regular situation reports reach the outside world (other UN agencies, implementing partners). The frequency of such reports will be determined by the characteristics of the situation; more frequent reports will be necessary in the initial stage of an emergency. Situation reports should give an overall view of the situation with sufficient factual content and explanation of changes since the last report to answer rather than raise substantive questions. By indicating progress achieved, problems encountered and steps being taken or planned to overcome these problems, the reports should give a cumulative picture of how the needs of the refugees are being met. It should report on actions including actual and planned activities; however, it should not dwell on intentions.

The SITREP should:

- ❏ Be short;
- ❏ Focus on priority areas;
- ❏ Give quantitative data in a standard format (e.g. give the death rate as deaths/10,000/day NOT the number of people who have died);
- ❏ Highlight trends (e.g. increasing/decreasing water supply, increase/decrease in arrival rate);
- ❏ Clearly say who is expected to take any actions which are specified.

2. A suggested format is given below. Information contained in the SITREP should be analyzed and consolidated before being passed on to the next management level. The practice of simply copying "raw" and un-analyzed information from one level to another should be avoided. If the same format is used by all levels from site to central office to Headquarters, it will make it easier to consolidate reports from various areas. Major headings should as a rule be the same in each report, indicating "no change" if appropriate. The report can either be structured by sector of assistance with sites covered under each sector, or alternatively, by site, with sectors of assistance covered under each site heading. In either case, the information under each sector of assistance and for each location should cover as applicable:

i. Current situation;
ii. Particular problem areas, remedial action planned with time frame;
iii. Any variation from overall implementing arrangements;
iv. Any action required from the addressee of the SITREP.

3. The reports should be sequentially numbered, copied to other UNHCR offices as appropriate (including the UNHCR liaison office in New York). The report may be used as the basis for wider situation reports issued from Headquarters.

SITREP (*number*)

COUNTRY

COVERING PERIOD (*date*) TO (*date*)

Drafted, cleared, authorized by ( ) on (*date*).

A. GENERAL SITUATION

B. MAJOR DEVELOPMENTS
Summary of general assessment of situation, assessment of refugee location, and field deployment of UNHCR staff. Summary of major trends including protection.

C. REFUGEE STATISTICS AND REGISTRATION
By location in country of origin or by distinct groups if not self-evident. Explanation of changes since last report. Indication of sources, e.g. government, UNHCR, etc. Any additional information (as relevant) on gender breakdown, vulnerable cases, variances between UNHCR and official figures, group or individual determination, etc. A format for reporting on population in emergency situation reports is given in Annex 1 of chapter 11 on population estimation and registration.

D. PROTECTION AND DURABLE SOLUTIONS
Summary of any developments.

E. OPERATIONS

E.1. Coordination
Government departments, UN system, NGOs – both at central and field levels.

E.2. Overall Implementing Arrangements
Role of authorities. Operational role of UNHCR. Role of UNHCR's government counterparts, other UN agencies, international organizations and NGO partners. Other sources of significant assistance.

E.3. Assistance
Summary of main developments since the last report, broken down by sector and/or site, as applicable. Additional information provided could include major problems encountered in programme delivery and modifications required to implementing arrangements.

F. EXTERNAL RELATIONS
Significant events in relations with donor government representatives, with diplomatic missions in general and with the media.

G. ADMINISTRATION AND STAFFING
Establishment of UNHCR presence, office premises, vehicles and equipment, staffing arrangements, local recruitment, etc.

Annex 4 – Format for Reporting on Population in Emergency Situation Reports

Period: From _____ to _____

Type / status of population	Current location	Origin / from	Pop. at start of period	New arrivals	Decreases			Pop. at end of period		
					Vol. return	Resettlement	Other	Total	% of total 0-4 years*	% of total who are female*

*Estimate

Main source of information is ❑ Government; ❑ UNHCR; ❑ NGO

Main basis of the information is ❑ Registration; ❑ Estimate

9

External Relations

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Relations with Government and Diplomatic Corps

1. All matters of protocol relating to establishing a new UNHCR presence in an emergency are likely to be handled by the Foreign Ministry in the same way as for other United Nations organizations. However, substantive matters concerning refugees may be handled by another authority, for example the President or Prime Minister's office or the Ministry of Interior. Guidance on the form of written communications with the government is given below.

2. It is important that the diplomatic corps accredited to the country is kept informed of UNHCR's activities from the start of an emergency. An informed and concerned diplomatic corps will be helpful in gaining support for the emergency operation both from the host country institutions and from donor governments for funding.

Briefing Meetings

3. Briefing meetings should start in the early days of an emergency and continue on a regular basis. There may already be a contact group of the ambassadors most interested in refugee matters who could be briefed in the early days of an emergency. Where there is no such group, or to make the arrangements for meetings more formal, it may be appropriate to invite the ambassadors of member states of the Executive Committee of the High Commissioner's Programme (EXCOM) to the briefings (for a list of EXCOM members, see Annex 1).

The aim is to keep Executive Committee and other immediately concerned Governments well informed while not devoting scarce time to a major protocol exercise.

4. A number of people may be helpful in giving advice on the organization and participants of the meetings, including: the ambassador from the country of the current Executive Committee Chairman may be helpful in advising on the organization of briefings, or the Dean of the Diplomatic Corps, or the ambassador of the country currently holding the presidency of the European Union (as a major donor group), or the Organization of African Unity or other regional groups.

5. A representative of the government would normally be present at these briefings. United Nations organizations and NGOs directly involved in the emergency operation should also be invited to attend.

6. Unless chaired by the representative of the Government, the meeting should normally be chaired by UNHCR. Other agencies should be encouraged to give account of their activities. Initially these meetings may need to be held fortnightly or even weekly, but once a month is a reasonable interval once the situation starts to come under control.

7. It may be useful to prepare for briefing meetings by prior discussions with other participating agencies to ensure that there is agreement on the issues and on information such as population figures.

8. If a question cannot be answered immediately, arrangements to follow up on an individual basis with the questioner should be made.

9. These briefing meetings will be important for fund-raising purposes. Representatives of donor governments will form part of the diplomatic corps and will therefore be involved in the meetings. Additional smaller briefing meetings may be appropriate, to deal with particular concerns of a donor, or to respond to a donor mission, or in respect of major protection issues which might require smaller, more discreet, briefings.

10. A useful complementary measure, which might eventually substitute for the diplomatic and other briefings, is a weekly or monthly written report prepared by UNHCR. The standard internal emergency situation report, or sitrep, could be used as the basis for this report (the format for this is suggested in Annex 3 of chapter 8 on implementing arrangements). If the sitrep is to be used in this way the parts which must not be made public should be clearly marked. Other United Nations bodies directly involved should contribute an account of their work. Such situation reports should be given wide distribution in the operations area and to focal points at Headquarters.

11. Implementation of these briefing arrangements will require valuable time and effort. Clearly the priority is to deliver the emergency assistance needed by refugees. However, if those interested do not have a regular source of information on the progress of the operation, UNHCR staff may end up spending even more time on individual briefings.

Relations with the Media

Introduction

12. The media has traditionally been an ally of UNHCR and other humanitarian agencies working in difficult conditions. The media, especially locally based correspondents, can also be a useful source of information. There may be considerable media interest in an emergency and perceptions of how the international community in general, and UNHCR in particular, is responding will be set in the early days. This has important implications for support for UNHCR. It takes time to correct an unfavourable first impression, and media interest may have shifted elsewhere before this happens.

The best way to have positive media coverage and support is to run the most effective emergency operation possible in the circumstances. Expertise in relations with the media can never substitute for good performance.

13. Television, radio and newspapers operate on tight deadlines and need factual stories on the emergency, with some background information. Magazines and some radio and television programs cover stories in depth and have more time available for research and subsequent re-checking. Television news channels (such as CNN, BBC World and Sky News), and wire services (for example AFP, AP, Reuters), produce bulletin-type news stories, have very short deadlines, and are likely to be the major source for world-wide coverage of the emergency.

14. Given the logistical difficulties of some emergencies, journalists are likely to approach humanitarian agencies with requests for help in moving around. Whenever possible, and taking into account the operational priorities and the sensitivity of some situations, journalists, both national and international, should be assisted in getting to the story.

General Guidelines for Relations with the Media

15. The first decision to make concerns who should handle relations with the media. The media prefer information directly from those responsible, which can be very time-consuming. It is therefore recommended that a Public Information Officer be a member of the UNHCR field team from the start.

16. The Public Information Officer must have full and immediate access to information concerning developments in the operation and UNHCR policies and reactions. He/she needs to be updated by the most senior UNHCR Officer in the operation as often as necessary, at least once per day in a major emergency. The Public Information Officer should then be responsible for all aspects of relations with the media. Where there is no UNHCR Public Information Officer, good contacts with the press officers of other organizations will be helpful for general advice, and for organizing joint news conferences.

17. In emergencies the media will probably go to the location of the refugees, often unannounced, and expect a briefing from UNHCR field officers on the spot. The briefing given should be limited to facts and practical intentions. See below for tips for interviews.

18. When intense press interest in a particular event can be predicted, there is much to be said for preparing a short and simple statement, distributing it to the enquirers, and avoiding further comment. Close internal coordination with field staff is essential, particularly if the interest relates to an event occurring in a location where UNHCR has field staff. Sending the statement to Headquarters is essential as questions are likely to be raised in Geneva.

19. Newspaper editors will generally print a factual correction, and will often give space in opinion or correspondence columns for UNHCR to comment on errors of interpretation of UNHCR's role and policy. It is more difficult to correct a factual error made on television or radio. However, when trying to made corrections, these should be corrections of fact not interpretation.

UNHCR should be careful to avoid public polemical debate.

Locally-based Media

20. The national media will be very important in determining local attitudes to the refugees, and may also give an early indication of sensitive issues and even government policy. The government may be as concerned by national coverage as by foreign coverage. Local foreign-language newspapers may be less important, except indirectly as a result of their effect on the diplomatic community or foreign press corps.

21. Field offices should monitor the local media, including the radio and television, which may play a much greater role in influencing public opinion than newspapers. Good relations should be developed with local correspondents covering the emergency. However, exercise considerable discretion until there is practical experience of the outcome of interviews. Language barriers are often a source of misunderstanding, particularly on the telephone and a locally recruited Public Information Assistant can be very helpful in this regard.

22. It will probably be useful to make early contact with the news editors of the main national (and any local foreign language) radio, and television stations and newspapers to explain UNHCR's role. Stress that every priority is being given to the needs of the emergency and give a contact reference, should further information be required.

Information Sharing with the Government

23. The government may be sensitive to coverage of the refugees, and early contact should be established with the official press office or information service. General statements or press releases should be shared with the government information services and the department handling refugees and UNHCR. Statements relating to joint government-UNHCR actions may have to be cleared with the government first.

Field/Headquarters Information Sharing

24. A regular and swift exchange of information is essential. Many questions on the operation will be asked directly in Geneva and New York. There is a UN press briefing in Geneva every Tuesday and Friday morning, where UNHCR participates, and a weekday press briefing at noon in New York by the spokesperson of the Secretary-General. In addition, UNHCR calls special news conferences whenever necessary.

25. The Public Information Section at Headquarters must have access to up-to-date information. The Field should therefore:

- ❏ Keep media interest in mind when reporting to Headquarters (for example in sitreps);
- ❏ Provide information (in sitreps or separately) on matters likely to be of specific press interest;
- ❏ Send reviews of local media coverage to Headquarters.

26. In addition, if the Field has given an interview with a major foreign newspaper or network, or if a foreign correspondent has been aggressive or appeared unsatisfied with answers, the Public Information Section at Headquarters should be forewarned.

27. Similarly, the Field must be kept regularly informed by the Public Information Section at Headquarters of international media coverage. Important international media reports (including those based on briefings given in the field) may not be available in the field.

Press who contact Headquarters before going to the field should be clearly briefed that only limited attention and logistical support can be devoted to them by the field offices during the emergency phase.

Tips for Interviews

28. Reporters generally respect the ground rules for an interview, provided these are clearly established in advance. The interviewer and interviewee should agree on type of attribution and how the interviewee will be quoted: for example: by name, "a UNHCR spokesman", "UN sources", "humanitarian worker", "sources in the international community", etc. An interview may need to mix full attribution for the facts, and no attribution for information on political considerations and constraints. Alternatively an interview can be fully attributed and may often be tape recorded. An interview can also be for background information, and in this case what is said by the interviewee is not attributed directly.

29. Radio and television interviews can provide good coverage for UNHCR's aims. They are, by definition, for full attribution. If this is not advisable because of particular sensitivities, avoid such interviews. Bear in mind that interviews on radio and television can be edited.

30. In all interviews and comments to the media, when in doubt err on the side of discretion. Considerable experience and self-discipline is needed to limit remarks to what was previously planned. Having agreed to give an interview or answer questions, showing hostility or irritation will nearly always be counter-productive, no matter how unreasonable or loaded the questions are.

31. UNHCR's work is difficult and mistakes will inevitably be made, but do not try to hide problems and difficulties.

Though it is important to be discreet, honesty and clarity are the best policy.

Most journalists understand these problems and respect efforts in what they know are very difficult conditions. In fact, it is almost always best to talk about problems before the media find out about them on their own – and they usually do. Finally, if mistakes are made, admit them and try to learn from them.

32. When a complete answer to a question is given and a silence ensues, leave it silent. There is no law stating that one has to say more than one wants or intends to say. It is better to pause to construct a response than to ramble. Do not suggest follow-up questions, unless it is in order to disseminate important information.

33. Do not ask for a story to be killed or suppressed. Attempts at censorship will backfire and are likely to generate two immediate consequences; stepped up investigation of the matter to be suppressed; and an unfavourable story on the attempts to suppress it.

34. When in a press conference and especially with the electronic media, state the most important point at the beginning. In subsequent answers and statements, refer again to the most important point. When dealing with radio and television, keep answers short; television and radio put severe restrictions on how much information can be used and long drawn-out explanations and answers tend not to be used and the main point not covered.

35. Give direct answers to direct questions. If the facts are not known, say so, and offer to get back to the reporter with the information.

36. Sensitive political or policy questions should be referred to the main UNHCR field office. Responses to general questions about the situation should be made with UNHCR's mandate and goals in mind.

37. Take the initiative/control. Avoid answering speculative "what if" questions.

Be prepared to take the lead and direct the interview into positive areas of information about the operation.

38. Key things to remember for all interviews are:

- ❏ BE YOURSELF. While journalists are always on the lookout for a good story, they are not out to make your life miserable. So relax and be friendly. Look at the interviewer. Avoid nervous gestures and mannerisms. Keep your answers short and simple;
- ❏ BE POSITIVE. Do not criticize colleagues or other UN organizations and NGOs. We are all in the same boat;
- ❏ BE CONVERSATIONAL. When you talk to journalists, keep it simple and clear. Do not use the type of language found in many UNHCR internal documents. In everyday conversation, ordinary people don't use terms like "modalities", "durable solutions," "inter alia" "specific international protection mandate," "NGO," and "implementing partner." Use examples that will make the information comprehensible to your audience;
- ❏ BE CONCISE. A 10-minute interview may end up being seconds on the air, or three lines in the newspaper. It is essential to crystallize your thoughts in a few quotable sentences;
- ❏ BE IDENTIFIABLE WITH UNHCR. If you are being interviewed for television, or if a photograph will accompany the report, try to get a UNHCR logo in the background – possibly a flag or on a vehicle, wear a UNHCR T-shirt or cap.

Guidelines For Appearance On Television

39. Key things to remember for television interviews are:

DO's

- ❏ Do make and maintain eye contact with the questioner, not the camera. Do not let your eyes wander;
- ❏ DO wear suitable subdued-coloured clothes. Normal working clothes for field conditions are fine – ties and suits are not appropriate;
- ❏ DO check your appearance before going in front of the camera, hair, buttons, zips?
- ❏ DO make short statements, each holding up on its own;
- ❏ DO remember to make your most important points as early as possible;
- ❏ DO, before you begin, discuss with the interviewer what line the discussion will take;
- ❏ DO remember that the interviewer and audience know less about your subject than you do;

❑ DO remember that any programme is likely to be edited before use.

DONT's

❑ DON'T smoke;

❑ DON'T wear sunglasses or jewellery;

❑ DON'T forget that the smallest mannerisms show up more obviously on television;

❑ DON'T fidget or fiddle with pens, pencils, lighters, etc.;

❑ DON'T say "I think" too often. it sounds as though you are uncertain of your subject. Talk about "we" or "UNHCR" instead.

Visibility of the Operation

40. In addition to working with the media to ensure coverage of UNHCR operations, emergency managers must pay attention to the visibility of the operation.

41. Proper identification of staff, vehicles, buildings and relief materials contributes to improved dialogue with beneficiaries, local authorities and partners.

In conflict zones, visible markings can be an important security measure for staff and property.

42. Staff should be visible and identifiable as UNHCR personnel. Visibility items for staff, vehicles and buildings are available from Headquarters (see Catalogue of Emergency Response Resources, Appendix 1). A visible UNHCR will help to show the beneficiaries and the outside world that UNHCR is present, active and delivering services to the refugees.

Funding and Donor Relations

Emergency Fund

43. The availability of funds is a prerequisite for any UNHCR emergency action. The initial funding in an emergency for project and operations delivery and administrative support expenditure is likely to be allocated from UNHCR's Emergency Fund. Under the terms of UNHCR's Financial Rules, the Emergency Fund is established to provide "financial assistance to refugees and displaced persons in emergency situations for which there is no provision in the programmes approved by the Executive Committee", and to meet additional administrative expenditures resulting from those emergencies. The High Commissioner may allocate from the Emergency Fund up to US$25 million annually, provided that the amount made available for any one single emergency does not exceed US$8 million in any one year and that the Fund shall be maintained at not less than US$8 million. Further details are provided in Chapter 4 of the UNHCR Manual and in Appendix 1, Catalogue of Emergency Response Resources.

Central Emergency Revolving Fund

44. The Central Emergency Revolving Fund of the UN Office for the Coordination of Humanitarian Affairs was established to provide funds within the UN system to respond rapidly to emergencies. The fund has a target level of US$50 million and is financed from voluntary contributions. It is used for cash advances to UN operational organizations and entities. In principle these advances are to be reimbursed as a first charge against income subsequently received, usually as a result of consolidated appeals. Further details are provided in the Catalogue of Emergency Response Resources (Appendix 1).

Using Existing Funds

45. If an emergency develops in an existing operation, immediate funds may be available from those already foreseen for that operation or, if appropriate, from the Programme Reserve. Depending on the scale of further needs, and also on the time of year when the emergency occurs, further funding could either be proposed to the Executive Committee as a new current year project or as a new project for the coming year, or could be the subject of a special appeal.

Communicating Needs to Donors

46. Operational needs, progress and constraints must be clearly communicated to donors. A donor relations strategy should be established in the first days of an emergency and maintained for its duration.

47. Donor relations should be maintained through:

i. Briefing meetings and regular contact at field level between UNHCR staff and donor representatives. Regular briefing meetings (see paragraphs 3 to 11 above) with donors should aim to keep them up to date on actions being taken, protection issues, and any constraints;

ii. Regular contact and follow-up at Headquarters level;

iii. Involving donor representatives in missions to see refugee sites and other points at which assistance is delivered;

iv. Indirect communication of operational needs through UNHCR visibility in the media.

48. It is important to highlight UNHCR's protection and coordinating role when communicating with donors. Coordination must be a reality on the ground with UNHCR taking, and being seen to take, an appropriate leadership role.

49.

Only request funding for operations and budgets which have been formally approved.

There are no exceptions to this. This is necessary to ensure funding is targeted where it is most needed, to provide consistency in operational priorities and objectives, and in communicating these priorities to donors. Several sections in UNHCR brief donors and it is important for credibility that the briefings be similar. In case of doubts regarding what should be presented to donors for funding, contact the Donor Relations and Resource Mobilization Service at Headquarters for advice.

50. Steer donors towards funding those activities or areas of the operation that are most in need of funding. When appropriate, promote regional funding. Do not forget that the emergency may have a regional dimension. Include this and other elements of the UNHCR operation in the briefing and be prepared to discuss funding for all aspects of the operation with donors.

51. Contributions tightly earmarked to one aspect of the operation impede flexibility. Sometimes substantial contributions are strictly earmarked and there is little scope for amending budgets once they are approved.

Donors should be encouraged to make unearmarked contributions whenever possible.

However, if donors do want to earmark a contribution to a specific part of the operation, advise them to check with the Donor Relations and Resource Mobilization Service at Headquarters to ensure that this portion of the operation has not been funded already, or offered for funding, to another donor.

52. Particularly in emergencies, donors may offer to supply commodities or services rather than make a cash contribution. To a large extent it will be up the Field to decide on the suitability of such contributions. The offer should be immediately reported to the Donor Relations and Resource Mobilization Service at Headquarters, and the donor requested to follow up with Headquarters. In kind contributions need to be coordinated by Headquarters to avoid duplication of similar contributions by different donors, and to avoid confusion over the amount of cash versus total contribution[1].

Preparation of an Emergency Appeal

53. The primary document for communicating with donors is the emergency appeal. It is the appeal which needs to be brought to the donors' attention at briefings, and it is the activities in the appeal against which progress should be reported.

54. The emergency appeal is developed by both the Field and Headquarters.

Information contained in the appeal about operational needs to be generated at the point of delivery – i.e. the field – so appeals written primarily in the field are the most effective in raising funds.

Headquarters is responsible for issuing the appeal: it should have all the information necessary from the Field as soon as possible to enable it to approve budgets and to issue the appeal at the earliest opportunity.

55. The government should be consulted in the development of the appeal. The appeal should also take into account the results of the initial assessment, and the budget should cover all foreseen expenditures.

56. If the situation changes dramatically during the emergency, and the current appeal becomes inappropriate, then the Field should review operational objectives and agree the new direction with Headquarters before the revised operation is presented to donors.

57. The appeal and the way the operation is funded can be a potential source of confusion when the government is UNHCR's operational partner. The total target can be misunder-

[1] *Further information on contributions in kind can be found in* Procedures for Handling Contributions In Kind, IOM/65/96 – FOM/74/96, *UNHCR, November 1996. Budgetary procedures for dealing with contributions in kind are discussed in chapter 8 on implementing arrangements.*

stood as being entirely intended for expenditure in the country, whereas the budget will, of course, cover all UNHCR's direct expenditure, such as for any international procurement and field and Headquarters operational delivery and administrative support, including protection. Clarity on this point from the start, for example in any local press release or comment, can avoid embarrassment later.

Communication Between the Field and Headquarters

58. Headquarters and the Field need to work together closely on funding and donor relations issues. The focal point for this at Headquarters is the Donor Relations and Resource Mobilization Service. The Private Sector Fund Raising Unit at Headquarters may also issue appeals to the general public or aimed at individual or corporate donors.

59. Donor Relations and Resource Mobilization Service at Headquarters should:

- ❏ Advise how to deal with a particular donor;
- ❏ Provide latest information on funding for the operation;
- ❏ Follow up with donor capitals on potential contributions discussed in the field;
- ❏ Produce and distribute appeals (with the active participation of the Field);
- ❏ Prepare specific submissions to donor funding agencies (with the active participation of the Field);
- ❏ Submit detailed reports to the donors.

60. The Field should:

- ❏ Produce the basic operation information and information for the appeals;
- ❏ Inform Headquarters when a donor has indicated an interest in contributing funds, whether to the appeal, to a particular operation, to earmarked activities, or as a contributions in kind, and should also ask the donor to follow up through the normal channels at Headquarters;
- ❏ Provide information to the donors about the current situation and UNHCR's plans. When deciding on a contribution, donors need relevant information. Some information will be in the emergency appeal and given at briefings, but some donors require more detailed information. Timely and detailed responses will ensure the most rapid funding;
- ❏ Provide reports and information to Headquarters to assist it in submitting reports to donors. To ensure continuity of funding it is essential that the required information be provided from the Field without delay.

Reporting to Donors and Special Requirements

61. A variety of reports are required by donors in order to account for their contributions and to release additional funds. Bear in mind that donor reporting cycles do not necessarily correspond to UNHCR's reporting and operation cycles.

62. Some major donors to UNHCR's emergency operation require particularly detailed reporting at both financial and narrative level in a unique format with strict deadlines. These special reports are prepared by the Donor Relations and Resource Mobilization Service at Headquarters on the basis of information from the Field. Some donors also monitor implementation directly through their local representatives.

63. A number of donors attach great importance to the visibility of their financial support, through the marking of assistance material and other means.

Formal Written Communications

64. When establishing a new UNHCR presence in a country, there is likely to be a need for a number of formal written communications to government or local authorities. The purpose of this section is to give brief guidance on the preparation of formal letters and "notes verbales" (formal notes written in the third person – see sample in Annex 2).

65. Formal letters are used for communications to ministers, ambassadors and senior officials (for example, the Director-General of a government department) on important matters.

66. Note the following points for written correspondence with ambassadors, ministers and other dignitaries:

i. The proper opening salutation is: "Sir" or "Madam", with "His/Her Excellency" used, if appropriate, only in the address. However, it may be local practice to begin and end with "Your Excellency". When in doubt check with UNDP or use "Sir". His/Her Excellency precedes all other titles and ranks (e.g. Her Excellency Dr. X Y; His Excellency General A B, Minister of the Interior);

ii. The expression "I have the honour ..." is usually used only in the opening sentence;

iii. "You" can normally be used in the text. However, in a long text it may be courteous from time to time to interject the more formal address (e.g. "I should be grateful if you, Sir, [or Your Excellency] would confirm that this is also the understanding of your Government");

iv. Formal letters end with "Accept, Sir/Madam/Your Excellency, the assurances of my highest consideration".

67. A note verbale is a formal note written in the third person. Notes verbales may be addressed to a Minister for Foreign Affairs or a Ministry of Foreign Affairs, an ambassador or an embassy. Notes verbales are always used in replying to an incoming note verbale. It is written from person to person (e.g. Representative to Minister) or office to office (e.g. Branch Office to Ministry). The following points should be noted:

i. Typical uses of notes verbales include the exchange of information between UNHCR and governments, embassies or permanent missions. The note verbale is not normally used to communicate with other United Nations agencies and is never used to address NGOs or the public. The note begins either, "The Special Envoy/Representative of the United Nations High Commissioner for Refugees in (country) presents his/her compliments to ... and has the honour to ..." or "the Branch Office of the United Nations High Commissioner for Refugees in (country) presents its compliments to ... and has the honour to ...";

ii. Titles must be given in full, at least in the opening and closing paragraphs. Be sure to use the full correct designation of the country (Kingdom of ..., Republic of ..., Democratic Republic of..., etc.)[2];

iii. The complimentary closing of a note verbale is always the same: "The (Representative/Special Envoy) of the United Nations High Commissioner for Refugees in (country) avails him/herself of this opportunity to express (renew) to ... the assurances of his/her highest consideration", or, as appropriate, "The Branch Office ..." etc.;

iv. The note should bear no signature. The Office stamp should be placed over the typewritten date and the officer responsible for its dispatch should sign his/her initials within the stamp. The Representative or Special Envoy and an alternate may be required to register their initials or even signatures with the protocol department of the foreign ministry;

v. The place and date should appear on the bottom right-hand side of the last page. The address does not appear on a note verbale;

vi. The text of the note verbale should be single spaced with double spacing between paragraphs.

68. Both formal letters and notes verbales may bear file references, as brief as possible, on the top left of the first page.

69. Notes verbales are always answered by notes verbales, and formal letters by formal letters. Apart from the restrictions on the use of notes verbales given above, there are no completely clear-cut rules about which to employ when UNHCR is initiating the communication. In general terms, the note verbale conveys brief information and is the normal form for routine exchanges with the protocol department, for example, when seeking customs clearance for relief supplies or advising of the arrival of international staff. References to important meetings with senior officials and major issues, particularly those already discussed, are better treated in a formal letter. A formal letter may also reach the action officer more quickly than a note.

70. If it is necessary to set out UNHCR's position on a specific subject (policy, action taken, intentions, etc.), this may be done in the form of an aide-mémoire written in the third person. An aide-mémoire has no addressee and is simply headed Aide-Mémoire, with the title below. A similar purpose is served by a "Note by the Office of the United Nations High Commissioner for Refugees", a minor difference being that this description goes below the title. An aide-mémoire would normally be used to convey information to a government ministry or department, an embassy or the diplomatic corps. For a less formal or wider distribution, the "Note by ..." form may be appropriate.

71. All four types of communication should be presented on UNHCR letterhead stationery.

[2] *The following document is a useful guide:* Terminology, Country Names, *United Nations Bulletin No. 347 (ST/CS/SER.F/347/Rev.1).*

MEMBER STATES OF THE EXECUTIVE COMMITTEE OF THE HIGH COMMISSIONER'S PROGRAMME

As of November 1998

Algeria
Argentina
Australia
Austria
Bangladesh
Belgium
Brazil
Canada
China
Colombia
Democratic Republic of the Congo
Denmark
Ethiopia
Finland
France
Germany
Greece
Holy See
Hungary
India
Iran (Islamic Republic of)
Ireland
Israel
Italy
Japan
Lebanon
Lesotho
Madagascar
Morocco
Namibia
Netherlands
Nicaragua
Nigeria
Norway
Pakistan
Philippines
Poland
Russian Federation
Somalia
South Africa
Spain
Sudan
Sweden
Switzerland
Thailand
Tunisia
Turkey
Uganda
United Kingdom
United Republic of Tanzania
United States of America
Venezuela
Yugoslavia

Annex 2 – Example of a Note Verbale

NATIONS UNIES
HAUT COMMISSARIAT
POUR LES REFUGIES

UNITED NATIONS
HIGH COMMISSIONER
FOR REFUGEES

Note Verbale

The United Nations High Commissioner for Refugees (UNHCR) Branch Office for [*Ruritania*] presents its compliments to the Ministry of Foreign Affairs of _____ and has the honour to request authorization to import [*two Toyota land-cruisers*]. It requests furthermore that the usual advice be sent to the appropriate authorities for exemption of payment of import duty, excise duty, registration and licensing fees for [*these vehicles*]. Details of (the vehicles) are as follows:

1. Bill of lading number: TAN-P-C 16-11/25-03
2. Engine numbers of vehicles: B-L-C 741-1334
   B-L-C 24-04-01

The Office of the United Nations High Commissioner for Refugees avails itself of this opportunity to renew to the Ministry of Foreign Affairs [*of Ruritania*] the assurances of its highest consideration.

(stamp)

[*name of place of UNHCR office in Ruritania*], [*date*]

10

Community Services and Education

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Situation

The trauma of becoming a refugee can be very great. Normal structures which have regulated community well-being and also cared for groups at risk such as older persons, women, children and the disabled, have broken down and need rebuilding. Social and psychological problems are created or exacerbated and appropriate measures for resolving these problems are essential.

Objectives

To provide for the welfare of the whole refugee group and to ensure that the most vulnerable refugees have equal access to basic goods and services.

To assist the re-establishment and development of refugee community structures which can be used in the management of the assistance programme and which can also minimize longer-term problems of dependency.

To ensure that the assistance provided is appropriate for the refugees.

Principles of Response

- Refugee community participation (including both men and women) should be promoted in all sectors, by building on the community's own resources as much as possible and encouraging individual, family and group self-reliance;
- Special services for the vulnerable should, as far as possible, be provided by the refugee community itself;
- Services should be decentralised but within a structured plan, and must reach those in need;
- Community services should be developed in co-ordination with and in support of the priority life support sectors and should be an essential component of the overall assistance operation.

Action

- Assess community problems, needs and resources. Help refugees to identify and establish the services which will meet their needs in all sectors;
- Ensure prompt identification of and support to the most vulnerable;
- Develop appropriate community management structures including mechanisms to ensure participation of women in decision-making and ensure that all groups within the population are appropriately represented. Identify community workers who can help the vulnerable, spread relevant information and support other sectors;
- Take immediate action to prevent family break-up and reunite families as soon as possible.
- Identify and provide care for all isolated vulnerable individuals, especially unaccompanied minors. Spontaneous groupings, if already bonded, should be kept together;
- Establish communication links with the refugees to ensure good two-way communication between the refugees and those assisting them;
- Build the capacity of the community by identifying training needs and by helping to organize practical and hands-on training in community work.

Introduction

1. The shock of having to leave home and the circumstances of life as a refugee, particularly in the early stages of an emergency, create major emotional and social problems and exacerbate existing problems in the community. The trauma of flight and its aftermath may leave the refugees confused, frightened, lonely and insecure, facing an unknown future in a strange, sometimes hostile, environment. Separation from or loss of other family members as well as lack of community support are common in refugee emergencies, and causes emotional stress and problems for individuals and their community.

2. The most important action that can be taken to help reduce the shock and stress for the community is to provide security, stability and protection. In part this can be done materially, and in part by ensuring protection and involving the refuges from the start in the organization of all aspects of their new lives, and in particular the search for durable solutions. Community services are a vital bridge between the refugee and the goods and services of the new settlement. Without help in adjusting to this new environment, the sense of loss and isolation can deepen even in circumstances of relative material well-being.

3. It is important to involve the refugees in the provision of assistance and allow the community to share the responsibility of caring for itself and its vulnerable members. This minimizes dependency and encourages self-reliance.

The approach used during the emergency period will determine the whole pattern of behavioural response of refugees towards external assistance.

4. In every emergency, there will be refugee groups at risk with psychological or social problems that require particular attention. The most vulnerable are those with no family support who are dependent on external assistance for their daily survival. This dependence may be because of their age; their physical condition; their psychological condition; or socio-economic problems. The social disruption of emergencies causes these problems to be both aggravated and overlooked – but in stable non-emergency situations, the community itself meets many of the needs of groups at risk. Thus services to meet these needs are best given in a community-based programme.

Organizing Community Services

- Plan and implement the community services programme with the refugees;
- Use a phased approach to implement a community services programme;
- Assess the needs by screening the whole community; the most vulnerable rarely come forward themselves;
- Co-ordinate closely with other sectors.

Introduction

5. The main objectives of community services should be to identify and assist those persons whose basic needs are not being adequately met and to ensure the general welfare of all refugees. A community services programme should mobilize appropriate community resources, with outside help as necessary, to screen the refugee population for those facing urgent problems and see these immediate needs are met. Community services can then proceed to strengthen self-reliance and develop community activities.

6. A three-phased approach has been developed to implement the community services programme:

Phase 1	assessment, action plan, guidelines;
Phase 2	foundation of community services programme;
Phase 3	building up community services.

To measure performance in each of these phases (which are not mutually exclusive), a community service checklist can be used (see Annex 1).

7. Experience suggests that even in an emergency many needs can best be met by resources that exist within the community. Every community has its own beliefs, social values, customs, traditions and preferences for how problems should be resolved.

A community services programme should seek to enhance and improve existing and positive coping mechanisms.

Community problems are best solved using an integrated, inter-disciplinary approach, working with other sectors. Community services staff should therefore work as part of the UNHCR team, contributing to assessment, planning, programming and monitoring activities of other sectors.

8. Community services programmes generally require a decentralised structure, allowing refugee community workers to work with the same refugees, getting to know and be known by them. An active community services team is likely to be a major referral unit, helping to direct refugees to available resources and identifying areas of need where other services (health, nutrition, etc.) may be targeted.

Assessment and Action Plan

9. A careful initial assessment will determine the most pressing social problems, and the plan of action. This assessment should cover the whole community, with particular attention to identifying refugees with special needs who may not come forward themselves. The assessment and resulting plan should take into account demographic and cultural information regarding the refugee population, as well as the policies and resources in the country of asylum. Another priority in drawing up the community services programme is to identify gaps in the general assistance programme.

10. The outcome of the assessment will determine the community services action plan, including priorities of actions to be taken, the role of the various partners, and the need for special programmes, such as family reunification or assistance to victims of violence (see key references for guidelines on these topics).

11. Before establishing the community services team (see the section on Human Resources below), it will be necessary to identify appropriate local, national and international partners, including NGOs, governments, local and refugee community leaders. Involving local communities and government will help raise refugees' sensitivity to the needs and culture of the local population, and will also facilitate local acceptance of refugees, thus preventing tension.

Foundation of Community Services Programme

12. It is important to identify and promote refugee self-management groups either within mainstream structures or if more culturally appropriate, in separate groups. These should include women and youth. Community support for the vulnerable must be encouraged. Refugee volunteers can help identify vulnerable refugees and ensure their access to general services.

13. To ensure that all refugees, especially the most vulnerable, have access to services:

i. Direct all refugees to appropriate health or nutrition services;

ii. Organize immediate tracing of lost children and registration of these and other vulnerable individuals and provide assistance to all those alone and unable to care for themselves;

iii. Address the problems of survivors of abuse or violence.

14. In order to minimize long term dependency, and ensure the services are appropriate for the whole refugee group, community services will promote refugee participation in all sectors, and build the refugee community's problem solving capacity. Community services should also raise awareness and mobilize refugees on sanitation and environment issues and respect for local community resources.

Building up Community Services

15. Once the community services programme has been established, community services are built up by: building the capacity of implementing partners; co-ordinating community outreach and community training activities; establishing information networks; running a training programme for community workers; setting up education programmes and running the tracing and special programmes. General community activities, for example, cultural events and recreation, will be important for the creation of a greater sense of normality and security, and the reduction of stress, as well as fostering the refugees' sense of community.

Human Resources

- The refugees themselves should play the central role;
- Continuity of personnel is very important;
- Professional impartial conduct and confidentiality must be maintained;
- Teamwork with other sectors is essential.

Introduction

16. Refugees trained as community workers should be the backbone of the community services programme. Outsiders will be severely limited by language barriers and lack of familiarity with social values and customs. Refugee community workers will be respon-

sible for assisting groups and individuals through outreach work, and referring individuals to appropriate services where necessary. In some cultures, traditional healers are especially skilled at resolving psychological problems.

17. Training refugee community workers is a priority. Training should draw on refugees' own knowledge of their community, and make use of outside expertise (from within the host country if possible). Training should cover social work and community development, with inputs from other disciplines such as public health, nutrition, sanitation, protection, water, shelter.

18. Refugee community workers should be drawn from the various groups within the refugees, and a particular effort may be needed to ensure that a sufficient number are women. There should be a proper balance between workers from different social and ethnic groups.

19. The number of such workers required will depend greatly on the community's own response mechanisms, and the geographical distance between site locations, population size and complexities of the situation. However, one worker per 1,000 refugees is usually appropriate. In addition, there should be community workers in the health centres, as there is a tendency for people with special needs to be directed to these even when the problem may not be medical.

20. Staff from outside the refugee community will be required to co-ordinate community services, manage training programmes and deal with problems beyond the resources of the refugees. This outside assistance is likely to involve both international and national personnel. The role of international personnel may be limited principally to overall co-ordination, guidance, support, training and liaison with the authorities and other organizations concerned.

Familiarity with social values and customs is essential.

21. National personnel will play an important role because of their cultural knowledge and understanding of the refugees. Additional specialist staff may be needed to focus on specific issues. A memorandum of understanding exists between UNHCR and Radda Barnen (Sweden) under which specialized community services staff can be quickly deployed to emergencies (see Appendix 1, Catalogue of Emergency Response Resources, for details).

Continuity of personnel is necessary for effective community services because of the fundamental part played in these services by human contact and trust.

22. Interpreters are a vital link of communication between UNHCR and the refugee community as they bridge the gap created by cultural, national, linguistic and racial differences. Interpreters are usually selected from the refugee or local community and should include an adequate proportion of women. Refugee interpreters have the benefit of knowing and being committed to helping their community; however they are likely to be placed in a difficult position as intermediary between refugees and UNHCR and expected to be answerable to both. Therefore, if possible, refugee interpreters should not be used in sensitive situations such as status determination interviews.

Working as a Team

23. Community services should support, and have strong links with, other sectors. For example:

Protection: Community services and protection have complementary roles in dealing with refugee problems on a day-to-day basis and working with refugee groups at risk. There will be areas of overlapping concern, for example, in training, promotional and advocacy activities at the community level; programmes for unaccompanied minors such as tracing, family reunification and foster care; and in developing preventive mechanisms and community-based solutions to deal with harassment of minority groups and sexual violence;

Health services: Many problems have both a medical and social component. Refugees might not make use of health services because they are too weak or infirm, too traumatized or just unfamiliar with the health service. Women may be particularly constrained if there are insufficient female health staff. On the other hand, problems of all kinds may be referred to health centres – so community outreach workers should be located in the health centre. Community networks can be used to promote basic health messages in cleanliness, sanitation, breast feeding etc.;

Site planning and construction: Community services can assist in the identification of social and cultural determinants of shelter planning, promote the involvement of all the community, including women, help establish refugee committees to oversee construction, and ensure that the community will take responsibility for providing shelter for its more vulnerable members in locations where they can be protected and assisted;

Environment: Community services should convey environmental messages such as the need to preserve trees and vegetation during emergencies (see chapter 12 on site planning). Community services should also promote simple, but crucial, energy saving techniques such as covering pots with lids during cooking, drying, chopping and splitting firewood before burning, and soaking beans and grains to reduce cooking time. Community services staff should work closely with environment specialists in areas such as forestry and domestic energy, to ensure these activities take into account the concerns and priorities of the local and refugee community. Without community participation, environmental programmes might not achieve their objectives;

Logistics: Community services should also work with logistics officers to ensure that vulnerable groups and groups at risk have equitable access to all commodities.

Family Tracing and Reunification

- ◆ Tracing and reunion of separated family members must be organized as quickly as possible;
- ◆ Refugees must be able to send and receive mail.

24. Procedures for the reunion of refugee family members separated during flight or within the country of asylum should be agreed with the authorities and implemented as soon as practicable. Tracing programmes should be set up and co-ordinated in the country of asylum, country of origin and regionally. At camp or local level, simple and effective tracing mechanisms include posting lists of names with photographs on the community notice boards in different locations, using the radio, or even making announcements by megaphone. The tracing arrangements must be widely promulgated; a central contact point in each site is likely to be needed. Tracing is a delicate task, and has to be organized by people who have the necessary experience and skills. A suitably experienced agency may be needed to implement these activities. Tracing requires the involvement of the refugees themselves, who will play a key role. The local population and authorities can also play an important role. Confidentiality of information and protection of individuals is also essential.

25. Consider the causes of separation when establishing tracing systems. Separation may have been caused by large scale population movements but may also have been due to other factors such as children opting to leave their families, or placement of persons outside their family for survival purposes. Outsiders, often relief workers, may have removed a child from an apparently dangerous situation, without informing the family and without proper documentation.

26. The following actions should be taken:

- ❏ Organize tracing and reunion of separated family members as quickly as possible, giving first priority to unaccompanied minors and other extremely vulnerable individuals;
- ❏ Combine a variety of systems: on the spot tracing, use of community mechanisms and formalized tracing at a regional level;
- ❏ Coordinate activities with agencies having expertise, e.g. the ICRC. Note that ICRC procedures, using the national Red Cross or Red Crescent societies, can be lengthy but may be the most appropriate for difficult cases;
- ❏ Ensure regional standardization of registration systems;
- ❏ Set-up a communication network in the community including a mailing system. A properly organized exchange of news (Red Cross messages) may considerably diminish the workload of a tracing service and accelerate the reunion of family members. Refugees have the right to send and receive mail.

Groups At Risk And Vulnerable Groups

- ◆ Develop and strengthen community-based support for vulnerable groups wherever possible;
- ◆ Ensure that children are cared for in ways that meet both their physical and emotional needs; individual care of unaccompanied children is all-important;

◆ Ensure that all groups among the refugees can participate in decision making affecting their well-being.

Introduction

27. In dealing with vulnerable groups, community based support is preferred, and only as a last resort should small, special facilities be established. These should be short-term to shelter vulnerable individuals while identifying community support mechanisms.

28. Experience shows that in refugee emergencies certain groups are likely to be more at risk than others. Standard criteria for vulnerability, and for eligibility for the provision of special assistance should be developed in conjunction with refugees. Some groups may be excluded from decisions directly affecting their wellbeing, and the particular needs of these groups may be unintentionally ignored or excluded in programme development. This exclusion may result in making the group vulnerable. This is often the case with minority groups. Women, who often make up the majority of the population, can be excluded in much the same manner.

29. In emergencies vulnerable refugees may need special transport where the refugee has physical problems which would prevent long distance movement. This would include older persons, the disabled, women in late pregnancy, severely malnourished or those in severe psychological distress. If special transport is needed, the refugee should be accompanied by a responsible attendant (usually a relative) and a clear reunion point identified to prevent further vulnerability through separation.

30. When individual casework is necessary, up-to-date records and confidential individual dossiers should be kept, and a simple periodic reporting system instituted, focusing on the needs identified and services provided rather than giving just statistical data. It is important that case records are transferred with refugees when they are moved. A coordinated response avoids unnecessary repetition of basic interviewing which is not only a waste of time but can also be psychologically damaging.

Children (including Adolescents)

31. For the purposes of this Handbook, "children" should be understood to mean "persons below the age of 18 years" (as defined in the Convention on the Rights of the Child, 1989), and therefore includes young children and adolescents.

32. Children make up a large proportion of most refugee populations. Early interventions during emergencies will help to normalize and stabilize their situation. Specialized agency expertise may be needed for parts of a child-focused programme.

33. Birth registration may be a prerequisite for obtaining nationality, enrolling in school and may be a vital tool for tracing. It can also be important in preventing military recruitment and other forms of exploitation. Ensure that the births of all refugee children are registered. Ideally births should be registered through the same procedure applicable to nationals. Where this is not possible the authorities should be encouraged to establish a separate birth registration system for refugee births. If this is not possible either, organize a temporary attestation system to ensure, at a minimum, that the date, place of birth and the names and nationalities of both parents are recorded. The UNHCR Field Office or the Red Cross/Red Crescent could, for example, issue such an attestation.

34. Different age groups will have different problems, young children have very different needs from teenagers.

35. UNHCR has an MOU with UNICEF which outlines their respective responsibilities for children and unaccompanied minors – UNICEF takes the lead in countries of origin and UNHCR in countries of asylum (see MOU attached as Appendix two).

36. Take the following action:

❑ Identify and develop community-based mechanisms to monitor refugee childrens' assistance and protection needs;

❑ Identify whether the child population as a whole might have any specific characteristics or needs as a consequence of the trauma of their flight and life before finding asylum: in particular, where children have been victims of and/or participants in armed conflict, or might have particular psychological, physical or social problems as a consequence;

❑ Identify what current risks there may be to the child population: for example a risk of on-going military recruitment, or of sexual exploitation or abuse;

- ❏ Promote the social role of adolescents in the community and their responsibility towards others in need, for example they can serve as community workers. Adolescents will need support, especially if they have assumed adult roles as heads-of-households. They will also need access to and education about reproductive health services, and vocational training;
- ❏ Coordinate with the health and nutrition sectors in organizing education campaigns and outreach activities in community health, nutrition and sanitation, such as promoting breast feeding, immunization and feeding programmes;
- ❏ Organize play groups, recreation activities and emergency education for pre-schoolers and for school age children including girls and vulnerable children;
- ❏ Identify resources within and outside the community which could be used to address the needs of children and young people (and their families). These community resources should encourage self-reliance, and work towards preventing domestic violence, sexual abuse, drug and alcohol abuse and involvement in military activities;
- ❏ Integrate the needs of children in all programming activities.

Unaccompanied Minors

37. UNHCR defines an unaccompanied minor as one who is below 18 years of age who has been separated from both parents and for whose care no person can be found who by law or custom has primary responsibility. Note that other organizations may have other definitions of unaccompanied minors. In addition, note that unaccompanied minors are sometimes also called separated minors.

38. Labelling children as orphans tends to encourage adoptions, (and in some cases, there may be enormous external pressure for orphanages and/or third country adoption) rather than focusing on family tracing, foster placements and increasing community support.

The description "unaccompanied minors", or "separated minors", should always be used in place of "orphans".

39. Although the government of the country of asylum should take legal responsibility for these minors, with UNHCR offering advice and assistance, in practice if government resources are thinly stretched, UNHCR may take a more pro-active role.

Prevention of Separation

40. Family unity must be preserved as much as possible – take no action that may prevent family reunion. The failure to protect family unity not only results in avoidable physical and emotional suffering, but subsequent efforts to reunite families are costly and difficult, and delays in family reunification will impede durable solutions. Although children are often separated from their families while their families are in flight, steps can be taken to minimize further separations, and to maximize the chances of timely and successful reunion.

Steps to prevent separation include supporting households at risk, and ensuring care provided to unaccompanied minors does not become an incentive for parents to abandon their children to institutionalized care.

41. There is sometimes pressure to rescue minors from dangerous situations but some child-only evacuations have caused years of separation and in some cases the breaks have been permanent. The physical dangers may be over estimated, while the children's psychological need to be with their parents may be under appreciated.

There should be no evacuations separating children from their parents or others recognized as primary caretakers (custody) unless essential to protect life.

42. If an evacuation is essential, the following safeguards should be observed. Minors should be accompanied by an adult relative, and if this is not possible, by a qualified caregiver known to the children, such as their teachers. The minors' identities must be fully documented before departure. Whenever possible, documentation should travel with the minors, and caregivers should be waiting at the destination. The evacuation must be coordinated with the designated lead agency. If the minors are moved across an international border, written agreements with the government should be secured in advance in order to ensure family visits and reunions are possible.

43. Continuity of existing care arrangements will help avoid further disruption and may facilitate reunion. Siblings should be kept together, as should unrelated children who have been living together and give each other emotional support.

Assessment, Identification, Registration and Tracing

44. Make a rapid assessment of the situation of unaccompanied minors among the refugee population. The first source of information for identifying unaccompanied minors will be the refugees themselves and the community leaders. A general registration or census of refugees may provide a suitable occasion for initial identification without raising expectations before seeking more detailed information.

45. A general registration or census will also identify those children not alone, but not with their immediate family, and who thus require tracing. Give priority to identifying children under five years, girls who may be subject to sexual abuse and boys who may be recruited into military service.

46. Once identified, unaccompanied minors should be individually registered as soon as possible (see Annex 2, unaccompanied minor registration form).

Registration should not raise expectations for special status and advantage.

The Emergency Kit for Unaccompanied Children provides guidance and tools for identification, registration, and tracing. This can be ordered from Headquarters and contains a priority actions handbook, emergency registration books, cameras, equipment and basic supplies.

47. Ensure that children are issued with separate registration documents and ration cards and that these documents (including a recent photograph), always travel with the child. These measures will avoid confusion if a fostering arrangement breaks down.

48. Unaccompanied minors should be individually assessed and medically screened. A sympathetic and imaginative approach to interviewing children is very important and best conducted by carefully trained refugees, if possible by someone the child already knows and trusts. If an interview has to take place through an interpreter, the interpreter must be well briefed, with his or her role limited to direct translation, and must not be allowed to break personal contact between interviewer and child. Children may react very differently, depending, for example, on the degree of their trauma, fear and shyness. The presence of the child's friend(s) at the interview can not only reassure the child but may also yield important information. Any accompanying adults or persons who brought the child forward should also be interviewed.

49. As soon as unaccompanied minors are identified, start to trace their parents or families. Family tracing is not considered exhausted before a two year investigation has been completed. All claims for reunification must be verified, as mistakes and false claims sometimes occur.

Care and Protection of Unaccompanied Minors

50. Children separated from their immediate next-of-kin during a refugee emergency are often cared for by the refugee community, frequently within an extended family.

It is only where children cannot be cared for by the community that special measures will be required for their care.

Whenever possible, children should be placed with families, as institutional placements cannot provide adequately for children's developmental needs and social and cultural integration into society. Ideally, they should be cared for by relatives or others from the same ethnic or cultural groups.

51. One of the most important principles in the care of any child is that relationships must be stable, because of the importance of the emotional bond developed with the caregiver. An unaccompanied minor must be placed in a family where bonding can continue until the parent(s) or recognized first caretaker(s) are found. The child will then need time to reestablish a bond with his or her parent(s) or original caretaker(s). A period of overlap with the two families may therefore be necessary, in order to permit the re-establishment of the relationship with the parents while avoiding an abrupt severance of the ties with the foster family. Where years have elapsed, the child's interests may be better served by remaining with the foster family. UNHCR's usual practice is to allow unaccompanied minors over 15 to take decisions concerning durable solutions for themselves.

52. Criteria for foster family care should be worked out together with the community. Foster care arrangements should be formalized as quickly as possible by signed contracts or agreements, with an understanding that children should be returned to their immediate family if located. Particularly needy host

families may be provided with an incentive to support the child on a case by case basis, but not as a systematic measure for all foster families. Food rations and other normal assistance should of course, continue to be provided for the child through the foster family. However, the child should continue to have registration and ration documents separate from those of the foster family. Foster care arrangements should be monitored closely through outreach activities in the community. Careful account should be taken of cultural attitudes towards fostering. For instance, in some situations, a family may find it hard to conceive of taking in a child except as a servant.

53. Where child care centres are necessary, they should be small, decentralized within the community, and integrated into community activities.

Remember that when the facilities and services provided for unaccompanied children are significantly better than those otherwise available, parents may actually place children in special care.

54. The advantage of small residential centres is that if reunification with the parents is expected to take place quickly, such centres provide an efficient way of caring for the children while at the same time not losing sight of them during the upheaval and confusion at the start of an emergency.

Unaccompanied minors should be integrated into the life, activities and services available to other children. Avoid either marginalizing them or paying them special attention.

55. Ensure continuity and stability in care (foster families and other) by employing refugee and national community services staff who are less likely to move on than international staff.

56. Provide supervision, support and training to child care workers, including child interviewing techniques, child development, community mobilization and child trauma. Train refugees and aid workers to identify and register unaccompanied minors from the outset of an emergency.

Women

57. While it is not correct to see women as a vulnerable group, women do have specific needs which, if not met, can put them at risk, such as vulnerability to exploitation and sexual abuse, sexual discrimination and restricted access to basic services. In addition, many decisions in camp management which affect women are made without them being consulted. Not including refugee women in decision making about camp management may put them at risk and add to their workload. In addition, the effectiveness of the assistance programme may be reduced because the problems and needs of all the beneficiaries have not been properly identified.

58. However, when seeking women's participation in decision-making, it is also wise to remember that measures which challenge the status quo may be threatening to traditional leaders. Special efforts may be needed to overcome resistance to change.

Culture and tradition cannot be used as reasons to exclude refugee women from participation in decision-making.

To Ensure Women's Participation:

- ❏ Include refugee women in leadership functions and give them responsible roles in the community including participation in decision-making bodies;
- ❏ Ensure that women have equal access to services and facilities, particularly health and reproductive health care services, and inform persons concerned about these resources;
- ❏ Encourage activities such as adult literacy classes which will help empower women and bring them together for mutual support;
- ❏ Provide community support to women by organizing recreational and educational activities for children;
- ❏ Develop preventive protection mechanisms with the community to ensure protection of women against all forms of abuse;
- ❏ Work with the elders and other influential groups to gain their support for the participation of women in camp management.

Single Parent Households

59. In refugee emergencies, the majority of single parent households are female-headed. However, community services must be sensitive to the needs of both male and female single parents. Men may have to be supported in the functions of rearing children and organizing household responsibilities. Women who

have to manage the family needs on their own are at risk as they are vulnerable to exploitation and harassment, especially if they are young. They may be exposed to pressures attached to provision of food and material resources. Women must therefore be included in food management and other committees. Some women may have to resort to prostitution in order to provide for their families, particularly if they do not have any skills to earn a livelihood.

Survivors of Violence

60. Men, women and children can be victims of violence in conflict situations (including torture, rape or solitary confinement) and suffer consequent trauma. Rape is a crime of violence, and is sometimes used as a systematic method of intimidation. Survivors of rape can be any age from the very young to the very old and belong to any social group. It should be remembered that survivors of sexual violence including rape can be men as well as women. It is important to recognize that the consequences of sexual violence on children and adolescents will differ from that on adults.

61. Where there is a high risk of violence, steps can be taken to reduce exposure and vulnerability. Crimes of sexual violence may be more likely to occur where women and/or children are exposed and vulnerable, such as when they collect firewood or water from distant points. The level of risk of violence including sexual violence from within or outside the community, should be reflected in taking increased precautions in camp security, and in creating mechanisms to allow people to travel outside the camp in safety e.g. fuel-wood gathering in groups.

Take the Following Action

- ❏ Establish services for survivors of violence which are integrated into other community and health care services;
- ❏ Ensure confidentiality is maintained;
- ❏ Organize counselling support services using trusted, supportive refugee staff, including female staff;
- ❏ Organize support groups with people who are trusted;
- ❏ Provide a safe place for survivors to stay, with friends if possible;
- ❏ Ensure appropriate legal and medical services are established and accessible, including access to female staff;
- ❏ Mobilize community support by discussing the general problem with them to ensure more compassionate treatment. Religious heads and community leaders in particular can influence attitudes to survivors of violence;
- ❏ Ensure that site layout, fencing and lighting promote physical safety. Good site planning, including location of services, will help create conditions where violence will be less likely (see chapter 12 on site planning).
- ❏ Sensitize the community to the problem and the seriousness of domestic violence. An emergency situation often triggers an increase in levels of domestic violence, particularly in the early stages. However, in the later stages of an emergency incidents of domestic violence may remain high and on occasion escalate, if the situation generates high levels of stress.

62. Urgent medical treatment must be provided to any person who has been raped to help deal with the physical trauma. A protocol for management of such persons, based on host country laws, should be adopted.

63. Post trauma reactions to sexual violence include feelings of shame and guilt, anger, humiliation, nightmares, withdrawal, depression and suicidal tendencies. Family, friends and community support groups must be alerted to these possible reactions so that they can understand and assist the survivors of violence.

64. Social attitudes to rape are usually very judgmental. A woman who becomes pregnant by rape may need help in being accepted by her family and the community or in placing a child for adoption. In some cases a man or a woman who has been raped may have to leave their present location in order to lead a normal life. This is especially the case of a woman with a child, who may then be left without family support. Additionally, she may feel hostile towards the child, a common post trauma reaction.

65. Any documentation of a case should be undertaken with the utmost confidentiality. It is the survivors choice whether or not to take legal action; there may be very strong considerations not to do so. If legal action is taken, the survivor will need support and protection in every step of what is a painful process, and should be made aware of ex-

actly what degree of protection and care will be available.

66. Community services, protection and health staff must work together for survivors of rape and sexual violence. Protection staff can provide information on legal action and monitor the legal process if charges are pressed. Health personnel should make necessary treatment facilities and documentation available. Community services should work directly with the survivor concerned, and with the family of the survivor, as well as establish support groups and more generally sensitize refugees to the problems of rape. A refugee team, which could complement the UNHCR community services team, may be established to provide outreach to women reluctant to come forward.

Disabled and Handicapped

67. Disabled and handicapped persons might have problems in accessing goods and services available to refugees and steps must be taken to ensure this access, including that of disabled children to whatever schooling is available. In some refugee situations, but more often in returnee situations, additional dangers of land-mines mean that an information campaign must be started immediately to prevent further disability. Initial care for the disabled should be through families and the community, nevertheless, rehabilitation services (e.g. wheelchairs, crutches) should also be introduced as soon as possible. Community based rehabilitation to care for disabled people is an approach that should be promoted from the outset of an emergency.

Older Persons

68. The presence of older people in the community can strengthen the bonds and the sense of belonging. However, physical deterioration may limit their mobility and hence their access to basic services. Those most at risk are living alone or caring for young children.

Older persons can constitute a significant proportion of the refugee population though they are often overlooked.

69. Consideration should be given to include older persons in the supplementary feeding programmes. Even if older people can obtain food rations, limited mobility may preclude collection of water or fuel essential for food preparation.

70. For the more frail elderly, family and community care should be encouraged. Refugee community workers should identify neighbours, relatives or others who can help these people with food, water or fuel collection.

71. It should be kept in mind that after any repatriation, the elderly may make up a high proportion of refugees remaining behind in the country of asylum. Hence local government structures and local NGO capacity should be strengthened to care for them.

Isolated Social Groups

72. Every society has its social, religious, political or ethnic groups whose access to services is restricted even under normal conditions. They become particularly vulnerable during emergencies as assistance is likely to be channelled through the leaders of the majority groups. Immediate assessment should be made of any of these groups to determine if they can be integrated into the refugee community, or whether special provision must be made.

In the early stages of an emergency, cultural and traditional customs that may be harmful to particular groups of refugees such as genital mutilation, early marriages and other abusive practices should be addressed and appropriate action taken.

Education

- Education programmes can help address not only the psychological and social needs of the children, but also the well being of the whole community, by helping to organize the population and by providing structure for the children and their families;
- Education programmes can provide important support to lifesaving activities;
- Every child has the right to education. Even in an emergency, start providing appropriate education as soon as possible;
- The priority is to make primary schooling available to all. Special efforts will probably be necessary to ensure the proper participation of girls in the programme;
- Refugee schools should be organized and run by the refugees themselves, to the extent possible, with proper outside support.

Introduction

73. Establishing an education system is important for the well-being of the whole refugee community, as well as for the social

and psychological well-being of children and young people. Setting up basic schools will give a structure and sense of normality to a dislocated and traumatized community. Refugees are dislocated not only from their homes and families but also from their community – the old community is disrupted while new community structures are only gradually evolving. Schools can be the initial community focal points, and a sense of well-being may be created if the new community is partly structured around institutions which are as familiar as schools, rather than around, for example, distribution points, registration and health centres which may be more representative of the problems of their current situation.

74. In addition, schools can be initiated and managed by the community itself much more easily than other refugee institutions, again enhancing self-esteem and self-reliance. Refugee teachers and parents often establish informal schools even in an emergency - as soon as basic needs in food water and health are met, because they recognize the importance of a school system for the reasons set out above.

Informal schools started by the refugees themselves should be supported, and can be used as a basis to begin the programme.

75. In addition to community building, other important functions of the education system in an emergency are:

i. To disseminate survival and life skills messages. Simple messages can be spread through the school system, on issues such as health, sanitation, nutrition, and looking after the local resources (fuelwood for cooking) so they do not become too rapidly depleted;

ii. To provide parents with extra time to work on family survival needs;

iii. To serve as an important protection tool in certain circumstances, e.g. through providing an alternative to military recruitment;

iv. To provide continuity of education which can help reintegration in the country of origin.

Every child has the right to education, as set out in the Convention on the Rights of the Child.

76. Detailed information on planning education programmes and on standards for refugee schools is set out in the latest edition of UNHCR's Education Guidelines. These guidelines are essential reading for those establishing an education programme.

Setting up an Education Programme

77. Basic education must be provided and, although priorities in the emergency phase may mean that the full implementation of an education programme is difficult, a start must be made. An education programme should only be delayed if the emergency is clearly going to be short-lived.

The emergency education programme should provide free access to organized activities and basic education for all refugee children and young people.

78. Identify teachers from the refugee population who can organize recreational and educational activities, and identify agencies to support the development of basic education programmes.

Simple Activities

79. In the beginning, the aim is to establish a simple programme of structured recreational and simple educational activities for children and young people. This is possible even with limited educational supplies – simply gathering the children together for a set period each day and keeping them occupied is a valuable first step. Identify teachers from the refugee population who are willing to do this. The activities should support the lifesaving measures underway in other sectors by including simple messages on health, sanitation etc. appropriate for the children's level, and by providing parents with extra time to work on family survival needs. Recreational and activity materials of the type listed in Annex 3 could be used to support such a programme.

80. The initial activities should then be developed into a primary school system, based on the curriculum of the country of origin. The timing of the transition from the simple activities to the more formal primary education will depend on the evolution of the emergency. Where the school system in the country of asylum is similar to that of the country or area of origin and refugee numbers are limited, resources may be provided to local schools to enable them to accommodate refugee students, provided this is cost-effective.

Basic Education

81. A single, unified primary school system should be developed as soon as possible. Edu-

cational materials of the type described in Annex 4 can be used to establish a basic education programme. The materials on this list would meet the initial needs of 1,000 refugees, and include sufficient writing materials for two classrooms of students in the earliest stages of primary school plus one classroom for students who have completed 2 or 3 years or more of primary schooling. If each classroom is used initially for separate morning and afternoon shifts, then a total of 240 students can be catered for. Typically there would be two or more writing materials kits (of the type specified in Annex 4) per school, according to the number of classrooms on each site.

The curriculum should initially be based on that of the country or area of origin, to facilitate reintegration upon repatriation.

82. Where possible, contact should be made with the Education Ministry of the country of origin, initially to obtain school textbooks and teachers' guides and later regarding certification of education and training received by refugees and teachers. In order to open schools as early as possible, temporary shelters may be erected using plastic sheeting. The community should be mobilized to help build and maintain school buildings. Other items required for simple classroom structures, latrines etc. should be constructed, using local materials where possible.

Smaller, decentralized schools are generally preferable to large schools. Primary schools should be established within walking distance for young children.

83. Recreational and sports programmes for children and adolescents should be included as part of the education programme, and necessary space should be allocated at the time of site planning. The likelihood that additional classrooms may be needed at a later stage should likewise be borne in mind at the time of site selection and demarcation.

It is probable that young refugees will have had their formal education disrupted. There should therefore be no limitation of entry to schooling according to the age of the children or adolescents.

84. Initial budgets should provide for the printing or photocopying of classroom materials for pupils and teachers, based on core elements of the country of origin curriculum as well as for the initial purchase of school and recreational supplies. Budgetary provision may also be necessary for the translation and reproduction of materials supporting health, environment, peace education and other messages.

Action

- ❏ Identify humanitarian agencies to be responsible for educational assistance in each location and to establish and train community education committees and parent/teacher groups;
- ❏ Identify school sites, and erect temporary shelter, ensure construction of latrines;
- ❏ Provide writing and recreational materials to support community initiatives (see Annexes 3 and 4);
- ❏ Convene a refugee education committee. Include refugees, local education authorities, relevant UN agencies, implementing partners and refugee educators, at appropriate (district and/or national) levels;
- ❏ Consult UNHCR Headquarters and the local UNICEF office regarding availability of educational materials and school-books;
- ❏ Arrange the timing of educational and recreational activities around other household and family activities to get maximum participation and cooperation of refugees;
- ❏ Establish schooling in all refugee locations with refugee education advisers and teachers. Make plans for moving to a normal system of education as soon as possible;
- ❏ Aim at a realistic level of service which can be sustained over the longer term;
- ❏ Organize in-service training of teachers. Training should cover: school organization; basic teaching methods; review of basic subject matter; and dissemination of messages regarding health, sanitation, environmental conservation and peace;
- ❏ Monitor participation of girls in educational programmes and promote girls' enrollment and attendance in school. Identify what are the root causes of non-attendance by girls. Promote recruitment and training of female teachers (at least 50 per cent);
- ❏ Reintegrate out-of-school children and youth in school or non-formal education. Causes of school drop-outs and non-participation in community activities should be monitored.

85. An education specialist may be needed to advise on programme development. Liaise with UNHCR Headquarters, regarding materials and expertise available internally and through standby arrangements (see *Catalogue of Emergency Response Resources,* Appendix 1).

86. The provision of education may give the refugees a privilege not enjoyed by the local population of some locations. If the government is in agreement and there is a common language of instruction, it is usually appropriate to open the schools to the local population. Some assistance may be provided to national schools located very near to refugee schools.

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Annex 1 – Community Services Checklist

The following chart covers the three phases of community services in an emergency. In each phase activities are identified and quantitative and qualitative indicators listed which can be used to assess the effectiveness of the community services programme.

CS = Community services

CSO = Community Services Officer

PHASE 1. ASSESSMENT, ACTION PLAN, GUIDELINES

Major Activities	Community Service Checklist
1.1. Assists with overall programme management	❑ Are CS resources available through LOI? ❑ Does the CSO participate in the UNHCR management team and support other sectors – water, sanitation, shelter, health, food and nutrition, programme, protection and environment?
1.2. Helps meet basic refugee survival needs	❑ Have CS considerations been included in the needs and resource assessment? ❑ Have refugee leaders been identified and involved in assessment? ❑ Do vulnerable groups have access to initial assistance? ❑ Have relevant local government and other local resources (NGOs, host families) been identified? ❑ Have CS standards and guidelines been set? ❑ Is there an action plan based on the above?

PHASE 2. FOUNDATION OF COMMUNITY SERVICES PROGRAMME

Major Activities	Community Service Checklist
2.1. Facilitates refugee participation and self-management	❑ Have refugee committees and information networks been established with women's participation as well as men and are vulnerable groups represented? ❑ Is community awareness building and information dissemination undertaken? ❑ Is there a CS coordination mechanism with refugees, implementing partners and government?

Major Activities	Community Service Checklist
3.1. Assistance to groups at risk, promoting their self-sufficiency	**Unaccompanied minors** ❑ Are they protected from exploitation by provision of information centres etc.? ❑ Are reception points established for reunifying parents and children? ❑ How many UAMs are identified? ❑ Is the community mobilized to provide foster care? ❑ Is information disseminated on the reunification programme? **Traumatized children and adults** ❑ Do children attend clinics, child care services, schools or organized play? ❑ Is there a system of identification and referral of acute cases to local facilities and are volunteers identified? ❑ Are there special programmes established and are children participating in these therapeutic activities? **Single parent households** ❑ Are neighbours or volunteers mobilized for support? ❑ Have interest groups formed? **Survivors of violence** ❑ Are means of safety and security identified and implemented? ❑ Are activities established to provide a supportive environment and re-establish normal life? **Disabled** ❑ Are preventative measures established? ❑ Are children immunized? ❑ Have health education messages been identified and disseminated? ❑ Are the disabled referred for identification and treatment? ❑ Are their families supported? ❑ Are the disabled receiving education? **Unaccompanied older persons** ❑ Do they receive assistance in daily survival? ❑ Are they involved in community activities? ❑ Has a skills inventory of elderly been established? **Ethnic minorities and mixed couples** ❑ Is their safety and security ensured through site planning? ❑ Have community activities been developed to foster peace and reconciliation?

Major Activities	Community Service Checklist
	Adolescent s ❑ Are they involved in community activities? **Single Females** ❑ Are they protected? ❑ Have neighbours and volunteers been identified to offer support? ❑ Have community activities been organized? ❑ Have females been accomodated in a physically secure place in the refugee community? **Other specific groups** ❑ Is there a system of emergency support for urban refugees, co-ordinated with programme and protection?
3.2 Establishment and maintenance of reproductive health services	❑ Has consultation been held with refugees groups? ❑ Have needs and priorities been identified within categories - safe motherhood, family planning, HIV/AIDS, STDs, sexual and gender based violence, special needs of adolescents? ❑ Have clinics and services been established? ❑ Have refugee health workers been mobilized and trained? ❑ Are women attending the services?
3.3. Promotion of refugee self-reliance and durable solutions	**Self-help activities** ❑ Have projects been established for community development? **Training** ❑ Are refugee training programmes developed, have refugees been trained? ❑ Has capacity building (on-the-job or orientation training) been organized for government, NGO, CS workers? **Education** ❑ Are schools established (especially primary) and students enrolled? ❑ Is non-formal education established? ❑ Is the education of girls taken into consideration? **Capacity building of refugee infra-structure** ❑ Are structures established (including community centres, clinics, housing)? ❑ Have some programmes been handed over to refugee groups? ❑ Are women included as part of the refugee leadership structure?

Annex 2

Sample
Unaccompanied Minor Registration Form

Child's Name

PLACE PHOTOGRAPH HERE

Sex

Age

Registration No.

ICRC Number

1. Write names of brothers & sisters who are with the child.
2. Find out the name and location of persons who found or brought child to current location, interview that person and record that information.
3. Interview any other adults & children who may have information on child's family and record that information.
4. Write down any visit the child receives: date, name and address of visitor and relationship to the child.
5. Record child's movements: date and places: e.g. hospital, nutrition centre, etc. and final move for family reunion or other reasons.

REGISTRATION FORM

		Child			Father	Mother
Date	Reg. No.	Last and First Name	Age	Sex	Last and First Name	Last and first Name

Note: Find out immediately who found the child and name, address of that person.
Are there other persons who know how to find child's family? Continue to talk to the child to obtain and write down more information about locating family.

Last Address of Child & Family	**Present Caretaker or Organization Complete Name and Address**	**With Siblings Yes/no**	**If Child leaves, note reasons: Family Reunion, moved to another place, where, reasons? – Died, etc.**

Annex 3 – List of materials for Recreational and Other Activities
(Resource box for children and young people)

Quantities indicated below are required for 1,000 total refugee population.

For the younger children:

Qty	Item
2	footballs
2	medium-sized inflatable balls
8	skipping-ropes, long
40	skipping-ropes, short
80	slates (A4)
80	slate pencils
80	slate cleaning cloths

For young people

2	volleyballs
2	volleyball nets
2	footballs
100	exercise books (100 pages, lined)
100	pens, ball-point

For storage of the above materials

1	lockable metal or plastic container
1	padlock

For use by the team leading the activities

2	double sided chalkboards
2	registration books
2	notebooks A4 (250 pages, lined)
4	tambourines
4	large handbells
8	whistles
2	air pumps
2	puncture repair kits
6	boxes of white chalk (144 sticks)
2	soft tape-measures
2	lockable sports bags
2	small padlocks

Note
The materials on this list is sufficient for a refugee population of 1,000 people. (Thus, a refugee population of 50,000 persons would require 50 times the quantities indicated on the lists).
Supplementary items based on local needs and culture should be added (such as items needed for local games). If these items are not available locally the UNHCR Supplies and Transport Section in Geneva should be asked to assist with their purchase. Specific items normally used by the refugee children should be added.

Annex 4 – Writing Materials List

Quantities indicated below are required for 1,000 total refugee population.

For the younger children:

Qty	Item
160	slates
160	slate pencils
160	slate cleaning cloths
160	pencils
160	exercise books (100 pages)

For older children

240	exercise books (100 pages, lined)
240	exercise books (100 pages, squares)
240	ball point pens

For storage of the above materials

3	lockable metal or plastic containers
3	padlocks

For use by the teachers

3	double sided chalkboards
6	boxes of white chalk (144 sticks)
1	chalkboard ruler
1	chalkboard compass
1	chalkboard set square
18	ball point pens, (6 blue, 6 red and 6 black)
3	large pencil sharpeners
3	register books
3	rulers, 30 cm
3	chalkboard dusters
9	erasers
3	boxes of HBO pencils (12)
3	poster sets (alphabet, numbers in the language and script of the refugees)
3	duffle bags to carry teacher items

11

Population Estimation and Registration

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Situation

Refugee emergencies are characterized by a mobile population, often with rapidly fluctuating numbers. It is often difficult to collect exact information on the total number and composition of the population.

Objectives

To find out the total number of the population of concern, and the breakdown of the population by age and sex, and by groups of special significance. The exact identity of those special groups will depend on the particular circumstances of the emergency.

Principles of Response

- Knowing who the refugees are and their number is essential for an efficient and cost effective operation;
- Formal mass registration should normally be the aim. Where this is not immediately possible, this can be reached in stages, starting with the first stage of population estimation;
- The final goal is a full registration of the refugee population;
- Information collected will be important for voluntary repatriation and re-integration into country of origin;
- Involvement and understanding by the refugees themselves is essential to the success of registration.

Action

- Use population estimation techniques as a first step;
- Plan towards a full registration, keeping the population informed;
- Identify resources needed for full registration;
- Review the need for full registration and implement each phase towards full registration as soon as each is feasible.

Introduction

- Knowing how many refugees there are and who they are is fundamental for planning and managing an efficient operation. There are several ways of determining numbers with sufficient accuracy;
- Although an accurate enumeration is essential, a formal mass registration should not necessarily be an automatic response at the start of an emergency;
- Successful registration needs good planning, careful implementation and consistent monitoring.

1. To plan and manage an efficient operation, one of the first things to know is how many refugees there are and who they are. An accurate enumeration is therefore an essential component of any assessment.

2. Chapter II, 8(f) of the UNHCR Statute states that the High Commissioner shall provide for the protection of refugees by "obtaining from Governments information concerning the number and condition of refugees in their territories". It must be made clear to the authorities that an assistance operation cannot be carried out without this information.

3.

Although an accurate enumeration is essential, a formal mass registration should not necessarily be an automatic response at the start of an emergency.

There are a number of methods for accurate population estimation (including age/sex breakdown) which do not require formal registration. In some circumstances these simpler methods may be preferable as an initial response.

4. The main advantage of registration is that it provides a unique opportunity to acquire basic information for subsequent programming. It also helps avoid disputes about refugee numbers. Registration will also be an essential component of any individual or family tracing programme and may be an important factor in protecting refugees.

5. The most practical time to register refugees is when they arrive at a reception/transit centre or site for settlement. Registration is often carried out in conjunction with health screening. Transferring refugees to a new site also provides a good opportunity for mass registration.

6. A discrepancy may arise with time, between official figures and the best estimates of those working closest to the refugees. Unless this discrepancy is swiftly resolved major problems will follow. Small discrepancies are likely, given the difficulties in enumeration and registration. Large ones can be avoided by timely action to verify numbers through the various methods set out in this chapter.

7. For detailed information on registration and population estimation techniques, refer to *Registration – A Practical Guide for Field Staff.*

Population Estimates

- For most methods of population estimation, it is important to understand the community structure of the beneficiary population;
- Estimates should be updated regularly.

Introduction

8. The following methods can be used to estimate the population:

i. Counting;

ii. Administrative records;

iii. Lists compiled by refugee leaders;

iv. Extrapolation and Global Positioning System (GPS);

v. Aerial photography.

9. Understanding the community structure of the beneficiary population is important for most methods of population estimation – for example, living arrangements and the average number in a family group.

10. Annex 1 provides a format for reporting population estimates as part of an overall situation report. Estimates should be updated regularly.

Counting

11. If there are easily identified entry or transit points during a refugee influx (e.g. bridges or transportation sites), then a daily count of the number of people passing through these points can give a reasonable estimate of the refugee population. Sufficient staff should be immediately positioned at bridges and other critical points to provide 24 hour coverage. These staff members should be provided with counters to aid counting, and with simple recording and reporting forms.

Administrative Records

12. Local authorities at the refugee site may collect population data on the refugees. If possible, national census and other population data should be obtained from the country of origin as a means of cross-checking the host area data.

Lists Compiled by Refugee Leaders

13. Lists of names can be compiled by refugee leaders and verified through a process agreed with the refugee community.

To ensure the system is as accurate and fair as possible, it is particularly important to understand the community structure.

The normal community structure and hierarchy in a society are often disrupted during exodus and different people often take on the role of leadership in the country of asylum. It is essential to understand the role, motives and effectiveness of the new leadership. Community services and field staff can help in this. Records compiled by refugee leaders may even eliminate the need for registration, provided they are checked and verified at random and updated regularly.

14. The lists can also be useful in identifying vulnerable refugees who need special assistance. Community services staff should visit vulnerable individuals and families to help confirm the accuracy of lists provided by the leaders.

Shelter Count and Extrapolation

15. Population estimates can also be obtained by calculating the total area of the camp, then counting shelters in a fraction of the camp, from which the population of the whole camp can be extrapolated.

16. The total surface area of the camp can be determined in a number of ways. It can be determined by measuring the average length and average width of the camp by pacing, or by using a wheel meter or measurement tape (if the camp is small), or by driving (if the camp is large), using the trip meter to estimate distance.

17. If there is a map of the camp, the surface area of the camp can be estimated by overlaying scaled gridlines on the map, and adding up the number of the squares falling within the camp's boundaries.

18. Finally the surface area can be calculated using GPS. GPS is a system which includes a hand-held device (about the size of a large calculator, costing about US $200 in 1999) which displays on a small screen the latitude and longitude of its current position. The device uses satellites to establish its position. It does not work under heavy forest cover or in deep narrow valleys because it needs an unobstructed sightline to several satellites.

19. The GPS is used to find the geographical coordinates of the camp perimeter. The more irregular the camp shape, the more perimeter points will be needed. Once the camp perimeter is established, the surface area of the camp can be calculated in the following ways:

i. Communicate the perimeter coordinates to Headquarters Mapping Unit where these can be used to calculate the area and the result will be communicated back. Alternatively, perimeter coordinates can be marked on paper which has scaled gridlines, using the X-axis to represent longitude and the Y-axis to represent latitude. A line is drawn joining these points. Counting the scaled squares inside the perimeter will give the total camp area. The distance represented by one degree of longitude varies, getting smaller moving towards the North and South poles and larger towards the equator. In order to use this method, the distance which one degree represents at the exact location of the camp must be found out. This could be scaled off a map of the area, if it has sufficiently large scale;

ii. Computer software (called Geographical Information Systems or GIS) can automatically map and calculate camp area based on the perimeter points established by GPS. Technical assistance for setting up this software can be obtained from Headquarters.

20. Once the surface area has been established, select a minimum of three sample areas within the camp, each representing about one thirtieth of the total camp area.

For example, if the total surface area of the camp is 600,000 sq. meters, then each sample area should be 20,000 sq. meters. Any variation of length or width which yields 20,000 sq. meters could be used for the sample sections. The normal GPS is not sufficiently accurate for use in measuring the size of the sample area and conventional means of measuring should be used instead.

21. Count the number of family shelters in each of the three sample sections. Obtain a

figure for the average number of shelters per section (i.e. – in 20,000 sq. meters). Then multiply by 30 to extrapolate this over the entire camp.

For example, if 3 sample sections have 120, 134, and 150 shelters respectively, then the average number of shelters in a sample section will be (120 + 134 + 145) / 3 = 133. Thus the total number of shelters in the 600,000 sq. meters camp will be 133 x 30 = 3,990 shelters.

22. Determine average family size per shelter to estimate the total population. For example, if the average family size per shelter is 5, then the total population is 5 x 3,990 = 19,950.

Aerial Photography

23. Aerial photographs (or sometimes videos) of a camp can be used to count the number of family shelters. This can be accomplished to a limited extent by taking a picture from a nearby hill, tower or tall building. In addition to professional aerial photography, "amateur" photographs taken, for example, from a UNHCR plane can be used for estimation. Flying over the site may require the permission of the authorities.

24. Aerial photographs must be accompanied by a ground survey to establish the average family size per shelter and the percentage of empty shelters.

25. The number of shelters appearing on the photograph (or mosaic of photographs) multiplied by the average family size per shelter will give an estimate of the overall population.

26. It is important to define an appropriate scale for the photography. This will depend, in part, on the size of the camps. High altitude flights produce fewer photographs to handle and interpret, but it will be more difficult to distinguish the shelters.

27. The results of aerial surveys can be integrated within the GIS from which maps can then be produced.

Registration

- Registration provides the more detailed information needed for the efficient management of an assistance operation;
- Registration is carried out over several phases.

Introduction

28. Protection and assistance can be provided more efficiently if it is based on the demographic information which can be obtained through registration. Registration may be required at different phases of an operation, for example: when there is a new refugee influx; when there is a voluntary repatriation operation (see chapter 19 on voluntary repatriation); at any time during an assistance programme to update information on the population, or to collect information on special groups e.g. unaccompanied minors (see the annex to chapter 10 on community services). The information below relates mainly to registration at the time of an influx or for updating.

29. In order to cope with large numbers it is preferable to separate the components of a registration exercise into six distinct phases, according to the immediate needs of the population and the time and staff available to carry out the task. Each phase should be viewed as an entity in its own right, but each leading to the next phase when circumstances permit.

30. The six phases of registration are:

i. Estimating the population;

ii. Planning the registration and informing the refugees;

iii. Fixing the population;

iv. Collecting information and issuing registration cards;

v. Computerization;

vi. Verification and updating.

31. The 'ideal' in registration is to work as closely as possible with the refugee population and its leadership, promoting community responsibility and participation in all stages of the process. Whilst this may not always be possible initially, it should be a major objective for both registration and camp management.

32. Formal registration requires considerable time and personnel resources and needs the active involvement of key partners to supply the necessary personnel. Key partners include government, other UN agencies, NGOs and the authorities responsible for security. Registration should only be carried out when:

i. The safety of the staff and of the refugees can be assured;

ii. The refugees accept the process;

iii. The key partners can supply personnel to help carry out the registration;

iv. There are sufficient quantities of registration materials and other equipment, including logistical support and communications.

Standard UNHCR Registration Materials

33. Standard materials for registration are stockpiled at Headquarters, and are sufficient to register 300,000 refugees. The materials include, for example, standard cards and forms, wristbands, fixing tokens, etc. These materials are included as part of a refugee registration package – see Appendix 2, Catalogue of Emergency Response Resources which has further details of these resources and how to obtain them.

Registration Phases

Phase 1: *Estimating the population*

34. This is the initial step to determine if there is a need for a full registration and/or to establish the planning figures for the registration exercise. It also provides working figures for the population for operational planning prior to the availability of more detailed population information.

Phase 2: *Planning the registration and informing refugees*

35. Designate a focal point to take responsibility for planning and executing the registration. A pilot registration in another camp can help identify potential difficulties. Planning should be a joint exercise with the concerned partners, including refugees. Staff training may be required at this stage. Ensure that the necessary staffing, equipment, supplies, security, telecommunications, vehicles and logistical support will be available on the date of the exercise. Decide on the level of information to be collected on a control sheet or registration form, and computerization.

36. At the same time as planning, there should be an intensive information campaign aimed at the refugee population at large (not just the leaders) informing the refugees of the procedures and benefits of registration.

Phase 3: *Fixing the population*

37. Give each individual in the target population a fixing token (see Annex 2) or wristband. This defines and temporarily freezes the size of the group on whom more detailed information will be collected later. Without the fixing phase, registration will become a revolving door, open to escalating distortion and abuse. It must be done rapidly (preferably within a few hours, maximum one day) to avoid multiple and/or bogus registration. While the population may be given only short notice of when this will take place, it is necessary to ensure that they understand what is happening.

Phase 4: *Collecting information and issuing registration cards*

a) Collecting limited information on control sheets and issuing temporary registration cards

38. This phase (including issuing temporary registration cards) should be carried out before the next food distribution because the fixing token or wristband is not linked to verifiable information about persons in need, and cannot be used reliably for food and relief distribution.

39. Usually there will be no time to collect detailed information immediately, yet assistance should be distributed urgently and basic demographic data is needed. The first step therefore is to exchange the fixing token or wristband for a temporary registration card (also used as ration card – see Annex 2) to all heads of family, and collect limited information on control sheets (see Annex 3). In most instances this information will be limited to the name of the head of family, the size and age/sex breakdown of the family and the number of the temporary registration card, with an indication of any immediately visible vulnerable family members (see Annexes 4 and 5).

b) Completing registration forms and distributing of registration cards

40. The second step is to record detailed information about the families on Registration Forms (see Annex 4) and to issue long-term registration cards (also used as ration cards, the standard UNHCR card lasts about one year or 24 to 36 distributions). Where this is done immediately after the fixing phase (without the intervening step of temporary registration cards) there will be time constraints. Where it is done after the issue of temporary cards it can be spread over a longer period of time, with a cut off date for the validity of the temporary cards.

It is the Registration Form that constitutes the core document of a UNHCR registration and which will provide the basis for all future reference, analysis, verification and updating of the registration.

41. This phase provides a verifiable linkage between the identity of persons of concern and the very simple forms of documentation needed for processing large numbers of people for assistance distribution. The two-step process of information collecting is used because the second step can take considerable time, and registration information is needed in the interim for commodity distribution. It is particularly important in this phase to have personnel who speak the language and to ensure there is a common code for transliteration between alphabets, particularly for names.

Phase 5: *Computerization*

42. Computerization can either start after registration cards have been distributed or at the same time if there are sufficient resources. Computerization is normally carried out using the "Field Based Registration System" (FBARS). Standard codes are used in UNHCR Registration Forms to facilitate the collection and input of data, particularly data on groups at risk (see Annex 5).

43. Data can be entered on-site by trained data-entry clerks or by out-sourcing to an off-site specialized data entry company. The data should be computerized as soon as possible and not more than a few months after being collected on the registration forms, otherwise it will be outdated and unusable.

44. FBARS can handle two types of registration, either by family unit (control sheet) or by individual (standard registration form). It also has a convoy management module which can be used during organized mass movement. It can be used by both UNHCR Offices and by Governments and implementing partners.

45. FBARS has easy-to-use search and report facilities and can produce information for planning, monitoring and reporting, for example:

i. Data on the numbers and rate of arrival;

ii. Data on refugee groups including on vulnerable groups;

iii. Data consolidated both regionally and globally;

iv. Food distribution lists;

v. Passenger manifests.

46. FBARS is available with the UNHCR registration materials (see above). The software and documentation are currently available in English, French and Russian. Information and support for the use of FBARS is available from the Information and Computing Services Section at Headquarters.

Phase 6: *Verification and information updating*

47. Registration information will need to be updated as the population changes with births, deaths and population movements. There should be a system to do this from the start. The registered numbers should be cross-checked with other information, for example, births and deaths can be monitored through the health services, and population movement monitored through any of the methods for population estimation described above.

48. Registration documents can acquire monetary value, especially if they are used to access assistance. There should be a system to check these documents, for example random verification at food distribution points to ensure the refugees are not using other people's documents or forged documents.

49. Verification is a continuous process, therefore routine verification, including house to house visits, at food distribution centres, etc., should become a standard, regular and frequent part of monitoring. Shelters should be given an address (section/block/individual shelter number) which will be linked to the individual family registration information.

Key References

Registration – A Practical Guide For Field Staff, UNHCR, Geneva, 1994.

Annex 1 – Format for reporting on population in emergency situation reports.

Period: From _____ to _____

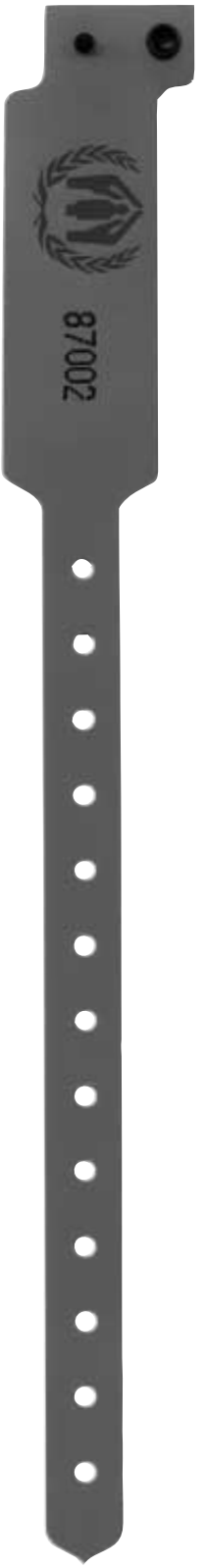
Type / status of popu-lation	Current location	Origin / from	Pop. at start of period	New arrivals	Decreases			Pop. at end of period		
					Vol. return	Resettle-ment	Other	Total	% of total 0-4 years*	% of total who are female*

*Estimate

Main source of information is ❑ Government; ❑ UNHCR; ❑ NGO

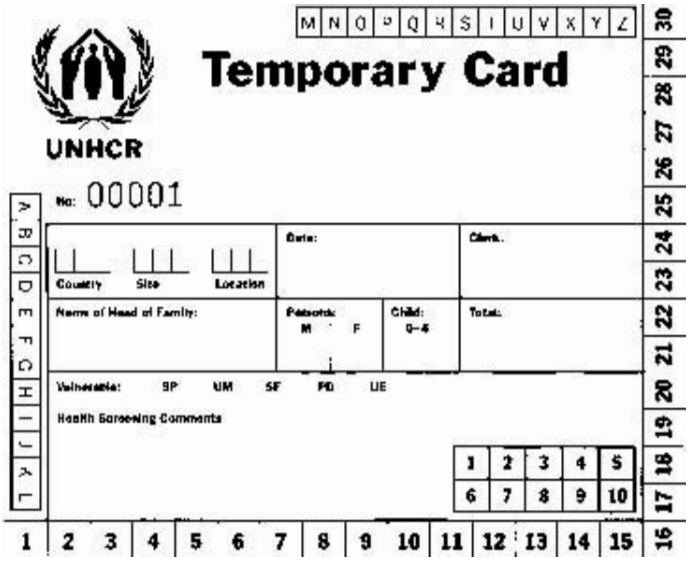
Main basis of the information is ❑ Registration; ❑ Estimate

Wrist band



Ration Card

Temporary Card



Control Sheet
Passenger Manifest

UNHCR **HCR**

Feuille de contrôle
Manifeste de passagers

Country: *Pays:*	Site-Camp: *Site-Camp:*	Location: *Lieu:*	Block: *Bloc:*	Vehicle No: *No de Véhicule:*	Clerk: *Employé(e):*	Date:

Card N° *N° de carte*		Name of HOH *Nom de CDF*	Household *Foyer*			Children/*Enfants*				Adulte*(e)*				Vulne ***	Place of Origin *Lieu d'origine*	
						< 5*		5-17		18-59		> 60				
			M	F	Total	M	F	M	F	M	F	M	F			
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																
		Total														

* not yet reached 5th birthday / *moins de 5 ans révolus*

** **SP** = single parent *= parent seul(e)* **UE** = unaccompanied elder *= personne âgée non accompagnée* **SF** = single female *= femme seule* **PD** = physically disabled *= handicapé(e) physique* **CI** = chronically ill *= malade chronique* **UM** = unaccompanied minor *= mineur non accompagné* **MC** = missing child *= enfant disparu*

Registration Card Number
Numéro de la carte d'enregistrement

UNHCR **HCR**

Country/*Pays* | Site/*Site* | Location/*Lieu* | Block/*Bloc*

Date of arrival / *Date d'arrivée:*
dd / *jj* mm / *mm*

Registration Form
Formulaire d'enregistrement

Country of Origin / *Pays d'origine:*	Province-County / *Province-Préfecture:*	District / *District-Commune*:	Town-Village / *Ville-Village:*	Ethnic Origin / *Origine ethnique:*
Intended Place of Return / *Lieu de retour prévu:*	Province-County / *Province-Préfecture:*	District / *District-Commune:*	Town-Village / *Ville-Village:*	Religion / *Religion:*

(if different to above / *si différent de ci-dessus*)

	Name *Nom*			Sex *Sexe*	YOB *DDN*	Relation *Lien de parenté*	Educat. *Format.*	Occupat./Skills *Profess./Qualific.*	Vulnerab.
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

Registration Date: *Date d'enregistrement:*	By / *Par:*	Remarks / *Remarks:*

11 Population Estimation and Registration

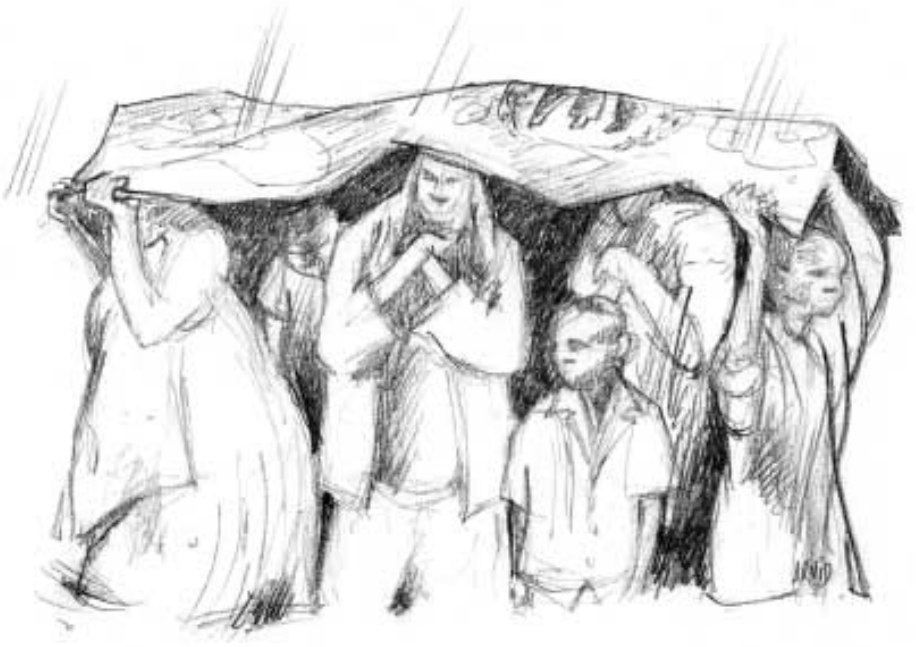
Annex 5 – Codes for UNHCR Registration Forms
Codes pour les formulaires HCR d'enregistrement

Sex ***Sexe***		**Relation to HOH** ***Lien de Parenté avec CDF***		**Education** ***Formation***		**Vulnerability** ***Vulnérabilité***	
F	Female *Féminin*	**SPO**	Spouse (husband/wife) *Conjoint (mari/femme)*	**P**		**SP**	Single Parent *Parent seul(e)*
M	Male *Masculin*	**CHI**	Child (son/daughter) *Enfant (fils/fille)*	**S**	Secondary *Secondaire*	**SF**	Single Female *Femme seule*
		PAR	Parent (mother/father) *Parent (mère/père)*	**T**	Technical/ Vocational *Technique/ Professionnelle*	**UE**	Unaccompanied Elder *Personne âgée non accompagnée*
		SBR	Sister/Brother *Sœur/Frère*	**U**	University *Universitaire*	**UM**	Unaccompanied Minor *Mineur non accompagné*
		GPR	Grandparent (grandmother/ grandfather) *Grand-parent (grand-mère, grand-père)*	**G**	Graduate *Diplôme universitaire*	**PD**	Physically Disabled *Handicapé(e) physique*
		GCH	Grandchild (grandson/ granddaughter) *Petit-enfant (petit-fils/ petit-fille)*	**I**	Informal Education *Education non Institutionnalisée*	**MI**	Mentally Ill *Malade mental(e)*
		INL	In-laws *Beaux-Parents*	**N**	No Formal Education *Aucune Education Institutionnalisée*	**CI**	Chronically Ill *Malade chronique*
		OFM	Other family member *Autre*	**X**	Unknown *Inconnu*	**MC**	Missing Child *Enfant disparu*
		UNR	Unrelated person belonging to the household *personne étrangère vivant avec la famille*	**O**	Others *Autres*		
		A/U	Aunt/Uncle *Tante/Oncle*				

11 Population Estimation and Registration

12

Site Selection, Planning and Shelter



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Situation

Suitable and well-selected sites, soundly planned refugee settlements with adequate shelter and integrated, appropriate infrastructure are essential in the early stages of a refugee emergency as they are lifesaving and reduce suffering. Refugee settlement in emergencies may take the form of dispersed settlements, mass accommodation in existing shelters or organized camps. Initial decisions on location and layout have repercussions throughout the existence of a refugee settlement with long-term effects on protection and the delivery of humanitarian assistance.

Objectives

To provide suitable sites and shelter to accommodate refugees in emergencies.

Principles of Response

- Use longer term planning principles, even when the refugee situation is expected to be only temporary;
- Decisions on site selection and camp planning are very difficult to reverse, therefore when in doubt seek technical support;
- Avoid high population density in settlements and in shelters;
- Avoid very large emergency settlements; refugee camps should normally be considered as a last resort;
- Involve refugees in all phases of settlement and shelter planning and construction;
- Use a bottom-up planning approach, beginning with the smallest social units, preserving traditional social arrangements and structures as far as possible;
- Develop a comprehensive master plan, with the settlement layout developed around sanitation and other services, providing room for expansion.

Action

- Assess the suitability of the refugee site and ensure that it meets the basic criteria;
- Simultaneously assess the most immediate needs for emergency shelter and provide the necessary materials that cannot be met from locally available resources;
- Identify the most urgently required measures to improve site planning and layout, and implement these as soon as possible.

Introduction

1. Providing a place to live is a natural consequence of granting asylum. As the layout, infrastructure and shelter of an emergency camp will have a major influence on the safety and well-being of refugees, these factors must be coordinated with the other vital sectors involved in the humanitarian response: community services, water, environmental sanitation, health, education, food distribution, logistics, forestry, and the environment.

2. Most refugee operations last much longer than initially anticipated, therefore cost-effective and sustainable infrastructure and shelter should be planned from the start. The expected life-span of a camp will influence site selection, camp planning and the implementation of a refugee operation.

3. The role and responsibility of the national authorities in site selection is obvious and of fundamental importance. Equally, the refugees themselves must be involved as early as possible; ideally, the needs of the refugees should determine the location, size and layout of the site. In practice a compromise has to be reached between the needs of refugees and external factors, both practical and political.

4. Good site selection, planning and shelter will:

i. Save lives and reduce cost;

ii. Minimize the need for difficult, corrective measures later;

iii. Make the provision of utilities, services and infrastructure easier and more cost-effective;

iv. Ensure most efficient use of land, resources and time.

5. Emergency refugee settlements generally fall into one of three categories:

i. Dispersed settlement;

ii. Mass shelter;

iii. Camps.

Dispersed Settlement

6. This type of arrangement is where the refugees find accommodation within the households of families who already live in the area of refuge. The refugees either share existing accommodation or set up temporary accommodation nearby and share water, sanitation, cooking and other services of the pre-existing households.

7. Accommodation is often found with extended family members or with people of the same ethnic background. This type of arrangement may occur in both rural or urban settings. The advantages of this type of settlement are:

i. Quick to implement;

ii. Limited administrative support is needed;

iii. Low cost;

iv. Fosters self help and independence;

v. It has less impact on the local environment than camps.

8. The disadvantages of this type of settlement are:

i. The host families and communities can become overburdened and impoverished;

ii. It can be difficult to distinguish the host population from the refugees. This may pose problems where population estimation and registration are required;

iii. Protection problems may not be as easy to detect as when the population is more concentrated;

iv. Shelter and other forms of assistance are likely to be needed by the host population as well as the refugees.

Mass Shelter: Public Buildings and Community Facilities

9. This type of settlement is where refugees find accommodation in pre-existing facilities, for example, in schools, barracks, hotels, gymnasiums. These are normally in urban areas and are often intended as temporary or transit accommodation. The advantages of this type of settlement are:

i. They are not continuously inhabited during normal use and refugees can be accommodated immediately without disrupting accommodation in the hosting area;

ii. Services such as water and sanitation are immediately available, though these may be inadequate if the numbers are large;

iii. The need to construct additional structures specifically for the refugees is avoided.

10. The disadvantages of this type of settlement are:

i. They can quickly become overcrowded;

ii. Sanitation and other services can become overburdened;

iii. Equipment and structure can be damaged;

iv. Buildings are no longer available for their original purpose, thus disrupting public services to the hosting population;

v. Lack of privacy.

Camps

11. This type of settlement is where refugees find accommodation in purpose built sites where a full range of services, for example water, sanitation, are provided, usually exclusively for the population of the site.

12. High density camps with very large populations are the worst possible option for refugee accommodation. However, this may be the only option because of decisions by the host country or simply because of a lack of alternatives. They are common in areas with little or no pre-existing infrastructure or where the size of the refugee population is such that it would put an intolerable strain on the local resources if the two other types of settlement mentioned above were used.

13. The advantages of this type of settlement are:

i. Services can be provided to a large population in a centralized and efficient way;

ii. There may be economies of scale in the provision of some services compared with more dispersed settlements;

iii. The refugee population can be easy to identify and communicate with;

iv. Voluntary repatriation can be easier to organize.

14. The disadvantages of this type of settlement are:

i. High population density seriously increases health risks to the population;

ii. High risk of environmental damage in the immediate vicinity of the camp;

iii. High population concentrations, particularly close to international borders, may make the population vulnerable to protection problems;

iv. Large camps may provide a hiding place and support base for armed groups who should be excluded from refugee status. It may be difficult to distinguish these groups from the normal refugee population and thus they may continue to benefit from assistance.

Organization of Response

◆ Site selection, planning and shelter have a major bearing on the provision of other assistance.

◆ This subject must therefore be considered as essential to a problem and needs assessment and response.

◆ Expertize is necessary, as is swift coordinated planning of a new site or the improvement of existing conditions.

Introduction

15. Site selection, planning and provision of shelter have a direct bearing on the provision of other assistance and will be important considerations in the overall assessment of problems and needs and planning of response. Decisions must be taken as part of an integrated approach and in light of the advice of specialists and views of the refugees.

Contingency Planning

16. Ideally sites should be selected, planned and developed prior to the arrival of the refugees. However, frequently the scale, nature, timing or direction of movement of the refugee flow will mean that some or all aspects of a contingency plan may need to be modified in the face of changing or unforeseen events. The information previously gathered in the contingency planning process, however, will usually be useful.

17. Because of the nature of emergencies, and because practical and political considerations are often the primary determinant of the location of a site, the immediate priority will often be to improve sites where refugees have spontaneously settled.

Information for Site Selection and Planning

18. The information previously gathered from the contingency planning process, and information already available (maps and data) should be reviewed to assist in determining the range of options for sites. Information that is essential for planning will often be in the form of maps, reports surveys and other data and should typically cover such areas as topography, land use, climate, soils, geology, hydrology, vegetation, infrastructure and key natural and cultural resources. Sources of information may include government offices, educational institutions and UN agencies. UNHCR Headquarters, through the focal point on Geographical Information Systems (GIS) can also support operations with maps, aerial photographs, satellite images and a special geographic database.

Expertize and Personnel

19. Expertize may be required in the fields of hydrology, surveying, physical planning, engineering (e.g. water supply, environmental

sanitation, road and bridge construction, building materials, etc.), public health, the environment and perhaps social anthropology. Familiarity with conditions in both the country of origin and asylum is very important. Prior emergency experience and a flexible approach are particularly valuable.

20. Expertize and advice should be sought through UNHCR's Engineering and Environmental Services Section, who will advise on the fielding of a specialist to coordinate activities in this sector. Potential sources of the necessary expertize are government line ministries, national and international NGOs, architecture and engineering faculties, local industry and professional organizations, as well as other UN organizations.

21. Site selection and settlement planning require broad consultations with all concerned in the planning, development and use of the site. When appropriate, multi-sector planning teams, work-groups or task-forces might be formed to better structure consultations and better solicit inputs. Consensus should be sought, though it is rare that the needs of all the parties will be fully satisfied.

Criteria for Site Selection

- Land may be scarce in the country of asylum and no site may be available that meets all of the desired criteria. If, however, the site is clearly unsuitable, every effort must be made to move the refugees to a better site as quickly as possible. Both the problems which result from a bad site, and the difficulties inherent in a move, increase with time.

Introduction

22. The social and cultural background of the refugees must be a primary consideration and will be an important determinant of the most appropriate type of site and shelter. In many circumstances, however, choice will be limited and land that meets even minimum standards may be scarce. For uninhabited sites or areas where refugee settlement is proposed, it is wise to establish why the site was not already in use, and examine whether the reason – for example, no water or because it floods in the monsoon – does not also exclude use by the refugees.

Water Supply

23. A specialist assessment of water availability should be a prerequisite in selecting a site.

The availability of an adequate amount of water on a year-round basis has proved in practice to be the single most important criterion, and commonly the most problematic.

A site should not be selected on the assumption that water can be found merely by drilling, digging, or hauling. Drilling may not be feasible or may not provide water in adequate quantity and quality. No site should be selected where the hauling of water will be required over a long period.

Size of Camp Sites

24. While there are recommended minimum area requirements for refugee sites, these should be applied cautiously and with flexibility. They are a rule of thumb for an initial calculation rather than precise standards.

Ideally, the recommended minimum surface area is 45 m^2 per person when planning a refugee camp (including garden space). However, the actual surface area per person (excluding garden space) should not be less than 30 m^2 per person.

The figure of 30 m^2 surface area per person includes the area necessary for roads, foot paths, educational facilities, sanitation, security, firebreaks, administration, water storage, distribution, markets, relief item storage and distribution and, of course, plots for shelter. The figure of 30 m^2 does not include, however, any land for significant agricultural activities or livestock. Although agricultural activities are not usually a priority during emergencies, small vegetable gardens attached to the family plot should be included in the site plan from the outset. This requires a minimum increase of 15 m^2 per person, hence, a minimum of 45 m^2 overall land allocation per person would be needed.

25. Large camps of over 20,000 people should generally be avoided.

The size of a site for 20,000 people should be calculated as follows assuming space for vegetable gardens is included:

20,000 people x 45 m^2 = 900,000 m^2 = 90 ha (for example a site measuring 948 m x 948 m).

26. If possible, there should be a substantial distance between each camp. The distance depends on a number of factors: access, proximity of the local population, water supplies, environmental considerations and land use.

27. Refugee settlements should have potential for expansion to accommodate increase in the population due to natural increases or new arrivals. The excess of births over deaths means that the population could grow as fast as 3 to 4% per year.

Land Use and Land Rights

28. In most countries land for the establishment of refugee sites is scarce. Often, sites are provided on public land by the government. Any use of private land must be based on formal legal arrangements in accordance with the laws of the country.

Note that UNHCR neither purchases nor rents land for refugee settlements.

Headquarters should be consulted at once if this is a problem.

29. Once a possible site has been identified, the process of site assessment should always include clarification of land-ownership and land rights. Almost invariably, land rights or ownership are known, even though these may not be well documented in public record, or may not be obvious. Nomadic use of rangeland, for instance, requires huge areas and may not look used.

30. The refugees should have the exclusive use of the site, through agreement with national and local (including traditional) authorities. Traditional or customary land use rights are very sensitive issues, and even if there may be an agreement with the national government to use a site, local groups may disagree with the site being used even temporarily. Clarification of access rights and land use restrictions is also necessary to define the rights of the refugees to:

i. Collect fuel-wood, and timber for shelter construction as well as fodder for animals;

ii. Graze their animals;

iii. Engage in agriculture or other subsistence activities.

Security and Protection

31. In principle, the granting of asylum is not an unfriendly act by the host country towards the country of origin. However, to ensure the security and protection of the refugees, it is recommended that they be settled at a reasonable distance from international borders as well as other potentially sensitive areas such as military installations.

The OAU Convention states: "For reasons of security, countries of asylum shall, as far as possible, settle refugees at a reasonable distance from the frontier of their country of origin"[1].

Exceptions should only be made to this rule where the interests of the refugees would be better served, for example if there are good prospects for early voluntary repatriation, and security and protection considerations allow.

Topography, Drainage and Soil Conditions

32. Where water is readily available, drainage often becomes a key criterion. The whole site should be located above flood prone areas, preferably on gentle (2 to 4%) slopes. Sites on slopes steeper than 10% gradient are difficult to use and usually require complex and costly site preparations. Flat sites present serious problems for the drainage of waste and storm water. Avoid areas likely to become marshy or waterlogged during the rainy season.

33. Soils that allow swift surface water absorption are important for the construction and effectiveness of pit latrines. The subsoil should permit good infiltration (i.e. allowing water absorption by the soil, and the retention of solid waste in the latrine). It should be noted that very sandy soils which are good for infiltration are sometimes poor for the stability of the pit. Where drinking water supplies are drawn from ground water sources, special attention must be given to preventing contamination by pit latrines. The pit latrines must not reach into the ground water. The groundwater table should be a minimum of 3 m below the surface of the site.

34. Avoid excessively rocky or impermeable sites as they hamper both shelter and latrine construction. If possible, select a site where the land is suitable at least for vegetable gardens and small-scale agriculture.

Accessibility

35. The site must be accessible and close to sources of necessary supplies such as food, cooking fuel and shelter material. Proximity to national services is desirable, particularly health care services. Roads must be "all-weather" providing year-round access. Short access roads to connect the main road with the site can be constructed as part of the camp

[1] *Article II, paragraph 6 OAU Convention.*

development. There may be advantages in choosing a site near a town, subject to consideration of possible friction between local inhabitants and refugees.

Climatic Conditions, Local Health and Other Risks

36. Settlement areas should be free of major environmental health hazards such as malaria, onchocerciasis (river blindness), schistosomiasis (bilharzia) or tsetse fly. A site may have unseen and/or irregular (but often locally known) risks such as flash flooding, or serious industrial pollution. For sites in dust prone areas, regular dust clouds can foster respiratory diseases. Emergency and temporary shelter need protection from high winds, however, a daily breeze is an advantage. Climatic conditions should be suitable year-round and careful account should be taken of seasonal variations: a suitable site in the dry season may be untenable in the rains. Likewise, mountainous areas may be suitable in summer, while in winter the temperatures may fall way below freezing. Seasonal variation can have a considerable impact on the type and cost of shelter, infrastructure, heating fuel and even diet. As far as possible, refugees should not be settled in an area where the climate differs greatly from that to which they are accustomed. For example, settling refugees from malaria-free high ground in a marshy area where the disease is endemic can be disastrous.

Vegetation

37. The site should have a good ground cover (grass, bushes, trees). Vegetation cover provides shade, and reduces erosion and dust. During site preparation, care should be taken to do as little damage as possible to this vegetation and topsoil. If heavy equipment is used, indiscriminate bulldozing or removal of topsoil has to be avoided at all costs. If wood must be used as domestic cooking fuel or for the construction of shelter, the refugees should be encouraged not to cover their needs at the site or in the immediate vicinity. Rather, a more dispersed pattern of wood collection should be encouraged, in coordination with local forestry authorities (see section on site planning and management of natural resources below). A quick survey of vegetation and biomass availability for these purposes should be undertaken. The site should not be located near areas which are ecologically or environmentally protected or fragile.

Site Selection Methodology

Obtain agreement among the planning team on site selection criteria;

i. Prioritize the criteria list;

ii. Obtain suitable maps and other information showing topography, road networks, land use and water sources;

iii. Determine site characteristics through site visits, identifying any potential flaws that would exclude use of the site (e.g. no water, flood-prone);

iv. Make simple estimates of the surface area of each of the potential sites, e.g. use vehicle trip-meter to estimate distances, or, if feasible, use other methods such as Global Positioning System (see chapter 11 on population estimation and registration);

v. Assess the implications of different layouts on the potential sites and rank the sites on the basis of the criteria list.

Site Planning: General Considerations

- The overall physical layout of a site should reflect a decentralized community-based approach focusing on family, village or other social groups.
- Site planning should use the "bottom up" approach starting from the characteristics and needs of the individual family, and reflect the wishes of the community as much as possible.

Introduction

38. The physical organization of the settlement will markedly affect the health and well-being of a community. Good site planning will also facilitate an equitable and efficient delivery of goods and services.

Whatever the circumstances, the overriding aim must be to avoid high density refugee camps.

Master Plan

39. A "master plan" or overall site plan should show the overall configuration of the site, its surroundings and characteristics, and its location vis-à-vis natural and existing features including settlements. The plan should take into account the social organization of the refugees and principles of module planning, and should cover the following physical features.

40. Natural and existing features:

i. Contours (lines joining points of identical elevation are called contour lines);

ii. Rivers, forests, hills, flood plains, swamps;

iii. Rocky patches, sandy soils;

iv. Existing buildings, roads, bridges;

v. Farm land, electrical power grid, water pipelines.

41. Planned features:

i. Shelter areas, potential expansion areas;

ii. Roads and footpaths;

iii. Drainage system and terracing;

iv. Environmental sanitation plan;

v. Water distribution plan;

vi. Utilities, camp lighting, etc.;

vii. Administration areas;

viii. Educational and health facilities;

ix. Distribution points;

x. Feeding centres;

xi. Markets and recreation areas;

xii. Fire prevention breaks;

xiii. Agricultural plots.

42. A topographical and planimetric survey is crucial as the basis for site planning. The plan or map should have a metric scale between 1:1,000 and 1:5,000, and in case of large camps a scale of 1:10,000 or above. A topographical survey describes the physical features of a landscape (rivers, valleys, mountains). A planimetric survey describes locations within an area (e.g. the camp site).

Services and Infrastructure

43. The following are standards for services and infrastructure and should be referred to when preparing the master plan:

1 water tap	per	1 community (80-100 persons)
1 latrine	per	1 family (6 - 10 persons)
1 health centre	per	1 site (20,000 persons)
1 referral hospital	per	10 sites (200,000 persons)
1 school block	per	1 sector (5,000 persons)
4 distribution points	per	1 site (20,000 persons)
1 market	per	1 site (20,000 persons)
1 feeding centre	per	1 site (20,000 persons)
2 refuse drums	per	1 community (80 - 100 persons)

44. There are two situations for which planning is required:

i. Reorganizing existing spontaneously developed sites;

ii. New sites.

The design standards to be applied should be the same in each case, although methods, approach and timing, may differ substantially.

45. Where refugees have spontaneously settled they may be understandably reluctant to relocate. In such cases involvement of representatives of the refugees in planning will usually facilitate a better understanding and acceptance by the refugees of priority changes. An early and clear demarcation of plots, including areas reserved for services, is advisable.

Comprehensive but swift planning is essential for a new site.

Modular Planning

46. Planning should start from the perspective of the individual refugee family. Begin by considering the needs of the individual household, such as distance to water and latrines; the relationship to other members of the community (other relatives, clan, or ethnic groups); and traditional housing and living arrangements. Developing the community layout in this way, and then considering the larger issues of overall site layout, is likely to yield much better results than beginning with a preconception of the complete site layout and breaking it down into smaller entities.

47. Thus planning and physical organization of the site should start from the smallest module, the family, and then building up larger units as follows:

Module	Consisting of	Aprox. No. of persons
Family	1 family	4 - 6 persons
1 community	16 families	80 persons
1 block	16 communities	1,250 persons
1 sector	4 blocks	5,000 persons
1 camp module	4 sectors	20,000 persons

These figures are indicative and should be adjusted according to actual conditions.

48. Modular planning does not necessarily mean using a grid layout for the site. The linear or grid layout, with square or rectangular areas separated by parallel streets, has

often been used for its simplicity of design and speed of implementation. However, every effort should be made to avoid a rigid grid design which promotes high density settlements since environmental health problems and disease are directly proportional to population density. Whatever design is used should take account of the natural features of the site and of the identity of the refugee community.

49. The social organization, background and family structure, are all factors that will influence the physical layout of a site. Initially, this information, which is part of the basic problem and needs assessment should be gathered through discussions with the refugees and others knowledgeable about their society. A full socio-economic survey of the refugee population should be conducted once resources allow, and will be important in subsequent planning, particularly for self-reliance and durable solutions.

Environmental Considerations

50. Environmental considerations have to be integrated into physical planning and shelter from the very start of an emergency. Location and layout of refugee camps, provisions made for emergency shelter, and the use of local resources for construction and fuel, can have a major negative environmental impact. It is in the earlier stages of an emergency where the greatest environmental damage can occur: This environmental damage has health, social and economic consequences for the refugees and local population, and can have political repercussions.

51.

Rehabilitation effectively starts in the emergency phase, and the costs of environmental damage can be substantially reduced by early environmental action in an emergency.

52. In order to safeguard the welfare of refugees and local population by protecting their environment, the following steps can be taken:

i. Site selection: avoid environmentally protected areas. Where possible, a site should be located a day's walk from protected areas or reserves;

ii. Site preparation: preserve existing vegetation and top-soil;

iii. Camp density and size: generally, the smaller the settlements the better;

iv. Camp layout: the layout (particularly roads) should follow the contour lines. This will reduce erosion and preserve topsoil, and avoid the creation of dangerous gullies. A site layout that encourages clustered living arrangements (which can also promote security) promotes sharing of resources including cooking which reduces fuel consumption;

v. Shelter design (energy saving through insulation): In cold climates, with extended winter seasons where continuous heating is needed, passive energy saving measures, e.g. sufficient insulation of roof, walls, floors can be extremely fuel saving and cost-effective over time;

vi. Shelter and fuel: The materials for these often come from the immediate surroundings of the camp. It is crucial to initiate at the outset a system managing and controlling the use of local natural resources including wood for construction and fuel. Meeting the initial need for shelter materials from the local resources can be particularly destructive – so collection of such materials should be carefully managed, and/or materials should be provided from an alternative source.

53. A simple natural resources management plan should be drawn up as soon as possible. A key feature of a basic plan will be controlled harvesting and collection of fuel-wood and timber. This should be discussed with government bodies, such as forestry departments. Controlled fuel-wood and timber harvesting in the vicinity of the camp can include: defining certain areas and trees (by marking) which should not be harvested, allowing only dead wood to be collected; establishing an environmental awareness programme to define clear rules from the outset regarding harvesting fuel-wood and to encourage respect for the local resources; assigning responsibility for managing and harvesting certain areas to certain groups.

54. The decision on supplying fuel-wood from outside the vicinity of the camp (e.g. trucking in wood), how to supply it and the quantity which is necessary, must be taken according to the specifics of the situation. The organized supply of fuel-wood or other fuel such as kerosene can have complex repercussions and should be instituted with care. Organized supply of **free** fuel on a regular basis is only appropriate in certain circumstances: for

example, where there are severe restrictions on fuel from other sources. Where fuel-wood is also readily available locally, its distribution free of charge from outside the vicinity may actually lead to increased consumption. In addition, refugees rely on local natural resources for income, therefore if free fuel-wood is provided for cooking purposes, collection of wood will continue for income generating purposes (e.g. the sale of fuel-wood or timber, charcoal making, etc.). To retain its value therefore, fuel-wood should generally be supplied in return for work.

55. The source and impact of wood supplied to the refugees needs also to be considered:

i. Is it being harvested sustainably?

ii. Are the environmental problems merely being moved elsewhere?

Care should be taken to prevent emergence of local monopolistic suppliers. Finally, it should be remembered that, if it is necessary to introduce free fuel supply in the initial stages of an emergency, it will be difficult to later modify such arrangements.

56. A more comprehensive natural resource management plan for the site and its immediate surroundings should be drawn up as soon as possible (with specialist advice if necessary).

Such a plan should be based on a baseline environmental survey.

The comprehensive natural resource management plan would cover, in addition to controlled harvesting of timber for fuel mentioned earlier: promotion of fuel saving stoves and fuel efficient cooking techniques, supply of key energy saving devices (e.g. lids with cooking pots, provision of mills or milled grain), awareness raising programmes, identifying the scope for better use of existing natural resources (e.g. using waste water, common areas, and areas around shelters), for kitchen gardens and tree planting, and reforestation where necessary.

Gender Considerations

57. In emergencies there may be a loss of normal community participation and the changes in demographic proportions may have altered values and principles. This may mean disruption of traditional mechanisms for the protection and assistance of women. This change of social patterns in refugee communities may also result in:

i. Increased numbers of female headed households;

ii. Large numbers of unaccompanied children;

iii. Shortage of men;

iv. Disruption of the extended family, with its role as social caretaker.

58. It is important that the needs of women are taken into account in site planning. It may be difficult to reach women if they do not traditionally form part of the leadership structure of the community. In such cases the community extension workers should be able to assist in obtaining views on the protection and security of women.

59. Among the refugees may be those who are unable to build their own shelters because of vulnerabilities. Specific actions should be taken to ensure that the refugee community themselves are organized to assist the more vulnerable refugees with their shelter construction.

Site Planning: Specific Infrastructure

◆ Under-estimation of surface area required for social infrastructure and communal services is a common problem.

60. At the start of an emergency it may be difficult to foresee all the administrative and communal services that are likely to be required. Where adequate space is available, free areas should be allocated for future expansion of these services. Under-estimation of the space required for future communal needs is a common problem in sites of limited area.

Sanitation

61. While water requirements often determine site selection, sanitation requirements often dictate site layout. High population density together with poor sanitation is a severe threat to health and safety of the refugees. This is often the case when sites have developed in an unplanned way. Minimal organization of basic sanitation should be introduced before reorganizing the site or transferring the refugees to a new site. This should include prohibiting uncontrolled defecation and the establishment of public latrines. Sufficient space must be left for replacement latrines. If communal latrines are unavoidable, there should be a plan for their maintenance and they should be accessible by road to facilitate this.

62. For all sites, new or reorganized, the goal should be one latrine per family. Only if the latrine remains under the control and maintenance of a family group is safety and hygiene assured in the long run. The ideal location of the family latrine is on the family plot, as far as possible from the shelter.

Water Supply

63. Where possible, the maximum distance between any shelter and a water distribution point should be not more than 100 m, no more than a few minutes walk. The layout of the site should contain the water distribution grid as an integral part of the service plan and the pipes should be underground. Water pipes should be kept at a depth that traffic or other surface activities do not cause damage (40 to 60 cm). In countries with very low temperatures, the pipes must be positioned at frost free depth (60 to 90 cm). Experience shows that water distribution to small, socially cohesive groups of 80 to 100 persons reduces water wastage considerably and reduces destruction of taps, standposts and concrete aprons. The water distribution point is more likely to be kept well drained and hygienic and the waste water used to irrigate communal or individual vegetable gardens.

64. Effluent and used water from water supply points should be well drained and eventually absorbed in soakage pits or gardens.

Roads

65. A site should have access and internal roads and pathways connecting the various areas and facilities. Accessroads should be all-weather roads above flood levels and have adequate drainage. If there has to be a significant amount of vehicle traffic on the site, it should be separated from pedestrian traffic. All structures, including fences, should be set back some 5 to 7 m from roads to provide adequate visibility for pedestrians and vehicles.

Fire Prevention

66. As a rule of thumb a firebreak (area with no buildings) 30 m wide is recommended for approximately every 300 m of built-up area. In modular camps firebreaks should be situated between blocks. This area will be an ideal for growing vegetables or recreation. If space allows, the distance between individual buildings should be great enough to prevent collapsing, burning buildings from touching adjacent buildings. The distance between structures should therefore be a minimum of twice the overall height of any structure, if building materials are highly inflammable (straw, thatch, etc.) the distance should be increased to 3 to 4 times the overall height. The direction of any prevailing wind will also be an important consideration.

Administrative and Communal Services

67. Buildings for administrative and communal services should be traditional structures, if possible of a multipurpose design to facilitate alternative uses. For example, buildings for initial emergency services could later be used as schools or other community facilities. The following list includes administrative and communal services most often needed, the division is indicative only – the importance of maximum decentralization has already been stressed. Whether centralized or decentralized, administrative and other facilities should be located and designed so as they are accessible to women as well as men.

68. Services and facilities likely to be centralized are:

i. Site administrative office;
ii. Services coordination offices for health care, feeding programmes, water supply, education, etc.;
iii. Warehousing and storage;
iv. Initial registration/health screening area;
v. Tracing service;
vi. Therapeutic feeding centre (if required).

69. Services and facilities likely to be decentralized:

i. Bathing and washing areas;
ii. Supplementary feeding centres (if required);
iii. Education facilities;
iv. Institutional centres (e.g. for the disabled and unaccompanied children, if required);
v. Recreation areas;
vi. Commodity distribution centres.

70. The location of the centralized services will depend on the specific situation and in particular on the space available. Where sufficient space is available, there may be clear advantages in having the centralized services in the centre of the camp. Where space is scarce, it may be better to have the centralized services located near the entrance to the

camp. In particular, this will avoid the trucks delivering supplies having to drive through a densely populated site, with the attendant problems of dust, noise and danger to pedestrians. If some form of closed camp is unavoidable, at least the centralized administrative services will probably have to be located near the entrance. The warehouses should always be near the administrative office for reasons of security.

Shelter

- Refugee shelter must provide protection from the elements, space to live and store belongings, privacy and emotional security;
- Blankets and clothing must be provided if necessary;
- Refugee housing should be culturally and socially appropriate and familiar. Suitable local materials are best, if available;
- Shelter must be suitable for the different seasons;
- Except for tents in certain circumstances, prefabricated or special emergency shelter has not proved to be a practical option on either cost or cultural grounds;
- Wherever possible, refugees should build their own housing, with the necessary organizational and material support.

Introduction

71. Shelter must, at a minimum, provide protection from the elements, space to live and store belongings, privacy and emotional security. Shelter is likely to be one of the most important determinants of general living conditions and is often one of the largest items of non-recurring expenditure. While the basic need for shelter is similar in most emergencies, such considerations as the kind of housing needed, what materials and design are used, who constructs the housing and how long it must last will differ significantly in each situation.

72. Particularly in cold climates or where there are daily extremes of temperature, lack of adequate shelter and clothing can have a major adverse effect on health and nutritional status.

Thus, in addition to shelter, provision of sufficient blankets, appropriate clothing and heaters will be a high priority.

73. The first steps are to assess the adequacy of any emergency shelter arrangements refugees have already made themselves, and to meet immediate needs through provision of simple local materials.

The key to providing an adequate shelter is provision of a roof.

If materials for a complete shelter cannot be provided, provision of adequate roof materials will be the priority, as walls can usually be made of earth or other materials found on site or locally available.

74. Wherever possible, refugees should build or assist in building their own housing, with the necessary organizational and material support. This will help to ensure that the housing will meet their particular needs, will reduce their sense of dependence, and can cut costs considerably.

Type of Shelter

75. Individual family shelter should be always preferred to communal accommodation as it provides the necessary privacy, psychological comfort, emotional safety and a territorial claim for future security. It provides safety and security for people and possessions and helps to preserve or rebuild family unity.

76. Emergency shelter needs are best met by using the same materials or shelter as would be normally used by the refugees or the local population. Only if adequate quantities cannot be quickly obtained locally should emergency shelter material be brought into the country. The simplest structures, and labour-intensive building methods, are to be preferred. Materials should be environmentally benign or gathered in a sustainable manner.

Standards

77. At the beginning of an emergency, the aim should be to provide sufficient materials to the refugees to allow them to construct shelter meeting at least the minimum standards for floor space, which in emergencies are:

i. minimum of 3.5 m^2 per person in tropical, warm climates, excluding cooking facilities or kitchen (it is assumed that cooking will take place outside);
ii. 4.5 m^2 to 5.5 m^2 per person in cold climates or urban situations including the kitchen and bathing facilities.

78. The design of shelter should if possible provide for modification by the occupants to suit their individual needs. In cold climates, for

example, it is very likely that people, in particular children and old people, remain inside the shelter throughout the day, hence more space is required.

Plastic Sheeting

79. Plastic sheeting has become the most important shelter component in many relief operations. In urban areas roofs can be repaired with specialized UV-resistant heavy duty plastic sheeting. Windows can be repaired with translucent reinforced panels. Tents and emergency shelters can be covered with highly reflective UV-resistant woven plastic tarpaulins.

80. Wooden support-frames and stick skeletons for these shelters, if collected from surrounding forests, can harm the environment considerably. It is therefore important to always supply frame material (which is sufficient to support plastic). The frame material should come from sustained, renewable supply sources. Bamboo is ideal, if available. Standard specifications for plastic sheeting can be found in Annex 1 to chapter 18 on supplies and transport.

Tents

81. Tents may be useful and appropriate for example when local materials are either not available at all or are only seasonally available or for refugees of nomadic background. The life-span of an erected tent depends on the climate and the care given by its occupants; it may be as long as 2 to 3 years. Where tents are used, repair materials should be provided to the occupants. A group of tents may also serve as transit accommodation while more appropriate shelter is constructed. Standard specifications for tents can be found in Annex 1 to chapter 18 on supplies and transport.

82. Tents should be covered with an outer fly to shade and protect the tent below. The tent should provide free standing height all over the floor area. Tents are difficult to heat as canvas walls and roof cannot provide insulation against heat loss. However, it is possible to some extent to heat a good, well sealed tent, if enough heat is produced in a tent stove. This stove needs fuel (usually wood or kerosene) around the clock to maintain a comfortable temperature. The fuel cost will be high. Therefore tents are not suitable as cold climate shelters, but if there is no choice, they can save lives and bridge the time until more suitable shelters are established.

Prefabricated Shelters

83. Neither pre-fabricated building systems nor specially developed emergency shelter units, even winterized shelter units, have proved effective in large scale refugee emergencies. Reasons include:

i. High unit cost;

ii. Long shipping time;

iii. Long production time;

iv. Transport problems including cost of transport;

v. Inflexibility.

Usually emergency shelter arrangements will have been made before these systems can arrive.

Shelter for Cold Conditions

84. Climates where cold weather with rain and snow prevails over extended periods (3 to 5 months), demand that people live primarily inside a house. In particular, the more vulnerable persons such as the elderly, small children, the sick and the handicapped need heated, enclosed spaces.

85. Shelters which are sufficient to withstand cold conditions have to be of a high standard and are complex and expensive to build. The following should be considered:

i. Wind protection of walls, roofs, doors and windows;

ii. Insulated enclosed space, with simple dividers;

iii. Heating stoves;

iv. Structural stability (to withstand snow- and wind-loads);

v. Protected and heated kitchens and sanitary facilities.

86. To help people survive the impact of cold weather in an emergency, a strategy should focus on the following:

i. Individual survival.
It is extremely important to protect the human body from loss of heat. Particularly during sleep, it is important to be able to keep warm, by being able to generate and retain body heat with blankets, sleeping bags, clothing and shoes, and food with high calorific value;

ii. The living space.
It is very important to concentrate on a limited living space and to ensure that cold air

can be kept out of this space. This can be done by sealing the room with plastic sheeting and sealing tapes. Windows and doors should be covered with translucent plastic sheeting, stapled on window and door frames. Large rooms should be subdivided, with the help of plastic sheets or blankets. New structures should be constructed with a sealed space to keep the cold air out. Walls, ceilings and floors of the living space should be designed to insulate from cold air and to retain warm air as efficiently as possible;

iii. Heating.
Keeping the inside of a shelter at a, comfortable temperature (15 to 19° C) depends to a large extent on the outside temperature, the type of construction, the quality of insulation, the orientation of the building, and on the type and capacity of the stove. Depending on these conditions, a stove with 5 to 7 kW performance should have the capacity to heat a space of 40 to 70 m^2 in most cold areas. Usually the stove for heating is used for cooking and baking as well.

87. For reasons of safety, convection stoves are recommended over radiation stoves. Fuel efficiency is very important as fuel may not be readily available, and its supply can pose major logistical problems. Overlooking regular fuel supply in the beginning can have very negative environmental consequences.

Reception and Transit Camps

88. Reception and transit camps are used where it is necessary to provide temporary accommodation for refugees. These camps might be necessary at the beginning of a refugee emergency as a temporary accommodation pending transfer to a suitable, safe, longer term holding camp, or at the end of an operation, prior to repatriation, as a staging point for return. Reception and transit camps are therefore usually either intermediate or short term installations.

89. Whether the transit camp is used in an emergency or as part of a repatriation operation, the camp should be designed for short stays of 2 to 5 days and a high turnover rate.

90. The required capacity of a transit camp will depend primarily on how many people will be channelled through the camp and in what time. This will depend on the absorption or reintegration capacity at the receiving end as well as the total time foreseen to carry through the operation.

91. The primary criteria for site selection for a transit camp are:

i. Good access (road, port, airport);

ii. The availibility of water;

iii. Good drainage (minimum 2% slope);

iv. Adequate conditions for sanitation.

92. The transit camp must be strictly functional and equipped with considerably higher construction standards than regular refugee camps. Operational maintenance must be fully supplied through the camp management. In particular, cleaning and disinfection of accommodation and sanitation areas need to be carried out on a regular and ongoing basis. Prepared food should be provided and individual food preparation should be prohibited. The transit camp will therefore need kitchen facilities, wet food distribution and a hall for food consumption. In view of the expected short-term stay, a minimum of 3 m^2 per person is needed.

93. Standards for the construction of transit facilities are:

Accommodation: in barracks, long houses (open plan or subdivision for groups/families of 5 persons) heated in cold climates. For example, a tent of 85 m^2 can accommodate approximately 14 to 25 persons;

i. Sanitation: 20 persons per latrine, 50 persons per shower. Regular and intensive maintenance is required;

ii. Water supply: absolute minimum provision of 7 litres/person/day plus water required for kitchens, cleaning and sanitation;

iii. Food preparation: approximately 100 m^2 per 500 persons;

iv. Storage: 150 to 200 m^3 per 1,000 persons;

v. A public address system;

vi. Lighting;

vii. Arrival zones and departure zones which are separated from accommodation zones;

viii. Administrative offices and staff accommodation;

ix. One health post;

x. Security fencing (depending on circumstances).

Public Buildings and Communal Facilities

- Public buildings should be used only as short term accommodation to gain time to provide more suitable shelter;
- Right from the beginning, intensive maintenance of infrastructure and utilities should be provided;
- The UNHCR shelter standards should be applied.

94. Public buildings such as schools are sometimes used initially as shelter. This is particularly the case in cold conditions which demand very rapid shelter response.

95. Where possible such accommodation in public buildings should be a temporary solution. The supporting infrastructure of the building (water, electricity, sanitation) will deteriorate very quickly with concentrated use, to the extent that living conditions can become dangerously unhealthy. The buildings decay rapidly primarily because they are unsuited to such large numbers and lack the necessary infrastructure and utilities. In addition the very low sense of responsibility by its inhabitants contributes to the deterioration.

96. The normal use of the building has to be suspended with various social and economic consequences (the buildings might otherwise be used for example as schools, sanatoria, workers' or students' dormitories, sports halls and hotels). Both local and national governments are therefore reluctant to transform public buildings into humanitarian shelter.

97. In order to ensure a healthy environment, it is particularly important to ensure regular operational and preventive maintenance in public buildings. Neglecting to maintain a building from the outset can have serious health consequences for the refugees, and economic consequences for the host government.

98. The UNHCR minimum shelter standard of some 3.5 to 5.5 m^2 per person should be applied, as well as the standard for public sanitation (maximum 20 persons per toilet/-latrine). Public buildings, such as schools, are not equipped to serve the sanitation needs of large populations including basic toilet use, as well as personal hygiene such as laundry and cleaning dishes.

13

Commodity Distribution

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Situation

Emergency situations are characterized by an urgent need to distribute life sustaining commodities such as food, shelter materials, cooking implements and fuel. The fair distribution of commodities is often problematic and groups and individuals from among the refugees can use the confusion of the emergency to obtain unfair control over the resources which are distributed.

Objectives

To provide life-sustaining commodities to the refugee families, fairly, according to specified rations, selection criteria and priorities.

Principles of response

- The design of the distribution system should be based on a thorough understanding of the social structure of the refugees;
- The refugees should be kept continuously informed on the design of the distribution system, on the timing of distributions and on the quantity of commodities to be distributed;
- All groups among the refugees should be appropriately involved in the design and operation of the distribution system. Particular care must be taken to involve women;
- The family as the basic social unit plays the key role in meeting basic needs of individuals, therefore, the family unit should be the target of commodity distribution;
- The commodity distribution cycle should be regular and predictable. Irregularities in the distribution cycle increases the tendency of the refugees to circumvent the system.

Action

- Use community services structures (or set up new structures if necessary) to consult the refugees on the design and operation of the commodity distribution system;
- Select and implement a commodity distribution system;
- Set up a system by which information on the operation of the commodity distribution system can be regularly conveyed to the mass of the refugees;
- Allow the refugees themselves to monitor the fairness of the distribution system.

Introduction

- Distribution passes control over a commodity to the intended beneficiaries. Distribution must be fair, and commodities must be distributed according to specified rations, selection criteria and priorities;
- Distribution must be monitored to ensure that it is fair and reaches vulnerable groups;
- However ingenious the distribution system devised, it is unlikely to work fairly without the support of the refugees themselves;
- UNHCR's distribution systems should provide material assistance to and through families.

1. The principles in the chapter apply to the distribution of both food and non-food items, although food often forms the bulk of the commodities distributed. This chapter provides brief guidance on the subject. The handbook "Commodity Distribution: A Practical Guide For Field Staff" is essential reading for those who plan to set up and run a commodity distribution system (see Key References at the end of the chapter).

When to start distribution

2. There is usually a degree of uncertainty when planning distributions. Ideally, distribution of commodities should start only after a full needs assessment has taken place and when the size of the beneficiary population is accurately known. However, the reality of almost all emergency programmes is that distributions must start prior to these ideal conditions being reached. Try not to start distribution until there is at least a minimum framework in place to build upon, and a plan as to how subsequent distributions will be improved.

Choosing a Commodity Distribution System

3. Two basic issues are:

i. How much responsibility should be given to the refugees themselves; and,

ii. What resources are available to set up and run the system (including time, space, experienced staff as well as financial resources (see Table 1).

4. There are three broad categories of distribution system (see Table 1). Note that the head of family can either be a woman or a man.

Distribution systems can be classified according to who receives the commodities.

5. There will probably be a period in the early stages of an emergency when it will not be possible to register or issue ration cards. However, effective distribution of commodities is possible without ration cards.

Table 1 – Commodity Distribution Systems

Through Group Leadership	Through Groups of Heads of Family	Through Individual Heads of Family
System Description		
Commodities are given in bulk to a representative of a large group of beneficiaries who further divides it among the group.	All of the commodities for the group of families are handed over to a representative of the group. The group usually consists of about 20 heads of family. The commodities are then immediately redistributed to the individual family heads by the representatives.	Commodities are handed over directly to each family head.
Types of situation in which these systems have been used		
◆ Early days of an emergency. ◆ Mass influx of refugees. ◆ No formal registration. ◆ Large populations.	◆ When the population is comparatively stable, and/or have ration cards. ◆ Where the beneficiaries are living in camps. ◆ Where the population is comparatively homogeneous.	◆ When the population is comparatively stable, and/or have ration cards. ◆ Where the beneficiaries are living in camps, settlements or integrated within the local population.
➤➤➤➤➤ Amount of resources needed increases ➤➤➤➤➤ ◄◄◄◄◄ Degree of self regulation by refugees increases ◄◄◄◄◄		

Components of Distribution Systems

General Considerations

6. The ideal distribution system should be safe and easily accessible to the intended beneficiaries.

- ❏ Safe: Distribution should be organized in such a way that the system is safe for all who use it. Particular attention should be given to women and the vulnerable;
- ❏ Accessible: Distribution points should be close to where people live and located so that the access of particular groups is not restricted. The timing of distributions should suit the beneficiaries.

7. The refugees themselves can provide the most effective monitoring and control of the distribution system. In order to do this they must be informed as to the type and quantity of commodities to be distributed and method and timing to be used.

A system needs to be put in place whereby the refugees can be continuously informed of changes in the quantity, type or method of distributions.

8. In the early stages of a new operation, particularly in large emergencies, effective control over distribution may not be possible. However, from the start, each action taken should contribute to a process whereby control by UNHCR is progressively established. For example the provision of plastic sheeting, tents and other shelter material is very important because it reduces the mobility of the population. Once it is issued, the population can settle and commodity distribution and other services will be easier to organize.

Refugee Involvement

9. Ensure the refugees are well informed (both women and men). They must know what they should receive, how much, when and how. This information should come to them directly rather than through their leadership.

The refugees should be able to see the distribution process for themselves as they are the best monitors and controllers of the process.

Ensure that the refugees participate at all levels of the distribution process. However, be aware of the dangers of non-representational leadership (see chapter 7 on coordination and site level organisation).

10. Irregularities in the distribution cycle undermine the confidence of the beneficiaries and increase their need to circumvent the system.

Logistical Considerations

11. In camps, the distribution system should allow beneficiaries to collect rations close to where they live (not more than 5 km away) and at regular monthly intervals. For dispersed populations refugees should not have to travel more than 5 to 10 km to distribution sites.

12. In the case of food distribution, it is usually preferable to distribute dry uncooked rations in bulk. Avoid mass cooked food distribution for the general ration (see chapter 15 on food and nutrition).

Managerial Considerations

13. Distributing relief commodities involves several organizations and many individuals, for example, the government, WFP and NGOs. Co-ordination structures must be put in place, including regular meetings of all interested parties. The frequency of these meetings will depend on the situation. At the start of an emergency daily meetings will probably be needed. As the situation normalizes the frequency of meetings can be reduced to one per month.

14. It is important to understand the roles and responsibilities of the main actors involved at various stages of commodity distribution. In the case of food distribution the modalities of distribution as well as the reporting requirements are set out in a tripartite agreement between UNHCR, WFP and the implementing partner. The respective roles of UNHCR and WFP in relation to food aid are set out in their Memorandum of Understanding (Appendix 3). See Chapter 15 on food and nutrition for more information on food distribution and on of the role of WFP.

15. The family, as a basic social unit, is the target of distribution. This applies to food and non-food items. Providing assistance to and through families is effective as the basis for the distribution system and also supports the family unit. However this does not mean that the ration has to be handed to each family directly. In some situations distribution can be more effective through groups of families or other community structures.

16. Avoid payment in kind to distribution workers. It makes monitoring difficult and, in

times of shortages, vulnerable people may be deprived of commodities in order to pay staff.

17. In camps, aim to have at least 1 distribution site per 20,000 refugees.

18. Plan to have a minimum of 2 distribution staff per 1,000 beneficiaries.

The Role of Refugee Women

UNHCR Policy

19. UNHCR's policy is to ensure the maximum possible appropriate involvement of refugee women in all aspects of distribution. Determining the nature of this involvement requires consultation with refugee women and men and a careful evaluation of the totality of the needs and responsibilities of refugee women and their families. Failure to take these considerations into proper account can have negative implications that go well beyond the distribution system itself.

20. In the great majority of refugee communities, the objective of fair distribution will be best served by having an appropriate balance of men and women. However, it is normally women, and in particular single female heads of household, who are either under-represented or excluded.

Areas of Women's Involvement

21. There are three areas where refugee women can be involved:

- ❏ In the decision-making processes and monitoring;
- ❏ In the distribution itself (women supervise and/or hand out the commodities); and,
- ❏ In collecting the commodities (where they are distributed to women not men).

22. Women must be directly involved in decision-making and monitoring, including being involved in planning the system and determining their own participation in its implementation. Women should be members of the commodity distribution or food committees.

23. Women should choose representatives who will be involved in the distribution itself. The extent and nature of this participation will depend on factors specific to that situation.

24. If women themselves feel that the most effective way to ensure that they receive their fair share and to retain control of its use thereafter, is by actually collecting, or at least being present at the distribution of food and non-food items for their household (whether or not they are its head), this should be ensured.

Monitoring

25. Monitoring the distribution system is an important management responsibility of UNHCR. General principles of monitoring are described in chapter 8 on implementing arrangements. Monitoring distribution includes monitoring the actual distribution of the commodity and spot checks in the camps on distribution days. See chapter 15 on food and nutrition, and "Commodity Distribution: A Practical Guide For Field Staff", for more details about monitoring distribution systems.

Key References

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14

Health

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Situation

It is well known from experience that emergencies result in excess loss of life (high mortality) and increased incidence of diseases (high morbidity). The diseases mainly responsible for high mortality and morbidity are measles, diarrhoeal diseases (including cholera), acute respiratory infections (pneumonia), malnutrition and malaria. The factors which increase the risk of disease and which should be addressed in any emergency response include an unfamiliar environment, poverty, insecurity, overcrowding, inadequate quantities and quality of water, poor environmental sanitation, inadequate shelter and inadequate food supply.

Objectives

- To promote the enjoyment of the highest attainable standards of physical and mental health[1], and to prevent excess mortality and morbidity.

Principles of Response

- Priority should be given to a Primary Health Care (PHC) strategy focusing on the vital sectors of water, food, sanitation, shelter and physical planning. In addition, preventive and basic curative health services should be provided. The health of the majority of the refugees is more likely to be affected by these measures than by individual care;
- Refugee participation in the development and provision of health services is essential;
- Services provided for refugees should be at a level equivalent to that appropriate to host country nationals – i.e. there must be *parity*;
- The health programme should also be *sustainable*. It is sometimes better not to start activities which cannot be maintained, than to cease supporting activities which both implementing partners and beneficiaries have come to take for granted;
- The health services must be of a quality that ensures that programmes, providers and institutions respect patients' rights and comply with nationally and internationally accepted health standards and principles of medical ethics;
- Many countries will not have sufficient human and material resources to respond adequately to the extraordinary needs generated by an emergency. Experienced national and international NGOs should be mobilized to initiate urgent life saving measures. Rapid integration with the Ministry of Health (MOH) is essential;
- Health services should take into account the particular vulnerability of children under five years during emergencies. Priority should be given to immunizations, feeding programmes, oral rehydration therapy, Vitamin A prophylaxis, basic curative care and family health;
- Health services should also take into account the special needs of women who play a central role as primary health care providers and at the same time bear a disproportionate share of suffering and hardship;
- A UNHCR Health Coordinator should be appointed with responsibility for the health programme and for ensuring that nationally and internationally accepted standards and best practice are adhered to, in close coordination with the national health authorities and other organizations.

Action

- Assess the health and nutritional status of the population and identify the critical health risk factors in the environmental conditions;
- Establish priority needs, define the required activities to meet those needs and determine the required human, material and financial resources to perform these activities;
- In accordance with these activities, set up community-based health services and devise the appropriate organizational and coordination mechanisms both with the health partners and the other relevant sectors of assistance;
- Promote basic health education for the refugees and train refugee health workers;
- Monitor and evaluate the effectiveness of the services and adjust as necessary;
- Ensure that decisions about the health services are based on proper assessment and surveillance;
- Communicate information about the emergency situation and the health services for advocacy purposes.

[1] *International Covenant on Economic, Social and Cultural rights", 1996, Article 12.*

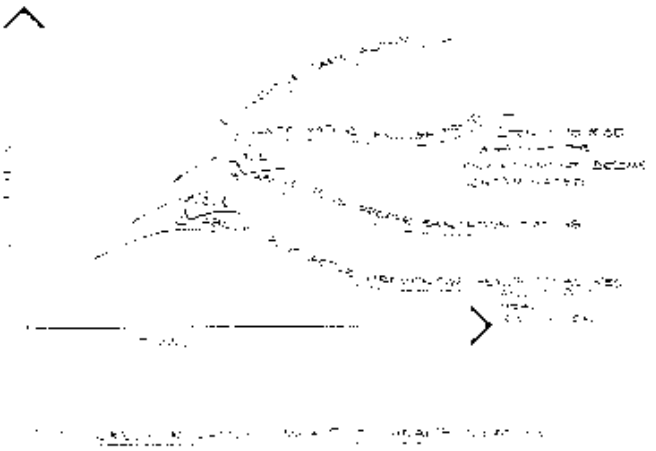
Introduction

1. Good health, depending as it does on so many non-medical factors, is too big a subject to be left only to medical workers. This chapter is directed at non-specialist staff in the field. It does not pretend to give "medical answers" to health problems. It does however seek to show that proper assessment of problems, needs and resources, appropriate organization and coordination of public health and medical services based on a Primary Health Care (PHC) strategy are more important to the overall health status of refugees than curative medicine alone, see figure 1. These crucial organizational factors are often the responsibility of non-medical UNHCR staff.

their full participation; health care provided at a cost the community and the country can afford. Though no single model is applicable everywhere, Primary Health Care should include the following: promotion of proper nutrition, an adequate supply of safe water, basic sanitation, reproductive and child care, including family planning, appropriate treatment for common diseases and injuries, immunization against major infectious diseases, prevention and control of locally endemic diseases, education about common health problems and what can be done to prevent and control them".

At the heart of such a strategy there is an emphasis on preventive, as against curative care alone.

Figure 1



2. In an emergency, many refugees will be exposed to insecurity, poor shelter, overcrowding, lack of sufficient safe water, inadequate sanitation, inadequate or inappropriate food supplies and a possible lack of immunity to the diseases of the new environment. Furthermore, on arrival, refugees may already be in a debilitated state from disease, malnutrition, hunger, fatigue, harassment, physical violence and grief. Poverty, powerlessness and social instability, conditions that often prevail for refugees, can also contribute to increased sexual violence and spread of sexually transmitted diseases including the Human Immuno-deficiency Virus (HIV).

3. The World Health Organization (WHO) has summarized the concept of Primary Health Care as follows: "PHC is essential health care made accessible to everyone in the country; it is given in a way acceptable to individuals, families, and the community, since it requires

Health Assessment, Planning, Monitoring and Surveillance

- An assessment of the health and nutritional status is an essential start to the provision of health services;
- This must be done by experts with experience of emergencies and, if possible, local knowledge;
- The factors affecting the health of the refugees must be identified and a surveillance and reporting system established.

Initial Assessment

4. First, information should be obtained on the number of refugees[2] segregated by age (percentage of children under five years of age) and sex (male/female ratio). See chapter 11 on

[2] *Health experts sometimes call this number "the denominator".*

registration for more information on estimating the total number of refugees.

Age/sex breakdown can be estimated from:

i. Information collected during surveys;

ii. Information collected during mass immunization campaigns;

iii. Mass health screening on arrival;

iv. Information collected by community health workers.

5. The aim of the initial health assessment is to identify basic problems and needs and to establish priorities. It should be carried out by people with appropriate qualifications and relevant experience. There are obvious advantages in using national or locally-based personnel, but appropriate outside expertise can be made available quickly and should be requested through the Health and Community Development Section at Headquarters if necessary.

6. The priority should be to evaluate the incidence of the major causes of excess mortality and morbidity – measles, diarrhoeas, pneumonia, malaria and malnutrition.

7. Relevant information can be obtained from:

i. Direct observation;

ii. Reviewing baseline information regarding the country/areas of origin and asylum;

iii. Analyzing records at health facilities and interviewing health workers;

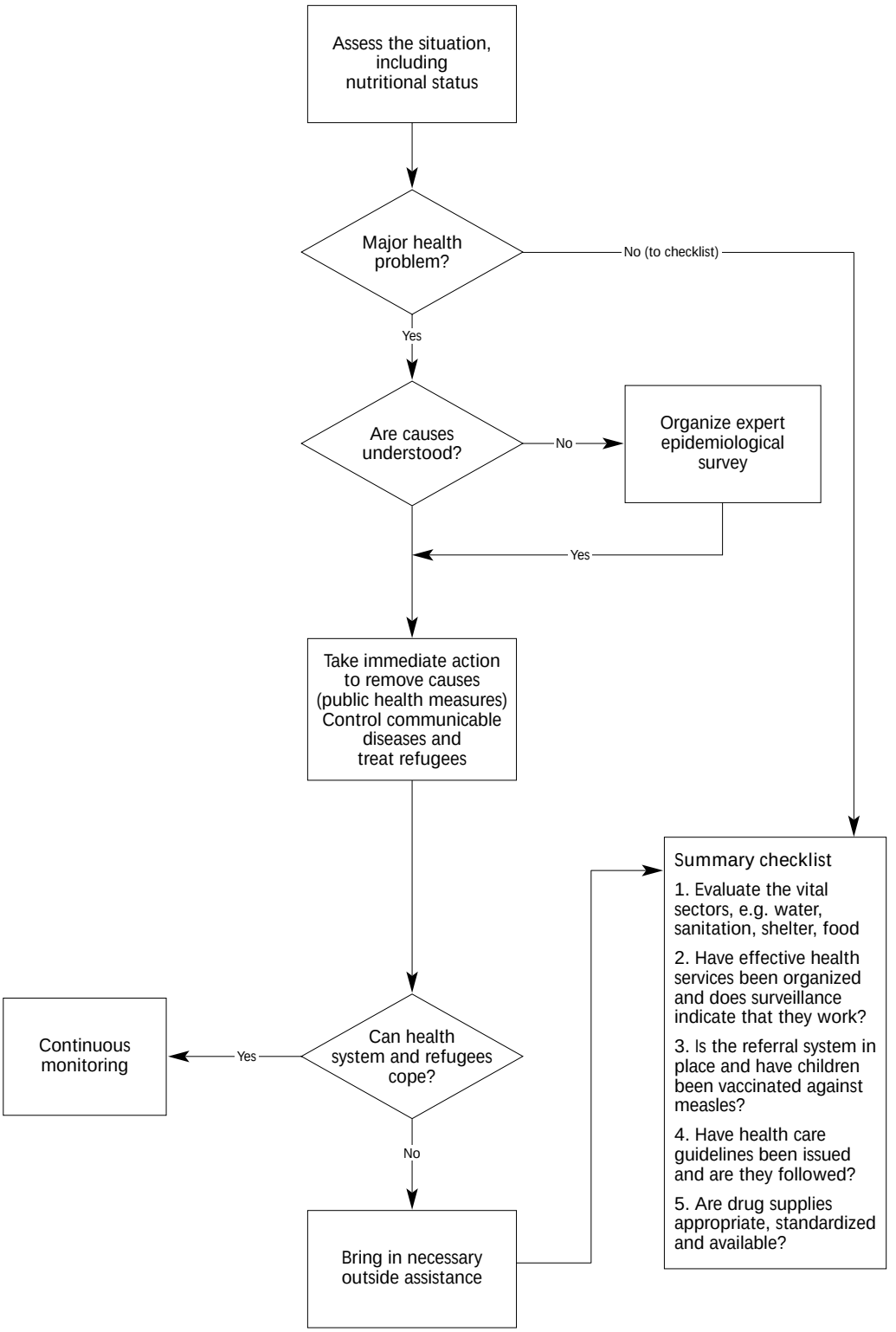
iv. Undertaking sample surveys (nutrition and mortality). These must be done by experts;

v. Population estimation and registration (see chapter 11 on population estimation and registration);

vi. Mass health and nutrition screening on arrival. This should focus on: (i) nutrition screening through visual inspection and measurement of the Mid Upper Arm Circumference ("MUAC"), (see chapter 15 on food and nutrition), (ii) checking for communicable diseases and vaccination coverage, and (iii) identifying patients in need of urgent referral. It is usually impractical to try to provide treatment in the screening line itself.

8. Figure 2 illustrates key management considerations for action in light of the initial assessment.

Figure 2 – Assessment and Response



Monitoring and Surveillance: The Health Information System

9. From the earliest stages of an emergency, a health information system should be put in place under the responsibility of the UNHCR Health Coordinator. The health information system should be simple, reliable, and action oriented, and its use will be essential to:

i. Quantify the health and nutritional status of the refugee population;

ii. Follow trends in health status and monitor the impact and outcomes of the relief programme;

iii. Detect epidemics;

iv. Evaluate programme effectiveness and service coverage;

v. Ensure that resources are targeted to the areas of greatest needs;

vi. Re-orient the programme as necessary.

10. Annex 1 sets out the tables and forms for collecting health-related information. However, to have a more comprehensive idea of the situation, information regarding water, food, sanitation, shelter and availability of soap should also be collected and analyzed (see the relevant chapters on water, nutrition, sanitation, and physical planning).

11. The health information system should be kept simple. The information to be collected should be adapted to suit the collectors' qualifications. Overly detailed or complex reporting requirements will result in non-compliance. In addition, only data that can and will be acted on should be collected. Communication and exchange of views among all the actors in the health information system are essential to secure the functioning of the system.

Only simple arrangements are effective in emergencies.

12. Health information in the initial stages of an emergency should concentrate on:

i. Demography (see chapter 11 on registration, also paragraph 4 above, and table 1 of Annex 1);

ii. Mortality and its causes (see tables 2.1 and 2.2 of Annex 1 and paragraph 14 below);

iii. Nutritional status (see Annexes 4 and 5 of chapter 15 on food and nutrition);

iv. Morbidity (see below, and table 3.1 of Annex 1).

13. Only when the situation stabilizes can the system be made more comprehensive. Information on mortality and morbidity should be collected as follows:

Mortality

14. Each health facility should keep a log of all patient deaths with cause of death and relevant demographic information. This information should be summarized in tables 2.1 and 2.2 of Annex 1, reported centrally and consolidated with other data. Because many deaths occur outside the health-care system, a community-based mortality surveillance system should also be established. Such a system requires identifying sites which people are using as cemeteries, employing grave watchers on a 24 hours basis, routinely issuing burial shrouds, and using community informants. Deaths that occur outside hospitals with unknown causes should be validated through verbal autopsy by health workers specifically trained for this task.

Morbidity

15. Each health facility providing out-patient services (including clinics for under five's and selective feeding programmes) should keep daily records. These records should be in the form of a log book or tally sheets at least, and should at least record the patient's name, age, sex, clinical and laboratory diagnosis and treatment. This information should be summarized in the forms set out as tables 3.1. in Annex 1 and reported centrally.

16. Diseases recorded in the health information system must have a case definition (i.e. a standard description) which will guide health workers in their diagnosis and ensure the consistency and validity of data. Where possible, case definitions that rely on clinical signs and symptoms (e.g. malaria) should be checked against a laboratory standard test (e.g. blood test for malaria).

17. In addition, the patient should be issued a health record card (or "Road to Health" card) on which the date, diagnosis, and treatment are recorded. Every contact a patient has with the health-care system, whether for curative or preventive services, should be noted on the health record card retained by the patient.

18. The health information system should be periodically assessed to determine its accuracy, completeness, simplicity, flexibility, and timeliness. The way programme planners and key

decision-makers use the information should also be assessed. The system should evolve as the need for information changes.

19. Camp and centrally controlled monitoring of health and nutritional status is essential if problems are to be identified in time to allow preventive and/or corrective actions to be taken and to adjust resource allocation. The refugees' health status should improve as public health services start to function adequately and the refugees adjust to their new environment.

20. However, a vigilant surveillance system must be maintained. Seasonal changes will affect health (for example temperature changes, and especially the rainy season) so seasonal variations in the incidence of disease will remain. The UNHCR Health Coordinator and her/his counterparts in the government and other partners will be responsible for the quality of this surveillance, the data required, who will interpret it and how to ensure action on the results and feed-back to all actors.

Mortality

21. The most important and specific indicators of the overall status of the refugee population are the Crude Mortality Rate (CMR), for the whole population and Under-5 Mortality Rate (U-5MR) for children under five years of age. These indicators are of crucial importance to managers of the operation and are also of great interest to the media, donors and relief agencies. A priority for the health surveillance system is to produce reliable information on death rates.

22. During the emergency phase, mortality rates should be expressed as deaths/10,000 persons/day so that sudden changes can be detected.

Crude Mortality Rate is deaths/10,000/day.
This is calculated as follows:

$$\frac{\text{Number of deaths} \times 10{,}000}{\text{Number of days} \times \text{total population}}$$

23. The objective of the overall assistance programme in the emergency phase should be to achieve CMR of <1/10,000/day and U-5MR of <2/10,000/day as soon as possible. These rates still represent approximately twice the "normal" CMR and U-5MR for non-displaced populations in most developing nations and should not signal a relaxation of efforts.

24. Age and sex-specific mortality rates have to be collected systematically and may indicate the need for targeted interventions. Table 1 below shows some benchmarks against which the daily Crude Mortality Rate (CMR) can be compared. Under-5 Mortality Rate benchmarks are usually twice the CMR.

Table 1 – Crude Mortality Rate Benchmarks

Average rate in most developing countries	0.5 deaths/10,000/day
Relief programme: under control	<1.0 deaths/10,000/day
Relief programme: very serious situation	>1.0 deaths/10,000/day
Emergency: out of control	>2.0 deaths/10,000/day
Major catastrophe	>5.0 deaths/10,000/day

Morbidity (incidence and types of disease)

25. Knowing the major causes of illness and the groups at greatest risk helps efficient planning of intervention strategies and the most effective use of resources. Morbidity incidence is the number of new cases of a given disease among the population over a certain period of time, usually expressed per 1,000. It is more useful to follow this than to keep a simple tally of cases, as trends can be followed over time, or compared with other situations. Morbidity incidence should be recorded as set out in Tables 3.1 and 3.2 in Annex 1.

Main Health Programmes

- The main causes of death and diseases in emergency situations are measles, diarrhoeas (including cholera), acute respiratory infections, malnutrition and malaria (where prevalent). Priority should be placed on programmes to reduce the negative impact of these diseases;
- Other causes of morbidity include tuberculosis, meningitis, vector-borne diseases, sexually transmitted diseases including HIV/AIDS, pregnancy and obstetric[3] complications, and childhood vaccine-preventable diseases;

[3] *Obstetrics: the branch of medicine concerned with childbirth and the treatment of women before and after childbirth.*

- The emotional stress of displacement, often compounded by harassment, violence and grief suffered by the refugees will combine to deplete their physical and emotional reserves and reduce their natural resistance to diseases;
- Experience underlines the importance of meeting the reproductive health needs of refugees, and most particularly of women and adolescents;
- Early emphasis should be placed on correcting environmental factors which adversely affect health.

Curative care

26. The peak of curative medical care is at the early stage, when refugees are most vulnerable to their new environment with the health hazards it poses and before it has been possible to achieve any major public health improvements. Even though curative care alone will not meet the objective of reducing excess loss of lives, it will create confidence among the refugees towards the health services.

27. Appropriate diagnosis and treatment protocols of major diseases must be defined in accordance with national protocols, if they are suitable to the refugee context. There may be some exceptions to this rule, but implementation of refugee specific protocols should always be previously agreed upon with national authorities.

28. Remember to take into account deaths occurring outside the health care system. A commonly documented error, committed by even excellent clinicians who have become absorbed in a health facility, is to fail to notice that cemeteries are being filled by refugees dying in their shelters, without having been identified or referred to receive appropriate curative services.

Immunization

29. Measles has been documented as being responsible for excess loss of lives, particularly but not exclusively among children under five years of age.

Immunization against measles for young children is the only essential immunization in the early stages of an emergency.

UNHCR advocates the immunization of children from 6 months up to 12 or even 15 years (rather than the more usual 5 years) because of the increased risks from the living conditions in refugee emergencies.

30. The decision as to whether or not to undertake a measles vaccination campaign at the onset of an emergency should be the responsibility of an expert. The campaign should ideally be associated with, but not delayed by, distribution of Vitamin A. The decision will be based on the vaccination coverage reported in the country and area of origin and its reliability, and whether there has been a recent epidemic or vaccination campaign. If there is a need for a measles vaccination campaign, it should not be delayed until other vaccines are available, and it should have appropriate mechanisms to ensure new arrivals are vaccinated. The provision of vaccines should be discussed with UNICEF (see the MOU between UNICEF and UNHCR, Appendix 3).

31. There are strong reasons, both medical and organizational, not to have a mass immunization programme with all vaccines. The most common causes of disease and death in the emergency phase cannot be cured or prevented by immunizations (except measles). Mass immunization programmes require a large number of workers, and vaccines need careful handling and controlled, refrigerated conditions. Therefore undertaking such a campaign may represent a misuse of time and resources in an emergency.

32. As soon as the emergency has stabilized there should be a complete Expanded Programme of Immunization (EPI), which should form an integral part of the ongoing long-term health programme. A standard EPI includes diphtheria, pertusis and tetanus toxoid (DPT), oral polio (OPV), and BCG (Bacille Calmette-Guerin) vaccines as well as measles. However, there should not be a vaccination campaign against any of these (apart from measles), nor should there be a complete EPI, unless the following criteria are met: the population is expected to remain stable for at least 3 months; the operational capacity to administer vaccine is adequate, and the programme can be integrated into the national immunization programme within a reasonable length of time (see the MOU between UNICEF and UNHCR, Appendix 3).

33. It is essential that adequate immunization records be kept. At the very minimum, personal immunization (or "Road to Health")

cards should be issued. In addition, an independent central register of all immunizations is desirable, to enable analysis of vaccination coverage.

Communicable Disease Control

- Emergency conditions, particularly overcrowding, poor sanitation etc. will facilitate the spread of communicable diseases;
- The aim is to prevent, detect, control and treat diseases;
- Refugees are at greatest risk if they are exposed to a disease against which they have not acquired immunity (e.g. measles, malaria etc.);
- Communicable disease outbreaks require an immediate on-the-spot expert investigation and close coordination of the response with the national authorities, WHO and partners as appropriate.

34. The main causes of death and morbidity among refugees in emergencies are:

i. Measles,
ii. Diarrhoeal diseases,
iii. Acute respiratory infections,
iv. Malaria (where prevalent).

Moreover, the interaction between malnutrition and infection, particularly among young children, contributes to increased rates of mortality.

Other communicable diseases – meningococcal meningitis[4], tuberculosis, sexually transmitted diseases (STDs), hepatitis, typhoid fever, typhus and relapsing fever – have also been observed among refugee populations. However, the contribution of these illnesses to the overall burden of disease among refugees has been relatively small.

Diarrhoeal Diseases

35. Diarrhoeal diseases represent a major public health problem and acute epidemics of shigellosis (causing bloody diarrhoea dysentery) and cholera, have become common in refugee emergencies and have resulted in excess loss of lives. In risk areas, it is essential to set up appropriate preventive measures as soon as possible. These measures include:

i. Adequate supply of potable water and an appropriate sanitation system;
ii. Provision of soap and education on personal hygiene and water management;
iii. Promotion of food safety and breast-feeding;
iv. Reinforced home visiting and early case detection;
v. Identification of an area ("cholera management unit") to manage patients with cholera in case an epidemic occurs.

36. It is not possible to predict how a cholera outbreak will develop. If proper preventive measures are taken less than 1% of the population should be affected. Usually however, 1 to 3% are affected but in extreme cases it can be more – even as much as 10%.

37. To be prepared to respond quickly to an outbreak, the above preventive measures should be accompanied by the establishment of appropriate protocols on case management. These protocols should be based on National or WHO protocols and should be founded on rehydration therapy, continued feeding and appropriate antibiotics (especially for shigellosis[5]). In addition, there should be a reliable surveillance system for early detection of cholera cases, to follow trends and determine the effectiveness of specific interventions.

38. A significant amount of material, financial and experienced human resources are likely to be needed to respond to a cholera outbreak and reduce the case fatality rate.

39. To facilitate an immediate response, cholera kits can be obtained from the Supply and Transport Section at Headquarters at short notice. Each kit can cover the overall management of some 500 cases. No efficient vaccine to prevent cholera outbreaks is as yet available.

Measles

40. WHO has classified refugees and displaced populations, especially in camps, as groups at highest risk for measles outbreaks. Indeed, this disease has been devastating in many refugee situations. Measles vaccination coverage should be as close as possible to 100%, if not, measures should be taken immediately to control the situation (see the MOU between UNICEF and UNHCR, Appendix 3, and paragraphs on immunization above).

[4] *See World Health Organization. Control of Epidemic Meningococcal Disease: WHO Practical Guidelines, 1995.*

[5] *See World Health Organization. Guidelines for the control of Epidemics due to Shigella Dysenteriae Type 1, 1995.*

Malaria

41. Malaria can also pose major problems. Its appropriate management and control is also a matter for experts and is based on the following:

i. Early case detection and appropriate treatment. It may be necessary to study drug resistance;

ii. Preventative treatment (chemoprophylaxis) particularly for pregnant women;

iii. Elimination of vector breeding sites;

iv. Vector control, including the distribution of insecticide-impregnated mosquito nets and periodic spraying, as indicated.

42. Chemical control measures such as spraying, or impregnated mosquito nets, may seem quite attractive but should only be taken upon expert advice as several factors must be considered such as: the habits of the refugees, seasonal variations, mosquito biting habits, transmission levels, national protocols about chemicals and registered lists of chemicals, and cost. Please see chapter 17 on environmental sanitation for guidance on vector control.

Acute Respiratory Infections

43. Pneumonia is the acute respiratory infection that has been documented as a cause for excess mortality, most particularly in the under five population. It is therefore essential to make sure that refugees are provided with adequate shelter and blankets as soon as possible. Health staff must be appropriately trained to diagnose and treat respiratory infections.

44. The more common diseases are outlined in table 2 below which illustrates the environmental impact on disease and indicates those improvements in living conditions which will bear directly on the health of the refugees.

Table 2 – Common diseases

Disease	Major contributing factors	Preventive measures
Diarrhoeal diseases	Overcrowding, contamination of water and food Lack of hygiene	• adequate living space • public health education • distribution of soap • good personal and food hygiene • safe water supply and sanitation
Measles	Overcrowding Low vaccination coverage	• minimum living space standards as defined in chapter 12 on site planning • immunization of children with distribution of vitamin A. Immunization from 6 months up to 12-15 years (rather than the more usual 5 years) is recommended because of the increased risks from living conditions
Acute respiratory infections	Poor housing Lack of blankets and clothing Smoke in living area	• minimum living space standards and • proper shelter, adequate clothing, sufficient blankets
Malaria	New environment with a strain to which the refugees are not immune Stagnant water which becomes a breeding area for mosquitoes	• destroying mosquito breeding places, larvae and adult mosquitoes by spraying. However the success of vector control is dependent on particular mosquito habits and local experts must be consulted • provision of mosquito nets • drug prophylaxis (e.g. pregnant women according to national protocols)
Meningococcal meningitis	Overcrowding in areas where disease is endemic (often has local seasonal pattern)	• minimum living space standards • immunization only after expert advice when surveys suggest necessity
Tuberculosis	Overcrowding Malnutrition High HIV prevalence	• minimum living space standards (but where it is endemic it will remain a problem) • immunization
Typhoid	Overcrowding Poor personal hygiene Contaminated water supply Inadequate sanitation	• minimum living space standards • safe water, proper sanitation • good personal, food and public hygiene and public health education WHO does not recommend vaccination as it offers only low, short-term individual protection and little or no protection against the spread of the disease
Worms especially hookworms	Overcrowding Poor sanitation	• minimum living space standards • proper sanitation, good personal hygiene • wearing shoes
Scabies[6]	Overcrowding Poor personal hygiene	• minimum living space standards • enough water and soap for washing
Xerophthalmia Vitamin A deficiency	Inadequate diet Following acute prolonged infections, measles and diarrhoea	• adequate dietary intake of vitamin A. If not available, provide vitamin A fortified food. If this is not possible, vitamin A supplements • immunization against measles. Systematic prophylaxis for children, every 4 - 6 months
Anaemia	Malaria, hookworm, poor absorption or insufficient intake of iron and folate	• prevention/treatment of contributory disease • correction of diet including food fortification
Tetanus	Injuries to unimmunized population Poor obstetrical practice causes neo-natal tetanus	• good first aid • immunization of pregnant women and subsequent general immunization within EPI • training of midwives and clean ligatures, scissors, razors, etc.
Hepatitis	Lack of hygiene Contamination of food and water	• safe water supply • effective sanitation • safe blood transfusions
STD's/HIV	Loss of social organization Poor transfusion practices Lack of information	• test syphilis during pregnancy • test all blood before transfusion • ensure adherence to universal precautions • health education • availability of condoms • treat partners

[6] *Scabies: skin disease caused by burrowing mites*

Reproductive Health[7]

45. Reproductive health care in refugee situations should be provided by adequately trained and supervised staff and should be guided by the following principle:

Reproductive health care should be available in all situations and be based on refugee, particularly women's, needs and expressed demands. The various religious, ethical values and cultural backgrounds of the refugees should be respected, in conformity with universally recognized international human rights.

46. The provision of quality reproductive health services requires a collaborative effort by a number of sectors (health, community services, protection, education) and organizations, which should provide reproductive health services based on their mandates.

47. While resources should not be diverted from addressing the problems of the major killers (measles, diarrhoeal diseases, acute respiratory infections and malaria), there are some aspects of reproductive health which must also be dealt with in the initial phase of an emergency. The major objectives of reproductive health care in an emergency are to:

i. Prevent and manage the consequences of sexual violence;

ii. Decrease HIV transmission by respecting universal precautions[8] and guaranteeing the availability of free condoms;

iii. Prevent excess neonatal and maternal morbidity and mortality by providing clean home delivery kits, ensuring clean and safe deliveries at health facilities and managing emergency obstetric complications by establishing a referral system;

iv. Plan for provision of comprehensive reproductive health services, integrated into Primary Health Care, as soon as possible;

v. Identify a person responsible to coordinate reproductive health activities under the responsibility of the overall health coordinator.

48. As soon as feasible, when the situation has stabilized, comprehensive reproductive health services based on the needs of refugees should be put in place. These services should be integrated within the primary health care system and should address the following aspects:

Safe Motherhood

49. This should cover antenatal care, delivery care and postnatal care. All pregnant women should receive antenatal care services during pregnancy. All deliveries should be accompanied by a trained health care provider. A referral system to manage obstetric emergencies should be put in place. Within the first 4-6 weeks, mothers and their new babies should visit the health services and receive nutritional supplements, counselling on child spacing, and education about breast-feeding and infant care.

Prevention and Response to Sexual Violence

Please refer to chapter 10 on community services.

Sexually Transmitted Diseases including HIV/AIDS[9]

50. Experience shows that HIV spreads fastest in conditions of poverty and social instability – conditions which typify refugee emergencies. The priority should be on preventing HIV transmission: ensure there is respect for universal precautions and work closely with the community to promote HIV prevention strategies including condom education and distribution. Where blood transfusions are provided, ensure they are safe. Treatment of sexually transmitted diseases should be a routine part of the health services and should include appropriate follow up of partners.

Mandatory HIV testing in refugee circumstances, with the single exception of testing blood for transfusion, is not justified, and WHO has determined that, as a matter of policy, such testing should not be pursued.

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[7] *See: United Nations High Commissioner for Refugees. An Inter-agency Field Manual on Reproductive Health in Refugee Situations, 1995.*
UNFPA have developed a set of reproductive health kits which can be used as part of a programme to deal with reproductive health problems and the Health and Nutrition Unit or the Supplies and Transport Section at Headquarters should be contacted for details.

[8] *"Universal precautions" means procedures and practices by health workers to limit transmission of disease.*

[9] *United Nations High Commissioner for Refugees, UNAIDS and WHO. Guidelines for HIV Interventions in Emergency Settings, 1996.*

Family Planning

51. Family planning services should be initiated as soon as feasible. Ensure that the refugees are informed and understand their free choice in the matter.

Other Reproductive Health Concerns

52. Women who have complications such as spontaneous or unsafe abortion should be cared for by the referral system.

53. Programmes to eradicate harmful traditional practices including female genital mutilation should be implemented once the situation has stabilized. It is crucial to work closely with the refugee community in tackling this issue[10]. Culturally appropriate sanitary supplies should be distributed to women as soon as possible. Inadequate sanitary protection may prevent women from collecting material assistance.

Reproductive Health and Young People

54. Health workers should pay particular attention to meeting the reproductive health needs of young people as they may be at greater risk and have more limited access to appropriate services.

55. It is important to ensure that sufficient female health workers are trained in reproductive health in order to provide culturally appropriate health services including education in the community and at the health facilities. At least some of these health workers should be recruited from among the refugee community.

Tuberculosis control[11]

56. The prevalence of Tuberculosis (TB) has significantly increased in recent years worldwide, but a TB control programme is not a priority in the early stages of an emergency when mortality and malnutrition rates are very high.

57. Expert advice and involvement of the National TB control programme (often supported by WHO) are needed before starting a TB programme. Bad planning and poor implementation could result in more harm than good.

58. To increase the chances of success, TB programmes should only be started in stable situations, when Directly Observed Therapy[12] can be implemented, when funds, drugs, reliable laboratory services and trained staff are available.

Mental Health[13]

59. The psychosocial needs of refugees have often been neglected or even forgotten. However, health services should aim to promote the highest standard of both physical and mental health. It is easy to recognize that there is a heavy burden placed upon refugees from, for example, physical violence, grief and bereavement, fear and stress, an uncertain future and a sense of powerlessness.

60. Experience in identifying and dealing with the psychosocial problems of refugees (including Post Traumatic Stress Disorders) is limited, even so the following general guidance can be given. Any programme dealing with mental health must be community-based with the refugees themselves playing a major role. The programme must be based on a solid knowledge and understanding of the refugees' cultural background and integrated with the other services provided to refugees, and, from the outset, its long term sustainability must be ensured.

Capacity building

Health Education

61. The importance of health education is widely recognized. However, there are significant difficulties in persuading those most at risk to change long-established habits.

In the emergency phase, the priority topics should be those directly related to the immediate public health problems.

62. Health education should therefore focus on the disposal of human excreta and refuse, water management and personal hygiene. Many governments and organizations produce simple health education materials that may be useful. Trained refugee teachers and respected elders are likely to be more effective

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[10] See IOM/FOM (83/97; 90/97), Policies on Harmful Traditional Practices, UNHCR, 1997.

[11] World Health Organization and United Nations High Commissioner for Refugees. Guidelines for Tuberculosis Control in Refugees and Displaced Populations, 1996.

[12] Directly Observed Therapy is where the health worker is able to observe the treatment including that the medication is taken correctly.

[13] World Health Organization and United Nations High Commissioner for Refugees. Manual of Mental Health of Refugees, 1996.

than outsiders in communicating the basic principles and practices of health to their own people. At a later stage, information, education and communication should also be a major tool for the prevention and reduction of sexually transmitted diseases including HIV.

Training

63. As suggested by the definition of "emergency", extraordinary mobilization of resources, including human, will be needed to cope with the situation. Annex 2 sets out a suggested structure of the health service and numbers and qualifications of staff needed. Full staff support including community health workers, and health workers, doctors and nurses at health centres, health posts and clinics, with the necessary qualifications and experience, will not be instantly available.

Training will therefore be a cornerstone of an effective health and relief programme.

64. Training activities must be well targeted to meet the objective of the programme, and this is dependent on definition of roles and responsibilities among various levels of health care and identifying the necessary qualifications. Training must be part of the main health programme.

Medical supplies

65. There must be a policy on essential drugs. The aim of the policy will be to ensure a supply of safe, effective and affordable drugs to meet priority needs of the refugees. The Health and Community Development Section and the Supply and Transport Section at Headquarters issued an essential drugs list which is used to order drugs for UNHCR operations.

66. In order to foster the appropriate use of drugs, standard treatment protocols should be established. This will help rationalize prescription habits among the various partners and organize training activities. Protocols are usually based on national standards.

67. In the early stage of an emergency, it is often useful to resort to pre-packaged emergency health kits. The best known is the New Emergency Health Kit which has been developed through collaboration among many agencies (WHO, UNICEF, MSF, ICRC, UNHCR and others). The contents of the kit are intended to cover the needs of 10,000 people for 3 months during an emergency. The kit can be obtained at short notice through the Supply and Transport Section at Headquarters and can be used at the community level of health care and at health centres. The emergency health kit should only be used in the early stage of an emergency and not relied on for longer term needs.

68. As soon as possible, arrangements should be made for a regular supply of appropriate quantities of essential drugs from the UNHCR essential drugs list. The requests should be based on epidemiological surveillance and disease patterns. The Supply and Transport Section can also provide support for the purchase of drugs and their transport to the field.

69. It is of utmost importance to establish a system to monitor drug consumption. In major operations, a full time pharmacist may be needed to work with UNHCR. Over-prescription of medicines by health workers following pressure by refugees is not uncommon in refugee emergencies.

70. Donations of unsolicited drugs are often a problem during emergencies. A number of agencies (UNDP, UNHCR UNICEF, WHO, MSF and others) have jointly developed guidelines on drug donations[14] that provide donors and users with a list of drugs and supplies which can be sent to emergency situations. This is to help ensure that personnel in the field do not waste time sorting out "useless" donations (small quantities of mixed drugs, free samples, expired medicines, inappropriate vaccines, and drugs identified only by brand names or in an unfamiliar language). UNHCR's policy is that overseas medical supplies should be sent only in response to a specific request or after expert clearance. The WHO Representative, local diplomatic missions and all others concerned should be briefed accordingly.

Laboratory Services

71. Refugees are often remote from laboratory facilities. However, very simple laboratory services at the site level are usually adequate.

72. Reference laboratory services are required for epidemic management and control, (e.g., meningitis, shigellosis, cholera, hemorragic and relapsing fevers, high malarial endemicity, hepatitis etc.) to confirm/clarify diagnosis and perform antibiotic sensitivity. This should be discussed with the national authorities and WHO. Where blood transfusions

[14] *WHO, Guidelines for Drug Donations, May 1996.*

are provided, laboratory services will be absolutely essential to test all blood for HIV before transfusion.

Organization of Refugee Health Care

- There is no single model for organizing health services in refugee situations, but it is usually structured on three levels: community health posts and clinics, health centres, and referral hospitals;
- It is of the utmost importance to ensure good communication and feed-back between the various levels of health care;
- Priority should be given to using host country health facilities as referral centres and support should be agreed upon and provided to the facilities (see MOU between WHO and UNHCR, Appendix 3).

Introduction

73. The three levels of health care are summarized in Annex 2. The first level is at the community level with health posts, clinics and outreach services. At the second level is a health centre with basic facilities for out and in-patients departments, dressing and injections, a pharmacy, and a basic laboratory. At the third level is a referral hospital for emergency obstetric care and surgery, management of very complicated cases, performance of laboratory tests etc. Referral hospitals are usually national facilities at the district, regional or national level.

74. The refugees must have easy access to appropriate treatment. If the local national health facilities cannot be strengthened to meet the needs, alternative arrangements will be required. Unless treatment is provided at the right level, the hospitals or health centres will be swamped by refugees demanding treatment for simple conditions. Thus, a community-based health service is required that both identifies those in need of health care and ensures that this is provided at the appropriate level. Close coordination with community services is essential.

Community Level Health Care

75. Whether refugees are in camps or spontaneously settled among local villages, community level services are essential.

Community-level health care must be the mainstay of health services from the very beginning of the emergency.

76. This means basic health care is to be delivered at the community level in a decentralized manner with two components: (i) a peripheral clinic/health post and (ii) outreach services delivered by Community Health Workers (CHWs) and Traditional Birth Attendants (TBAs). TBAs might be recruited among traditional midwives in the community. In order to be effective, CHWs and TBAs must be trained, supported and closely supervised. The role of CHWs and TBAs includes:

i. home visiting, identification and referral of sick people and malnourished children;

ii. identification of pregnant women and referral for antenatal, delivery and post natal care;

iii. basic health education;

iv. data-gathering for the health information system (deaths and their causes and the incidence of major communicable diseases);

v. responding to the needs of refugees who have been sexually assaulted.

As a guide, 1 CHW per 1,000 population and 1 TBA per 3,000 population should be the goal. Ideally, 50% of those trained should be women as same sex care is often preferred.

77. The clinic or health post will cater for the needs of approximately 5,000 refugees in crowded conditions but otherwise in reasonably good health. This should be a simple building with facilities for consultation, basic curative care (drugs from the New Emergency Health Kit), oral rehydration therapy, clinical procedures such as dressings (but not injections because of the risks of HIV transmission), a small lock-up pharmacy, simple equipment and sterilization facilities (electricity may not be available), data collection (log books to record patients and activities). Water and sanitation are essential in all health facilities.

The Health Centre

78. In support of the clinics/health posts, there should be a health centre for each refugee settlement (approximately 10,000 to 20,000 people). Very large settlements may require more than one. The health centre should be able to handle all but the most complicated medical, obstetric and surgical cases. More facilities should be available than at the clinics, including basic laboratory services, a central pharmacy and some beds for in-patients, in the range of one per 2,000 to 5,000 refugees. The health centre should

collect and consolidate health information from the various clinics and health posts. The health centre should also organize the main health programmes (EPI, reproductive health, tuberculosis) and the supervision and training of staff (at both first and second level).

79. An indication of the number and qualifications of health staff required is given in Annex 2.

Referral Services

80. The health centre must be able to refer patients to hospitals for treatment. Referral hospitals should provide emergency obstetric and surgical care, treatment for severe diseases, laboratory and x-ray services as well as supply and support for nationally controlled programmes (TB, leprosy, HIV/AIDS).

81. Only a small proportion of patients will require referral services. These services will usually be organized in national health facilities at the district, regional or national level, and ideally, referral should be made to the nearest national hospital. This has obvious advantages, not least the fact that the infrastructure already exists.

The programme should compensate the national referral structures for services provided to refugees.

82. The hospital(s) should be expanded or supported as necessary, for example with tents and additional health personnel as well as some financial and/or material support (drugs, supplies, food). Care must be taken not to swamp the local hospital. Close and direct coordination with the district or regional medical officer is essential.

83. An agreement should be signed between the parties, under the aegis of the Ministry of Health, which clarifies the conditions of assistance including cost per patient per treatment and in kind support (food and drugs). A written agreement is essential to avoid controversies.

84. It is only in certain circumstances that special refugee hospitals will need to be established, but generally this should be avoided. They should only be established when the needs cannot be met by existing or strengthened national hospitals, for example when refugee numbers are very large (much larger than the local population), when the nearest national hospitals are too far away, or for security reasons. The Supply and Transport Section and the Health and Community Development Section should be consulted prior to establishing or acquiring refugee specific field hospitals.

85. Whatever arrangements are made for hospital treatment and referral, there must be suitable transport to and from the referral hospitals. Facilities at the hospital must also provide for the needs of relatives and allow parents to be with young children.

86. Arrangements for referral must be such that only those patients specifically referred from the health centres are attended, with no refugees presenting themselves directly to the hospital.

87. Refugee emergencies are not usually characterized by large numbers of injured persons. However, when this is the case, there may be an initial requirement for the rapid deployment of a surgical unit which is normally quickly available. Pre-packaged (expensive) surgical kits can be obtained through Supply and Transport Section at short notice.

88. The UNHCR Health Coordinator should ensure that there is a system to record referrals and subsequent treatment and follow-up of the patients.

Human Resources and Coordination

- The health services must be developed **with** and not just **for** the refugees and in accordance with their needs and demands;
- The early appointment of a suitably experienced health coordinator to UNHCR's staff has proved essential. A reproductive health focal point should also be identified as early as possible;
- While the use and development of local expertise is preferable, it is often necessary to mobilize outside assistance in an emergency;
- The issue of staff salary and incentives should be discussed and solved from the outset;
- The Ministry of Health at all levels must be as closely involved as possible.

The Refugees

89. The refugees must be given responsibility for their own health. Outside health workers must understand the refugees' own concepts of health and disease. From the beginning, health services should be developed and operated with, rather than for, the refugees. If not,

the services will be less effective, may be distrusted and poorly used, and are unlikely to be sustainable.

90. Preventive services should always be free. In most situations, other health services are also offered free of charge. While this may well be justified, it should not be considered as a policy as it is often based on paternalistic attitudes. The issue of cost-recovery or payment for services should be regularly analyzed and most particularly when refugees are integrated within the local population (which may have to pay for services) or when refugees are benefiting from local integration and sources of income.

Staffing Needs

91. As a general principle, the order of preference for selecting health personnel, in cooperation with the national authorities, is:

i. Refugees;

ii. Experienced nationals or residents;

iii. Outsiders.

Most emergencies will require some combination of these sources.

92. Strong emphasis should be placed on the training, supervision and upgrading of medical skills of selected refugees, particularly in their former roles within the community. When selecting refugees, care must be taken to include women who may not come forward as readily as men. Full account should be taken of the experience of the traditional healers and midwives. Refugees may seek traditional treatments and experience has demonstrated the advantages of encouraging traditional methods of health care which complement other organized health services.

93. An important consideration may be the government's attitude to foreign medical personnel, including, for example, recognized qualifications and permission to practice medicine.

94. The issue of staff salary and incentives should be addressed at the onset. All agencies and organizations involved in the refugee programme should adhere to the same standards. The determination of salaries and incentives should be based on the national (or country of origin) standards and due account should be taken of assistance (free food, water, shelter etc.) received by refugees. In principle, all staff performing work on a daily basis, with clearly identified responsibilities and strict working hours, should receive a salary or an incentive.

95. Special attention should be given to the recruitment of local staff. The salary or incentive offered to them should be in line with national standards. Very frequently, refugee emergencies attract national personnel (commonly referred to as "brain drain") at the expense of national services which can create serious tension.

The National Health Authorities

96. Early involvement of the host government's central, provincial, and district health services is essential. To the extent possible, services provided to refugees should be integrated with national services. It will be particularly important to ensure integration and compatibility with certain treatment protocols, immunization programmes, communicable disease control and surveillance practices. Promoting good health for the refugees is clearly in the interest of the local population. In addition, supporting existing structures will help ensure that health services for refugees are sustainable and are at a standard equivalent to that of the host country nationals.

UNHCR Health Coordinator

97. In major emergencies, (e.g. when there is a prevalence of epidemics, many partners, large numbers involved) UNHCR must ensure that a Refugee Health Coordinator is appointed. The Health Coordinator should be a key member of the UNHCR programme staff. The person should take the lead role in this sector, or play a key supporting role to the national institution which takes the lead role.

98. The Health Co-ordinator's primary responsibility will be to ensure that the level and quality of services provided adhere to nationally and internationally accepted standards and medical ethics.

Other main tasks and duties include:

i. Participating and facilitating the consultation process among all concerned parties in order to carry out an appropriate problem, needs and resources assessment;

ii. Participating in, and facilitating the creation of, health and nutrition committees with the Ministry of Health, other UN agencies and non-governmental organizations (NGOs) where coordination will take

place to jointly identify priority activities, and to plan for their implementation by defining needed human, material and financial resources;

iii. Facilitating cooperation among all partners to ensure an appropriate implementation and monitoring of the programme as agreed upon at the coordination committee meetings;

iv. Setting up and participating in the implementation of an effective Health Information System;

v. Ensuring that joint protocols for medical treatment, staffing and training are established and that implementing partners adhere to them;

vi. Ensuring the identification of a qualified and experienced person to coordinate reproductive health activities at the start of the relief programme;

vii. Facilitating inter-sectoral coordination;

viii. Consolidate the reporting about the refugees' health and nutritional status;

ix. Assisting in setting up a medical evacuation plan for UNHCR staff.

99. Experience shows that it is in the first days and weeks of an emergency that excess mortality is recorded.

It is therefore vital that a UNHCR Health Coordinator is fielded immediately, at the very start of the emergency.

100. The quickest and most practical way to deploy a Health Coordinator is usually to send UNHCR staff or consultants. Headquarters should be consulted immediately on this. At a later stage, posts can be created or staff seconded from other UN agencies (UNICEF or WHO), or from the Ministry of Health.

Other Specialized Staff

101. The need for specialized staff should be carefully assessed by the UNHCR Health Coordinator or by the Health and Community Development Section at Headquarters. Such specialists include epidemiologists, specialists in public, reproductive and mental health, nutrition, tropical medicine, paediatrics, midwifery, pharmacy etc.

Experienced personnel with the right personality are more important than highly trained specialists, whose skills are often inappropriate.

102. Familiarity with the local culture, patterns of disease and the public health services and previous experience in emergencies are as important as an advanced knowledge of medicine and medical techniques.

Role of the UN and Specialized Agencies

103. *WHO*. The World Health Organization works directly with the Ministry of Health in almost every country in the world. The response to the health needs of the refugees and surrounding local populations should be closely coordinated with WHO. Details of this collaboration are described in the WHO and UNHCR Memorandum of Understanding, Appendix 3.

104. *UNICEF.* Collaboration with UNICEF in emergencies will focus on supply of measles vaccines and delivery/midwifery kits, as well as on health education (see Memorandum of Understanding between UNICEF and UNHCR for more details, Appendix 3)

105. *UNFPA.* Collaboration with UNFPA focuses on reproductive health matters and demography and there is a Memorandum of Understanding between UNFPA and UNHCR which details this collaboration, Appendix 3.

106. *UNAIDS.* UNAIDS is an inter-agency mechanism created in 1995 to support national HIV/AIDS programmes. Refugee health services must be integrated in these national programmes.

107. Through a standby arrangement with UNHCR, the Centre for Disease Control and Prevention (CDC Atlanta, USA) can supply, at short notice, experts for rapid health and nutritional assessment, improvement of epidemic preparedness and response in emergencies and set up Health Information Systems. Deployments are usually limited from four to eight weeks and can be arranged upon request through the Health and Community Development Section at Headquarters.

Role of NGOs

108. Operational and implementing partners are essential collaborators for UNHCR. All collaborators in the emergency health programme must be brought together to form health sub-committees at the central and field level as appropriate. Initially, these committees may have to meet daily or at least weekly, usually under the chairpersonship of a representative of the Ministry of Health, supported

by the UNHCR Health Coordinator. Ideally, members of the committee should have been identified at the contingency planning stage.

109. Activities of the health sub-committee include: allocation of tasks, exchange and pooling of information on health activities and with other sectors (e.g. food, water, sanitation etc.), setting up jointly agreed protocols for medical procedures, staffing levels and training, and problem-solving in general.

110. In emergencies, urgent outside assistance in the health sector is almost invariably necessary. This is because the immediate and specialized attention needed represents a burden that existing local structures are not designed to bear. District health services will almost never have the needed reserve capacity in terms of staff at all levels, infrastructure, medical supplies and technical expertise. This capacity can be developed over time, with the support from the central government and other UN agencies.

111. NGOs (international, regional or national) must be chosen with care and this is usually done by the government of the country of asylum. However, it is also the responsibility of UNHCR to advise the government on which organizations have proven competence in emergencies. Some agencies have experience in long-term situations but less in emergencies; others may be too narrow in focus, preferring to do purely curative work to the exclusion of public health, prevention, sanitation etc.

112. Small NGOs, especially those created in response to a specific situation, should first demonstrate appropriate competence before being engaged in the emergency phase.

The number of agencies involved should be kept to a minimum.

113. During the early stages of an emergency it is essential that the numbers of NGOs involved should be kept to the minimum necessary, and that those chosen should be professional, capable of deploying experienced personnel and with proven past experience in collaborating with both governments and UNHCR in the effective management of an emergency.

Organization of Response

114. A possible hierarchy of health services is outlined in Annex 2. It is based on a large-scale emergency involving a great number of health staff, both national and international. A smaller emergency will require fewer levels of organization. Note that the numbers and qualification of staff suggested is no more than an indication. Actual needs will depend on the health problems, the degree of isolation of the area and so on.

115. Once the pattern of disease and overall needs have been determined, situation-specific guidelines on standard procedures for health workers should be prepared, based on national or internationally recognized standards. These should cover all aspects of the services, including such subjects as basic principles, how the services are to be organized, including any selective feeding programmes, standardized treatment protocols, drug lists and supply, vaccination and reporting. The guidelines should be prepared by the UNHCR Health Coordinator in consultation with all concerned, issued under the aegis of the Ministry of Health if possible, and reviewed periodically, for example by a health coordination sub-committee. At least part of the guidelines should be translated into the language of the community health workers.

All organizations providing health care to the refugees should be involved in the preparation and required to observe standard guidelines.

Key References

An Inter-agency Field Manual on Reproductive Health in Refugee Situations, 1995. United Nations High Commissioner for Refugees, Geneva. To be updated in 1999.

Essential Drugs Manual: Guidelines for the Use of Drugs in Refugee Settings and UNHCR List of Essential Drugs, Geneva, 1989.

Famine-affected, Refugee, and Displaced Populations: Recommendations for Public Health Issues, July 24,1992/Vol.41/No. RR-13. The Centers for Disease Control, (CDC).

Guidelines for Tuberculosis Control in Refugees and Displaced Populations, 1996 World Health Organization and United Nations High Commissioner for Refugees.

Guidelines for HIV Interventions in Emergency Settings, 1996 United Nations High Commissioner for Refugees, UNAIDS and WHO, Geneva.

Manual of Mental Health of Refugees, 1996 World Health Organization and United Nations High Commissioner for Refugees.

Sexual Violence against Refugees, Guidelines on Prevention and Response, 1995 United Nations High Commissioner for Refugees, Geneva.

UNHCR, IOM/FOM (83/97; 90/97), Policies on Harmful Traditional Practices, 1997 United Nations High Commissioner for Refugees, Geneva.

Vector and Pest Control in Refugee Situations, April, 1997 United Nations High Commissioner for Refugees, Geneva.

In the early stages of an emergency it is essential to collect information on a weekly or monthly basis for the following tables:

Table Number	Table Description
1	Demographic information
2.1 A and B, 2.2	Crude Mortality Rate and Under five years old Mortality Rate Cause-specific-mortality
3.1	Morbidity Incidence
4.1 and 4.2 (set out in Annexes 4 and 5 of chapter 15 on nutrition)	Nutrition, Supplementary and Therapeutic Feeding Programmes
5.2	Main causes of discharge/deaths in In-Patients Departments
7.1	Deliveries: Birth (Total births and birth rate only)
7.4	Cholera/Meningitis/Hepatitis/Micro-nutrients deficiencies

Collection of the information required for the other tables should be progressively introduced as the situation stabilizes.

In order to detect problems and to monitor the impact of any health programme, it is necessary to collect information over time so as to follow trends. The tables below are designed to allow tabulation of information on a weekly or monthly basis. Graphical presentation of the same information will make it easier to detect trends. The tables may need to be adjusted to reflect the needs of actual situations.

1. Demographic Information

Table 1 – Population

Camp/area Names	Male under 5 years	Female under 5 years	Male over 5 years	Female over 5 years	Total Population
Total					

Sources of demographic information: registration ❑, Estimate ❑, Government ❑, Other ❑

% of total population which is under 5 =

% of total population which is female =

Note: demographic information does not necessarily have to be reported in a table format. The denominator used for calculation of rates could differ from the official working figure and this should be clarified.

2. Mortality

2.1 Mortality rates

Mortality rates (segregated by age and sex) **should be given per 10,000 per day**

A. Crude Mortality Rate: CMR

Table 2.1 A

Camp/area Names	Male		Female		Total	
	Number of deaths	Death Rate	Number of deaths	Death Rate	Number of deaths	Death Rate
Total						

B. Under five years old mortality rates (U-5 MR)

Table 2.1 B

Camp/area Names	Male		Female		Total	
	Number of deaths	Death Rate	Number of deaths	Death Rate	Number of deaths	Death Rate
Total						

Female / Male ratio:

A graph line (to show trends) for CMR and U-5 MR could be attached.

2.2 Cause-specific mortality

Tables 2.2 (2.2 A for total population and 2.2 B for under-five population).

	Male		Female		Total	
	Number of deaths	% of the total number of deaths	Number of deaths	% of the total number of deaths	Number of deaths	% of the total number of deaths
Malaria						
Pneumonia						
Watery diarrhoea						
Bloody diarrhoea						
Measles						
Meningitis						
Cholera						
Maternal death (2.2 A only)						
Peri/neo natal						
Malnutrition						
Total		100%		100%		100%

From table 2.2 A and 2.2 B, pie charts could be attached to the report.
The list of diseases is provided as an indication.

Comments on mortality:

3. Morbidity

3.1 Incidence (Number of new cases per 1,000 of the population for the period)

Tables 3.1 (3.1A for total population and 3.1B for under-five population).

	Male	Female	Total
Malaria			
Pneumonia			
Watery diarrhoea			
Bloody diarrhoea			
Measles			
Meningitis			
STDs			

The list of diseases is provided as an indication.

3.2 Out-Patient Department (OPD) consultations

Table 3.2 Number of consultations per refugee per year.*

Camp Names	Male	Female	Total
Average			

* from the total number of OPD consultations per camp, extrapolate to define the number of consultations per refugee per year. As an example: 10,000 consultations in one month in a camp of 30,000. 10,000 x 12 = 120,000 / 30,000 = 4 consultations/refugee/year.

Comments on morbidity:

4. Nutrition

4.1 *Supplementary Feeding Programme Monthly Report*

This table is contained in Annex 4 of chapter 15 on nutrition.

4.2 *Therapeutic Feeding Programme Monthly Report*

This table is contained in Annex 5 of the chapter 15 on nutrition.

4.3 *Food basket monitoring*

See chapter 15 on food and nutrition.
If undertaken, please specify by whom and the results.

Comments on nutrition:

5. In-Patients Department (IPD) activities

5.1 Activities

Table 5.1 (per week or month)

	Hospital Name	Hospital Name	Hospital Name
A. No. of patients end last week/month			
B. No of patients admitted			
C. No. of patients end week/month (A+B-D)			
D. No. Discharged of which:			
D.1 authorized	%		
D.2 unauthorized	%		
D.3 deaths	%		
D.4 transferred	%		
No. of beds			
Average length of stay (No. of days)			
Occupancy rate	%		

5.2 Main Causes of discharge/deaths in IPDs

Table 5.2 (per week or month).

	Hospital Name:		Hospital Name:		Hospital Name:	
	Number of cases	Number of deaths	Number of cases	Number of deaths	Number of cases	Number of deaths
Malaria						
Pneumonia						
Watery diarrhoea						
Bloody diarrhoea						
Meningitis						
Measles						

Comments on IPDs:

6. Referral system

6.1 Total number of patients transferred for admission and where:

6.2 Causes of transfer

Table 6.2

	Camp Name:		Camp Name:		Camp Name:	
	Number of cases	% of the total	Number of cases	% of the total	Number of cases	% of the total
Obstetrics						
Surgery						
Paediatrics						
Internal medicine						
Blood transfusion						
Total						

Comments:

7. Main Health Programmes

7.1 Reproductive Health

7.1.1 Safe motherhood

a. Deliveries: Birth

Table 7.1.1

Camp names	Number	Crude Birth Rate*
Total A: a1 + a2 + a3		

*Crude Birth Rate = $\frac{\text{Number of births in a year}}{\text{Total population}}$ x 1,000

- a1: total # and % of birth in health centre or hospital:
- a2: total # and % of birth assisted by a ***Trained*** Birth Attendant (but outside health centre or hospital):
- a3: total # and % of other births (i.e. A - (a1 + a2):
- total number and % of complicated deliveries:
- total # of cases of neonatal tetanus:
- total # and % of deliveries with adequate Tetanus Toxoid (TT) coverage:

b. Ante-natal care (ANC)

- total # of expected pregnancies per year:
- total # of new ANC consultations (last 3 months) and % compared to expected:
- % of women with three ANC visits at delivery:
- are supplements given to pregnant women? specify criteria and supplements provided:
- RPR test (syphilis test): % of positive tests:

c. Other information

- maternal mortality: # and incidence per 100,000 live birth per year:
- Peri/neonatal mortality: # and incidence per 1,000 live birth per year:
- # of abortions and % per number of pregnancies:
- low birth weight (below 2.5 kg): provide # and percentage per total number of births:
- # and percentage of total number of births having a post-natal consultation:

7.1.2 Sexual and gender based violence

- # of cases of sexual and gender based violence per month (incidence per 10,000):
- is there any special programme for Female Genital Mutilation (where prevalent)? if yes, give brief description:

7.1.3 STDs including HIV / AIDS

- enforcement of universal precautions:
- % of blood tested for HIV before transfusion:
- % of HIV positive among blood tested:
- distribution of condoms, # and percentage of acceptance:

7.1.4 Family Planning (every three months)

- number of new acceptors in last three months, per method:
- total # and % of acceptors per method:

7.1.5 Adolescents

Is there any special programme for adolescents? if yes, give a brief description:

Comments on reproductive health:

7.2 Extended Programme of Immunizations (EPI)

- measles vaccination coverage:
- other antigens coverage:
- are there any vaccine preventable diseases prevalent in the camps?:
- comments:

7.3 Tuberculosis (every three months and not usually during the emergency phase)

- expected number of new cases per year (i.e. prevalence in country of origin):
- treatment protocols:

Table 7.3

	January-March	April-June	July-September	October-Dec.
A. No. under treatment at beginning				
B. No. of new cases				
C. No. of discharged of which:				
C.1 cured	%			
C.2 defaulters	%			
C.3 deaths	%			
C.4 transferred	%			
Total at end of period: A + B - C				

7.4 Cholera/Meningitis/Hepatitis/Micronutrients deficiencies etc.

On daily, weekly and/or monthly basis: number of cases, number of deaths and attack rate (cumulative) and Case Fatality Rate (cumulative). Graphic representation could be attached to the report.

7.5 Mental health

Provide a description of the mental health programme.

7.6 Training activities

Provide a description of training activities which have taken place during the reporting period: type of training, by whom, to whom, etc.

7.7 Laboratory activities

8 Information on other vital sectors

- availability of potable water: # litres per person per day
- availability of functioning latrines per # of persons
- % of population with adequate shelter
- quantity of soap available per person per month
- specify vector control activities

	Unit/Location	Level	Health staff	Outline of major responsibilities
	• Health Coordinating committee with all partners, this may be decentralised as appropriate • Refugee Health Unit (with Ministry of Health if possible or as part of UNHCR programme team)	Capital/National Level	• UNHCR Health Coordinator or Health professionals, Nutritionist, Pharmacist, Health Administrator	• Planning and monitoring programmes • Preparation and dissemination of guidelines on standard procedures • Overall coordination and supervision • Procurement and supply of drugs and equipment
3rd level	Regional/district Hospital	Regional or district level	• If necessary: say, 1 doctor, 2 nurses to help existing staff (plus material support if required, especially food and drugs) • Cost per patient or per treatment could also be negotiated with the hospital	• Complicated obstetric cases and surgical emergencies on referral from settlement • Reference laboratory
2nd level	Health Centre (with limited beds for overnight stay, as guidance: 1 bed per 2,000 to 5,000 refugees)	Each refugee settlement of about 30,000	• As guidance: 2 doctors, 6-8 nurses, 1 midwife • About 10 health workers (1 health worker per 50 - 70 consultations per day)	• Supervision of settlement health services including training health workers and any selective feeding programmes • Treatment of patients not handled at 1st level • Security, distribution and use of drugs • Basic laboratory • Referral to third level
1st level	1 health post or clinic	Section level approximately 5,000 refugees	• As guidance, 1 nurse (from above) and 2-3 refugee or national health workers per section	• Section level services, both preventative and basic curative care • Supervision of outreach services
	The community	Outreach services (organized by section of, say 1 Community Health Worker per 1,000 and 1 traditional birth attendant per 3,000 refugees)	• Refugee Community Health Workers	• Identification of public and individual health and nutritional problems • Referring sick patients to health post • Home visiting • Basic surveillance of mortality and birth

15

Food and Nutrition

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Situation

In emergencies, food and nutritional security is often severely threatened. This causes increased risk of malnutrition, disease and death. Therefore, refugees will need partial or full food support. Some may also need nutritional rehabilitation.

Objective

To provide the refugees with sufficient quantities of appropriate food to maintain their health and nutritional status and, where necessary, to improve the condition of those who are already malnourished.

Principles of Response

- Measures to meet food needs should be appropriate and standardized, with responsibilities clearly defined, and the overall co-ordination ensured by a single organization;
- Whenever possible use familiar foods that meet nutritional requirements and maintain sound traditional food habits;
- The food distribution system should allow families to prepare their own meals;
- Pay particular attention to infant feeding and the needs of children, women and others prone to malnutrition;
- Maintain close co-ordination with the other vital sectors (health, water, environmental sanitation, etc.) and aim for maximum integration in existing services;
- Ensure the active involvement of a nutritionist.

Action

- Assess health and nutritional status and food needs as soon as possible;
- Ensure the availability of appropriate food and the necessary transport, storage, cooking fuel and utensils;
- Organize a general feeding programme for all refugees and, if necessary, selective feeding programmes to meet the additional needs of children, women and others;
- Monitor effectiveness of feeding programmes and make necessary changes.

Introduction

1. In an emergency, refugees may be completely dependent on external food sources. An initial assessment of their health and nutritional condition and their numbers must be made as soon as possible. The types of programmes needed will be determined by this initial assessment. Continuous monitoring of nutritional status will ensure that the emphasis on different programmes can be adjusted in order to reflect changing conditions.

2. The causes of malnutrition are often complex and multi-sectoral (see Fig 1). Therefore coordinating the food and nutrition programmes with health and other vital sectors is essential.

3. Assistance must be appropriate to the nutritional needs of the refugees and be culturally acceptable. Foods prepared locally with local ingredients are preferable to imported foods. Infant feeding policies require particular attention.

4. Certain groups are more at risk of malnutrition than others. These include infants, children, pregnant women and nursing mothers, the sick and the elderly. Special action is required to identify the malnourished and vulnerable and to meet their additional needs. Where the refugees have already suffered a prolonged food shortage, many will be malnourished by the time of the first assessment.

5. If the refugees are already suffering the effects of severe food shortage, immediate action must be taken to provide food available locally which is acceptable to the refugees.

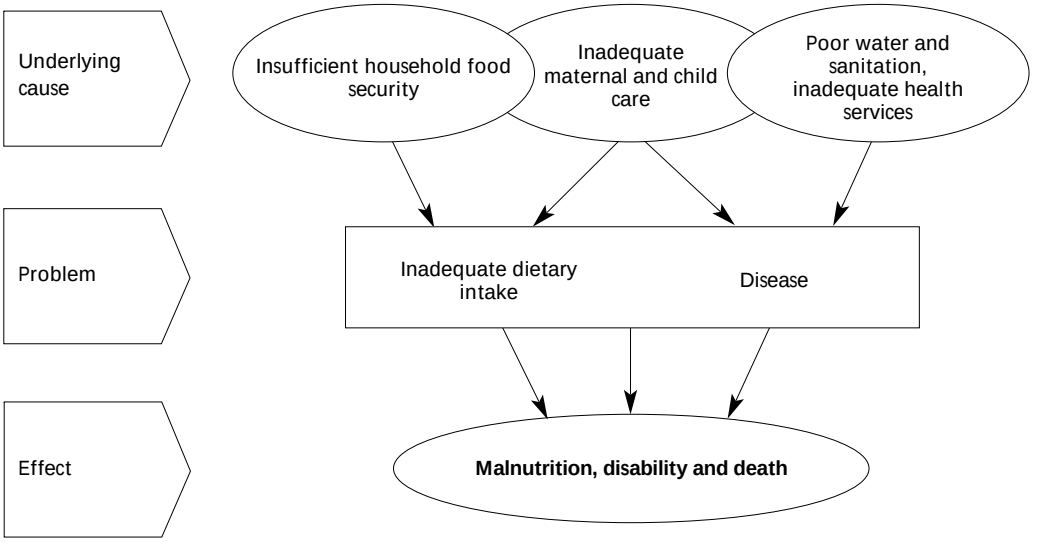
6. If insufficient acceptable food is available locally, it must be brought in from outside, initially by air if necessary. Flexibility and improvisation will be required, and time may be needed to develop the full response set out in this chapter.

7. This chapter should be read in conjunction with "Nutrition Guidelines" Médecins Sans Frontières (MSF), 1995, and UNHCR/WFP Guidelines for Estimating Food and Nutritional Needs, 1997 and Selective Feeding Programmes, 1999.

Organization of Food Support

- The World Food Programme (WFP), the food aid arm of the United Nations system, shares with UNHCR responsibility for meeting the food and nutritional needs of refugees;
- The Memorandum of Understanding (MOU) signed between WFP and UNHCR establishes the division of responsibilities and coordination mechanisms for refugee, returnee and internally displaced persons feeding operations;
- The aim of the food programme is to ensure the restoration and maintenance of sound nutritional status through a food ration that meets the assessed requirements, is nutritionally balanced, palatable and culturally acceptable;

Figure 1 – The Complex causes of malnutrition



Adapted from: UNICEF Conceptual Framework of Malnutrition, 1997.

- In most refugee emergencies a UNHCR food and nutrition co-ordinator should be appointed, who will have overall responsibility for co-ordination of all aspects of the food and nutrition programme;
- The refugees, and in particular refugee women, must be involved in the organization of these programmes;
- Simple nutrition education is an integral part of effective food support.

WFP/UNHCR Co-operation

The objective of WFP/UNHCR co-operation is the timely provision of the right amount of food, to ensure the restoration and maintenance of sound nutritional status.

8. The means to achieve this is through a food ration that meets the assessed requirements, is nutritionally balanced, palatable, culturally acceptable, and promotes gradual self-reliance of the beneficiaries. Essential to this objective is joint UNHCR/WFP planning, from the start of the emergency.

9. A Memorandum of Understanding (MOU) (see Appendix 3) exists between UNHCR and WFP covering cooperation in the provision of food aid. Under the terms of the MOU, WFP meets the emergency food needs of refugees, returnees, and, in specific situations, internally displaced persons, and provides associated logistic support. The terms of the MOU only apply when the beneficiaries in the country of asylum number more than 5,000, irrespective of their country of origin or their location within the country of asylum. UNHCR will meet the food needs of persons of its concern who are outside the scope of the MOU.

10. Within the scope of the MOU, WFP has the lead responsibility for mobilizing the following food commodities (whether for general or selective feeding programmes) and the resources to deliver them.

WFP resourced commodities include:
i. Cereals;
ii. Edible oils and fats;
iii. Pulses and other sources of protein;
iv. Blended food;
v. Iodized salt;
vi. Sugar;
vii. High energy biscuits.

11. WFP is also responsible for arrangements for milling cereals and transporting WFP commodities to agreed extended delivery points (EDPs), and for the operation and management of the EDPs. UNHCR is responsible for the transportation of all commodities from the EDP to the final destination and for final distribution.

12. Under the MOU, UNHCR is responsible for mobilizing and transporting complementary food commodities and for the provision of the necessary micronutrients (vitamins and minerals) when they cannot be met through the ration.

UNHCR resourced commodities include:
i. Local fresh foods;
ii. Spices and other condiments;
iii. Tea;
iv. Dried milk;
v. Therapeutic milk.

13. UNHCR and WFP have developed a common set of guidelines[1] for estimating food and nutritional needs in emergencies and in selective feeding programmes[2]. These guidelines should be used to assess the food needs for both the general and selective feeding programmes.

Extended delivery Points (EDP)

An EDP is the location at which WFP hands over a consignment of food to UNHCR or its implementing partner. WFP is responsible for the consignment and all costs incurred in moving and storing it, until UNHCR or its representative collects it from the EDP. In all cases the location of EDPs must be agreed jointly by UNHCR and WFP.

EDPs should be positioned to give cost effective and logistically practical delivery, while avoiding the imposition of undue hardships on the beneficiaries because of travel distance and/or difficult access. Whenever possible the EDP should be at the same place as the final distribution point, or, if not, then as near as possible to it. An EDP should be established for approximately every 10,000 beneficiaries.

Joint Assessment and Planning

14. UNHCR and WFP should carry out a joint assessment of the overall food, nutrition and related requirements in consultation with

[1] *WFP/UNHCR Guidelines for Estimating Food and Nutritional Needs in Emergencies, UNHCR/WFP, 1997.*

[2] *UNHCR/WFP Guidelines for Selective feeding Programmes in Emergencies, WFP, UNHCR, Geneva, 1999.*

government authorities, operational partners and experts.

The first requirement is a knowledge of the numbers, nutritional status and food habits of the refugees.

Assessing nutritional status is discussed in detail below. The joint UNHCR/WFP assessment for the food assistance programme should cover the following:

Basic Information

i. Numbers and demography (see chapter 11 on registration);
ii. Current nutritional status;
iii. Milling possibilities;
iv. Food commodity preferences of the beneficiaries;
v. Capacity of the family to prepare, store, and process the food;
vi. Access to cooking fuel, utensils and distribution containers;
vii. Food availability now and over time;
viii. Availability of local food for purchase;
ix. Ease of access to food supplies;
x. Groups at risk – identify who and how many;
xi. Degree of and prospects for self-reliance;
xii. Coping strategies.

Other Important Information

i. Health status and health services;
ii. Environmental health risks;
iii. Community structure;
iv. Food distribution systems;
v. Socio-economic status;
vi. Availability of human resources;
vii. Logistics constraints;
viii. Storage capacity and quality;
ix. Delivery schedule of food and non-food commodities;
x. Other agencies' activities and assistance currently provided: quantity, items and frequency, and selective feeding programmes.

15. WFP and UNHCR should draw up plans covering: the number of beneficiaries, the composition of the food basket, ration size, duration of assistance, and directly related non-food inputs which may have an impact on the nutritional status of the beneficiaries (for example, cooking utensils, cooking fuel and milling equipment).

16. The main considerations to take into account when responding to food and nutritional needs of refugees are set out in figure 1.

17. Special consideration should be given to the needs of women, children and groups-at-risk. The views of the beneficiaries, especially those of women, should be sought. The proposed food assistance programme should also take into account the need to minimize the environmental impact of cooking the food provided.

Coordination

18. A UNHCR coordinator should be appointed as focal point for food and nutritional issues. In smaller operations, either the programme officer or the logistics officer could be appointed as food coordinator. If technical expertize is not available initially within UNHCR then assistance should be sought from government nutritionists, UN agencies or NGOs.

19. The food and nutrition coordinator's responsibilities are to establish standard procedures, including procedures for general food distribution, coordinate feeding programmes, monitor and evaluate the feeding programmes, and ensure close coordination and integration with community services, health and other sectors. The coordinator should act as the focal point within UNHCR for coordination with WFP and NGO's. Where the food coordinator is not her/himself a nutrition specialist, an experienced nutritionist will also be needed to provide the food coordinator with the necessary technical advice.

Role of Refugees and Nutrition Education

20. The refugees must be involved from the start in the organization and management of the feeding programmes. Special training will be necessary for refugees.

21. The provision of simple nutrition education for the refugees is always necessary when unfamiliar foods or new methods of cooking cannot be avoided. This should be organized in conjunction with nutrition education activities and provide guidance on: proper infant feeding, feeding sick children, treating diarrhoea, basic food hygiene and preparing available foods for maximum nutritional benefit.

Cooking Fuel

22. Particular attention must be paid to the provision of cooking fuel and the control and

management of the natural resources in the vicinity of the camp. Failure to deal with this can quickly lead to destruction of the vegetation in and around the site causing lasting damage to the environment, with direct effects on the health and well-being of refugees and local people and friction with the local population. Fuel needs and consumption vary considerably[3] – factors affecting the use of fuel include:

i. *food preparation, cooking techniques, fuel type and preparation.* Soaking beans prior to cooking, ensuring lids are used on pots, ensuring wood is dry and chopped, and that fires are put out after cooking – all these make considerable fuel savings and can be incorporated into environmental awareness raising and training programmes. Other steps to facilitate efficient fuel use are to ensure that the pots supplied have lids.

ii. *type of stove.* It may be possible to use local technology to modify existing types of wood or charcoal burning stoves in order to make them more fuel efficient. Simple improvements and local technologies are best. Note that the social and economic implications of a new technology are usually more important in determining whether it will be adopted than the effectiveness of the technology itself. The promotion and use of improved stoves must closely involve the refugees.

iii. *type of food.* Freshly harvested foods take less cooking time, also using milled rather than whole grain and using pre-cooked food make considerable fuel savings. The environmental implications of the food basket need to be taken into account with WFP.

iv. *availability (or "price")* of fuel itself. This is often the most significant factor affecting per capita fuel consumption. The provision of fuel wood and managing and controlling the use of natural resources around a refugee camp is discussed further in chapter 12 on site planning.

Nutritional Assessments

◆ The nutrition assessment should be carried out as soon as possible by an experienced nutritionist;

◆ Nutritional assessment should include anthropometric surveys as well as food security information;

◆ Regular assessment is necessary both to monitor the nutritional status of the community as a whole and identify individuals and groups who need special care and food assistance;

◆ Information must be gathered on mortality and morbidity in addition to malnutrition rates, in order to understand the underlying causes of malnutrition and to identify people who are most affected.

Introduction

23. An initial assessment of the nutritional status of the refugees should be made as soon as possible and should be carried out by an experienced nutritionist. The extent of malnutrition has important implications for what form the emergency response will take, and will enable early decisions to be taken on the components of the rations and on the requirement for any additional selective feeding programmes.

24. The nutritional assessment should be followed by regular nutrition surveys under specialist supervision to monitor the condition of the population as a whole.

25. Where conditions and/or results of the initial assessment or later surveys indicate a need for selective feeding programmes, individuals will need to be identified and registered for these programmes. Their individual progress should then be monitored through periodic measurements at the feeding centres.

26. The initial nutrition assessment and the periodic nutrition surveys of the population as a whole should be done by measuring the weight and height of a random sample of the child population (as explained below). Initially such surveys should be carried out every two to three months. When conditions have stabilized, once every six to twelve months is sufficient. Any change or trend in nutritional status can thus be detected and appropriate adjustments made in the assistance programmes.

There is a serious nutritional emergency where the malnutrition rate is either over 15%, or over 10% with aggravating factors (e.g. an epidemic). Such a situation requires urgent action.

[3] *Average fuel-wood consumption per person per day in different refugee camps has varied from 0.9 kg to 4 kg.*

Recognizing and Measuring Malnutrition

27. Malnutrition can be recognized by clinical signs (such as oedema and micronutrient deficiencies) and by anthropometry (body measurements). Measurements such as weight-for-height are used as an objective assessment of nutritional status, which quantifies the nutritional situation at one point in time, and allows comparisons over time.

28. Mortality and morbidity information will assist in understanding the underlying causes of malnutrition and identify people who are most affected. Child mortality rates are particularly important.

In an emergency a high child mortality rate is very often associated with high levels of malnutrition.

Death rates among children who are severely malnourished can be about six to ten times greater than those who are healthy and well nourished in the same population.

29. ***Weight-for-height in children,*** is the best indicator to assess and monitor nutritional status of populations. The actual weight of a child is calculated as a percentage of the standard weight for a normal child of that height, or as a Z score. It is the most sensitive indicator of acute malnutrition and is preferred for nutrition surveys and for measuring individual progress in feeding programmes. It is usually young children aged between 6 and 59 months who are measured in nutrition surveys, because young children are the first to show signs of malnutrition in times of food shortage and are the most severely affected. When the ages of children are not known, 65 cm and 110 cm height are used as the cut off points instead of 6 and 59 months.

30. ***Body mass index*** (BMI) (Weight in kg)/(Height in m)^2, is used for assessing the nutritional status of adults by assessing the degree of thinness (see table 1).

31. ***Oedema*** is an essential nutrition indicator and indicates kwashiorkor (see Annex 3). Oedema is characterized by swelling in both feet due to an abnormal accumulation of fluid in intercellular spaces of the body.

32. ***Mid-upper-arm-circumference***
The mid upper arm circumference (MUAC) is measured on the left arm, at the mid-point between elbow and shoulder. MUAC should only be used as part of a two-step screening exercise. In the first step the MUAC of children is measured. Those falling below a certain cut-off circumference are then channelled to weight-for-height measurement to determine their nutritional status and whether they should be included in selective feeding programmes.

33. ***Weight-for-age*** and ***height-for-age*** are not such useful assessment indicators in emergencies as age is often difficult to determine. This can be used for growth monitoring of individual children, and in assessing long-term (chronic) malnutrition.

Moderate and Severe Malnutrition

34. The standard cut-off points to describe malnutrition, are between 70% and 80% weight-for-height (or between -3 and -2 Z scores) for moderately malnourished and less than 70% weight-for-height (or < -3 Z scores) for severely malnourished.

Children with oedema are always classified as severely malnourished.

Table 1 summarizes the key malnutrition indicators.

Table 1: Key Nutritional Indicators*

Malnutrition	Children under 5 years			Adults BMI
	Weight-for-height (W/H)% of median value [4]	Weight-for-height (W/H) in Z scores or SD's [5]	MUAC	
Moderate	70% to 79%	-3 to -2 Z	110 mm to<125 mm	16 - 17
Severe	less than 70%	less than -3 Z or oedema	< 110 mm, oedema	less than 16

* Results expressed by different methods are not directly comparable

[4] *Percentage below the median "reference" weight-for-height values.*

[5] *Standard deviations (SDs, or Z score) below the median "reference" weight-for-height values.*

General Feeding Programme

- A mean figure of 2,100 kcal per person per day is used as the planning figure for calculating the food energy requirements of refugees in emergencies in developing countries[6];
- Everyone in the population, irrespective of age or sex, should receive exactly the same general ration (i.e. same quantity and type of foods);
- The food basket should be nutritionally balanced and suitable for children and other groups at risk;
- Every effort should be made to provide familiar foodstuffs and maintain traditional food habits;
- The level of fat intake should provide at least 17% of the dietary energy of the ration. Protein intake should provide at least 10-12% of the total energy;
- The diet must meet essential vitamin and mineral requirements;
- Particular attention should be paid to locally prevalent nutrient deficiencies.

General Ration

35. Every effort should be made to provide familiar foodstuffs and maintain sound traditional food habits. Expert advice on the ration size and composition is essential and should take full account of local availability of food commodities. Staple food should not be changed simply because unfamiliar substitutes are readily available. Inappropriate foods often lead to waste and lower the morale of the refugees.

36. The first concern is to ensure that energy and protein requirements are met. The planning figure for the average minimum daily energy requirement per person per day for a developing country population at the beginning of an emergency is 2,100 kcal. See Annex 1 for examples of rations which meet this requirement. This average requirement is calculated on an average population containing men, women and children of different age groups. However, a complete ration should be provided to each refugee without distinction.

A minimum requirement of 2,100 kcal per person per day is used as the planning figure for a developing country population at the beginning of an emergency.

A population which contains mostly active adults may require considerably higher average energy intakes. In addition, a higher ration is vital for survival in a cold climate.

37. The daily energy requirement can be adjusted when the situation has stabilized[7] and detailed data is available. Factors to be taken into consideration are:

i. Age and sex composition of the population;

ii. Activity level;

iii. Climatic conditions;

iv. Health, nutritional and physiological status;

v. People's access to other food sources e.g. agriculture, trade, labour.

38. The food basket should comprise: a staple food source (cereals), an energy source (fats and oils), a protein source (legumes, blended foods, meat, fish), salt and possibly condiments (such as spices). Fresh foods should be included in the food basket for essential micronutrients. The level of fat intake should provide at least 17% of the dietary energy of the ration, and protein intake should provide at least 10-12% of the total energy.

39. When certain food commodities are not available, they can be replaced for a maximum of one month by other available food items in order to maintain the adequate energy and protein level. Substitution in energy value, should an item not be available, is:

Corn Soy Blend (CSB) for beans	1:1
Sugar for oil	2:1
Cereal for beans	2:1
Cereal for oil[8]	3:1

E.g. the energy from 20 g of sugar can substitute for that from 10 g of vegetable oil.

40. Cereal flour, rather than whole grain, should be provided, especially at the beginning of an emergency. Considerable fuel savings are made by using milled rather than whole grain. If whole grains are provided, local milling should be made available and the cost compensated for.

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[6] *The Management of Nutritional Emergencies in Large Populations, WHO, Geneva, 1978.*

[7] *See for further information: WFP/UNHCR Guidelines for Estimating Food and Nutritional Needs in Emergencies, 1997.*

[8] *One way only, note that oil cannot be used in place of cereal.*

41. Essential vitamin and mineral requirements must also be met. The basic food commodities distributed through the general ration do not normally cover the required amounts of vitamins and minerals. Therefore, deficiencies often arise among populations entirely dependent on external food aid and within a population among vulnerable groups like infants, pregnant women and nursing mothers. Particular attention should also be paid to locally prevalent nutrient deficiencies.

42. The risk of specific nutrient deficiencies can be estimated from the composition of the general ration and access the population has to other food sources in the area. Possible options for providing vitamins and minerals are:

i. Provide fresh food products;

ii. Promote the production of vegetables and fruits;

iii. Add to the ration a food rich in a particular vitamin and micronutrient such as fortified cereals, blended foods, or condiments;

iv. Provide supplements in tablet form, which is the least preferred option.

43. Wherever possible the refugees should be encouraged to grow vegetables themselves: the production of fresh food by refugees not only improves and diversifies the diet but saves fuel and provides an opportunity to generate some income. Larger plot sizes and the provision of appropriate seeds would facilitate this, however, it can be difficult to encourage refugees to produce fresh food because of their uncertainty as to the length of their stay and problems of access to land.

Food Distribution

44. The need for a fair, efficient and regular food distribution cannot be over-emphasized. This is discussed in chapter 13 on commodity distribution. There are two main types of distribution: dry ration and cooked meals.

45. Dry food distribution (which is taken home) has major advantages over cooked food distribution. It allows families to prepare their food and to use their time as they wish, permits them to continue to eat together as a unit and is more culturally and socially acceptable. It also reduces the risk of the spread of infectious diseases.

46. Cooked meal distribution requires centralized kitchens with adequate utensils, water and fuel (the requirement is less than the amount required for family cooking), and trained personnel. The refugees usually sit together in a feeding compound, although in some circumstances families can carry the cooked meal to their accommodation. At least two meals must be served each day.

Cooked meals are much more difficult to organize efficiently than dry ration distribution, particularly for large numbers.

Cooked meal distribution to the whole population is therefore only provided under exceptional circumstances when the refugees do not have access to adequate water and/or cooking fuel and in insecure situations.

47. In addition to cooking pots, fuel and utensils, the refugees must have containers and sacks to protect and store their food rations. Oil tins and grain bags will be useful, and contracts with suppliers, at least for initial deliveries, should not require their return.

Monitoring the General Feeding Programme

48. The general feeding programme can be monitored by:

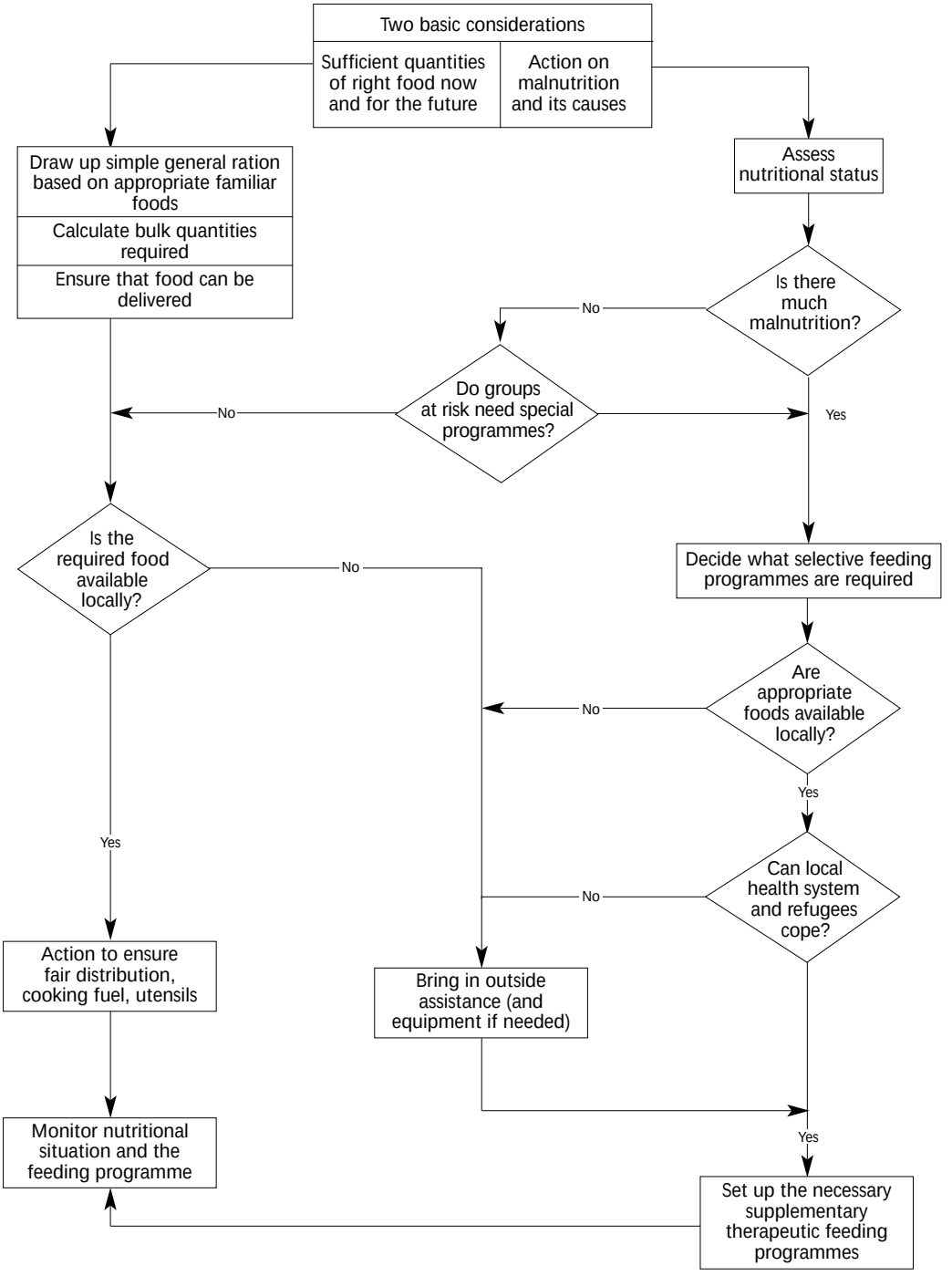
- ❏ Food basket monitoring: Comparing the quantity and quality of food collected by the refugees at the distribution site on distribution days compared with the planned ration, Also by monitoring after the distribution at household level through house visits (on distribution day);
- ❏ Discussing the quality and quantity of the rations regularly with the refugees;
- ❏ Investigating complaints.

For more information on how to monitor the general food programme see UNHCR's Commodity Distribution: A Practical Guide For Field Staff, and MSF's Nutrition Guidelines.

Selective Feeding Programmes

- ◆ The objective of a selective feeding programme is to reduce the prevalence of malnutrition and mortality among the groups at risk;
- ◆ Selective feeding programmes provide **extra** food for the malnourished and at-risk groups – this food must be in addition to (not a substitute for) the general feeding programme;
- ◆ The programme must actively identify those who are eligible for the selective feeding programmes, using criteria described in this chapter.

Figure 2 – Response to food and nutritional needs



General Principles of Selective Feeding Programmes

49. Where malnutrition exists or the needs of the groups at risk cannot be met through the general ration, special arrangements are required to provide extra food. This is organized through different types of selective feeding programmes which take into account the degree of malnutrition and associated risks. In the emergency phase of an operation, selective feeding programmes are part of an emergency measure to prevent excess mortality. However, preventing excess mortality should be a combined strategy of selective feeding, public health and emergency health care. Ref. Figure 2.

The organization of these programmes should be integrated from the beginning with community and health services and especially with Mother and Child Health Care programmes (MCH).

50. Malnutrition develops particularly among infants, children, pregnant women, nursing mothers, the elderly and the sick. Their vulnerability stems from the greater nutrient requirements associated with growth, the production of breast milk, repair of tissues and production of antibodies. Malnutrition results in lower resistance to infection, which in turn results in further malnutrition. Small children are particularly susceptible to this cycle of infection and malnutrition. Sick children must eat and drink even if they do not have an appetite, are vomiting, or have diarrhoea. Because children are unable to eat a large volume of food, it is necessary to prepare food in a concentrated form (giving the required nutrients in less volume), and to provide more frequent meals.

51. Certain other groups or individuals may be at risk of malnutrition for social or economic reasons. These include unaccompanied children, the disabled, single-parent families, and the elderly, particularly those without family support. In some communities specific social or cultural practices and taboos may put constraints on meeting the nutritional needs of certain persons, for example pregnant women and nursing mothers or even sick children.

52. Even if the overall quantity of food is sufficient there may be other causes such as:

i. Inequities in the distribution system reducing access to food for certain groups;

ii. Inaccuracies in registration or unfair distribution of ration cards;

iii. Infections;

iv. Faulty feeding or food preparation habits.

Selective feeding programmes are not a substitute for an inadequate general ration.

53. The following types of selective feeding programmes are contemplated:

i. Supplementary Feeding Programmes (SFP)

   a) Targeted SFP

   b) Blanket SFP;

ii. Therapeutic Feeding Programmes.

To be effective, the extra ration provided must be additional to, and not a substitute for, the general ration.

Supplementary Feeding Programmes (SFP)

54. Targeted and blanket supplementary feeding programmes provide extra food to groups at risk, in addition to the general ration, as dry take-home or wet on-the-spot feeding for a limited period of time.

55. A targeted SFP aims to rehabilitate those who are moderately malnourished. These could be children adults or older persons and/or individuals selected on medical or social grounds, e.g. pregnant and nursing women and the sick. This is the most common type of supplementary feeding programme.

56. A blanket SFP provides a food (and/or micronutrient) supplement to all members of a certain vulnerable group regardless of their individual nutritional status in order to prevent a deterioration in the nutritional status of those groups most at risk (usually children under five, pregnant women and nursing mothers.

57. Supplementary feeding programmes can be implemented either by giving wet or dry rations.

Therapeutic Feeding Programmes (TFP)

58. A TFP aims to reduce deaths among infants and young children with severe protein-energy malnutrition (PEM). The forms of PEM are described in Annex 3. Generally the target group is children under 5 years with severe malnutrition. Therapeutic feeding can either be implemented in special feeding centres or in a hospital or clinic. TFP involves intensive medical and nutritional treatment. Therapeutic milk (TM) is used for treatment of severely

malnourished children. However if TM is not available, high protein milk can be used (dried skimmed milk, oil and sugar) mixed with vitamin mineral supplements.

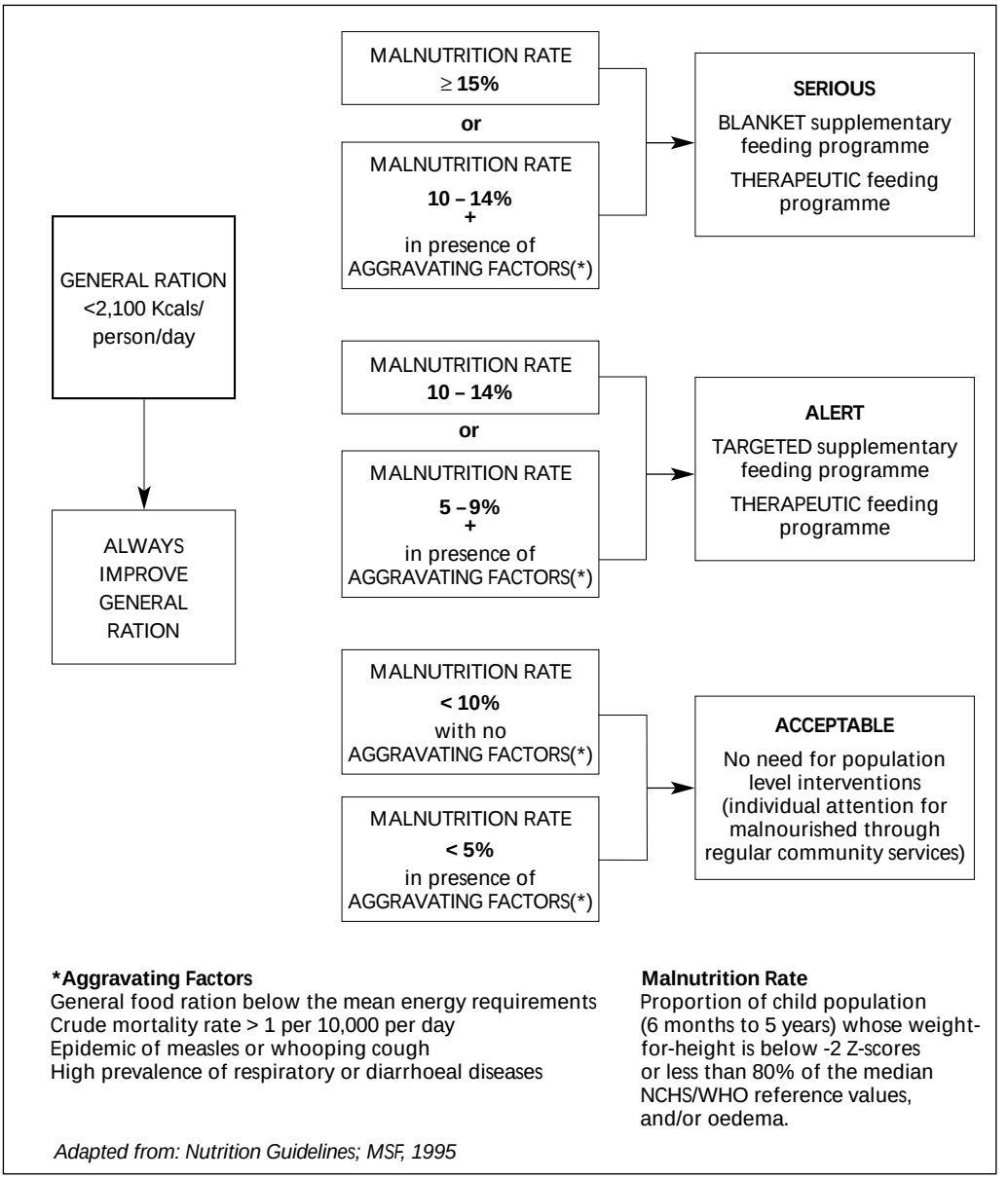
Starting a Selective Feeding Programme

59. The decision to start a selective feeding programme is based on the prevalence of malnutrition and other aggravating factors. Aggravating factors include high mortality (more than 1 person per 10,000 per day), measles epidemic, high prevalence of infectious diarrhoea, general ration below minimum requirements. The prevalence of malnutrition is assessed from the initial and ongoing nutrition assessments and surveys.

In all situations, remember that it is more important to address the root causes of malnutrition than to address symptoms through selective feeding programmes.

60. The effectiveness of these programmes will be severely compromised if an adequate general ration is not provided.

Figure 3 – Selective Feeding Programmes



***Aggravating Factors**
General food ration below the mean energy requirements
Crude mortality rate > 1 per 10,000 per day
Epidemic of measles or whooping cough
High prevalence of respiratory or diarrhoeal diseases

Malnutrition Rate
Proportion of child population (6 months to 5 years) whose weight-for-height is below -2 Z-scores or less than 80% of the median NCHS/WHO reference values, and/or oedema.

Adapted from: Nutrition Guidelines; MSF, 1995

61. Figure 3 provides guidance on deciding when to initiate selective feeding programmes. Clear criteria for the termination of these programmes should be defined from the beginning.

Identifying Those Eligible

62. Selective feeding programmes must be based on the active identification and follow up of those considered at risk. Beneficiaries can be identified by:

- ❏ House to house visits to identify all members of a targeted group (e.g. children under five, elderly people);
- ❏ Mass screening of all children to identify those moderately or severely malnourished;
- ❏ Screening on arrival (for example with the registration exercise);
- ❏ Referrals by community services and health services.

63. Table 2 below summarizes the main objectives, target groups and criteria for selection of beneficiaries of selective feeding programmes.

Table 2 – Types of Selective Feeding Progammes

Programme	Objectives	Criteria for selection and target group
Targeted SFP	• Correct moderate malnutrition • Prevent moderately malnourished from becoming severely malnourished • Reduce mortality and morbidity risk in children under 5 years • Provide nutritional support to selected pregnant women and nursing mothers • Provide follow up service to those discharged from therapeutic feeding programmes	• Children under 5 years moderately malnourished: → between 70% and 80% of the median weight-for-height or: → between -3 and -2 Z-scores weight-for-height • Malnourished individuals (based on weight-for-height, BMI, MUAC or clinical signs): → older children (between 5 and 10 years) → adolescents → adults and elderly persons → medical referrals • Selected pregnant women (from date of confirmed pregnancy) and nursing mothers (until 6 months after delivery), for instance using MUAC <22 cm as a cut-off indicator for pregnant women • Referrals from TFP
Blanket SFP	• Prevent deterioration of nutritional situation • Reduce prevalence of acute malnutrition in children under 5 years • Ensure safety net measures • Reduce mortality and morbidity risk	• Children under 3 or under 5 years • All pregnant women (from date of confirmed pregnancy) and nursing mothers (until maximum 6 months after delivery • Other at-risk groups
TFP	• Reduce excess mortality and morbidity risk in children under 5 years • Provide medical/nutritional treatment for the severely malnourished	• Children under 5 years severely malnourished: → < 70% of the median weight-for-height and/or oedema or: → < -3 Z-scores weight-for-height and/or oedema • Severly malnourished children older than 5 years, adolescents and adults admitted based on available weight-for-height standards or presence of oedema • Low Birth Weight babies • Orphans < 1 year (only when traditional care practices are inadequate) • Mothers of children younger than one year with breast feeding failure (only in exceptional cases where relactation through counselling and traditional alternative feeding have failed)

64. The links between different selective feeding programmes and the criteria for entry and discharge from a programme are shown in figure 4 below.

Planning and Organizing a Selective Feeding Programme.

Organizing a Supplementary Feeding Programme

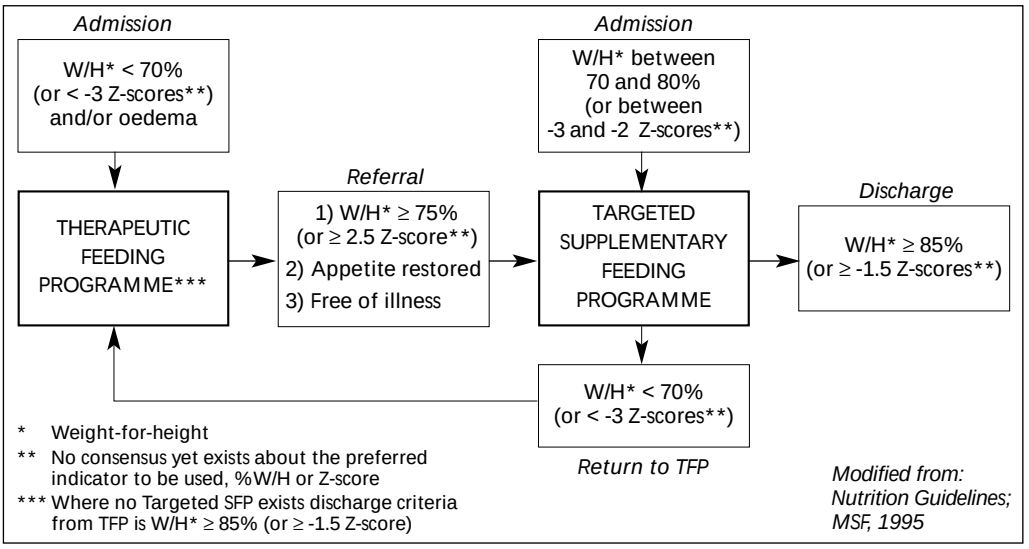
65. Supplementary feeding programmes can be implemented either by providing wet rations or dry rations.

i. Wet rations are prepared in the kitchen of a feeding centre and consumed on-site. The beneficiary, or child and caretaker, have to come for all meals to the feeding centre every day;

ii. Dry rations are distributed to take home for preparation and consumption. Rations are usually distributed once a week.

66. In most situations dry take-home SFP programmes are preferable. The advantages of dry instead of wet rations for SFP include:

Figure 4 – Admission and discharge Criteria



i. Much easier to organize;

ii. Fewer staff are needed;

iii. Lower risk of transmission of communicable diseases;

iv. Less time-consuming for the mother;

v. The mother's responsibility for feeding the child is preserved.

The ration for dry feeding however has to be higher than for wet feeding in order to compensate for sharing and substitution. Wet rations are typically given in situations where insecurity prevents dry rations from being taken home safely or where access to cooking facilities are limited. See Table 3 below for some of the main considerations when organizing a selective feeding programme.

Organizing a Therapeutic Feeding Programme

67. Therapeutic feeding programmes are either implemented in specially organized feeding centres or in hospitals or clinics. They involve intensive medical and nutritional treatment as well as rehydration. The programme should be easily accessible to the population, near to or integrated into a health facility. The treatment should be carried out in phases (see Table 3), the length of which depend on the severity of malnutrition and/or medical complications. At least during the first week of a TFP, care has to be provided on a 24-hour basis.

Table 3

Organization of Selective Feeding Programmes			
	Supplementary Feeding Programme		**Therapeutic Feeding Programme**
Organization	• On site wet feeding • Some medical care On site feeding would usually only be considered for targeted SFP	• Take home dry feeding This is the preferred option for both blanket and targeted programmes	• On site wet feeding + • Intensive medical care + • Psychological stimulation during rehabilitation phase
Size of extra ration	• 500 - 700 kcal/ person/day, and • 15-25 g protein	• 1,000 - 1,200 kcal/person/day, and • 35-45 g protein	• 150 kcal/kg body-weight/day/ patient. and • 3-4 g protein per kg body-weight/day/patient
Frequency of meals	Minimum 2 meals/day	Ration distributed once per week	Frequent meals. Phase 1: 8-10 meals over a 24 hour period Rehabilitation phase: 4-6 meals

68. One of the main constraints to the implementation of a TFP is the lack of experienced or insufficient staff to manage the programme. Proper training of both medical and non-medical personnel is essential before starting the programme. The refugees, particularly the mothers of patients, must be involved in managing the TFP centres.

Planning the quantity of food needed for selective feeding

69. The amount of food needed for the selective feeding programme will depend on:

i. The type of selective programme;

ii. The type of commodities;

iii. The expected number of beneficiaries.

70. This information should be based on precise demographic information and on the prevalence of malnutrition taken from the results of the nutritional survey. The nutritionist will advise on the appropriate commodities and type of programme.

71. However, in some circumstances, estimates on the prevalence of malnutrition and expected number of beneficiaries may need to be made for planning purposes, when for example a registration and nutrition assessment have not yet been carried out. See table 4 below for a projected demographic breakdown for a typical population.

72. If it is apparent that there is, or is likely to be, a major nutritional emergency, the following assumptions can be made for planning purposes:

i. 15 to 20% may suffer from moderate malnutrition;

ii. 2 to 3% may be severely malnourished;

iii. The breakdown of a typical population, by age, is as follows:

Table 4

Projected Breakdown by Age	
age groups	% total population
0-4 or under 5	15-20%
Pregnant	1.5 - 3%
Lactating	3-5%

73. For example, to estimate the number of beneficiaries for a targeted SFP and TFP, both for children under 5 years:

If the total population = 30,000
Estimated number under 5 yrs = 4,500 – 6,000 (15-20%)

Estimated prevalence of moderate malnutrition (15%) gives 675-900 children

Estimated prevalence of severe malnutrition (2%) gives 90-120 children

With these numbers the estimated food requirements can be calculated by multiplying the estimated number of beneficiaries for each programme by the ration scale appropriate for each beneficiary, as follows:

Quantity of Commodity req. =
Ration / person / day x no. benef. x no. days

Monitoring Selective Feeding Programmes

74. The effectiveness of impact of the selective feeding programme should be monitored at regular intervals.

75. Selective feeding programmes should be monitored and evaluated to assess their performance in relation to the established objectives[9]. Monitoring and evaluation will involve the regular collection and analysis of:

- ❏ Process indicators such as attendance, coverage and recovery rates, to evaluate the success in implementation and trends in the programme over time;
- ❏ Impact indicators such as malnutrition prevalence, mortality rate and numbers served, to evaluate the effectiveness and efficacy of the programme.

76. The effectiveness of selective feeding programmes can be measured through nutrition surveys and the regular collection of feeding centre statistics. Specific forms for monthly reporting on supplementary and therapeutic feeding programmes are attached as Annexes 4 and 5. A nutrition survey results form (weight-for-height) is also attached (Annex 6).

77. Trends in health and nutrition indicators can be related to many different factors. Actions in other sectors such as water, shelter, or community services may help explain a positive outcome.

Criteria for Closing Programmes

78. Once the number of malnourished is significantly reduced, it may be more efficient to manage the remaining severely malnourished individuals through health facilities and through community based programmes. The specific criteria for closing each selective feed-

[9] For further reference, consult Chapter 8: Evaluation of Feeding Programmes in the MSF Nutrition Guidelines.

ing programme will depend on the degree of success in reducing the main aggravating factors mentioned in Figure 3 and on the degree of integration between these feeding programmes and mother and child health (MCH) activities and other support services offered by the refugee community.

79. After closing selective feeding programmes, any deterioration of the situation should be detected by nutrition surveys undertaken at regular intervals and review of morbidity and mortality data. This is especially important if the overall situation remains unstable.

Infant Feeding and use of Milk Products

- Breast-feeding is best for babies and must be promoted and continued for as long as possible;
- Ban baby bottles completely;
- Weaning foods must be appropriate; foreign baby foods and special foods often are not;
- Infant formulae should be avoided and used only under strictly controlled conditions, with a cup and spoon;
- Re-stimulate lactation[10] in cases where milk production has been affected by stress and use wet nursing where appropriate;
- Milk products, especially powdered milk, and infant formulae can cause health problems (as described below) and they are often inappropriate.

80. Human milk is the best and safest for infants and children under two years. Breast-feeding provides a secure and hygienic source of food, often initially the only source of food, as well as antibodies giving protection against some infectious diseases. Breast feeding must be encouraged for as long as possible. Every effort must be made to promote or re-stimulate lactation even among sick and malnourished mothers. Experience has shown that this can be done. Mothers may need to receive extra food to encourage breast-feeding and provide the additional calories and nutrients required. This should be done through the feeding programmes.

81. The problems associated with infant formulae, milk products and feeding bottles are exacerbated in a refugee emergency. Clean boiled water is essential but rarely available, careful dilution of the feeds is of critical importance but difficult to control, mothers are unlikely to be familiar with the use of infant formulae, and the instructions are often in a foreign language. Infant formulae, if unavoidable, should be distributed from health or feeding centres under strictly controlled conditions and proper supervision. Infant feeding bottles must never be distributed or used; they are almost impossible to sterilize and keep sterile under emergency conditions and are therefore dangerous. Babies should be fed by clean cup and spoon if necessary. Appropriate weaning foods should be introduced while breast-feeding is continuing. Weaning foods should be locally available foodstuffs and as far as possible be prepared in the traditional manner. Overseas donations of tinned baby foods are rarely appropriate.

Policy On Use of Milk Powder[11]

i. Never distribute milk powder, by itself, to take home. It should be mixed with cereal flour, six parts cereal to one part milk powder;
ii. Never let liquid milk be carried home;
iii. Only use dried milk in supervised wet feeding programmes as a high energy drink mixed with oil and sugar;
iv. Dried skimmed milk should always be fortified with Vitamin A and have a shelf-life of more than six months.

Key References

Calculation of Nutritional value of Food Commodities (NUT-VAL), an EXCEL spreadsheet which can be used to calculate the nutritional value of ration scales, UNHCR, Geneva, 1998.

Commodity Distribution: A Practical Guide For Field Staff, UNHCR, June 1997.

IOM 88/89 – FOM 76/89 Policy for acceptance, distribution and use of milk products in refugee feeding programmes, UNHCR, Geneva, 1989. Also available in French.*Memorandum of Un-*

[10] *Re-stimulate lactation refers to the re-establishment of an adequate volume of milk release. This is achieved by increasing suckling and through social peer support.*

[11] *UNHCR IOM 88/89/FOM 76/89 Policy Directive for acceptance, distribution and use of milk products in refugee feeding centres, UNHCR, Geneva.*

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Glossary

Anthropometric measurements	Assessment of body size and composition which reflects food intake, physical activity and disease. Most common anthropometric indicators include weight, height and arm circumference.
Baseline data	Data collected at the beginning of a programme that can be compared with similar data collected later and so used to evaluate the impact of interventions or to monitor trends.
Body Mass Index (BMI)	(weight in kg)/ (height in m)^2 which is used for assessing the nutritional status of adolescents and adults.
Fortified blended food	A flour composed of pre-cooked cereals and a protein source, mostly legumes, fortified with vitamins and minerals, e.g. corn soya blend (CSB), wheat soya blend (WSB) used for feeding programmes.
Fortification	Adding micronutrients to foods, e.g. iodized salt and fortified blended food.
Kilocalorie	Unit of energy used in nutrition, 1 Kcal = 4.17 kilojoules.
Kwashiorkor	Severe form of malnutrition characterized by oedema (swelling) particularly of the lower parts of the arms and legs.
Marasmus	Severe form of malnutrition in which the person becomes wasted.
Micronutrients	Minerals and vitamins.
Mid-upper arm circumference (MUAC)	Circumference at the mid-point of the left upper arm, which is an indicator of malnutrition and used as a tool for screening.
Nutrients	Those parts of food that are absorbed and/or used by the body i.e. carbohydrate, protein, fat, alcohol, vitamins and minerals.
Oedema	An abnormal accumulation of fluid in intercellular spaces of the body. In case of nutritional oedema this is oedema due to a deficiency in the diet.
On-site feeding	Cooked meal eaten at the feeding centre.
Stunting	Low height for age. Comparing the height of a child of a certain age with the height of reference (healthy) children of the same age indicates the level of chronic malnutrition.
Take-home rations	Dry rations that are given to people to take and prepare at home.
Therapeutic milk	Special milk used for rehabilitation of severely malnourished persons.
Wasting	Abnormal loss of fat and/or muscle tissue which is indicated by a low weight for height, a low body mass index or observation (thinness).
Xerophthalmia	Clinical signs in the eye caused by Vitamin A deficiency.
Weight-for-Height	The weight of a person at a certain height compared with the reference weight for that height.

All foods are made up of five basic types of nutrient in addition to variable amounts of water.

Carbohydrates, the main source of energy, provide 4 kcal/g. They are mostly starches and sugars of vegetable origin, and are a major component of cereals and tubers.

Fats and oils provide the most concentrated source of energy, and have more than twice the energy content per weight of carbohydrates and proteins (9/kcal/g).

Proteins are body-building substances required for growth and tissue repair. Protein is found in foods of animal origin and in cereals and legumes and provide 4 kcal/g.

Vitamins and minerals are needed in small quantities for the adequate functioning of the body and protection against disease. Fresh vegetables and fruits are a good source of vitamins. Water soluble vitamins are fragile and cannot be stored (Vitamins Bs and C), whereas fat soluble vitamins can be stored in the body (Vitamin A and D). Important minerals are iron, sodium, iodine, zinc, magnesium, potassium, etc. Individual vitamins and minerals or combinations are found in all foods in very variable amounts.

Energy and Protein Intakes

If the energy intake is inadequate, some protein will be burnt to provide energy. That is, it will be used in the same ways as carbohydrate or fat. More than 20% of the energy requirement should be supplied from fats and oils which greatly enhance the palatability of the diet and increase energy density (important for younger children). Energy requirements vary widely even in normal individuals. They are also increased by physical activity. Much higher energy and protein intakes are required for the treatment of malnutrition, when the aim is rehabilitation rather than maintenance.

Food and Diets

Most diets in most countries contain adequate amounts of all the nutrients required for good health if enough of the diet is taken to satisfy the individual's energy requirements. Even a growing child, if healthy, requires no more than 10% of total calories to be supplied from protein sources.

Annex 1 (cont.) – Nutritional Value Of Food Commodities

COMMODITY	Nutritional Value / 100 g			Price per MT in US$
	Energy Kcal	Protein (g)	Fat (g)	
Cereals				
Wheat	330	12.3	1.5	165
Rice	360	7.0	0.5	280
Sorghum / Millet	335	11.0	3.0	200
Maize	350	10.0	4.0	170
Processed Cereals				
Maize meal	360	9.0	3.5	225
Wheat flour	350	11.5	1.5	240
Bulgur wheat	350	11.0	1.5	220
Blended Food				
Corn Soya Blend	380	18.0	6.0	320
Wheat Soya Blend	370	20.0	6.0	390
Soya-fortified bulgur wheat	350	17.0	1.5	240
Soya-fortified maize meal	390	13.0	1.5	270
Soya-fortified wheat flour	360	16.0	1.3	240
Soya-fortified sorghum grits	360	16.0	1.0	190
Dairy Products				
Dried Skim Milk (enriched)	360	36.0	1.0	1,900
Dried Skim Milk (plain)	360	36.0	1.0	1,800
Dried Whole Milk	500	25.0	27.0	2,200
Canned cheese	355	22.5	28.0	1,850
Therapeutic milk	540	14.7	31.5	2,200
Meat and Fish				
Canned meat	220	21.0	15.0	1,950
Dried salted fish	270	47.0	7.5	1,500
Canned fish	305	22.0	24.0	2,000
Oils and Fats				
Vegetable oil	885	-	100.0	750
Butter oil	860	-	98.0	2,300
Edible fat	900	-	100.0	950
Pulses				
Beans	335	20.0	1.2	440
Peas	335	22.0	1.4	375
Lentils	340	20.0	0.6	500
Miscellaneous				
Sugar	400	-	-	350
High Energy Biscuits	450	12.0	15.0	1,250
Tea (black)	-	-	-	1,235
Iodized salt	-	-	-	150
Dates	245	2.0	0.5	1,900
Dried fruit	270	4.0	0.5	1,200

Note: The prices quoted are free-on-board (FOB) and therefore do not include transportation costs. The prices shown are as of 1998 and will vary over time. This information is regularly updated and published by WFP and is available from WFP HQ's or from their offices in the field.

Annex 1 (cont.) – Characteristics of Common Foods

	Food type	Vitamins and minerals	Comments
1.	Cereal grains (rice, corn, sorghum, oats, etc.)	Contain vitamin B and iron. However these are reduced by milling, i.e. the whiter the flour the greater the loss of vitamins.	The main source of both energy and protein in most diets.
2.	Legumes / oilseeds (beans, peas, soya, ground-nuts, etc.)	B complex vitamins. Most contain significant quantities of iron and calcium.	Legumes are particularly useful when eaten with cereals as the proteins complement each other.
3.	Whole tubers and roots (yams, taro, cassava, sweet potato, potato, etc.)	Variable but generally low, except for potatoes which are rich in vitamin C.	Bulk and low protein content makes them unsuitable as staple foods in emergencies.
4.	Vegetables and fruits	Important source of vitamins and minerals. Variable quantities of B and C vitamins. Dark green leaves or yellow/red pigmentation usually indicates vitamin A compounds.	
5.	Meat, milk and dairy products, eggs, etc.	Good sources of B vitamins. Whole milk and eggs also good source of vitamin A. Milk and eggs provide significant amounts of calcium.	Usually consumed in very small quantities in normal times. They are more readily used by the body than proteins of vegetable origin. Therefore small quantities useful to improve the quality and palatability of diet.
6.	Fish, dried	Rich source of calcium and iron. Contains B Vitamins.	A concentrated source of protein for those who like it. Therefore acceptability trials essential before use.
7.	Fats and oils	Fats derived from milk are sources of vitamin A and D, while vegetable fats contain no vitamin A and D, except for red palm-oil.	Useful way to increase energy intake without increasing bulk of diet. Improves palatability and helps in food preparation.

Examples of adequate full rations for the affected population entirely reliant on food assistance[12]

Five types of rations are shown to illustrate differences due to such factors as the food habits of the population and the acceptability and availability of the commodities in the region.

Items	Rations (quantity in grams per person per day)				
	Type 1*	Type 2*	Type 3*	Type 4**	Type 5*
Cereal flour/rice/bulgur	400	420	350	420	450
Pulses	60	50	100	60	50
Oil (vit. A fortified)	25	25	25	30	25
Canned fish/meat	–	20	–	30	–
Fortified blended foods	50	40	50	–	–
Sugar	15	–	20	20	20
Iodized salt	5	5	5	5	5
Fresh veg./fruits	–	–	–	–	100
Spices	–	–	–	–	5
Energy: kilocalories Protein (in g and in % kcal) Fat (in g and in % kcal)*	2113 58 g; 11% 43 g; 18%	2106 60 g; 11% 47 g; 20%	2087 72 g; 14% 43 g; 18%	2092 45 g; 9% 38 g; 16%	2116 51 g; 10% 41 g; 17%

** For rations 1, 2, 3, & 5 the cereal used for the calculation is maize meal*

***This ration has rice as a cereal; the low percentage energy for protein is acceptable due to its high quality; the slightly low fat content is in line with food habits in rice-eating countries*

Examples of Typical Daily Rations for SFPs (in grammes per person per day)

	Take-home or dry ration		On-site feeding or wet ration				
Item	Ration 1	Ration 2	Ration 3	Ration 4	Ration 5	Ration 6	Ration 7
Blended food, fortified	**250**	**200**	**100**			**125**	**100**
Cereal					**125**		
High Energy Biscuits (HEB)				**125**[13]			
Oil, fortified with vitamin A	**25**	**20**	**15**		**20**	**10**	**10**
Pulses			**30**		**30**		
Sugar	**20**	**15**				**10**	**10**
Salt, iodized			**5**				
Energy (Kcal)	**1250**	**1000**	**620**	**560**	**700**	**605**	**510**
Protein (g)	**45**	**36**	**25**	**15**	**20**	**23**	**18**
Fat % Kcal	**30**	**30**	**30**	**30**[14]	**28**	**26**	**29**

[12] *WFP/UNHCR Guidelines for estimating food and nutritional needs. December, 1997.*

[13] *WFP Specification.*

[14] *High Energy biscuits with 15% fat meet the energy density requirement.*

Protein-energy malnutrition (PEM) is likely to be the most important health problem and a leading cause of death during an emergency. There are several forms:

> ***Marasmus*** is marked by the severe wasting of fat and muscle, which the body has broken down for energy, leaving "skin and bones". It is the most common form of PEM in nutritional emergencies.
>
> ***Kwashiorkor*** is characterized essentially by oedema (swelling which usually starts in the feet and legs), sometimes accompanied by a characteristic skin rash and/or changes in hair colour (reddish). The hair becomes sparse.
>
> In ***Marasmic kwashiorkor*** there is a combination of severe wasting and oedema.

Children under 5 years are usually the most affected, but older children and adults are also often at risk or affected. The treatment of severe forms of PEM is presented in the section on selective feeding programmes.

Vitamin and mineral deficiencies can cause long-lasting or permanent disabilities and can be fatal. The deficiencies most likely to occur include:

> ***Iron*** *deficiency* (1) causes ***anaemia***. (signs: pallor of skin and eyelids, fatigue, weakness and shortness of breath); (2) increases the risk of haemorrhage, infection and death associated with childbirth; (3) increases rates of low-birth-weight and (4) impairs the cognitive development of infants and children.
>
> ***Iodine*** *deficiency* causes not only ***goitre*** but also some impairment of intellectual development of children and of reproductive performance in women. Severe maternal deficiency can cause cretinism in the offspring. Best prevented in emergencies by the use of Iodized salt.
>
> ***Vitamin A*** *deficiency* causes ***Xerophthalmia***, blindness and death. Eye signs: poor vision in dim light, dryness of conjunctiva or cornea, foamy material on the conjunctiva or clouding of the cornea itself. These signs may appear after several months of an inadequate diet, or following acute or prolonged infections, particularly measles and diarrhoea.
>
> ***Vitamin B1 (Thiamine)*** *deficiency* causes ***beri-beri***. Symptoms and signs: loss of appetite, malaise and severe weakness, especially in the legs; may also lead to paralysis of the limbs or swelling of the body, heart failure and sudden death. Beri-beri occurs when the diet consists almost exclusively of white polished rice or starchy staple such as cassava.
>
> ***Vitamin C*** *deficiency* causes ***scurvy***. Signs: swollen gums which bleed easily, swollen painful joints, easy bruising. This occurs due to a lack of fresh vegetables and fruits.
>
> ***Niacin*** *deficiency* causes ***pellagra***. Signs: skin rash on parts of body exposed to sunlight; diarrhoea; and mental changes leading to dementia. This occurs especially where maize and sorghum are the staples and there is a lack of other foods.

Prevention involves ensuring that people receive or have access to a variety of foods that contain sufficient quantities of essential vitamins and minerals. This also includes fortified food items distributed in food aid, access to local markets, and produce from home gardens.

Treatment consists of administering therapeutic doses of the missing nutrients. The distribution of multi-vitamin tablets to the entire refugee population is a waste of time and money, since they contain insufficient quantities of individual vitamins to correct deficiencies.

[15] *Adapted from: The Management of Nutritional Emergencies in Large Populations, WHO, Geneva, 1999 (in press).*

Annex 4 – Reporting Form: Supplementary Feeding Programme

Country: Period: Total population:
Location: Under (<) 5 population
Agency: Moderate malnutrition rate:
Target <5 (moderate malnutrition rate *<5 pop):
Theoretical coverage <5 (new total (J)/Target):

	CATEGORIES							
	< 5 years		≥ 5 years		Pregnant women	Lactating women	TOTAL	
	M	F	M	F				
Total at end of last month (A)								
New Admissions:								
< 80% WFH or < -2 Z-score								
Others								
Total New Admissions (B)								
Re-admissions (C)								
Total Admissions (D=B+C)								
Discharged in this period:								percentage for <5 yrs (target):
Discharges (E)								E/I* 100% = (>70%)
Deaths (F)								F/I* 100% = (<3%)
Defaulters (G)								G/I* 100% = (<15%)
Referrals (H)								
Total Discharged (I=E+F+G+H)								
New Total at end of this month (J=A+D-I)								

Average length of stay in the programme
(from all or a sample of 30 recovered children) (target <60 days) =

$$\frac{\text{Total No of days of admission of all (or 30) recovered children}}{\text{No of recovered children (or 30)}}$$

Comments:

Annex 5 – Reporting Form: Therapeutic Feeding Programme

Country: Period: Total population:
Location: Under (<) 5 population
Agency: Moderate malnutrition rate:
Target <5 (moderate malnutrition rate *<5 pop):
Theoretical coverage <5 (new total (J)/Target):

	CATEGORIES							
	< 5 years		≥ 5 years		Adults		TOTAL	
	M	F	M	F	M	F		
Total at end of last month (A)								
New Admissions:								
< 70% WFH or < -3 Z-score								
Kwashiorkor								
Others								
Total New Admissions (B)								
Re-admissions (C)								
Total Admissions (D=B+C)								
Discharged this month:								percentage for <5 yrs (target):
Discharged (E)								E/I* 100%= (>75%)
Deaths (F)								F/I* 100%= (<10%)
Defaulters (G)								G/I* 100%= (<15%)
Referrals (H)								
Total Discharged (I=E+F+G+H)								
New Total at end of this month (J=A+D-I)								

Causes of death:

Average weight gain during last month (from all or a sample of 30 children) (target: >8 g/kg/day) =

$$\frac{\text{weight at end of month (or on exit)} - \text{lowest weight recorded during month}}{\text{lowest weight recorded in last month } \mathbf{x} \text{ No of days between lowest weight recorded and end of month (or on exit)}}$$

Average weight gain for ***marsmus*** (include only children in phase II) =
Average weight gain for ***kwashiorkor*** (include only children in phase II after complete loss of oedema) =

Average length of stay in the programme (from all or a sample of 30 recovered children) (target <30 days) =

$$\frac{\text{Total No of days of admission of all (or 30) recovered children}}{\text{No of recovered children (or 30)}}$$

Annex 6 – Nutrition Survey Reporting Form

Country:
Camp:
Date of reporting:

Population	Male		Female		Total
	number	%	number	%	number
total population					
under five population					

Survey						
date:	...../...../...../					
method:	random – systematic – cluster					
sample size:						
under five population (6-59 month or 65-110 cm)	Male number	%	Female number	%	Total number	

Results							
weight-for-height % median				weight-for-height Z-score			
category	number	%	confidence interval	category	number	%	confidence interval
<70% and/or oedema				≤3 and/or oedema			
>70 and >80%				≥3 nd ≥2			
total				total			

Other results:
(mean Z-score, mean SD, family size, % children in each category that is attending feeding center)

Comments/Observations:

Action/Intervention:

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Water

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Situation

Water is essential to life and health. In emergencies, it is often not available in adequate quantity and quality, thus creating a major health hazard.

Objective

To provide sufficient safe water for the refugees and to meet communal needs in the most cost-effective way.

Principles of response

- Give priority to quantity while respecting quality;
- Refugees should be directly involved in the development and operation of the water supply;
- Ensure consideration of water supply at the site selection and planning stages and coordinate response closely with physical planning, public health and environmental sanitation measures;
- If at all possible, avoid the need to treat water – it is better to use a source that does not need treatment. Treatment plants must always be correctly operated and maintained. If large numbers of refugees are concentrated in camps, disinfection of drinking water is absolutely necessary. Other types of treatment should be considered according to the characteristics of the raw water;
- Provide a reserve supply and spare capacity to meet temporary difficulties and the needs of new arrivals;
- Take account of seasonal variations in water quantity and quality;
- Seek expert advice and coordinate closely with the appropriate national services.

Action

- Calculate the water requirement and organize an immediate assessment of water supply possibilities;
- Make an inventory of water sources and assess all sources in terms of their water quality and yield;
- Protect existing water sources from pollution and provide good quantities of water of a reasonable quality;
- Improve access to supplies by developing sources and a storage and distribution system to deliver a sufficient amount of safe water, including a reserve supply;
- Ensure regular testing of water quality;
- Set up infrastructure for operation and maintenance;
- Maintain and update information on water resources obtained during needs assessment; planning, construction, operation and maintenance.

Introduction

1. People can survive longer without food than without water.

The provision of water demands immediate attention from the start of a refugee emergency. The aim is to assure availability of enough water to allow its effective distribution in the required quantities, and to ensure that it is safe to drink.

Adequate storage capacity and back up systems for all components of a water system must be assured; interruptions in the supply may be disastrous.

2. If it is evident that available sources are inadequate (in terms of yield or water quality), arrangements must be made to find alternative sources. If necessary, water may have to be imported to the site (by truck, barge, pipelines, etc.). Where even the most basic needs for water cannot be safely met by existing resources, or when time is needed for further exploration and development of new sources, refugees should be moved to a more suitable location.

3. Water quality is difficult to assess. Always assume that all water available during emergencies is contaminated, especially if it is taken from surface water bodies (lakes, ponds, rivers, etc.). All sources of water used by refugees must be separated from sanitation facilities and other sources of contamination. In many circumstances, treatment will be needed to make the water safe to drink. Safety of the water must be assured right through to its consumption in the household.

4. As it is difficult to predict the life-span of a refugee camp, it is best to plan on a cost-effective, long-term basis.

5. Figure 1 (a and b) shows some of the considerations for planning an emergency water supply system.

6. The sectors of water, sanitation and site planning are highly interdependent. This chapter should be read in conjunction with the chapters on these topics.

Assessment and Organization

- An immediate, on the spot, assessment of local water resources in relation to needs is essential;
- Technical expertize is required and local knowledge is most important. Outside expertize should be brought in only when clearly necessary;
- Involve the refugees, use their skills and train them to operate and maintain the system;
- Technology and equipment should be simple, reliable, appropriate and familiar to the country;
- Refugees may compete with the local population for water resources. This may cause problems between the two groups;
- Available sources must be protected from pollution at once;
- The water supply system must be supported by appropriate environmental health measures and hygiene.

An immediate, on the spot assessment in relation to needs is essential.

7. The government's central and local authorities should be involved as much as possible in this assessment. Knowledge of the local terrain and conditions is indispensable and expertize from outside the country should be brought in only when clearly necessary.

Figure 1a – Needs and Resources Assessment

General considerations for planning an emergency water supply system

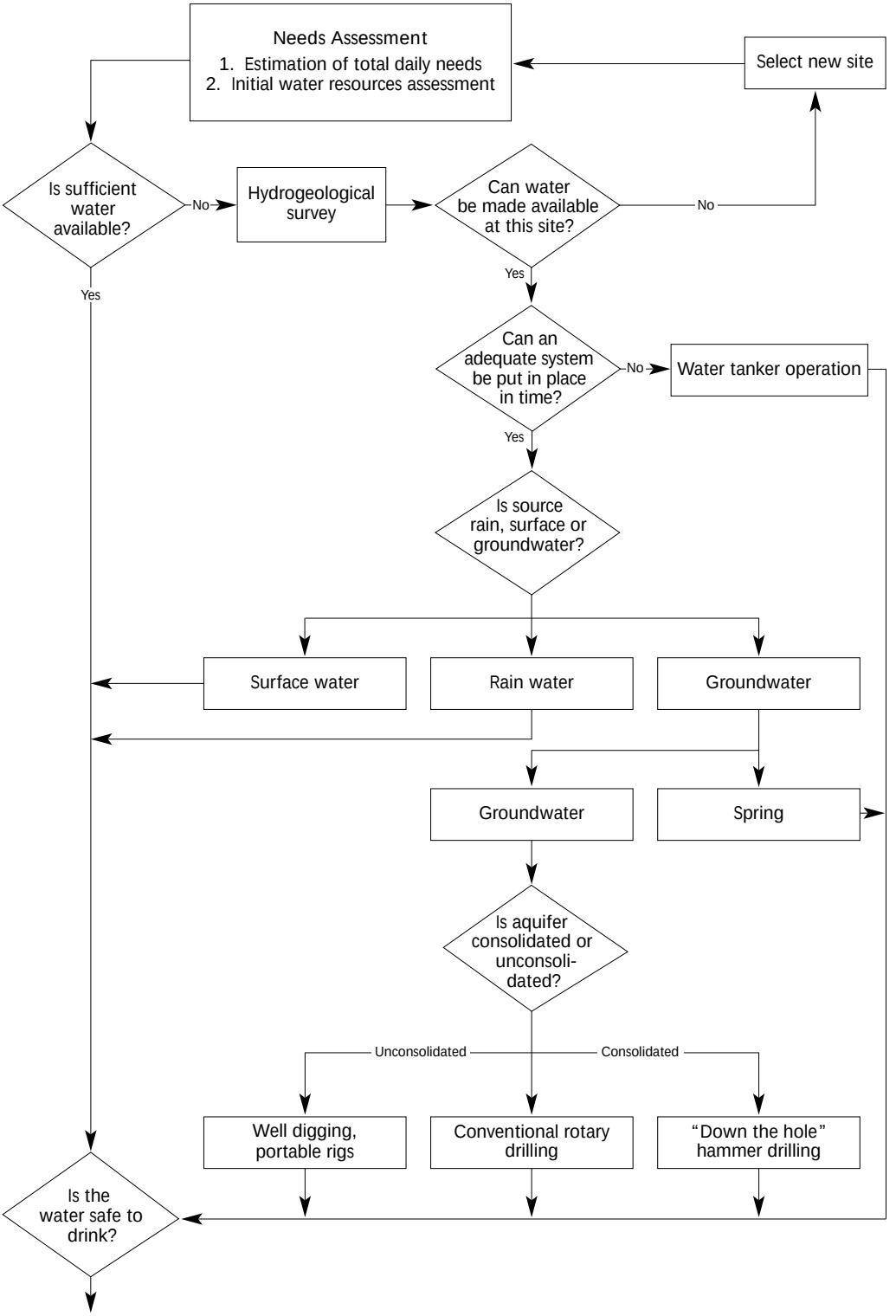
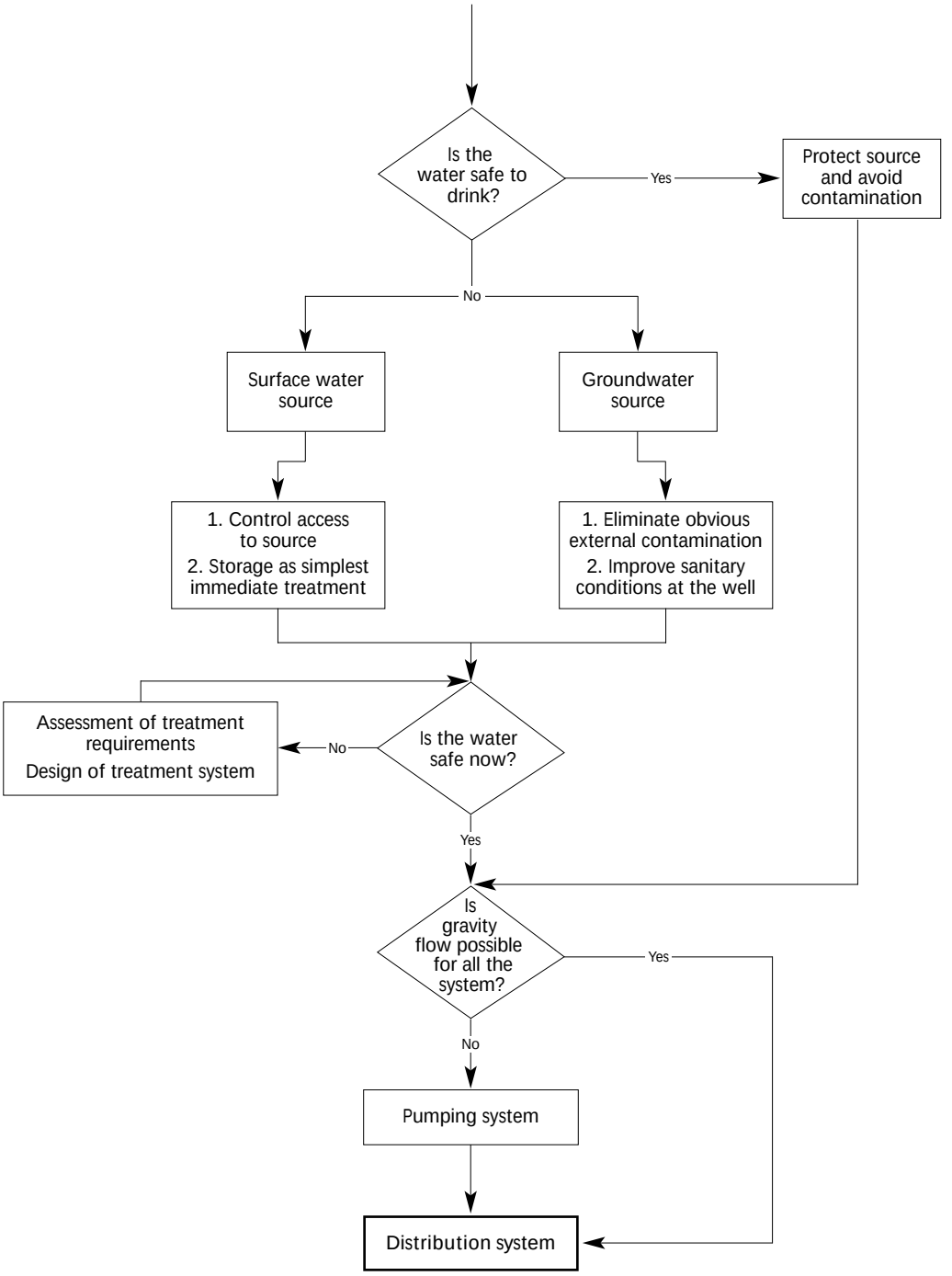


Figure 1b – Needs and Resources Assessment

General considerations for planning an emergency water supply system



8. Available sources must be protected from pollution at once. Rationing of scarce water may be needed initially in order to ensure survival of the weak and equity in distribution to the rest of the refugee population. The design and construction of a water supply system should be cost-effective and efficient bearing in mind long term needs, and should use simple but appropriate technology to facilitate operation and maintenance.

Assessment

9. The objective of an assessment of water resources for human consumption is to ascertain the availability of water (its quantity and quality) in relation to the demand.

10. Estimating the need, or demand, for water does not require special expertize, however, the assessment of supply possibilities does. Assessing the supply means identifying possible sources, and assessing the potential for developing and exploiting those resources.

11. Sources of water can be identified by: the local population, the refugees themselves, the lie of the land (groundwater is often near the surface in the vicinity of rivers and in other low places; its presence at shallow depths is usually indicated by some types of vegetation); maps (topographical, geological), remote sensing imagery (satellite images, aerial photography), previous surveys of water resources; national or foreign experts (hydrologists, hydro-geologists); and water diviners.

12. Assessing the water resources requires expertise in for example water engineering, sanitation and in some cases logistics. It includes assessing topographical advantages (gravity) and disadvantages (pumping requirements), and analysing the overall environment of the refugee sites. Further surveys will be necessary to organize the water supply system and should cover relevant information on the refugees, other beneficiaries, and the socio-economic characteristics of the host community. The results of such assessments and surveys should be systematically filed to ensure that such data will be available for future reference.

13. UNHCR maintains a standby arrangement with certain organizations whereby qualified and experienced water engineers and other experts can be provided at short notice for deployment to emergencies. (See Appendix 1, Catalogue of Emergency Response Resources, for further details). If it becomes clear that locally available expertize will not suffice, assistance from the Programme and Technical Support Section at Headquarters should be requested without delay.

14. Seasonal factors must always be carefully considered.

Supplies that are adequate in the rainy season may dry up at other times.

Local knowledge, historical and hydrological information and statistical interpretation should all be taken into account to determine the seasonal patterns.

Organization

15. Bear in mind that the economic and social bases of refugee groupings differ from those of the host communities. In addition, an influx of refugees may over-strain water resources used by the local population and lead to tension between the two groups. Special arrangements should be made with local authorities and other implementing partners for adequate operation and maintenance arrangements; the technology used in the water supply systems should be carefully evaluated to ensure it is appropriate and that long term operational needs (fuel, spare parts, management, etc.) will be within reach of the refugees and camp managers.

16. The provision of safe water could become impossible without the beneficiaries' understanding and cooperation. To the extent possible the system should be developed in collaboration with the refugees who should be involved with its operation and maintenance from the start.

Even the best system needs continuing maintenance, otherwise it will break down.

Refugees without prior experience should be trained.

17. In order to be effective, water quality control and treatment have to be combined with improved personal hygiene and environmental health practices. Basic public health education stressing the importance of avoiding pollution of the water by excreta and of the use of clean containers in the household, will be essential. The water supply system design and construction must be closely coordinated with site planning and layout and must be supported by health, education and environmental measures, in particular sanitation.

As a general rule, technology should be kept simple. It should be appropriate to the country and should draw on local experience.

Where pumps and other mechanical equipment are necessary, supplies should be standardized as far as possible.

Locally available material and equipment should be used as much as possible.

Local familiarity, availability of spare parts, fuel and ease of maintenance are priority considerations.

18. Both organizational and technical aspects of the complete water supply system need to be carefully monitored. The use of the system must be controlled and water wastage or contamination prevented. Maintenance must be assured, and technical breakdowns quickly repaired.

The Need

- Demand: Calculate on at least 15 litres per person per day. Absolute minimum survival allocation is 7 litres per day.
- Quality: To preserve public health, a large amount of reasonably safe water is preferable to a smaller amount of very pure water;
- Control: The water must be safe: test the physical, chemical and bacteriological quality of new sources before use and regularly thereafter, and immediately following an outbreak of a disease which might be caused by unsafe water.

Quantity

19. Minimum water needs vary: it increases with air temperature and physical exercise. As a general indication, the following amounts of water are desirable:

Minimum daily requirements:

Minimum survival allocation: 7 litres per person per day. This should be increased to 15-20 litres per person as soon as possible.

Communal needs and a spare capacity for possible new arrivals should be added.

Health centres: 40-60 litres per patient per day;
Feeding centres: 20-30 litres per patient per day.

20. Further needs may include: livestock, sanitation facilities, other community services, irrigation and construction of camp infrastructure (e.g. roads or concrete structures). The more convenient the supply, the higher will be the consumption.

21. Give priority to quantity while respecting quality. A reduction in the quantity of water available to individuals will directly affect the overall health status of the refugee population. As supplies are reduced, personal and domestic hygiene suffers, and the reduction is reflected in increased incidence of parasitic, fungal and other skin diseases, and diarrhoeal diseases. Even those individuals who may have traditionally lived on less than the normally recommended amount of water will require more water when living in a refugee camp, because of crowding and environmental factors.

22. The availability of water will be a factor in deciding on a sanitation system. Pit latrine systems do not need water to function; but showers, washing, laundry or pour-flush toilet facilities all require water.

23. Water will also be needed for livestock in many refugee situations. Take great care to avoid pollution or depletion of scarce water resources by livestock, separation of human water supply points from those used by animals is a must. As a rule of thumb, cattle need about 30 litres of water daily. Water will also be needed to irrigate food (vegetable gardens, crops) cultivated by refugees. Annex B of UNHCR's Water Manual provides additional indicative figures on water requirements including livestock and agricultural crop needs.

24. Water will probably be of little use in controlling major fires on refugee sites owing to a lack of sufficient quantity and pressure.

If more refugees are expected to arrive, plans must allow for a substantial spare capacity over the initially assessed needs.

Quality

25. The water must be both acceptable to the refugees and safe to drink. Water that tastes and looks acceptable will be drunk by refugees who may unknowingly expose themselves to the dangers from microbiological organisms. Water-borne diseases are not usually as serious or widespread a problem as the water-washed diseases such as skin and eye infections which result from insufficient water from personal hygiene.

Thus, a large quantity of reasonably safe water is preferable to a smaller amount of very pure water.

26. The most serious threat to the safety of a water supply system is contamination by faeces; once the water has been contaminated it is hard to purify it quickly under emergency conditions.

27. Water may contain pathogens, particularly certain viruses, bacteria, protozoan cysts and worm eggs which are transmitted from faeces to mouth. Water contamination by human faeces is the major concern, although animal faeces in water may also cause disease transmission. Water contamination by urine is a significant threat only in areas where urinary schistosomiasis (Schistosoma haematobium) is endemic.

By far the greatest risk associated with polluted drinking water is the spread of diarrhoea, dysentery and infectious hepatitis (Hepatitis A).

28. Diarrhoea and dysentery are caused by a variety of viruses, bacteria and protozoa. The numbers of viruses and protozoa in water will always decrease with time and will always decrease most rapidly at warm temperatures. Bacteria behave similarly, but in exceptional circumstances may multiply in polluted water. The infectious dose of the viruses and protozoa is typically very low, whereas the dose of bacteria needed to establish an infection in the intestine may be large.

29. New water supplies should be tested for bacteriological quality before use and existing ones checked regularly and tested again immediately following any outbreak of disease which might be caused by unsafe water.

30. Potability analysis involves studying the chemical, physical and bacteriological characteristics of the water. Although it is possible to examine water for a specific pathogenic organism, a much more sensitive test for routine analysis uses an indicator organism, called Escherichia coli (coliform, or E-coli), which is a normal inhabitant of the intestine of warm-blooded animals and is excreted in large numbers. If these bacteria are found in water, faecal pollution is indicated and the sample is therefore potentially dangerous.

31. Concentrations of faecal coliform are usually expressed per 100 ml of water. As a guide:

Faecal Coliform/100 ml	Water Quality
1 - 10	reasonable quality
10 - 100	polluted
100 - 1000	very polluted
> 1000	grossly polluted

32. In cases where the water is disinfected by chlorination, it is easier and more appropriate to test for the presence of free available chlorine than for bacteria. The presence of free chlorine in the range between 0.2 mg/l and 0.5 mg/l at the distribution point shows that the bacteria have almost certainly been killed and that the water cannot be heavily polluted with faecal or other organic matter.

33. The water must, of course, be safe at the time of consumption or use in the household, not just at the distribution point. Domestic hygiene and environmental health measures to protect the water between collection and use are important. The water in storage tanks and any tanker trucks should also be tested periodically.

34. Where drinking water is scarce, use non-potable, brackish or salty water for washing.

Immediate Response

- If even the minimum amount of water cannot be made available in time from local sources, the refugees should be moved.
- Whatever the water source, take immediate action to prevent pollution by excreta. (See chapter 17 on environmental sanitation for further details).
- Organize a distribution system that prevents pollution of the source and ensures equity if there is insufficient water.

35. Short-term emergency measures may be necessary while the longer term supply system is being developed or pending the move of the refugees to a more suitable site. If the locally available water supply is insufficient to meet the minimum needs of the refugees, arrangements must be made to bring in water by truck.

36. If this is not possible, the refugees must be moved without delay. Often, however, the quantity of water available will meet initial minimum needs; the immediate problem would be water quality.

37. The refugees will be using either surface water or, less often, ground water (well or springs) – usually whatever water is closest, regardless of quality. Whatever the water source, take immediate steps to prevent pollution by excreta.

The best immediate response is likely to be organizational.

38. Work with community leaders to organize the refugee community and make the community aware of the possibilities and dangers of existing water sources and convey the idea of trying to prevent pollution of these sources by excreta. If the source is flowing, supplies must be drawn off upstream and a special area set aside for this. Then allocate an area for washing, and finally downstream of the settlement, allow any livestock to drink (see figure 2). Fence off parts of the river banks as necessary, and beware of any dangers in the water, such as reptiles.

39. Where the source is a well or spring, fence off, cover and control the source.

Prevent refugees from drawing water with individual containers that may contaminate the source.

40. If possible, arrange to store water and to distribute it at collection points away from the source. Not only does this help avoid direct contamination but storage can make water safer.

41. From the start, families will need to be able to carry and store water at the household level. They must be able to transport at least 10 litres (from water distribution points to the household) and store at least 20 litres per household (1 household = 5 persons). Suitable containers (10-20 litres) are essential. Collapsible jerry-cans are recommended, especially when their transportation to the site may involve airlifts. Jerry-cans must have narrow inlets to prevent contaminating objects getting in. For this reason, buckets and other wide necked containers are not recommended. Sometimes empty cooking oil containers or the like are available which may be appropriate.

If the immediately available supplies of water are insufficient, action to ration supplies and to ensure equitable distribution will be a priority.

42. Rationing is difficult to organize. The first step is to control access to the sources, using full-time guards if necessary; uncontrolled distributions are open to abuse. Distribution at fixed times for different sections of the site should be organized. Vulnerable groups may need special arrangements. Every effort must be made to increase the quantity of water available so that strict rationing is unnecessary.

43. In parallel to these steps, action must be taken to improve the quantity from existing sources and the effectiveness of any distribution system. Plan how the need for water may best be met in the longer term. The following sections outline the main considerations.

Water Supply Systems

(See Water Manual, Chapter 12)

- A water supply system is a combination of structures (intakes, pumping sets, treatment, storage and distribution facilities and drainage outlets) necessary for the production (collection, treatment, storage) and distribution of potable water;
- Ensure the system components are compatible with each other and appropriate in view of the supply and demand, and can be maintained from locally available resources and at the lowest possible cost;
- The system will have to be planned, designed, constructed and put into operation in a short period of time (involving the refugee population as much as possible). The complexity of the task requires professional expertize which should be sought at the beginning of the project. Pay attention to long-term operation and maintenance requirements from the start.

44. As soon as possible, make an overall plan for the longer term water supply system. At least some elements of the plan will be problematic – there is often a lack of basic data or difficulty in obtaining the planning or design tools (cartography, hydrological data, etc.). The following steps should be taken:

i. Search for adequate sources;

ii. Preliminary surveys. Assess water quantity and quality (see above). Assess topographical advantages (gravity) and disadvantages (pumping requirements). Collect additional, relevant information on the refugee community, on any other beneficiaries, on the social and economic characteristics of the host community, on the overall environmental framework of the refugee sites;

iii. Implementation arrangements. Analyze the possibilities and constraints of all parties interested in the project and allocate responsibilities for project implementation, including operation and maintenance. Clarify arrangements for funding, contractual procedures, project monitoring, financial matters and reporting;

iv. Production of the design concept (see Chapter 12, paragraph 2, UNHCR's Water Manual). Consider the alternatives, taking into account implementation time, technology considerations and cost-effectiveness;

v. Detailed surveys. To refine all aspects and details of the adopted design. These include further water analyses, identifying building materials, further measurements of water production at sources, detailed topographical surveys of the position of water sources, storage tanks and distribution points;

vi. Production of final designs;

vii. Organization of refugee involvement on the project. Identify relevant skills and expertize among the refugees. Organize refugee committees;

viii. Implementation of the project. Besides construction, other inputs are required, such as the technical supervision to ensure that construction is carried out in accordance with previously approved plans and that payments for construction reflect the real value of the works accomplished;

ix. Organization of operation and maintenance, including the organization of a committee in which refugees and relevant assistance sectors are represented (health, sanitation, community services). Ensure there is continuous engineering support and employ a caretaker or a group of caretakers to carry out the operation and maintenance tasks.

45. See UNHCR's Water Manual for additional information and details on these issues (chapter 6, paragraphs 1, 36; chapter 11, paragraphs 2, 3, 11; chapter 12, paragraphs 5, 12-8, 16).

46. An ill-conceived or badly managed water supply system will soon create problems. The long-term needs of the refugees should be considered while searching for solutions to the emergency needs. All efforts to avoid long-term problems will prove, with time, very valuable.

Water Sources

(See UNHCR Water Manual Chapter 6)

- Rain water, groundwater from springs and wells or water from municipal and private systems are usually of better quality than surface water from sources such as rivers, lakes or dams and should be used if available;
- Surface water should be considered to be contaminated and must be treated prior to use;
- Physical protection of the source from pollution will be essential;
- New or repaired sources and equipment should be disinfected before use;
- Develop a data bank of water sources.

Introduction

47. There are three main natural types of fresh water: surface water (streams, rivers, lakes), groundwater (underground or emerging as springs) and rain water.

48. Considerations in choosing between alternative sources of water in an emergency include:

i. Speed with which source can be made operational;

ii. Volume of supply;

iii. Reliability of supply (taking into account seasonal variations and, if necessary, logistics);

iv. Water quality, risk of contamination and ease of treatment if necessary;

v. Rights and welfare of local population;

vi. Simplicity of technology and ease of maintenance;

vii. Cost.

49. Take careful account of systems and methods already in use locally. Adoption of well-proven and familiar techniques, combined with action to improve protection against pollution is often a sound solution.

50. Besides organizational measures to protect the water supply, some form of treatment may be necessary. However, if possible use sources that do not require treatment. The treatment of unsafe water, particularly in remote areas, can be difficult and requires trained supervision to be reliable.

51. Gather as much technical information as possible on the different water sources to allow a simple cost-benefit analysis of alternative solutions. The decision on which sources

to develop and the technological approaches to be used should take into account the need to develop systems to efficiently cover both immediate and longer-term needs.

Surface Water

Water from streams, rivers, ponds, lakes, dams and reservoirs is rarely potable; its direct use is likely to require treatment measures that may be complicated to plan and implement during most refugee emergencies.

Rainwater

52. Reasonably pure rain water can be collected from the roofs if these are clean and suitable. This method can only be the major source of water in areas with adequate and reliable year-round rainfall; it requires suitable shelter and individual household storage facilities. It is, therefore, not a suitable solution in most refugee emergencies.

Every effort should be made to collect as much rainwater as possible.

53. Small rainwater collection systems, for example using local earthenware pots under individual roofs and gutters, should be encouraged. Allow the first rain after a long dry spell to run off, thus cleaning the catchment of dust, etc. The supply of water that may be collected by this method is estimated as follows:

54. One millimeter of yearly rainfall on one square metre of roof will give 0.8 litres per year, after allowing for evaporation. Thus, if the roof measures 5 x 8 metres and the average annual rainfall is 750 mm, the amount of rain water which may be collected in a year equals: 5 x 8 x 750 x 0.8 = 24,000 litres per year or an average of 66 litres per day (on many days there will be none).

55. Rain water may be a useful supplement to general needs, for example through special collection for community services such as health and feeding centres, where the safety of water is most important. It should also be noted that surface water is particularly likely to be contaminated in the rainy season. Thus rain water may be a useful source of safe water for individual use at a time when other water is plentiful but unsafe.

Groundwater

56. Groundwater is contained in aquifers. Aquifers are rocks or groups of rocks capable of transmitting, storing and yielding water. They may be formed by loose sediments (silt, sand, gravel), fractured rocks or otherwise porous rocks (fractured lavas, granites, metamorphic rocks, sandstones, etc.). The microbiological quality of groundwater is usually very good in view of the filtration undergone by water in its transit through rock pores (An exception to this filtering effect is when the size of the fractures in the rock is large.)

57. The use of groundwater during refugee emergencies would almost always be the preferred solution: if available, groundwater usually provides the most cost-effective alternative to obtain quickly the necessary quantity and the best quality. However, the decision to use it for long term needs should be made after a detailed assessment of the aquifer and all factors relating to the recharge, transmission and release of water and on the availability of relevant expertize and equipment.

Springs are the ideal source of groundwater.

58. Water from a spring is usually pure at the source and can be piped to storage and distribution points. It should be taken off from above the refugee camp site if possible. Care should be taken to check the true source of spring water, as some apparent springs may really be surface water which has seeped or flowed into the ground a short distance away. The yield of water from a spring may vary widely with the seasons. It will be at its minimum at the end of the dry season and early in the rainy season. Seek local advice.

It is essential that spring water be protected against pollution at the source.

59. This can be by a simple structure built of bricks, masonry or concrete, from which the water flows directly through a pipe to a tank or collection point. Care must also be taken to prevent contamination above the take off points.

If the need for water cannot be met by springs, the next best option is to raise groundwater.

60. Groundwater can be raised by infiltration galleries, tube wells, dug wells or boreholes. (Infiltration galleries extract groundwater horizontally, for example through tunnels and/or ditches). The choice of method will depend on the depth of the water table, yield, soil conditions and availability of expertize and equipment.

61. Without good groundwater resource surveys, preliminary test drilling, or clear local evidence from nearby existing wells, there is no assurance that new wells or boreholes will yield the necessary amount of water of the right quality. They can also be expensive.

A hydrogeological survey must be undertaken before starting any extensive drilling programme.

62. The yield of infiltration galleries, wells or boreholes depends on the geological formation in which they are constructed, the topographical characteristics of the site, the construction techniques and the pumping equipment to be used. Any new well or borehole must first be developed to full yield by an initial period of pumping at a fast rate. This pumps out finer soil particles, allowing water to pass more easily into the well. Yields can be raised by increasing the size of the well below the water table, for example in the case of a shallow well, by an infiltration gallery across the line of groundwater flow. If wells are sited too close together, yields will be reduced.

63. Wells, boreholes, infiltration galleries and pumps should be disinfected immediately after construction, repair or installation, as they may have been polluted during the work – two or three buckets of a 2.5% chlorine solution in water would be a suitable disinfectant. They should be located where surface water and, in particular, any seasonal rain or flood water, will drain away from the well head. They should be above and at least 30 metres away from any sanitation facilities and their discharge. Special techniques are used in the design and construction of these facilities to avoid the pollution of their water.

Sea Water

64. Sea water can be used for almost everything but drinking, thus reducing fresh water requirements. In locations where no adequate sources of fresh water exist but where sea water is near, desalinisation is one possible but costly option. Neither of the two basic methods – distillation using the sun's heat nor the use of modern desalinisation plants – is likely to meet immediate fresh water requirements in a major refugee emergency, and is therefore strongly discouraged. If no fresh water sources are available at a given site, relocation of the refugees must be considered as a matter of urgency.

Municipal and Private Systems

65. Existing municipal and private water supply systems in the vicinity of the refugees, for example those belonging to industrial or agricultural establishments, may be able to meet part or all of the need during the emergency phase and should be used where possible before taking unnecessary measures to develop other sources. A substantial increase in the yield and quality of such systems may be possible.

Pumping Equipment

(See UNHCR Water Manual, chapter 7)

- Pumps will generally be needed in refugee emergencies. Seek expert local advice on what is suitable and remember that operators, fuel and spare parts will be needed;
- As much as possible, use gravity rather than pumps for water distribution and treatment systems;
- Emergency water supply solutions involving pumps should be designed to ensure long-term and effective operation: avoid ad-hoc solutions;

66. Once an adequate source of water has been established, arrangements are needed to store and distribute the water to meet minimum needs.

The distribution system should use gravity whenever possible: gravity fed systems are much less costly and easier to maintain than pumping systems.

67. In areas subject to seasonal flooding, or where the level of a river source varies markedly, great care must be taken in placing any pumps, distribution, storage and treatment systems. It may even be necessary to mount a pump on a raft.

68. Water can be raised in two basic ways: by hand, using some kind of water container or bucket, or by using pumps (which may be driven by hand or engine). Nobody should be allowed to put individual containers into the source. A captive rope and bucket carries a low pollution risk. In this system, only the single rope and bucket that is fixed to the well is used to draw water – refugees fill their own containers from this captive bucket. The system is more reliable and much cheaper than a pump.

Where it can meet the demand, a hand operated system is to be preferred. Not more than 200 people should depend on a well with one rope and bucket.

69. The main uses of pumping equipment in refugee water supply systems are:

I. Pumping water from wells or boreholes;

ii. Pumping water from surface water intakes;

iii. Pumping water into storage reservoirs.

70. Additionally there may be a need to use pumping equipment for other purposes, for example, feeding water treatment plants, boosting the flow through long pipelines, feeding water tankers. Gravity flow systems should be used as much as possible for these purposes as a way to minimize pumping requirements.

71. All pumps have moving parts and require regular maintenance. Professional advice should be sought on the selection and placing of pumps. Local familiarity, fuel supplies, spares, ease of maintenance and, above all, reliability, will be the major considerations in pump selection. Hand-pumps may be appropriate because they reduce dependence on outside supply of spare parts and fuel. However, in a refugee emergency, the sudden and large concentration of people requires maximum output of available water. Motorized pumps have a far greater output and may, therefore, be indispensable.

72. In some circumstances, pumps powered by solar panels may be suitable. The currently available pumps are expensive for their output but very reliable and involve no direct running costs. The pumps naturally work best in direct sunlight but will still work with light cloud cover. A solar pump might be a solution when the output of a handpump would be insufficient but large mechanised pumps are not necessary.

73. The theoretical capacity required of the pump depends on available storage, likely demand, and variations in demand throughout the day. A reserve for breakdowns, new arrivals, etc. should be provided. The minimum daily period during which a pump should be idle is that required to allow the level of water in the source to recover to its old level. Pumps should not be operated at night. Always have a pump on standby in a major supply system to cover repairs and maintenance.

Treatment

(See Water Manual, Chapter 8)

- The most serious threat to safety of a water supply is contamination by faeces;
- Only treat water to the extent necessary. Disinfection of drinking water is required if large numbers of refugees are concentrated in camps;
- All water treatment methods require some expertize, regular attention and maintenance;
- In refugee emergencies, the priority is to improve the physical and the bacteriological characteristics of drinking water. Only under very special circumstances would the improvement of chemical quality be considered;
- Cloudy or turbid water should be clarified before disinfection because chlorinating cloudy or turbid water is ineffective;
- Water purification tablets or boiling are not generally appropriate for large scale water treatment.

Introduction

74. The potability of any source has to be assessed before a decision to use it for human water supply is taken.

75. The importance of trying to find a source that does not require treatment is obvious.

If treatment is necessary it should be the minimum required to ensure acceptably safe water, using appropriate technology and a reliable operational and maintenance system.

76. Correct plant operation and maintenance must be assured. If large numbers of refugees are concentrated in refugee camps, disinfection of drinking water is absolutely necessary. Other types of treatment should be considered in accordance with the characteristics of the raw water.

77. Determining how to treat water on a large scale is best done by experts. However, simple and practical measures can be taken before such help is available. Full explanations of all treatment methods applicable in refugee emergencies are given in Chapter 8 of UNHCR's Water Manual. All methods require regular attention and maintenance.

78. Besides the physical measures to protect water at its source and initial disinfection of water sources (usually by chlorine), there are four basic methods of treatment: storage,

filtration, chemical disinfection and boiling. These can be used singly or in combination.

Storage and Sedimentation

79. Storage is the simplest method of improving water quality. It causes some pathogens to die off and any heavy matter in suspension to settle ("sedimentation").

Leaving water undisturbed in containers, tanks or reservoirs improves its quality.

80. Storage of untreated surface water for 12 to 24 hours will already cause considerable improvement in its quality; the longer the period of storage and the higher the temperature, the greater the improvement. Be aware, however, that in refugee emergencies, it is very seldom that the amount of water available would be enough to allow the water intended for drinking purposes to be stored for more than a few hours before it is distributed to users. Where sedimentation tanks are used, their capacity alone should equal one day's consumption, thus allowing sedimentation to take place overnight.

81. Longer storage time can help control schistosomiasis (bilharzia), as the parasites die if they do not reach the fresh water snail within 24 hours of excretion by an infected person, or if they do not reach a human or animal host within 48 hours of leaving infected snails. Thus two day's storage would provide an effective barrier to transmission of the disease, provided snails do not enter the tank.

82. Sedimentation clarifies cloudy water which can be greatly speeded up by the addition of aluminium sulphate (Alum). A two-tank system is often used, the first tank being a settling tank with the second storing the clarified water. If additional treatment (e.g. chemical disinfection) is required, it can be done in the second tank, and a third one used for storage if necessary.

83. Great care should be taken to prevent pollution of stored water. Storage tanks must always be covered: the dangers of contamination of open tanks more than offset the advantages of direct sunlight. The storage area should be fenced off, and if necessary guarded, to prevent children playing or swimming in the water.

Filtration

84. Sand filtration can be an effective method of water treatment. A proper slow sand filter works in two ways. Passage of the water through the sand physically filters out solids, and, more importantly, a thin and very active layer of algae, plankton, bacteria and other forms of life develops on the surface of the sand bed. This is called the "schmutzdecke", where micro-organisms break down organic matter.

85. The rate of filtration depends on the surface area, depth and type of sand through which water is passed, and the depth of water above the level of the sand surface. The usual size range of the sand is 0.3 - 1 mm. Provided the rate of filtration is slow enough, the quality of the treated water is very good.

86. Many types of sand filters are described in the available technical guides (See key references). A packed drum filter can be improvized if drums and sand are available and this may be a good way of providing limited quantities of safer water quickly, for example for a health centre. The water passes down through sand on a 5 cm layer of gravel and is drawn off at a rate that should not exceed 60 litres per hour for a 200 litre drum. If a tap is used, unfiltered water equal to the amount drawn off is simply added to the top. Other types of sand filters include the slow sand filters, the horizontal sand filters and the river bed filters or infiltration galleries (suitable only where the bed is permeable). These can be used to treat larger amounts of water but are likely to be more difficult to set up quickly and effectively. For a river source a possible intermediate measure is to dig a well close to the bank. The water recovered will be river water but will have been filtered through the bed and bank.

Chemical Disinfection

87. Disinfection of water on a large scale is a rule in all refugee emergencies. Purification of wells, sand filters, pumps and piped water systems will be required initially. Iodine or various forms of chlorine can be used for disinfection and purification. Chlorine is more widely used, cheaper and often more readily available. The most generally suitable form of chlorine for refugee emergencies is calcium hypochlorite powder. Expert advice is essential for large-scale chlorination. As with all other water treatment methods, disinfection requires regular attention; it will be of little value if it is not fully reliable. Whilst clear water usually only requires chlorination, turbid water usually requires sedimentation and/or filtration before the chemical disinfection. Chlorination should therefore take place after any sedimentation

or filtration process has been undertaken. It requires at least thirty minutes to act.

88. Care must be taken to ensure strict control of any chemical disinfection process and particularly to test the water for chemical residual levels after each disinfection and before distribution. After chlorination, and once chlorine has reacted, (about 30 minutes after dosage) there should be at least 0.5 mg/l (0.5 parts per million) of free available chlorine left in solution, in other words, still available to kill bacteria. The amount of chlorine required to achieve this is usually a broad indication of the level of pollution. If the amount of free available chlorine is much above 0.5 parts per million, people may not be prepared to drink the water; over-chlorinated water tastes unpleasant and will have the reverse of the desired effect if people therefore prefer untreated water.

89. A pocket size chloroscope (chlorine comparator kit, preferably of the DPD[1] type) tests for residual chlorine levels. It consists of two tubes, each containing a measured quantity of the water under test, which can be visually compared for colour. One of the two tube samples is coloured by the addition of a chlorine sensitive reagents (o-toludine, a common reagent, should be avoided, as it decomposes in hot climates; it is also a poor indicator if the water has been over-chlorinated). The other tube is looked at through a range of standard coloured glass slides; the chlorine concentration can be read-off directly after matching the colour of the tube with the added reagent with that of the nearest standard. This test is simple and all treatment plant attendants should be trained to use it to check frequently the water quality. In view of the fact that water may be kept in storage, after chlorination, for some time before distribution, and bearing in mind that residual chlorine levels tend to drop with time, it is important to ensure any water leaving the plant should have, at least, a residual chlorine content of 0.4 mg/l (or parts per million) of free available chlorine to be regarded as safe.

90. When chlorination equipment is not working, the water should not normally be distributed. Therefore to ensure a continuous water supply, back-up chlorination equipment should be available in any water treatment plant.

91. Chlorine and iodine water purification tablets are also available, but are rarely suitable for water treatment for large populations. They may be used in health or supplementary feeding centres.

Boiling

92. Boiling is the surest method of water sterilization. At low altitudes, water that is simply brought to the boil can be assumed to be free of pathogenic bacteria. Boiling should, however, be continued for one minute for every 1,000 metres of altitude above sea level, as the boiling temperature reduces with altitude. Prolonged vigorous boiling is often recommended but is not necessary to destroy the faecal-orally transmitted pathogens; it wastes fuel and increases the concentration of nitrates in the water. Water with high nitrate content is dangerous for very young babies. Domestic fuel supplies may, in the longer term, be the determining factor: boiling requires about 1 kg of wood per litre of water. However, if the refugees have traditionally boiled their water and can continue to do so, this should be encouraged and, at least initially, might make the need for other types of treatment less urgent.

[1] *DPD is Diethyl-P- Phenylene Diamine.*

Storage

- All refugee sites must be provided as soon as possible with adequate water storage facilities;
- Water storage may be the only means of ensuring a constant availability of water to cover the needs of a camp population at a given site;
- In general, use local technology for the design and construction of storage tanks or reservoirs. However, using prefabricated tanks may sometimes be the only way to provide water quickly enough;
- Ensure that the size, location and overall design of storage tanks are compatible with all other system components and design characteristics.

93. In nearly all systems, it will be necessary to store water in covered tanks between the sources and distribution points. As well as providing an essential reserve both during the emergency and for long-term use, storage will facilitate monitoring, collecting, treating and distributing safe water.

All refugee sites must be provided as soon as possible with facilities to store an adequate reserve of water.

94. The size of the reserve to be used will depend on the number of people and on the nature of the water supply system.

Water can be stored in various locations:

i. At the water collection point in tanks;

ii. In central storage tanks (before or after treatment) to balance supply with demand and to allow for gravity-fed distribution;

iii. At distribution points in tanks, including public stand-pipes or other service points at health centres, camp administration facilities, staff houses, etc.;

iv. At the refugee household level in small containers. These containers should not be the same as the ones used to collect and transport water from distribution points.

95. Whatever the type of storage needed, adequate enclosure should be provided to prevent any contamination from humans, animals, dust or any other source. A tight cover and dark storage also prevent algal growth and breeding of mosquito larvae.

96. In areas with pronounced dry and rainy seasons, the construction of a reservoir to collect water may be an option, despite the dangers of pollution and of mosquito breeding. An erosion-protected overflow spillway should always be provided in this case. Catchment tanks for the collection of surface water can also be considered. Pits are dug in the ground to catch and hold the water which runs off hard ground during heavy storms. They need special lining to hold the water and should be covered if possible.

97. Tanks above ground may be needed where the water table is very high and contamination cannot otherwise be avoided. Many types of simple, air portable, butyl rubber storage tanks are available, and some can be supplied with a complete distribution system. Headquarters' advice should be sought if local resources cannot meet this need.

Distribution

(see Water manual, Chapter 10)

- An appropriate water distribution system should ensure an even coverage of water needs among camp beneficiaries;
- Keep the distribution system simple;
- Under normal circumstances, water distribution in refugee camps should be carried out through public distribution stand-pipes;
- The water distribution system should minimize waste.

Refugees must have easy but controlled access to water.

Ideally, no dwelling should be further than 100 metres or a few minutes' walk from distribution points.

98. Experience has shown that where people have to fetch water from considerable distances, they tend either not to fetch enough to limit water-washed diseases or to collect water from closer but contaminated sources. Water distribution will be an important consideration in the layout of the site. The areas round the distribution points should be paved with stones or gravel, or protected by boards, with a run off structure to allow proper drainage.

99. Water can be distributed to individual users in many ways, depending on local conditions. Uncontrolled access by individual co sumers to primary water sources should be avoided.

A distribution system should have a sufficient number of outlets to ensure that people do not need to wait for long periods to have access.

100. Service and administrative buildings should be provided with private connections.

Equity in the distribution of scarce water is an extremely important consideration.

101. While vulnerable groups (the sick, wounded, most severely malnourished, children, pregnant and lactating women and the disabled) should have adequate and assured allocations, scarce water must be evenly shared among the rest of the population. Refugees should be encouraged to assume responsibility for equitable distribution. Arrangements should be carefully monitored to detect and prevent abuses. In some situations, water meters have proved a cheap and effective way of identifying excessive use and reducing consumption.

102. The main components of a water distribution system are the pipes themselves. Between source, storage and distribution points, water for domestic use should flow only in pipes to protect its quality. Other system components are break-pressure tanks, valves, service reservoirs and the watering points.

103. Standpipes and push taps are recommended to be used as outlets where possible. Multiple tap standpipes are normally constructed, each installation having usually between 5 and 10 individual taps. Taps are very vulnerable and spares must be available. Where water supplies are limited and the site is crowded, valve distribution points which can be chained shut may be the only effective solution.

There should be at least one tap per 80-100 refugees and no more than 200 refugees per handpump or per well with one rope and bucket.

104. The larger the number of people using a single source or outlet of water, the greater the risk of pollution and damage. Whatever the final distribution system, this must be carefully controlled and supervized – guards are often needed.

105. The design, construction, operation and maintenance of the water supply system should be carried out bearing in mind the need to minimize water wastage (from taps, pipes etc.) This is particularly important in systems based on low yield water sources or on those requiring treatment or pumping.

106. The community itself will also generate a certain amount of waste water. This must not be allowed to become a danger to public health, and it may instead be usefully recycled, for example to water livestock, irrigate vegetable gardens or in pour-flush latrines.

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17

Environmental Sanitation

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Situation

Overcrowding, a harsh environment and disruption of normal sanitation habits can threaten the lives and well-being of the refugees in emergencies. Proper sanitation is a key aspect of the hygiene cycle involving water and health and is fundamental to a multi-sectoral approach in emergency response.

Objective

To prevent the spread of disease and promote a safe environment for the refugees.

Principles of Response

- The co-operation of the refugees is essential for success. Programmes must be developed with them, and, to the extent possible, run by them. The measures taken must be culturally acceptable to the refugees;
- Swift provision of a basic system for human waste disposal is better than delayed provision of improved systems;
- Take full account of sanitation needs in site selection and layout;
- Make full use of locally available human, material and technological resources. This includes using both skilled and unskilled refugee labour, using public health or sanitary engineering expertise available in the national institutions, and relying on the traditional practices of the refugees and the local people;
- The materials and technology chosen should be as simple as possible;
- The sanitation programme must include provisions for continuous maintenance of the sanitation facilities and services;
- The best guarantee that latrines will be used and kept clean is to allocate them on an individual or family basis. Refuse disposal should be arranged on a community basis;
- Wherever possible, restrict the use of chemicals (for the control of rats, flies and other pests particularly) to specific places and for a limited period of time. Environmental measures should be favoured instead.

Action

- Localize defecation and prevent contamination of the water supply;
- Collect baseline data on the site and draw a sketch of the area to locate potential zones for sanitary facilities;
- Develop appropriate systems for disposal of excretia, garbage, and wastewater. Control vectors of public health importance such as mosquitoes, flies, fleas, lice, bugs, rodents and other vermin;
- Plan the amount of facilities and services to be provided. Optimum standards are: for excretia disposal: one latrine per family; for refuse: one bin of 100 litre capacity for 10 families or 50 persons; one sanitarian for every 5,000 persons, and one sanitation assistant for every 500 persons;
- Establish sanitation teams for the construction and maintenance of infrastructure;
- Set up services for vector control and burial of the dead;
- Establish a monitoring and reporting system for all environmental health services in co-ordination with the general health surveillance system;
- Include environmental sanitation as an integral part of health education.

Introduction

1. Environmental sanitation includes: safeguarding water quality; disposal of human excretia, waste water and garbage; insect and rodent control; safe food-handling practices; and site drainage. All these services, and the provision of health care, are very much interrelated and should be considered together. In particular, this chapter should be read in conjunction with the chapters on water, on health and on site planning.

2. Disruption and crowding people together who are accustomed to living in different and less crowded conditions, makes adequate sanitation of critical importance. Basic services are often lacking and habits may have to change. In these conditions, indiscriminate disposal of human and other waste poses a serious threat to health.

3. Due to unfavourable environmental factors or unfavourable socio-cultural habits the implementation of sanitation programmes in refugee camps can be difficult. Additional constraints include:

i. Sites that are easily flooded, barren and/or inaccessible;

ii. Lack of space;

iii. Limited availability of local materials due to either natural factors or considerations related to environmental protection;

iv. Limited time for the community to get organized if only in a rudimentary way; and,

v. Lack of qualified personnel.

4. The key to reducing health hazards is to have acceptable and practical waste disposal systems. These must be developed in co-operation with the refugees and be culturally appropriate, even if circumstances necessitate a departure from traditional practices. Special public health education may be required.

5. The refugees must also run the services to the extent possible. Monitoring will be essential: the effectiveness of the services will depend to a significant degree on regular and thorough maintenance and inspection.

Basic Principles And Standards

- Take full account of sanitation needs in site selection and layout;
- Analyse sanitation and environmental hygiene issues as part of the initial needs and resources assessment;
- Seek professional advice from those with local knowledge;
- Consult and involve the refugees in the design and location of sanitary facilities, and particularly their maintenance;
- Educate the refugees as part of the public health education programme and devote special attention to sanitation matters at school for refugee children.

6. As stressed in the chapter on site planning, environmental sanitation will be a very important consideration in site layout, and the organization and operation of the sanitation services must be integrated with other community services.

7. Developing adequate sanitation in a refugee emergency is difficult; but correcting mistakes is even more difficult. Expert advice should be sought from a public health engineer who is familiar with the habits of the refugees and nationals of the country of asylum, and if possible has experience of refugee emergencies. Assistance should first be sought locally from sources such as government departments, the UN system, NGOs, universities, consultants or contractors. If these cannot meet the need, Headquarters' assistance should be requested.

8. Good sanitation depends to a great extent on the attitudes of the community and the people who run the system. The systems and services developed should be able to operate effectively with a minimum of outside involvement. Refugees themselves must be trained to run the environmental sanitation programmes.

9. The public health education programme must place proper emphasis on the importance of sound environmental sanitation practices. The link between excretia contamination and disease must be clearly understood by all.

Whatever the success of the sanitation system with adults, children will present a special challenge.

Children are both the main sufferers from excretia-related diseases and also the main excreters of many of the pathogens that cause diarrhoea. Teaching environmental sanitation in schools is therefore essential.

10. Measures to contain human excretia and to dispose of refuse should be taken immediately. Since it is almost impossible to

Table 1: – Number and Types of Sanitary Facilities Required

	FIRST OPTION	SECOND OPTION	THIRD OPTION
EXCRETIA DISPOSAL	1 latrine / family	1 cubicle / 20 persons	1 cubicle / 100 persons or defecation field
	STORAGE	**TRANSPORT**	**FINAL DISPOSAL**
REFUSE/GARBAGE	1 bin, 100 litres / 10 families or 50 persons	1 wheelbarrow / 500 persons and 1 tipper / 5,000 persons	1 pit (2 m x 5 m and 2 m deep) / 500 persons **and** 1 incinerator and 1 deep pit for each clinic

estimate how long refugees will stay in a given site, more durable facilities should also be established simultaneously. For example, once a defecation field has been established, latrine construction should begin at once; the greater the time lag between those two actions, the more difficult to shift people from their previous habit (defecation in the open) to subsequent building and use of latrines. Even in hot, dry climates, human excretia disposed of on the ground can favour the transmission of diseases.

11. Communal facilities, especially latrines are difficult to maintain in a permanent state of cleanliness. However, refuse management (especially transportation and final disposal) is better to organize on a communal basis. Domestic wastewater drainage requires a combination of both individual and communal systems. Drains collecting wastewater from each household have to be connected to main ones which will channel those waters away from the living quarters.

12. General norms and standards related to specific activities (excretia disposal, solid waste, vector control, etc.) should be seen as indicative only and be adapted in each case to the prevailing social, cultural and physical conditions. Table 1 above gives standards which can help to work out a preliminary quantitative estimate of the most urgent needs.

13. Surveys of the status of environmental sanitation programmes should be carried out regularly and corrective action taken (see Annex 1, Environmental Sanitation Survey Form).

Human Resources And Organization

- ◆ Appoint a focal point;
- ◆ One sanitarian for every 5,000 persons and one sanitation assistant per 500 persons should be recruited from among the refugees or from other sources;
- ◆ Community participation is the key to successful sanitation projects.

14. A focal point for sanitation must be appointed at the very start of the emergency, and responsibilities of various partners clearly defined. There are not many agencies specializing in environmental sanitation.

15. The first step in appointing the focal point is to investigate the availability of local expertise (a civil engineer specialized in sanitary engineering as an ideal example). Recourse to outside assistance has to be contemplated if local expertise is not available.

16. At camp level, sanitation teams or brigades, provided with basic hand-tools, should be set up to carry out urgent tasks (digging trenches or pits for excretia and waste disposal). A health education programme should be launched simultaneously. Each team should be headed by staff who have good knowledge of sanitation (including medical and engineering aspects).

One sanitarian for every 5,000 persons and one sanitation assistant per 500 persons should be recruited.

17. It is always more efficient to have only one agency responsible for both sensitizing people to environmental sanitation and supervising related activities. Education for environmental sanitation should focus on the "how and why" of hygienic containment of human excretia, and simple methods for waste disposal and hygiene at household level (water storage in the home, habitat and personal hygiene, etc.) Women, teachers, leaders, and school children should be the first target of such a programme.

18. Community participation is a key to the success of sanitation projects. Health education and sensitization are a prerequisite to that participation. It should nevertheless be recognized that it takes time to convince both the commu-

nity and individuals about benefits they can expect from a sanitary environment. Concrete examples such as pilot latrines near clinics, market or other places are therefore very important to support environmental health programmes.

19. Refugees should be provided with tools and basic materials (and incentives in some cases) to encourage them to contribute to the improvement of their own living conditions. They should be gradually integrated into the sanitation teams, the ultimate goal being that the refugees themselves should do most of the maintenance tasks.

20. Annex 2, Resource Inventory Form, gives a checklist of the human and material resources needed for environmental sanitation.

Human Excretia Disposal

- Take immediate action to localize excretia disposal and prevent contamination of the water supply;
- Carefully consider cultural and physical factors and ensure that appropriate anal cleaning materials and hand-washing facilities are available;
- Communal trench latrines may be needed initially, but in most circumstances pit latrines are much better;
- Ensure that latrines can be used at night and are safe for women and children.

Introduction

21. The priority is to create an efficient barrier against faecal contamination. This can be assured through a sufficient number of sanitary facilities, ensuring that these facilities are properly used and kept clean, and do not become the source of problems such as bad smells and flies, and do not collapse when it rains.

The most common cause of breakdown is inadequate maintenance, even for properly designed and installed systems.

22. The best guarantee of proper maintenance is the individual family allocation of latrines. Breakdown of latrines will lead to contamination of the environment and a high risk of infection and disease. There must be regular inspection and maintenance.

Even when in working order, latrines will not be used unless they are clean. Latrines must be cleaned daily.

23. Individual families will be responsible for their own units, but where communal latrines are unavoidable, special arrangements to keep them clean will be essential. Particular attention must be given to the maintenance and cleanliness of the latrines serving community facilities such as health centres. Refugee workers with proper supervision will be required. It may be necessary to pay or otherwise compensate those who are responsible for keeping communal latrines clean and operational.

24. Disinfectants would prevent the biological degradation of excretia. However the regular addition of soil, ashes or oil, if available, to trench or pit latrines may help control insect breeding and reduce odours.

Disinfectants should not be poured into the pits or tanks of latrines.

25. Two main factors will affect the choice of an excretia disposal system: the traditional sanitation practices of the refugees and the physical characteristics of the area, including the geology, the availability of water, rainfall and drainage. Failure to take proper account of these can easily result in the system itself rapidly becoming a health hazard.

26. The essential starting point is to find out the traditional sanitation practices of the refugees and how these can be modified to reduce health risks in a refugee emergency. The following information will be required:

- ❏ Previous sanitation system and practices;
- ❏ Method of anal cleaning;
- ❏ Preferred position (sitting or squatting);
- ❏ Need for privacy;
- ❏ Segregation of sexes and other groups or individuals with whom it is culturally unacceptable to share a latrine;
- ❏ Cultural practices for children;
- ❏ Cultural taboos (for example, against contact with anything that may have touched excretia of others);
- ❏ Social factors, including likelihood of community action to ensure proper use of proposed system;
- ❏ Need for special orientation (direction) of latrines in some cultures;
- ❏ Systems used locally in neighbourhood of site.

27. Arrangements must be made to assure the availability of appropriate anal cleaning materials at or near all latrines. This is essential for hygiene.

The latrines must be safe for children, and must be able to be used at night.

Pay attention to security for women: for communal units some form of lighting should be provided and it may be necessary to provide guards.

Immediate Action

28. Initially the refugees are likely to defecate indiscriminately, contaminating their environment and often the water supply. In consultation with the community leaders, the best first step is to demarcate defecation fields to localize and contain excretia.

29. Designate an area or areas (about 50 m x 50 m each) away from the dwellings and down wind, but sufficiently close to be used. Separate areas for men and women are usually desirable. Within the defecation field, strips of land – roughly 1.5 m wide, 20 m long, on each side of a central access path – will be used, one after the other, beginning with strips farthest from the entrance.

30. Based on a recommended surface area of 0.25 m^2 per person per day, exclusive of access paths, defecation fields of the size above would be sufficient for about 250 people during a month, or 500 people during two weeks. Operating defecation fields beyond one month is not advisable.

31. Fence the area(s) and provide privacy by means of partitions and shallow trenches (in the strips) and spades, if possible. Covering excretia with ash, lime or just soil lessens health risks. Locate such areas where the surface water run-off will not cause contamination. Protect the area with cut-off ditches.

32. A publicity campaign will be required to encourage refugees to use these areas and not defecate indiscriminately near dwellings or the water supply. At least one attendant should be assigned to each defecation field. To the extent possible, hand-washing facilities should also be installed nearby.

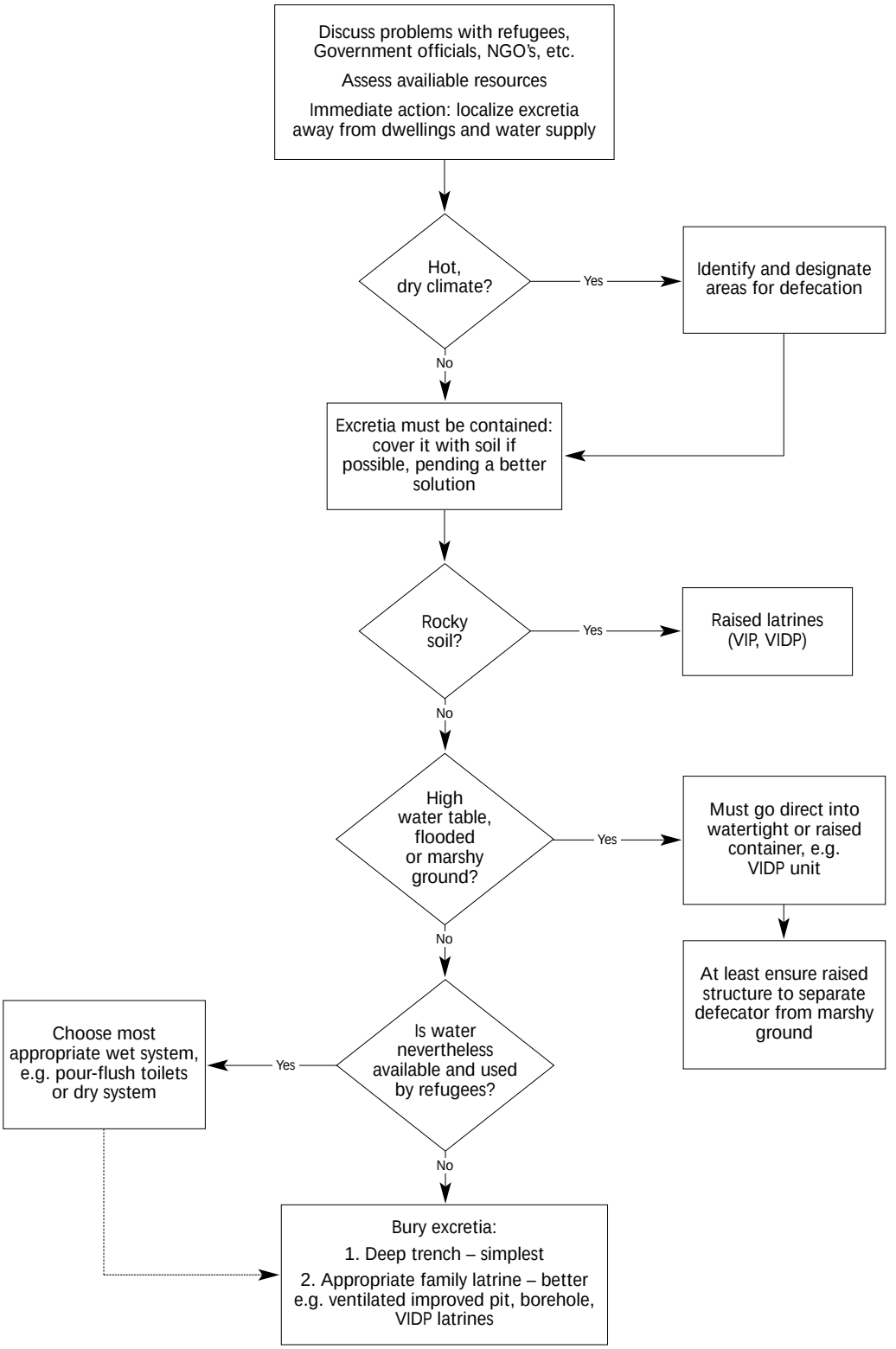
Selection of a System: Basic Considerations

33. The selection of an excretia disposal system suitable for a particular situation requires consideration of a number of factors. In an emergency, however, time is the critical factor. Pollution of the environment by excretia, with all its attendant risks, cannot be stopped without immediate sanitation measures. Thus the range of choice is always much more limited at the very outset of an emergency.

34. Temporary systems, to meet the most immediate needs, will have to be improved or replaced by others as soon as possible, in order to maintain adequate sanitation standards.

In emergency sanitation, act first and improve later.

Figure 1 – Considerations in Excretia Disposal



35. Figure 1 illustrates some considerations to be taken into account in excretia disposal.

36. The design of sanitary facilities should be governed by cultural factors (discussed above) and by the following physical considerations:

i. *Flies and smells:* these can be reduced by: installing vent pipes topped with anti-corrosive screens; covering faeces regularly with ash; treating latrines with biological larvicides to control fly larvae; using fly traps, etc.;

ii. *Flooded pits or collapsed walls:* these can be avoided by ensuring proper construction including having a raised superstructure, well-built base and mound, pit lining, and good drainage. Sometimes these steps are not taken because of, for instance, financial considerations. However, a large number of latrines built quickly and cheaply will not necessarily solve environmental health problems;

iii. *Life-span:* to dig a pit for excretia is not a very exciting exercise. Normally, the pit should be designed to last two to three years (the capacity of a dry pit should be at least 0.07 cubic meters per person per year). If its dimensions have not been properly calculated, people will have to dig a new pit a short time later. Community members would understandably be reluctant to do this and the site would become covered with pits, some containing un-stabilised faecal matter hazardous to human health. In addition, shortage of space limits the number of latrines which can be built;

iv. *Cleanliness and privacy:* Communal installations are rarely kept clean and become unusable within a very short period of time and encourage transmission of diseases. Therefore family latrines should be preferred whenever possible. Sanitary facilities should preserve users' privacy. Cubicles should be partitioned off within each block. At family and individual level, socio-cultural considerations often make it compulsory to build separated units for men and women. Disregard for these simple criteria might result in misuse and abandonment of facilities;

v. *Location:* groundwater pollution must be nil or at a minimum. Latrines should be at least 30 m from any groundwater source and the bottom of any latrine at least 1.5 m above the water table. Latrines must be close enough to users' shelters to encourage their use (not more than 50 m). They must be far enough from shelters and other buildings to prevent potential smells and pests from bothering or harming the population (at least 6 m from shelters if possible).

37. There are a number of latrine options: once cultural and physical factors have been taken into account, the key factors to consider are low cost, simplicity of construction and ease of maintenance.

Trench Latrines

38. Trenches can be used for a few months. If necessary, and where space is available, this solution can continue for longer periods, with new trenches being dug as old ones fill up.

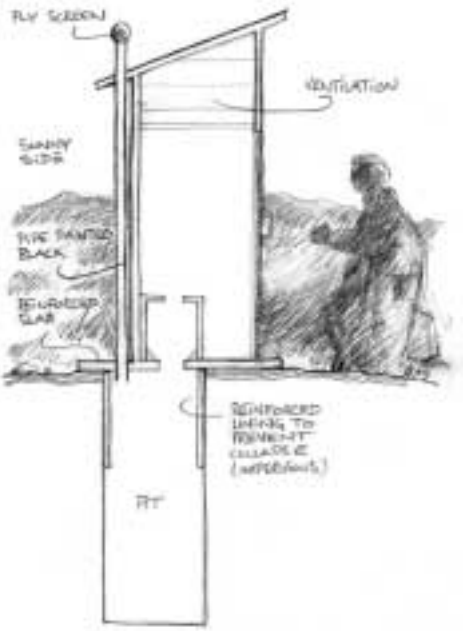
Trench latrines should be dug 1.8 to 2.5 m deep and 75-90 cm wide. Recommended length per 100 persons is 3.5 m.

39. A platform and structure will be needed, providing a seat or squatting hole as appropriate, with lid. When the trench is filled to within 30 cm of the top, it must be covered with soil and compacted. Trench sides must be shored up if there is a danger of collapse.

Pit Latrines

40. The pit latrine is the most common excretia disposal system used around the world

Figure 2a



(see figure 2a). It has major advantages over a trench latrine. It consists of four basic components: a pit, a base, a squatting slab (or plate) and a superstructure.

41. If used by only one family these latrines are usually well maintained. Pit latrines can also be used in clusters as communal facilities.

42. Pit latrines are most suitable in conditions of low to medium population density – up to about 300 persons/hectare – but have been used satisfactorily in areas with twice this density. Space is needed not only for the construction of one pit latrine per family, but also for new pits when the old ones are full. This is an important consideration when pit latrines are used as communal facilities.

43. When the pits are three-quarters full, they must be filled with soil and the superstructure and squatting plate moved to a new pit. Applying layers of ashes as the pit fills will speed up the decomposition of excretia and in time the site can be used again.

44. The pit should be about one meter across and over two meters deep. The rim of the pit should be raised about 15 cm off the ground and ditches should be dug around the base to divert surface run off. The pit wall should always be reinforced for one meter below ground level to prevent collapse.

45. The basic variety has both odour and insect problems, but these can be considerably reduced by making the simple improvements of the ventilated improved version (VIP) (see figure 2b), and by adding oil and using lids.

Where pit latrines are used, the ventilated improved version should be built whenever possible.

46. In a VIP latrine the vent pipe should be at least 15 cm in diameter, about 2.5 m high, painted black and placed on the sunny side of the latrine for maximum odour and insect control. Blackening the external surface of the vent pipe only marginally increases the venting velocity, but this factor may be of greater importance under "no wind" conditions. The vent pipe must be fitted with an insect proof gauze screen (so it works as a fly trap). The hole should not be covered by a lid as this impedes the air flow.

Bore-Hole Latrines

47. Bore-hole latrines (figure 3) are dug with a hand auger or mechanical drill and require a smaller slab than a pit. The bore-hole is 35-45 cm in diameter and any depth up to 7 meters. The advantage of the bore-hole latrine is that it can be constructed quickly as a family unit if augers are available. The disadvantages are that the side walls are liable to fouling and fly breeding, they are smellier than vented systems and the risk of ground water contamination is greater because of the depth.

Figure 2b

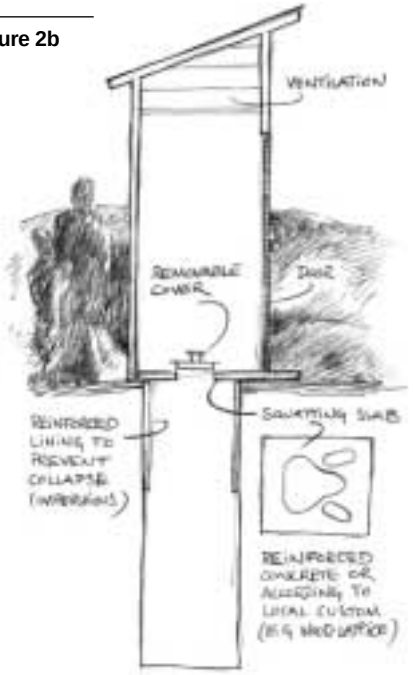
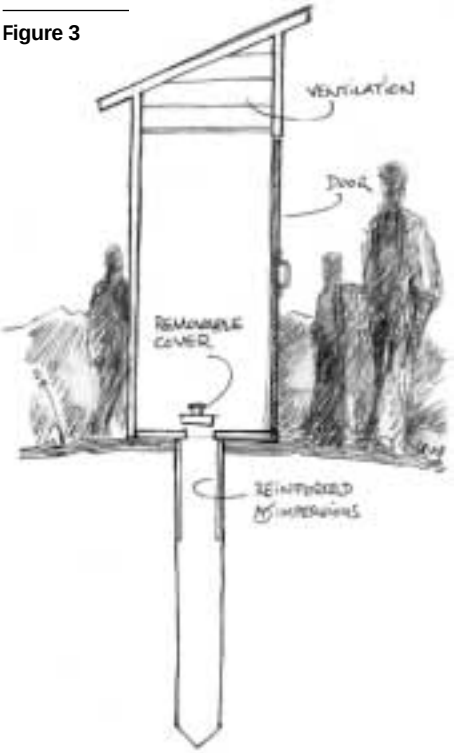


Figure 3

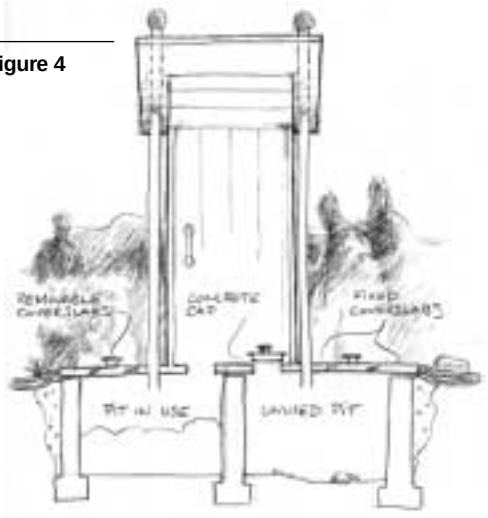


Ventilated Improved Double-Pit (VIDP) Latrine

48. Raised (or built-up) pits can be used where it is not possible to dig deep pits because the water table is high or excavation is difficult (for example in rocky ground).

49. The VIDP latrine (figure 4) (also called alternating-twin pit ventilated latrine) has two shallow pits, both of which are ventilated by separate vent pipes capped with fly screens. It is a good option in crowded areas which may become even more crowded, as it preserves the space needed for replacement latrines.

Figure 4

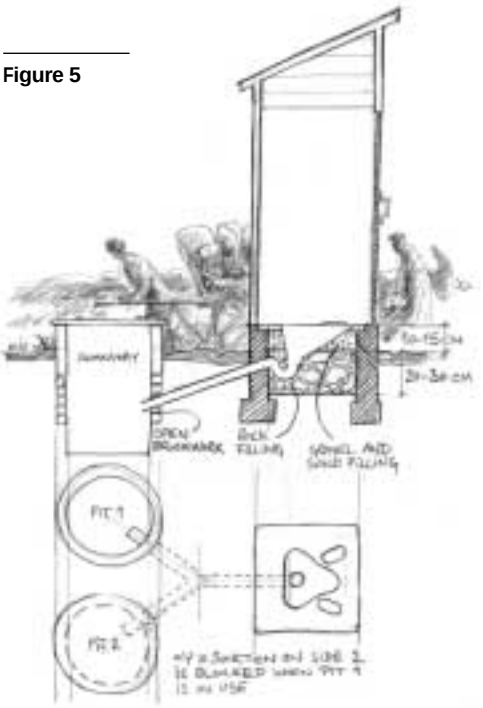


50. Two pits give more flexibility. A pit fills up in two to three years, and it should then stand for at least one year. This gives enough time for the night soil to dry out and decompose, so that it can be removed more easily and not pose a health hazard. While the full pit is decomposing, the other pit is used. The two pits must not be used at the same time.

Pour-Flush (PF) Latrine

51. Pour-flush latrines (figure 5) are simple in design but need permeable soil for their soak-away. A water seal is made by a U-pipe filled with water below the squatting pan or seat. It is flushed by hand with some 1-3 litres of water into a pit or soak-away. This system is suitable where water is used for anal cleaning and where refugees are used to flushing. It is not suitable where paper, stones, corncobs or other solid materials are used for anal cleaning. Pour-flush latrines will be used properly only if water is readily available. A large container with a 3 litre dipper should be made available close by the latrines.

Figure 5



Stabilization Ponds

52. Where liquid effluent has to be disposed of in impermeable soil, stabilization (oxidation) ponds are a simple and cheap solution, particularly in hot climates. Various systems are described in the technical references. If ponds are used they must be securely fenced off.

Solid Wastes

- Improper garbage disposal increases the risk of insect and rodent-borne diseases, and an effective system must be established for the storage, collection and disposal of garbage;
- Garbage disposal areas must be designated and access to them restricted;
- Large amounts of dust can damage health. Preventing destruction of vegetation is the best preventative measure against dust.

General Considerations

53. The quantity of garbage generated by refugees is often not considered substantial and it therefore tends to be neglected. However, the daily amount of garbage as well as its weight can be significant, in market places in particular.

Uncontrolled accumulation of garbage is unhealthy, and promotes an increase in rodent and insect borne disease.

At the beginning of an emergency hygiene and waste disposal is usually poor, so vermin and other pests including rodents proliferate very rapidly.

54. Food is occasionally distributed to refugees in metal cans. How those are disposed of should be given particular consideration not only for aesthetic reasons but also because of health hazards (injuries to children, potential breeding sites for mosquitoes, etc.). In addition, this kind of garbage is far from biodegradable.

55. Medical waste (used syringes and needles, contaminated bandages, laboratory specimens, etc.) generated by health centres, are a hazard. Access to medical sanitary services should be well controlled, and the waste should be treated separately, without delay (see below).

The safe disposal of all medical waste requires particular attention.

There should be routines for the storage, collection and disposal of garbage – this will be particularly important in high-density sites.

Garbage Management

56. Storage: metal drums can be used as refuse bins at individual dwelling level. A 200 litre drum cut in half is often used. Bins should have lids if possible and drainage holes in the bottom. A ratio of one container (100 l capacity) per 10 families has proved to be effective. The containers should be placed throughout the site in such a manner so that no dwelling is more than about 15 meters away from one. Using concrete structures as refuse bins is neither economical nor practical: they are difficult to empty properly so rodents are encouraged and garbage is dispersed around the area.

57. Collection and Transportation: garbage should be collected from the containers regularly, daily if possible. Camps near a city could benefit from existing refuse-dump services. Using tractors with trailers is expensive and should be considered as a last option and only for large and densely populated camps. Wheelbarrows and/or carts (hand or animal carried) are usually more appropriate.

58. Disposal and Treatment:

i. Sanitary land-filling (also known as controlled tipping) remains the most advisable method. Areas designated for burying garbage should be well away from dwellings, and fenced off;

ii. Incineration is justified on a small scale and usually only for medical waste. After each incineration, cover the waste with a layer of soil;

iii. Composting is an attractive option but requires technical knowledge, which may not be available. In addition, garbage must be sorted to produce good compost.

Dust

59. Large amounts of dust carried in the air can be harmful to human health by irritating eyes, respiratory system and skin, and by contaminating food. The best preventive measure is to stop the destruction of vegetation around the site. Dust can also be controlled by spraying roads with water or oil, especially around health facilities and feeding centres, and limiting or even banning traffic.

Wastewater

◆ Sources of waste water must be controlled as soon as possible and drainage provided.

General Considerations

60. This aspect of environmental sanitation should always be considered from the beginning. Drainage prevents water from stagnating around water distribution points, and drains the rainfall as well as domestic wastewater originating from various sources (toilets, showers, kitchens, etc.). Other measures to help control vectors include eliminating ponds.

61. Drainage can very quickly become a problem and corrective measure are difficult once shelters and other infrastructure have been built. For example, people often wash next to water sources, causing problems which could be avoided if special separate washing areas are constructed with duckboards or stones and proper drainage.

62. Some families manage to channel wastewater away from their homes and use it to irrigate vegetable gardens. Although this should be encouraged it should not disrupt the main drainage system.

63. Good drainage should be a priority at the following locations:

i. Water points (standpipes, taps, handpumps);

ii. Sanitary facilities such as showers, toilets and washing areas. Waste water from these places should either be used to irrigate veg-

etable gardens and fruit trees or drained into absorption trenches or soak-away pits;

iii. Shelters: household members usually manage to protect their shelters from runoff waters by means of perimeter drains. It is nevertheless important to ensure that such water is collected and disposed of through main drains.

Treatment

64. In some circumstances, waste water should be treated, for example waste from sewers collecting effluent from pour-flush toilets. Some treatment package units are available on the market; but these are usually expensive, complex, and difficult to operate and maintain.

65. However, there is a broad range of waste water treatment technology. Sanitary engineering professionals should be consulted to select the most appropriate technology.

Pest and Vector Control

- Insects and rodents carry and spread diseases and can spoil food supplies;
- Physical screens are the best immediate measures;
- Preventive action to eliminate or limit breeding areas and conditions favourable to the vectors is the best long-term solution;
- Specialist supervision of all chemical measures and local knowledge of resistance is necessary;
- Avoid chemical control where possible.

General Considerations

66. The environment in a refugee emergency is typically favourable to the proliferation of disease-carrying insects and rodents ("vectors"), which can also destroy or spoil large quantities of food.

67. Flies tend to breed in areas where food or human excretia are present, mosquitoes where there is stagnant water, and rats where there is food, garbage and cover. As a result of overcrowding and inadequate personal hygiene, lice, fleas, mites, ticks and other arthropods may also cause health problems. Table 2 gives an indication of common vectors and related diseases.

68. Reducing the numbers of flies, mosquitoes and rodents quickly in an emergency is difficult and physical screens may be the best immediate measure. Over the longer term, the most effective method of controlling insects and rodents is preventive: to improve personal hygiene, sanitation, drainage, garbage disposal and food storage and handling practices and thus make the environment less favourable for the vectors. Examples of practical measures are the removal of stagnant waste water, regular garbage collection, use of oil in latrines and provision of soap and sufficient water for washing. The recommended monthly supply of soap is 250 g soap per person per month. The programme should provide for regular inspection and be integrated with other public health measures.

69. The problems should be discussed with the refugees and education given on the significance of vector control. Where solutions unfamiliar to the refugees are employed, these must be carefully explained.

70. Whatever the nature of nuisances and pests, one should avoid having systematic recourse to chemical control by means of pesticides (insecticide, rodenticide, molluscicide, etc.). Such products are costly and toxic to both human beings and the environment. There is a risk of poisoning during transport, storage, handling and of course spraying the chemicals. Also, pests can develop resistance to the chemicals.

Table 2 – Vectors Which May Pose Significant Health Risks

VECTOR	RISKS
Flies	Eye infections (particularly among infants and children), diarrhoeal diseases
Mosquitoes	Malaria, filariasis, dengue, yellow fever, encephalitis
Mites	Scabies, scrub typhus
Lice	Epidemic typhus, relapsing fever
Fleas	Plague (from infected rats), endemic typhus
Ticks	Relapsing fever, spotted fever
Rats	Rat bite fever, leptospirosis, salmonellosis

Physical Control

71. Measures described in this chapter to deal with excretia and waste disposal will also help control pests (flies and rodents particularly).

72. The elimination of stagnant water and other breeding and resting sites for mosquitoes through drainage is important and the drainage network must be maintained.

Chemical Control

73. Obtaining precise information on chemicals which are used or authorized to be used in the country (i.e. registered list of pesticides if any) should be the first priority.

Insecticide spraying carried out on a routine basis must be avoided, and in any event should be consistent with the rules and procedures in force in the host country.

74. Advice from specialists, particularly medical entomologists, should be sought to minimize the risks and to maximize the impact on target-species.

75. Staff assigned to such tasks must be trained on technical aspects, informed about health hazards linked with handling and spraying of pesticides, and protected by means of adequate clothing (mask, boots, gloves, etc.).

76. The use of rodenticides should always be adopted in agreement with medical staff. Rats are favoured carriers of vectors (such as fleas) of bubonic plague and murine typhus. When these diseases may be present it is more important to take measures directly against the vectors themselves – i.e. the fleas, rather than the rats – because destroying the rats will simply cause the fleas to leave the dead bodies of the rats and become more of a threat to people.

77. The body louse is the only proven vector of louse-borne epidemic typhus and relapsing fever. If there is a serious increase in body louse infestation, quick action is required by properly trained personnel. This generally involves dusting individuals' inner clothing and bedding with an insecticide or the use of clothing fumigants. There is widespread resistance in lice to some insecticides and expert local advice must be sought.

General Hygiene

- Sanitary engineering must be complemented with sufficient health education, sensitization and community participation.

78. Habitat hygiene, food hygiene and personal hygiene, while being integral parts of environmental sanitation, are a matter of health education and community sensitization rather than of sanitary engineering. It is nevertheless worth underlining that the most effec-

tive manner to sustain "soft" activities such as education in general and health education in particular is to complement them with "hard", visible and concrete activities on the spot.

79. Community participation in sanitation activities is a key to successful implementation, however, to make participation work in practice, the community members must have the necessary resources – human, institutional and material – to enable them to take on their responsibilities.

80. Activities to improve living conditions should take place at all levels – site, community, family and individual – and not be restricted to just one level. Elementary rules of hygiene should be observed by everyone.

81. There are three essential steps to improve living conditions:

- ❏ Avoid overcrowding and overpopulation, which increase transmission (through direct or indirect contact) of diseases brought about by vectors such as fleas and lice;
- ❏ Reduce faecal/oral transmission risks by ensuring systematic hand-washing before cooking and eating;
- ❏ Encourage personal hygiene including clean clothes by providing amenities such as showers and laundering areas and basins. This will also reduce contact with water bodies that have been polluted by excretia, reducing the risk of disease including bilharziasis (schistosomiasis).

Disposal Of The Dead

- ◆ Suitable arrangements for disposal of the dead are required from the start of an emergency;
- ◆ Action should be co-ordinated with the national authorities;
- ◆ Burial is the simplest and best method where acceptable and physically possible. Arrangements should be made to allow traditional rituals;
- ◆ Before burial or cremation, bodies must be identified and the identifications recorded.

82. Suitable arrangements for the disposal of the dead are required from the start of a refugee emergency. The mortality rate may well be higher than under "normal" conditions. The authorities should be contacted from the outset to ensure compliance with national procedures, and for assistance as necessary.

83. Dead bodies present a negligible health risk unless the cause of death was typhus or plague (when they may be infested with infected lice or fleas) or cholera. Funerals for persons dying from cholera should be held quickly, near the place of death. Efforts should always be made to restrict funeral gatherings of persons dying from any of these three diseases, and to restrict feasting and ritual washing of the dead, by intensive health education or by legislation, as appropriate.

84. Health considerations provide no justification for cremation, for which sufficient fuel may often not be available. Whenever possible, the customary method of disposal should be used, and the traditional practices and ritual should be allowed. Material needs, for example for shrouds, should be met. The necessary space for burial will need to be taken into account at the site planning stage, particularly in crowded conditions.

85. Before burial or cremation, bodies must be identified and the identification recorded, and, if possible, cause of death recorded. This is particularly important for the control, registration and tracing of disease. If the whereabouts of relatives are known, the most immediate relation should be notified; and steps must be taken to assure the care of minors who, as the result of a death, are left without an adult to look after them.

86. When handling corpses workers should protect themselves with gloves, face masks, boots and overalls. The workers should wash thoroughly with soap and water afterwards. Although the HIV virus cannot survive for long in a dead body, care should be taken with bodily fluids.

Key References

A Guide to the Development of On-Site Sanitation, WHO, Geneva, 1992.

Chemical Methods for the Control of Arthropod Vectors and Pests of Public Health Importance, WHO, Geneva, 5th edition 1997.

Manuel d'Utilisation des Désinfectants, UNHCR, Geneva, 1994.

Sanitation and Disease: Health Aspects of Excretia and Wastewater Management, Feachem & al, Wiley & Sons, 1983.

Vector and Pest Control in Refugee Situations (also in French), PTSS, UNHCR, Geneva, 1997.

Vector Control: Methods for Use by Individuals and Communities, WHO, Geneva, 1997.

Annex 1: – Environmental Sanitation Survey Form

Country: Date: ...../...../.....

Camp/Settlement: Camp Population:

Prepared by:

I. Living Areas

A. Excretia Disposal

Ratio of latrine seats to people: 1/.....

	Total	V.I.P.*	Rudimentary	P.F.**	Other
Private Latrines					
Public Latrines					

Comments: _____

_____

B. Refuse Disposal

	Capacity (Litres)	Number	Max Distance from dwelling (m)
– Individual pits:	☐	☐	☐
– Garbage Bins	☐	☐	☐

	Wheel-barrow	Truck	Other
– Transportation:	☐	☐	☐

	Landfill	Incineration	Other
– Final Disposal	☐	☐	☐

	Dimensions	Number
Communal refuse pits	long___x Wide___x Deep___x	☐

Comments: _____

_____

* V.I.P. = **V**entilated **I**mproved **P**it

P.F. = **Pour-**F**lush

II. Public Places

C. Existing Facilities

Schools

*Latrine Type	P.F.	V.I.P.	Rudimentary	Other
	☐	☐	☐	☐

1 seat /_____ boys
1 seat /_____ girls
1 urinal /_____ boys

*Refuse collection	Yes	No
	☐	☐

Hospitals

*Latrine Type	P.F.	V.I.P.	Rudimentary	Other
	☐	☐	☐	☐

*Refuse collection	Buried	Burnt
	☐	☐

Markets

*Excretia Disposal	Good	Poor	None
	☐	☐	☐

*Refuse collection	Good	Poor	None
	☐	☐	☐

Comments: _____

_____

D. Drainage

– at water posts	Good	Poor	None
	☐	☐	☐

– around latrines	Good	Poor	None
	☐	☐	☐

– camp drainage network	Good	Poor	None
	☐	☐	☐

Comments: _____

_____

E. General Characteristics

– topography	Flat ☐	Moderate ☐	Steep ☐
– soil	Rocky ☐	Clay ☐	Sandy ☐
– water table distance from ground surface	Rainy Season _____ m	Dry Season _____ m	

F. Community water supply

– sanitation at source	Good ☐	Poor ☐	None ☐
– sanitation at distribution point	Good ☐	Poor ☐	None ☐
– individual water containers	Capacity		_____ litres
– storage at home	Capacity _____ litres	Clean Y – N	Covered Y – N
– chemical used for water disinfection	Chlorine ☐	Other ☐	None ☐
– points of application of above chemicals	Source ☐	Storage Tank ☐	Home Container ☐

Annex 2: – Environmental Sanitation – Resource Inventory Form

Country: Prepared by:

Camp: Population:

Date: ...../...../.....

A. Implementation	**Name(s)**
Governmental authorities	
International organisations	
Private sector	
NGO's	

B. Human Resources			**Number of Workers**
Is there a spraying team?	Y	N	
Is there a drainage team?	Y	N	
Is there a sanitation team?	Y	N	
Is there an organised workshop?	Y	N	
Number of sanitarians:			
Number of health workers: (assigned to sanitation tasks)			

C. Tools	**Description**	**Specification**	**Quantity**
Axe			
Crowbar			
Iron bar cutter			
Pickaxe			
Shovel			
Spade			
Tape metre			
Other (please specify)			

D. Equipment	**Description**	**Specification**	**Quantity**
Cement mixer			
Mortar bucket			
Mould (latrine slab)			
Mould (brick)			
Wheelbarrow			
Sprayer			
Spraying equipment			
– overall clothing			
– masks			
– gloves			
– boots			
Other (please specify)			

E. Chemicals	**Item**	**Unit**	**Quantity (stock in Hand)**	**Comments**
Vector control				
–				
–				
Water Treatment				
–				

17 Environmental Sanitation

18

Supplies and Transport

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Situation

Refugee emergencies are often in locations removed from the main sources of supply and communications arteries. Exceptional efforts may be needed to ensure the provision of supplies and services. However without these, the whole operation will fail.

Objective

The timely delivery of the materials needed for the refugee operation.

Principles of Response

- There should be a single, unified "supply chain" with standardized procedures and coordinated with external agencies such as WFP. The term "supply chain" includes the sourcing, procurement, transport, import, management, storage and distribution of goods and services required to meet operational needs;
- Duplication of supply chain support within the UNHCR operation must be avoided;
- A single coordinating body of all the relevant UN agencies may be required to implement certain aspects of the supply chain such as transportation and storage (e.g. a "UN Joint Logistics Cell");
- Request urgently needed supplies from the UNHCR Central Emergency Stockpile if they are not available locally;
- Ensure there is good communication between offices involved in the supply chain and timely information exchange regarding logistical capacities and constraints;
- Transport and storage arrangements must have spare capacity: things often do not go according to plan, needs, and the demand for supplies, may increase;
- Seek technical assistance when necessary.

Action

- Make a comprehensive plan for all supply chain functions. Integrate supply chain arrangements in the overall planning from the start, coordinate with all sectors, and take into account any special requirements;
- Identify weak elements in the supply chain and inform operational managers of actions rendered critical due to lead time (the delay between the request for material and its arrival);
- Seek out knowledge on local conditions and assess implementing possibilities with local suppliers, or other agencies.

Introduction

1. The vital role of the supply chain must not be overlooked in the initial planning, and the input of a logistics specialist is required on any assessment mission. The more remote the location of the refugees, the more difficult will be the logistical problems, yet these are the situations where logistic support or the lack of it becomes the key to success or failure.

The ability to deliver the right supplies to the right place at the right time and in the right quantities is a prerequisite for an effective emergency operation.

2. The supply chain must provide for international purchase, transport, swift unloading and duty-free clearance on arrival, local purchase, transit storage, onward transportation, and final distribution, with proper stock control at every stage. Figure 1 shows the likely major components of the system in diagrammatic form.

3. Logistical support can be disrupted by unpredictable events and many factors outside UNHCR's control including customs delays, breakdowns, looting, and the vagaries of nature. Furthermore, the numbers requiring assistance often increase during the emergency phase of an operation.

The supply chain must provide for spare capacity because available capacity may become quickly overwhelmed.

Organization of the Supply Chain

- A single coordinated operation is essential and duplication of supply chain services must be avoided;
- This requires a clear understanding of overall needs and the responsibilities for meeting them;
- Three key qualities of a good supply chain are: rapidity, flexibility and security.

Assessment

4. A clear understanding of the overall needs by all concerned is essential. Needs assessment and planning should be carried out together with government, WFP and NGO partners.

5. An easily understood and comprehensive list of requirements is essential as the starting point for meeting the basic material needs. Without it, great confusion can result. With such a starting point, the balance of needs, requirements and distribution can be continuously monitored, and the effect of these relief goods or services will be immediately apparent.

Planning

6. Three key qualities of a good supply chain are: rapidity, flexibility and security. These three qualities depend on good coordination and communications as well as good planning. When planning for and developing the supply chain, ensure:

i. *Rapidity:* Response time is critically important in emergencies, and advance planning is essential to optimize resources, and not waste time correcting avoidable mistakes or inefficiencies. Planning must take into account lead times;

ii. *Flexibility:* Logistics is dictated by the circumstances of the operation and terrain, and must be able to quickly adapt to rapid changes in circumstances. Plan for the worst case scenario, and build in the required flexibility and adaptability;

iii. *Security:* The security of personnel and relief goods must be a priority in the logistics plan. Security risks vary from theft and looting to war;

iv. *Coordination:* Coordinate planning and implementation with other agencies, in particular WFP who often have good local transport and logistical capacity. WFP is normally responsible for food supplies up to the agreed Extended Delivery Point – see chapter on food and nutrition.

Avoid duplication of logistical services by different organizations and ensure a single, coordinated operation.

A single coordinating body of all the relevant agencies may be required to implement certain aspects of the supply chain such as transportation and storage (a "UN Joint Logistics Cell") – guidance on setting this up is given in MCDU's **UN Joint Logistics Cell: Standard Operating Procedures**. Ensure effective coordination by: advising team members and staff from other organizations of minimal lead times, respecting deadlines and delivering the expected supplies at the time and place agreed and keeping to agreed loading and transport schedules;

v. *Comprehensive planning:* Have an overview of the whole operation when planning for and managing services, materials, staff and time;

vi. *Spare capacity:* The logistics plan must provide spare capacity, taking into account factors which would cause delays (such as vehicle breakdowns);

vii. *Cost-effectiveness:* Ensure proper maintenance of warehouses, efficient stock control, and well negotiated contracts (e.g. for transport, warehouses, customs clearance, and maintenance). Ensure purchases are made from competitive sources in accordance with UNHCR regulations – although initial purchases may be made with speed as a foremost concern, plan follow on supplies in good time to be able to purchase from competitive sources;

viii. *Good communication:* A regular exchange of information between the offices involved in the supply chain is essential. Headquarters should give the Field as much notice as possible of procurement and shipment of goods or services, estimated times of arrival (ETA), changes in delivery schedules, and of contributions in kind. The field should advise Headquarters of any changes to importation laws, acknowledge receipt and distribution of consignments, and advise Headquarters of contributions in kind.

There must be good communications facilities at dispatch and arrival points as well as mobile communications sets on surface transport.

ix. *Clear responsibility:*

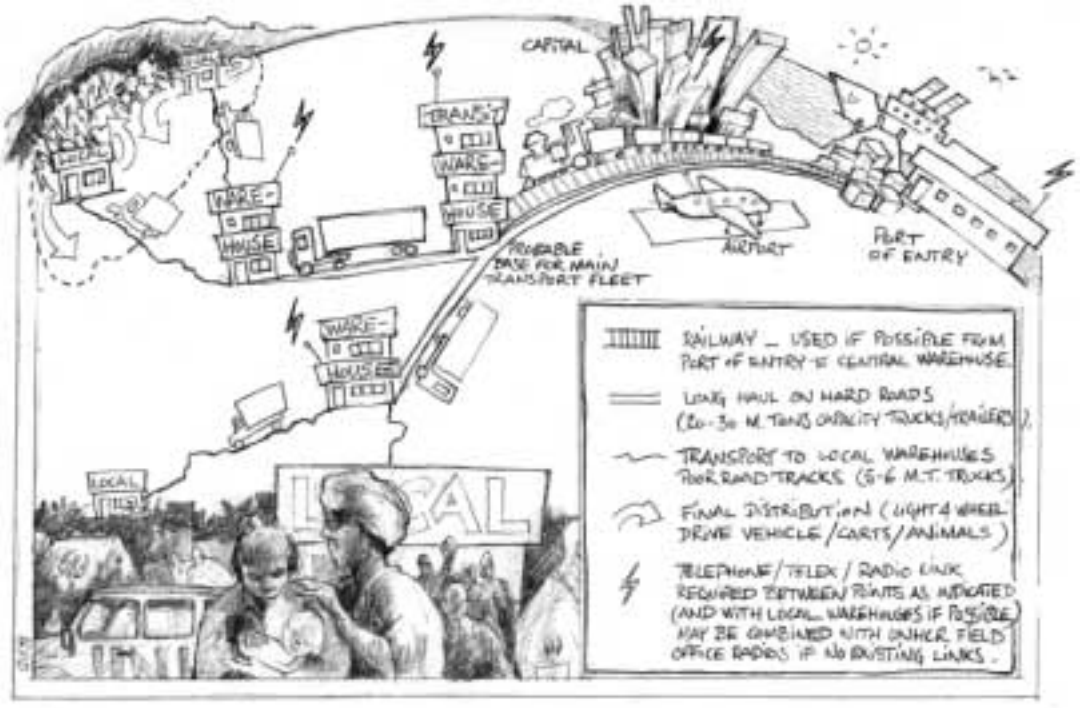
Whatever the arrangements in the field, the line of responsibility and reporting to UNHCR by the operational partners must be clear.

The major decisions about supply chain issues should be taken by the same person with the appropriate responsibility and authority;

Local and Other Resources

7. The supply chain should use local resources and knowledge to the extent possible. Where there is a good existing warehousing and distribution system, outside assistance may not be necessary. Where outside assistance is required, sources include:

Figure 1



i. Supply and Transport Section at Headquarters (which handles procurement, logistics, fleet management, and contracting);

ii. Government disaster agencies or emergency corps, and Government Service Packages from donor governments (see chapter on implementing arrangements);

iii. An NGO or commercial firm with appropriate experience.

Setting up the Supply Chain

8. The circumstances of each emergency will determine what type of supply chain support is required – whether it is directly implemented by UNHCR, through an operational partner or as a commercial contract.

9. Steps to establish the supply chain include the following:

i. Make arrangements for the duty-free import/export of relief goods, and duty free and tax free purchase of relief goods with the appropriate governmental authorities. To avoid delays, this must be done before the goods are due to arrive;

ii. Investigate the possibility of using local suppliers;

iii. Select warehouses appropriate for their purpose (for storing food or non-food items; for transhipment, storage or distribution). Ensure that access roads and doors allow easy loading and offloading;

iv. Select appropriate transport for goods and/or passengers: determine the type and the number of light and heavy vehicles, vessels, aircraft and trains needed. Calculate fuel and maintenance requirements (tyres, lubricants, parts and mechanics);

v. Use temporary assistance during peak demand for staff;

vi. Provide the necessary staff support equipment such as office equipment and supplies, light and water, vehicles, freight handling items, power, communications, and accommodation;

vii. Put in place a documentation and filing system, and use standard forms to report on the status of relief goods. Advise and train personnel on procedures.

Supplies

◆ Assess what is readily available on the local market: if locally available items are appropriate, make at least initial purchases locally;

◆ The basis for UNHCR procurement is competitive tendering;

◆ Standard specifications have been developed for common items;

◆ Certain emergency relief items are stockpiled centrally by UNHCR and can be accessed quickly in an emergency.

Introduction

10. The basis for all UNHCR procurement is competitive tendering. This process is made easier and more efficient by standard specifications.

11. Headquarters' Supply and Transport Section gives advice and provides support on all procurement and logistics matters and is responsible for international procurement. Guidance on local purchase can also be sought from other UN organizations. Tendering procedures are described in Annex 2 to chapter 8 on implementing arrangements.

12. When drawing up tender documents and purchase orders it is essential that all specifications, quantity, required delivery, packaging and payment terms be clearly stated. Care must be taken to ensure that contract terms protect the rights and immunities of UNHCR. Requests for tenders should in any event include UNHCR's standard conditions of sale. Advance payments and cash transfers to suppliers must be authorized by Headquarters.

13. If procurement is to be undertaken by implementing partners on behalf of UNHCR, the principles of competitive bidding must be followed (see **A Programme Management Handbook for UNHCR's Partners**, section 4). UNHCR staff should monitor local and international procurement made by implementing partners for the UNHCR-funded programmes.

14. Care should be taken to avoid purchasing different qualities of the same items.

Local and International Procurement

15. If emergency relief items are available locally, compare prices where possible with the international market. Use catalogues or send local prices to the Supply and Transport Section in Headquarters who will advise on the most appropriate course of action. Assess what is readily available on the local market: if locally available items are appropriate, make at least initial purchases locally. At the same time however, consider the cost-effectiveness

of continuing such local purchases beyond the initial phase of the emergency, compared with making those purchases internationally.

16. Local procurement can offer a number of advantages over international purchases. These could include:

i. lower prices;

ii. speed and flexibility of delivery;

iii. local acceptance;

iv. benefits and incentives to the local economy (particularly in areas affected by a large refugee influx).

17. However, the disadvantages of local purchase could include:

i. higher prices;

ii. inappropriate quality;

iii. sudden price increases (due to sudden heavy demand) on the local market, adversely affecting the local consumer population and causing resentment;

iv. higher maintenance costs.

18. As a rule, no more than 15% would be an acceptable premium for prices of locally procured goods over the total delivered cost of internationally procured goods[1].

Local Procurement

19. When the capacity of the local market is limited, care must be taken to avoid price increases caused by organizations bidding against each other for the same supplies. Provided there is clear agreement on the needs, coordination of purchases and even combined orders among the organizations concerned should be possible.

International Procurement

20. UNHCR has entered into a number of long term supply agreements ("frame agreements") for a range of products. The purpose of these agreements is to ensure the availability of goods of a standard quality at competitive prices, and reduce total lead time. These items include blankets, plastic sheeting, essential drugs, kitchen sets, semi-collapsible jerry cans, and buckets. Support and office items supplied under frame agreements include light vehicles, vehicle tires and tubes, generators, ballistic armour, computer and telecommunications equipment, and some office equipment and supplies.

21. The UNHCR **Catalogue of Most Frequently Purchased Items** gives summary specifications, reference number, price (US$), country of origin, and, where relevant, production capacity, production lead times and estimated shipping times. It also includes a list of current frame agreements.

22. When requesting Headquarters to make a purchase, be sure to use both the reference number for a product, and the name and date of publication of the catalogue. If specifications are not available for the product wanted, inform the Supply and Transport Section of the purpose of the product and the context in which it will be used.

23. Bear in mind lead times for international purchase can be lengthy.

Emergency Stockpiles

24.

Certain common relief items are stockpiled centrally by UNHCR, or by suppliers on behalf of UNHCR, and can be accessed quickly in an emergency.

The UNHCR stockpile includes the operations support items listed in the Catalogue of Emergency Response Resources (see Appendix 1). These items can be ordered through Headquarters.

25. Other UNHCR operations in the region may hold stocks that could be made available – these offices should be approached directly about the most urgent requirements.

26. UNICEF, WHO, WFP, the IFRCS and NGOs also maintain emergency stockpiles with supplies which may be available to UNHCR.

Specifications and Catalogues

27. There are a number of catalogues of products with detailed specifications. Using standard specifications (and frame agreements) is not intended to limit choice, but simplifies supply, and ensures better integration of equipment, spare parts and services. Generic specifications also make the procurement and tendering process fairer (e.g. comparing prices). Annex 1 gives detailed specifications of certain common relief items.

28. Catalogues of specifications include:

i. **UNHCR Catalogue of Most Frequently Purchased Items.** This is published annually by UNHCR's Supply and Transport Section, and distributed to all field offices. It gives brief specifications, price, and lead times.

[1] *IOM116/94 FOM120/94, UNHCR 14.12.94.*

ii. **IAPSO Emergency Relief Items.** This is a two volume catalogue published by the Inter Agency Procurement Services Office (IAPSO) of the United Nations. A large number of standard specifications adopted by UN are available in this catalogue, and there are additional IAPSO catalogues on other items (see key references).

iii. **UNICEF Supply Catalogue.** UNICEF also produces a large illustrated catalogue.

Considerations in Product Choice

Environment

29. UNHCR has a policy, also applicable in emergency situations, to ensure awareness and supply of environmentally friendlier products. Impact on the environment is considered an integral part of product quality. Where two or more suppliers are offering items which are substantially the same in terms of specifications, price, quality, and delivery time, the policy is to select a product whose manufacture, use and disposal is less harmful to the environment. For further details see **Environmentally Friendlier Procurement Guidelines,** UNHCR, 1997.

Shelter

30. For shelter, local materials and methods of construction should be used where possible, combined with tarpaulins or polythene sheeting if necessary. Except for nomadic tribes, tents are not a satisfactory type of long-term shelter. They are, however, a valuable last resort in emergencies. Remember that tents may deteriorate rapidly if stored for any length of time, particularly if humidity is high.

In-Kind Donations

31. In-kind donations should always be evaluated against actual needs and cultural appropriateness. All offers for in-kind donations should be discussed with Donor Relations Services and the Supply and Transport Section in Headquarters before being accepted (see chapter on implementing arrangements). Particular attention should be given to packaging (which must meet transport requirements) and expiry dates of products offered.

Clothing

32. Used clothing is often offered in emergencies but is generally an unsatisfactory way of meeting a need for clothing and should be discouraged. It often arrives in poor shape, dirty or badly sorted and will frequently be inappropriate for the customs of the refugees. Consider the alternative of purchasing particularly locally made clothes, and ensure that what is provided is culturally acceptable.

Transport

- Vehicle fleets should be standardized (same makes and models);
- Ensure there are sufficient drivers, fuel, lubricants, spare parts, tyres, maintenance personnel and facilities;
- It may be necessary to improve access roads, bridges, airport, or other infrastructure;
- A substantial margin of spare transport capacity (10-20%) must be provided;
- With health and community services, assess particular requirements for transporting refugees in a repatriation operation, and/or distribution for vulnerable groups.

International Transport

33. Arrangements must be made in advance with the relevant authorities for priority clearance and duties exemptions.

Air

34. In the emergency phase, supplies from abroad may arrive by air. Provide Supply and Transport Section at Headquarters with an update on the handling capacity of the airport (state of equipment, working hours, etc.) and the list of documents required for import and export of relief supplies.

Sea

35. As soon as details of the arrival of relief supplies by sea are known, arrangements should be made for clearance and priority allocation of an alongside berth and/or handling of cargo. In principle, relief supplies should be loaded only on vessels with the capacity for self-discharge. Whenever discharging alongside, they should do so directly onto trucks if possible. Arrangements for onward movement of the supplies and any interim storage necessary must also be made well in advance of the estimated time of arrival of the ship.

National Transport

Transport Networks

36. In many countries, existing transport services do not have a large spare capacity or may not serve the area where the refugees are located.

37. Where a suitable rail network exists, this can be an effective way of moving supplies. However, many railway systems are either congested or short of rolling stock (the locomotives and carriages used by railways) and long delays may be encountered. In most cases, onward movement by road to the final destination will be necessary.

38. Assess rail, road and inland waterway capacity, journey times, reputable transport contractors, freight rates, capacities and facilities at transhipment points (for example transferring goods from ferry or rail to road), and availability of fuel supplies and maintenance facilities.

Evaluate various transport corridors (including reception capacity) for cost and speed of delivery – even airlifts may not always significantly reduce delivery time.

Road Transport

39. Light vehicles will be needed for staff and for specific purposes such as ambulances, and heavy vehicles for transporting cargo, and for transporting refugees in repatriation operations.

40. There must be appropriate servicing facilities, including fuel, spare parts, and administrative support. Special arrangements, e.g. establishing workshops, may be necessary.

Managing a transport fleet requires strong administrative skills, good communications and close coordination with the procurement and other functions to ensure efficient timing for collection and delivery.

Assessing and planning vehicle needs and servicing facilities is described in Annex 2.

41. Drivers must be given training in UNHCR procedures. A sufficient number of drivers must be hired to ensure that recommended working hours are not exceeded.

Accident rates increase markedly with tired drivers.

A system must be established to monitor and control vehicle use, (see Annex 4 for an example of a vehicle log sheet). For light vehicles, drivers should be assigned to a specific vehicle for which they should be responsible.

42. In some situations, urgent action may be necessary in order to improve access roads. Technical advice will be of paramount importance in deciding how improvements should be made (seek advice through Programme and Technical Support Section at Headquarters). These improvements could be undertaken by the ministry of transport (or appropriate authority), perhaps supported by refugee labour. In some situations, careful briefing will be required about alternative routes in case usual roads are impassable.

43. Vehicles, bicycles, or animal or hand carts could be used for final distribution. Observe how local movement of supplies normally takes place.

Transport Capacities

44. If a commodity is to be transported by truck, the number of trucks needed should be calculated from the following information:

i. The quantity of goods to be transported in weight and volume;

ii. Type of truck available and its capacity in weight and volume;

iii. How long a round trip takes (including loading and offloading);

iv. Time allowed for routine maintenance capacity or time allowed for other known factors (driver breaks);

v. A margin for unpredictable events (such as breakdowns, accidents, bad weather, road and bridge repairs). The size of this margin will depend on many factors including the likelihood of new arrivals and the need to build up buffer stocks near the refugees. In difficult conditions, the theoretical capacity might need to be increased by 25% or more.

45. To give an example for food:

i. The number of refugees served is 30,000 who need 500 g/person/day, which is total 15,000 kg / day, or 15 MT /day;

ii. Truck capacity is 20 MT per truck;

iii. The rainy season journey time from the port of entry to a regional warehouse serving the 30,000 refugees is 3 days out and 2 days back;

iv. One day per round trip is added for routine maintenance;

v. The road surface can take a truck and trailer with a combined payload of 20 MT.

46. Therefore it will take 6 days for one truck to transport one 20 MT load, and 30,000 refugees will require 90 MT of food every six days.

Therefore the theoretically required capacity is for 4.5 such trucks. In such circumstances, it is clear that six trucks would be the prudent minimum.

47. Appendix 2 (Toolbox) sets out the capacities of different means of transport.

Transporting people by road

48. Logistical support will be necessary when transporting people for e.g. repatriation operations or relocating refugees to another site. Ensure there is close coordination with health and community services. Take particular care to look after vulnerable individuals, and minimize any risk of family separation. Passengers must be registered on a passenger manifest, wristbands should be used whenever possible, and water and food provided if it is a long journey. Ensure trucks have safe access (for example ladders).

49. When transporting medically vulnerable individuals such as pregnant women, it is preferable to use buses or ambulances. If trucks must be used, weigh the trucks down with sand bags to minimize the roughness of the transport. If there is a risk that some passengers might have a contagious disease, disinfect the vehicles after the journey.

50. Determine the number of light and heavy vehicles needed. These could include minibuses for 8-12 passengers to transport staff and vulnerable individuals, ambulances or mobile clinics (ask health staff about specifications), vehicles for transporting possessions, and mobile workshops.

51. If a convoy is necessary, plan for escort vehicles at the front and back of the convoy. If the operation involves many journeys over a short distance, consider having roving patrols with telecommunications, in case there are problems or breakdowns.

Reception of Goods

- Have a single consignee and address and inform Headquarters of any changes;
- Use the internationally accepted marking and packaging standards;
- Inspect goods on arrival and register insurance claims: supplies can get lost or arrive damaged;
- Advance arrangements with appropriate government authorities and freight forwarders will be necessary for rapid handling of supplies from abroad;
- Develop and promulgate a clear policy for customs clearance procedures for NGOs.

Consignment

52. Ensure offices sending supplies know who the consignee is. The consignee would normally be the Representative, with an indication in brackets of any special instructions, for example "For (*name of project/NGO*)".

Have the same consignee and address for all items required from abroad for the UNHCR emergency operation.

However, where UNHCR was not previously present it may be better to consign c/o a UN organization already well known in the country, for example UNDP, provided no delays will result. Similarly, there should be a single consignee and address at the camp level.

53. Whether purchases are made locally or abroad, proper packing, labelling, marking are essential. All organizations and donors need to use a uniform system for marking or labelling relief consignments – use the following guidelines:

i. *Colour code:* the colours used for the relief supplies are: red for foodstuffs, blue for clothing and household equipment, and green for medical supplies and equipment;

ii. *Labelling:* if necessary the consignment should bear one of the international hazard warning signs (fragile, no hooks, keep dry, etc.). Consignments of medicines should state on the outside of the package the content and the medicines' expiration date and whatever temperature controls are necessary. English or French should be used on all labels and stencilled markings, though another language may be added. It is essential that the final destination (or port of entry) appears at the bottom of the label in very large letters;

iii. *Markings:* all international or regionally procured goods will normally be marked with the UNHCR project code, purchase order numbers, commodity, packing specifications, port of entry and the consignee. Relief supplies should always be packed by commodity type. Mixed consignments create problems in warehousing and in the ultimate distribution at the receiving end. The colour code recommended loses its value if, for example, medical supplies are packed in the same container as food;

iv. *Size and weight:* packing units should be of a size and weight that one person can handle (ideally, 25 kg; up to a maximum of 50 kg) since mechanical loading and unloading equipment may not be available at the receiving end.

Advance notice should be sent to the consignee. The following information (preferably in one document) is essential, for safe transport and ease of handling at the receiving end:

i. Name of sender (or "shipper") – normally the Supply and Transport Section in Headquarters;

ii. Name of consignee;

iii. method of transport, the name of the vessel or the number of the flight or truck, estimated time of arrival, port or airport of departure, and name of transporter (e.g. aircraft of shipping company);

iv. A detailed list of contents, including weight, dimensions, and number and type of packing units;

v. A pro-forma invoice or gift certificate showing the value of the consignment;

vi. If the consignment is insured then the type of insurance, name of company, etc.;

vii. The clearing agent, including the name of the person to be contacted in the receiving country;

viii. Instructions or special requirements for handling and storing the supplies.

An acknowledgement should be sent to the sender as quickly as possible after consignments are received, and indicate whether the goods were received in good order and/or there was any loss or damage.

Clearance Procedures

54. The supplies coming in for the operation may far exceed the scope of the routine arrangements between the authorities and the local UN community. Problems and delays may be avoided by discussing in advance the procedures to be followed by UNHCR with senior officials in the foreign ministry, ministry of finance, customs authorities, and airport and port authorities. The aim is immediate release of incoming supplies.

Arrangements for clearance procedures and duties exemptions must be made in advance.

55. Arrangements will need to be made with:

i. The Civil Aviation Authorities (CAA) and airport authorities for priority clearances for relief flights (whether international or national) and waiver of fees. These arrangements include: over-flight clearance; free landing rights, air traffic control and parking; priority handling of aircraft and charges at cost for handling services;

ii. The ministry of finance and customs authorities for exemption from duties and taxes of goods and services (such as the tax element of landing fees and fuel tax). Ensure the ministry of finance (as well as the CAA) have been advised in advance of planned airlifts for the operation.

56. UNHCR's cooperation and/or implementing agreement with the government should allow for the duty-free import of all items, provided that they are required for the operation (see chapter on implementing arrangements, and the UNHCR Checklist for the Emergency Administrator). Special duties exemption and customs clearance procedures may have to be developed for the emergency.

Implementing partners' clearance

57. UNHCR can undertake the customs clearance for implementing partners' relief supplies, provided these meet the purposes of the emergency operation. This will allow some control over the arrival of clearly unsuitable goods, and help in the coordination of material assistance.

58. Guidelines should make it clear to all potential consignors that UNHCR will undertake to clear only supplies for which notification is received prior to dispatch and which are considered appropriate. The guidelines should be made available to implementing partners active in the operation and to new implementing partners on arrival.

Guidelines on customs clearance for implementing partners should be drawn up as early as possible in the operation.

A copy of these guidelines should be shared with Headquarters and reference to this general procedure made in any NGO briefings at Headquarters, as well as in the first few general sitreps.

Handling costs and other fees

59. The expenses incurred in customs clearance, handling, storage, and onward movement of supplies belonging to UNHCR should

be budgeted for. UNHCR might receive supplies procured by an implementing partner on their behalf, in which case all expenses involved should normally be borne by the implementing partner, and UNHCR will be the "consignee of convenience" (not the "owner" or "donee"). However, in certain circumstances and provided the supplies are items directly foreseen in the UNHCR operation (for example blankets, tents), UNHCR may also meet onward transportation costs.

Inspection and Damage

60. All consignments must undergo a visual and quantitative inspection on arrival (by staff) and some deliveries will be required (under government regulations) to undergo a qualitative inspection by a government designated inspection company.

61. If during the inspection, visible damage is noted, the damage must be clearly indicated on the shipping documents and a claim lodged against the last transporter within three days of receipt of the goods. The claim should indicate the dollar value at which UNHCR holds the transporter fully responsible for the loss or damage. A copy of the claim should be sent to the Supply and Transport Section in Headquarters who will follow up. The value of the loss or damage must include any associated transport costs. If damage is not visible and the packaging is undamaged, transporters will only accept a claim if it is lodged within seven days of receipt of the goods.

Do not accept supplies that do not meet contract specifications.

Headquarters should always be informed immediately of any damage or shortfalls or if the products do not meet specifications.

Insurance

62. Some damage, whether during transport or storage, is inevitable and considerable sums may be involved in the loss. Internationally procured supplies are insured against loss or damage in transit if their value is over a certain threshold ($200,000 in 1998) or the goods are non-expendable (such as vehicles and computers). Insurance claims must be registered at once.

Storage

- There must be appropriate storage capacity, correctly sited;
- The requirement for buffer stocks must be properly calculated and forecasted – do not hoard "just to be prepared".

Basic Requirements

63. Goods must be protected from damage due to bad handling or improper stacking; the adverse climatic effects of the sun, rain, cold or humidity; attacks by pests; and bacteriological decomposition of both food and non-food items over time.

64. Storage facilities may be required for:

i. Initial storage near the port of entry;

ii. Transit storage at certain key transhipment locations;

iii. Local storage no farther than one day's transport from the refugees;

iv. Storage at camps.

See figure 1 for information about location of storage facilities.

65. Warehouses must be accessible in all seasons and weather – plan well in advance of the winter or rainy seasons. Existing government warehousing should be used if it meets operational requirements.

66. Security of supplies must be ensured. Warehouses must be secure against theft, and should be lit if possible. Storage for local purchases should be the responsibility of the supplier whenever possible. Particular attention must be paid to those items requiring special storage.

67. A single large building is better than several small ones, as long as there are sufficient loading doors and access ramps. The doors must be large enough to allow for quick loading and offloading and small enough to keep control of the entry and alleyways.

68. Organize the distribution and storage system so that supplies are handled a minimum number of times. This will not only incur less costs, but also less damage and loss. Remember the rule "first in first out" for stock management and avoid offloading in the rain.

Considerations in Warehouse Selection

69. Warehouses should be well-constructed, dry, well-ventilated, and provide protection from rodents, insects and birds. The floor should be flat and firm and the building should be easy to access, with suitable arrangements for loading and unloading (e.g. a ramp or platform).

70. When selecting a warehouse check the following:

- ❏ State of the roof and ventilation;
- ❏ State of the walls and whether they are water tight;
- ❏ State of the floor, its insulation and general water drainage;
- ❏ Number of traffic lanes and doors;
- ❏ Availability of handling equipment and labour;
- ❏ Utilities (water, electricity, toilets, fire protection);
- ❏ Office space and lodging for drivers and guards;
- ❏ Special configuration as necessary for example for fuel, construction material, water reserves;
- ❏ Fences, guards, and secure doors and windows.

71. Warehouse capacity required will depend on the nature, variety and quantity of goods supplied, the numbers of refugees they serve, and what outside support they need. Buffer stocks of essential items, particularly food and fuel, should be built up close to the refugees.

Sufficient stocks should be on hand to cover likely interruptions in the delivery schedule. As a rule of thumb, this should cover one to three months distribution.

Conversely, care should be taken not to hold unnecessarily large stocks of items that are not immediately required by the refugees, e.g. seasonal items such as heaters or blankets.

72. The volume of a warehouse necessary to store a given commodity may be roughly estimated as follows. First calculate the volume of the goods. As an indication:

1 Metric Tonne of	Occupies approximately
grain	2 m^3
medicaments	3 m^3
blankets (approx. 700 heavy blankets per bale)	4-5 m^3
blankets (loose)	9 m^3
tents (approx. 25 family tents)	4-5 m^3

If the goods can be stored to height of 2 metres, the minimum surface area occupied by the goods will be half their volume. Increase this surface area by at least 20% to allow for access and ventilation.

73. For example, the approximate size of a store to hold 2 months' supply of the cereal staple for 30,000 refugees receiving an individual cereal ration of 350 g/day would be:

350 g x 30,000 x 60 days = 630 MT

1 MT of grain occupies 2 m^3

Therefore 630 MT occupies 1,260 m^3.

1,260 m^3 stored to a height of 2 m gives a surface area of 630 m^2, add 20% for access = 756 m^2 of floor space. A building some 50 m long by 15 m wide would therefore be indicated.

Warehouse construction

74. If suitable storage facilities do not exist, they may have to be built. Local techniques, materials and practices are likely to be the most appropriate in the longer term. However, for rapid construction, it may be necessary to use prefabricated (tent) warehouses as a temporary measure. These should be carefully sited, protected from surface water by digging ditches if necessary, and with raised platforms inside (for example using pallets, or groundsheets on sand). The contents must not touch the tent walls. Prefabricated warehouses are held as part of the UNHCR central emergency stockpile. They are 24 m long x 10 m wide with a capacity of between 750 to 1,100 m^3.

Stock Management

- ◆ Effective stock management and security are imperative and must cover the whole supply chain through to the final distribution to families or individuals;
- ◆ Report on stock levels, movements, losses, damage and distribution using the UNHCR Commodity Tracking System (CTS).

75. The stock management system should ensure that initial low quantities of goods can be put to best use and quickly into distribution.

A sound stock management and distribution system is essential in order to identify potentially critical shortages in time and assure final delivery to the beneficiaries.

Levels of relief may not meet total requirements of the beneficiaries – the agencies involved must identify what goods should be immediately distributed and to whom.

76. The stock management and distribution system should identify what has been ordered, where the goods are, when they will be delivered, and where they have been distributed. This information must be available to those responsible for the operation.

77. Control mechanisms include verifying the bulk consignments on arrival, physical stock checks in the warehouses, individual ration cards or distribution checks at the sites and carefully calibrated measures (scales) for final distribution. The nature of these mechanisms will depend on the circumstances, but they must be in place from the start and they must provide real and not just theoretical control. The supplies actually distributed to the refugees must be reconcilable with those known to have been delivered, those remaining in storage, and those which are lost or damaged.

78. In the emergency phase certain basic controls should be established at once, in addition to the controls over actual distribution. These are described in Annex 3.

79. The UNHCR Commodity Tracking System (CTS) is a computerized tool for stock management, which uses information from purchase orders and shipping and warehouse documentation (described in Annex 3), to track goods from their arrival at the port of entry of the country of operation, to the final distribution point. An additional module ("pipeline management module"), which can be attached to the CTS, tracks goods from the point of source (globally) to the port of entry.

80. The stock control and distribution system (including CTS) provides information to fulfil reporting obligations – ensure the system takes account of reporting needs as specified by Community Services, Field and Programme Officers. See UNHCR Commodity Distribution, A Practical Guide for field staff for further guidance, in particular on setting up a reporting system for distribution.

81. A Motor Item Management system, (MIMS) is a computerized tool for fleet management, which keeps track of the maintenance and repair of vehicles, generators, etc., of fuel consumption, vehicle insurance, and the registration of vehicles, their re-deployment and disposal.

82. Assistance with setting up the CTS or MIMS can be obtained from Supply and Transport Section, Geneva.

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Stock Management, (Guide No. 6), ITC, Geneva, 1985.

Supplies and Food Aid Field Handbook, UNHCR Geneva, 1989 (this is the same as Chapter 10 of the UNHCR Manual).

UNHCR Manual, Chapter 4, UNHCR, Geneva, 1996.

UN Joint Logistics Cell: Standard Operating Procedures, MCDU, Geneva, 1997.

Annex 1: – Standard specifications for certain common relief items

These specifications can be useful in drawing up tender requests where local purchase is possible, to assist in negotiations with suppliers, and to give a clear indication of what could otherwise be supplied at short notice through Headquarters (some items are available in the emergency stockpile – see Appendix 1, Catalogue of Emergency Response Resources).

1. Woven Dry Raised Blankets (Type A) (for warm climates)

Composition:	Woven, minimum 30% wool. Balance of new cotton/synthetic fibres;
Size:	150 x 200 cm, thickness 4 mm;
Weight:	1.5 kg;
T.O.G.: (thermal resistance of garment)	1.2 - 1.6;
Finish:	10 stitches/decimetre or ribbon bordered 4 sides;
Packing:	In compressed water tight wrapping in pressed bales of 30 pcs. Each bale of 30 pcs would be about 0.3 m^3 volume and weigh approx. 48 kg.

2. Woven Dry Raised Blankets (Type B) (for cool climates)

Composition:	Woven, minimum 50% wool. Balance of new synthetic fibre;
Size:	150 x 200 cm, thickness 5 mm;
Weight:	1.5 kg;
T.O.G.: (thermal resistance of garment)	2.0 - 2.4;
Finish:	10 stitches/decimetre or ribbon bordered 4 sides;
Packing:	Compressed water tight wrapping in pressed bales of 30 pcs. Each bale of 30 pcs would be about 0.35 m^3 volume and weigh 50 kg.

3. Heavy duty plastic bucket, 10 litre

Type:	Heavy duty plastic bucket, multi purpose, with lid;
Material:	High density polyethylene (HDPE), food grade material, conical seamless design.
Handle:	Steel-wire bale handle, fitted with plastic roller grip, rust proof;
Thickness:	Minimum 1.0 mm;
Dimensions:	Approx. top diameter: 30 cm Approx. height: 30 cm; volume 0.01 m^3
Weight:	450 g.

4. Jerry Cans, 10 litre

Semi-collapsible jerry cans

	(Semi-collapsible jerry cans are the preferred option because of the much lower shipping volume, but they are sometimes difficult to obtain locally.)
Type:	Semi-Collapsible plastic jerry cans for drinking water;
Material:	Manufactured of food grade HDPE (i.e. containing no toxic elements);
Construction:	Semi-collapsible; built-in carrying handle, wide enough for adult hand; screw cap linked to container by polymide string; jerry can opening 35 mm (inner diameter); 0.6 mm thick walls; Impact resistance: Must withstand drop from minimum 2.5 m containing maximum volume;
Operating Temperature:	-20 to 50°C;
Weight:	200 g/pce;
Packaging:	150 pcs/wooden crate. Each crate weighs 49 kg, volume 0.38 m^3

Non-collapsible jerry cans

As above, except non-collapsible, weight 400 g/pce; 1 mm thick walls; jerry can opening 40 mm (inner diameter)

5. Kitchen Sets

Kitchen Sets – Type A

a) 1 aluminium cooking pot, 7 litre, minimum thickness 1.75 mm, with lid minimum thickness 1 mm, two cast aluminium handles, sandpaper finish.
b) 1 aluminium cooking pot, 5 litre, as above, minimum thickness 1.6 mm.
c) 5 aluminium bowls, minimum thickness 1 mm, 1 litre capacity, rolled edge border, sandpaper finish.
d) 5 deep aluminium plates, minimum thickness 1 mm, 1 litre capacity, sandpaper finish.
e) 5 aluminium cups, minimum thickness 1 mm, 0.3 litre capacity, with handle, rolled edge border, sandpaper finish.

f) 5 stainless steel table spoons, polished finish.
g) 5 stainless steel table forks, polished finish.
h) 5 stainless steel table knives, polished finish.
i) 1 kitchen knife with stainless steel blade, cutting edge 14/15 cm long, 2.5 cm wide with moulded plastic handle.
j) 1 galvanized steel bucket, 15 litre, 0.5 mm thick, tapered with raised bottom, curled brim and metal arch handle.

Packing: Individual carton: 30 x 30 x 33 cm = 0.02 m^2

Weight: Approx. 5.5 kg

Kitchen Sets – Type B

Consists of the following items: a, b, c, (or d) e, f and optionally i).

Packing: 4 sets per carton: 56 x 56 x 19.5 cm = 0.06 m^2

Kitchen Sets – Type C

Consists of the following items: a, c, (or d) e and f.

Packing: 4 sets per carton: 54 x 54 x 19.5 cm = 0.05 m^2

6. Reinforced plastic tarpaulins in sheets

Sheets are 4 m x 5 m each.

Material: Made of woven high density polyethylene fibre; warp x weft (12/14 x 12/14 per inch); laminated on both sides with low density polyethylene with reinforced rims by heat sealing on all sides and nylon ropes in hem; 1000 dernier Min. Stabilized against ultraviolet rays and excess heat for long outdoor exposure (1.5% loss of strength in yarn and in lamination); provided with strong aluminium eyelets or equivalent on four sides of the sheet at 100 cm centre to centre.

Dimensions: Thickness: 200-230 microns; weight 190 g/m^2; density 0.9-.95 kg/cubic decimetre.

Tensile strength: Min. 600 N both directions of warp and weft (BS 2576, 50 mm grab test or equivalent).

Tear resistance: 100 N Min. both directions (BS 4303 wing tear or equivalent).

Heat/cold resistance: Flammability: flash point above 200°C.

Colour: Blue one side white on reverse; UNHCR logo.

Weight: 4.8 kg per piece, packed in bales of five, weight per bale 22.5 kg; volume per bale 0.045 m^3.

7. Soap bars:

Composition: Min. 70% fatty acid: max. 20% moisture, max. NAOH 0.2% max. NACL 1.25%; no mercury content. Local standards of lower content of fatty acid might be acceptable.

Weight: Soap bars should be approx. 125 g/piece.

8. Double Fly double fold centre pole tent

Family sized tent.

External dimensions: 4.4 m x 4.4 m (outer fly), surface area 19.36 m^2, centre height 3 m.

Internal dimensions: 4m x 4m, floor area 16 m^2, centre height 2.75 m, side wall height 1.8 m (25 cm distance between outer and inner fly).

Material: Cotton canvas; 100% cotton yarn (10/2 x 10/2 twisted in warp 42/44, weft 24/26 threads per inch, plain weave); 15-16 oz/m^2. Canvas to be free of weaving defects and finishing faults adversely affecting strength, waterproofness and durability. Water proofing/resistance to water penetration by paraffin wax emulsion and aluminium acetate to withstand 20 - 30 cm hydrostatic head. Stabilization against decomposition of the fabric (rot-proofing) with copper napthanate.

Poles/ropes/pegs: 4 aluminium or bamboo poles for roof corners (2 m x 22 mm diameter); heavy duty sectional steel tube (or aluminium or bamboo) centre pole, plastic clad or galvanized (3 m x 50 mm diameter). Complete with ropes made of 9mm 3 strand polypropylene; 24 T-Type bars 40 mm x 40 mm, 50 cm long; 12 iron pegs (25 cm x 9 mm diameter), one iron hammer of 1 kg; one repair kit with one straight and one curved needle with 20 m of suitable thread for tent repair, illustrated assembly instructions with list of contents.

Groundsheet: Reinforced PVC groundsheet 250g/m^2.

Packing: All rolled into a canvas bag. Weight 100 - 130 kg, dimensions: 2 m x 50 cm diametre (0.4 m^3).

1. Assessing needs

Assessing vehicle needs involves not only calculating the vehicles which are needed, but also assessing what vehicles it will be possible to operate and maintain in the area of operation. Make sure that the existing infrastructure (roads, workshops and fuel) is fully evaluated before obtaining vehicles.

What will the vehicles be used for and how many are needed?

Heavy vehicles

i. Will the vehicles be used for – transporting people or relief supplies?
ii. What will be the frequency of use (one off transport, or scheduled deliveries for distribution)?
iii. What is the total quantity (of goods or people) to be transported?
iv. Are any special configurations necessary: if a truck is to carry dangerous goods e.g. fuel, ensure that dangerous goods regulations are followed.

Light vehicles

i. How many vehicles are needed for staff? In an emergency, it is advisable to have a ratio between light vehicles and international staff of 1:1. In more stable situations, slightly fewer vehicles per staff member may be acceptable.
ii. What special vehicles might be needed (e.g. ambulances for transporting vulnerable refugees)? The main categories of light vehicles which might be useful are: sedan and minibus (4x2 only), and station wagon, van, pick-up, and ambulance (both 4x2 or 4x4).

What configurations of vehicles are needed?

i. What is the condition of the routes that will be used? tarmac roads, good unpaved roads (with stone or macadam surface), sand or dirt trails, or no roads (in which case consider animals for transport).
ii. How long are the journeys expected to be?

Light vehicles

i. What configuration light vehicles should be used according to road conditions: 4x2 or 4x4?

Heavy vehicles

i. What configuration for heavy vehicles should be used according to the road conditions: 4x2, 4x4, 6x2 or 6x4?
ii. Should trailers be used? Trailers can be more economical, i.e. - with a relatively small investment one is able to transport twice the amount of cargo. The following configurations for heavy vehicles (trucks/trailers) could be appropriate:

i. Truck with trailer (6x2 or 6x4) with a combined capacity of 20-40 MT for transport up to 3,000 km 2-7 day trip, normally for use on tarmac roads;
ii. Truck (6x4, 4x4, 4x2) for intermediary distribution with a capacity of 10-15 MT (normally 1 day trip) on unpaved roads with stone or macadam surface,
iii. 5-10 MT capacity trucks on tracks and trails (generally for trips of half a day or less up to distribution points).

Trailers

Prior to purchasing trailers, the following additional questions should be considered:

i. Are the roads and bridges suitable to drive on with trailers?
ii. Are the drivers capable of driving with trailers?
iii. What are the regulations in the country regarding the weight and length of truck-trailer combinations?
iv. What type of trailer is needed? Can the trucks be operated with trailers or would tractor trailers be better? Can the trailer be transported on the truck on empty runs? Ensure there are air-brakes, a towing hook, extra fuel tanks and spare wheels. Particular attention must be paid to the tow-bar strength and number of axles.

What makes and models of vehicles would be appropriate?

i. What makes of vehicles are maintained (to supplier specifications) by local service dealers? The heavy vehicle fleet must be standardized to suitable makes and models already operating in the country. If a mixture of models of truck is unavoidable, it may still be possible to standardize to a single make.
ii. What is the availability of vehicles: the spare capacity of local transport companies, and possibility of purchasing new or second hand vehicles?

Infrastructure (fuel, workshops)

i. Is there a service network available with the know how to maintain the fleet, or will it be necessary to set up dedicated workshops and fuel stations?
ii. Are there sufficient spare parts and tyres in the local market, or must they be imported?
iii. Is fuel (diesel and gasoline) and are lubricants readily available in the area of operation? (note the number of fuel stations, capacity and likely availability of fuel at each).

2. Sourcing vehicles

Vehicles (whether light or heavy) can be: rented locally, provided by the government, loaned from another UN Office in the region, re-deployed from another UNHCR operation, or purchased. Heavy duty vehicles can also be provided under a standby arrangement (see Catalogue of Emergency Response Resources, Appendix 1). If trucks are to be purchased internationally, send a request to the Supply and Transport Section in Headquarters by completing the appropriate form (Operations Analysis Form for Trucks – request this from Headquarters if necessary).

In order to analyze the procurement options, take into account the following:

i. Expected length of operation. If the expected length of the operation is short, (3 - 6 months), or the situation is very unstable, it may be better to rent, loan or re-deploy rather than purchase vehicles, because of high initial costs;
ii. Comparative costs. Compare the cost of renting vehicles with the cost of purchasing them (including delivery costs). Consider purchasing second-hand vehicles if they are in good enough condition;
iii. Servicing and other benefits. Take into account that renting vehicles will include servicing and other benefits (such as drivers, insurance) which would need to be separately arranged if the vehicles are re-deployed, purchased, or loaned;
iv. Time. Light vehicles can be quickly deployed from the UNHCR emergency stockpile (see Appendix 3). Purchasing new vehicles can be very time consuming, because of long delivery times (up to 8 months if they are manufactured to order, which is usually necessary for the configuration of heavy duty vehicles for UNHCR operations). If there is an urgent need for heavy vehicles, inform Supply and Transport Section at Headquarters of the vehicle requirements and infrastructure, who will look into possible options (re-deployment, purchase etc.) in the international market and regionally. If it becomes necessary to purchase vehicles, early notification and action will be a priority;
v. Other options. Consideration could also be given to the possibility of "grafting" the heavy vehicle fleet onto a large national or regional transport organization. That organization's infrastructure, including workshops, offices, etc., would then be immediately available as would its accumulated experience of operating in the country.

The vehicles exclusively involved in the operation should be individually numbered and distinctively marked – for example, white with blue markings.

3. Fuel and Maintenance Facilities

There must be adequate servicing facilities, including sufficient supplies of fuel and spare parts. Maintenance and repair must be carried out regularly and as per manufacturers' standards, either through local service dealers or through a UNHCR workshop. Regular maintenance will prevent minor problems turning into major ones. Proper driving and care by the drivers can be an important factor in keeping vehicles on the road and prolonging their life. Adequate training, incentives and supervision will be the key to this.

Fuel and lubricants

- Assured supplies of fuel and lubricants must be available where they are needed (make sure oil and lubricants are in accordance with manufacturer's specifications – and new). This may require separate, secure storage arrangements and an additional fleet of fuel tanker vehicles. It may be necessary to establish fuel stations to ensure fuel supplies.

Spare parts and workshops

Consumable items (filters, shock absorbers, brake linings etc.) and spare parts must be available, especially tyres: tyre life may be no more than 10,000 km in rough desert or mountain conditions. Arrangements for maintenance and repair include:

i. Making use of or strengthening existing facilities:

   Existing commercial, government or UN facilities (e.g. WFP or UNDPKO) may be able to service additional UNHCR vehicles or could be strengthened in order to do so;

ii Establishing dedicated workshops:

   Workshops may have to be established by UNHCR solely for the operation – for example a central, fully equipped workshop, including personnel, tools, soldering capacity, spare parts store, and transport administration office. In addition, depending on the size and area of the operation, consider also having smaller workshops and transport administration offices closer to isolated destinations;

iii. Mobile workshops and heavy recovery vehicles may also be necessary:

   Always ensure there is recovery capacity for trucks, such as mobile workshops, recovery trucks, winches, etc.

This annex gives an indication of the basic components of a stock management system. The minimum level of controls necessary will vary with each operation. Simple controls and accounting established from the start will be much more effective than a sophisticated system later. No system will be effective unless it is understood by those required to operate it. Training will be required for all staff involved. All these documents are UNHCR forms apart from waybills. The computerized UNHCR Commodity Tracking System (CTS) relies on the information contained in this paper system.

1. Stock Control

i. Pipeline report: each order or consignment (including contributions in kind), should be tracked using a pipeline report. This records all stages of stock movement from the initial request for goods through, as applicable, requests for tenders, placing of order, notification of shipment, planned delivery time and place, actual time of arrival, and distribution details.

ii. A simple board where progress can be monitored visually is likely to be very useful and can be set up at once.

2. Source Documents

Source documents identify the quantity of the commodity, specifications, packaging, value and origin.

i. Purchase order. This defines the order: specifications, number of units ordered, price/unit, total price, packaging, date of purchase, supplier, destination etc. It should make reference to the legally enforceable standard conditions of contract.

ii. Contribution Advice Form (CAF)/Donation Advice Form (DAF). When contributions in kind are pledged, Fund-raising and Donor Relations Services in Headquarters issues a CAF or DAF. This gives similar information to a purchase order and the information should be used to track the goods until final distribution in order to account to the donor as stipulated in the CAF/DAF.

3. Authorization Documents

i. Release Request. This is a formal request for goods which authorizes warehouse staff to release goods from stock.

ii. Transporting/Warehouse Request. This gives formal approval for NGOs to use UNHCR transport or warehouse facilities for their goods.

4. Certification Documents

There are a number of documents which are used to certify that goods have been received, delivered, and/or sent in good order.

i. Waybill/Air Waybill/Bill of Lading. This is the shipping document and contract with the transporter showing the destination and accompanies the goods from the port of loading to the contracted destination in duplicate. This document is the basis for customs clearance and enables staff to check goods actually received against those loaded. Duplicate copies are also used by procurement staff to verify goods dispatched against those ordered (i.e. against the purchase order form). Where the movement is between UNHCR warehouses, use the delivery note (attached as Annex 4).

ii. Release Note. This is used when goods are collected at the warehouse and the goods leave UNHCR's stock control system – the person (driver or consignor, for example an NGO) who collects the goods certifies that goods have been received in good order.

iii. Delivery Note (see Annex 4). The delivery note is sent with the goods when they are transported (under UNHCR's control) to another location (for example another UNHCR warehouse). The receiver of goods signs the delivery note to certify that the goods have been received in good order, and a signed copy is returned to the sender. It is used when the goods have been sent by rail, road or barge (an "Aircargo Manifest" is used where the goods have been transported by air).

iv. Receipt Note: Where goods have been received without a delivery note or waybill/bill of lading, a receipt note is signed by the receiver of the goods and sent to the sender for certification.

5. Warehouse documents

Whatever the size of the warehouse or store and wherever it may be located, the minimum recommended book-keeping controls are those outlined below. They must be complemented by routine inspection to ensure goods are properly stored and protected, and by a periodic audit.

i. Daily Incoming Shipment Log Sheet. This is used to record basic details of all inward consignments – description of goods, quantity, supplier, name of person receiving and date of receipt, with cross reference to waybills (above).

ii. Daily Outgoing Shipment Log Sheet. This is used to record basic details of all outward consignments – description of goods, quantity, destination, and date of dispatch, (with cross reference to waybill, delivery or receipt note).

iii. Stock card (sometimes called a bin card). One stock card for each different commodity in the warehouse is used to record every in and out movement of that particular commodity, with cross reference to the appropriate entries in the incoming/outgoing log sheets. It gives a running balance. Where possible those actually receiving and issuing the goods should not also be responsible for maintaining the stock card.

iv. Daily stock report (see Annex 4). This gives basic details of goods in stock and the quantity, value, weight of these commodities for each warehouse location.

v. Loss/damage report: to report loss or damage to stock (whether incurred during transport or storage).

Movement of goods

The easiest control to ensure that goods reach their destination may be to make (final) payment (for the goods, of the driver or transporter, as applicable) conditional on return of the certified duplicate of the Delivery Note or Waybill. More comprehensive controls and measures (e.g. monitors) may be required later, and are anyway needed to ensure that goods reach their destination (in the worst case, this control only indicates that they did not). But provided the signatories for both authorization and receipt are carefully chosen, and signatures controlled (combining them with a UNHCR seal is recommended), this should be an effective initial safeguard.

Annex 4

UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES

Vehicle Daily Log Sheet

Date:	**Starting Mileage:**

Vehicle Check:

☐ Oil	☐ Water (Radiator & Windscreen Washer)	☐ Brakes (Foot & Hand)	☐ Front Lights	☐ Rear Lights
☐ Tool Kit & Jack	☐ Spare Tyre	☐ Vehicle Clean	☐ Full Tank	☐ Radio Check

Driver (Print Name):	**Driver's Signature:**

Destination	Passengers	Time Out	Time In	Official / Private	Starting km Reading	Ending km Reading

Fuel (liters):	Mileage when fueled:
Fuel (liters):	Mileage when fueled:
Engine Oil (liters):	Engine Oil (type):

Remarks:

Annex 4

UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES

Delivery Note

Distribution:	
2 copies for Destination *	(Yellow and Blue)
1 copy for UNHCR	(White)
1 copy for Driver	(Pink)
1 copy for Dispatch Warehouse	(Green)

Delivery Note No.

Page _____ of _____ Pages

Issuing Warehouse / Location (Consignor)	**Release Authority**
Receiving Warehouse / Location (Consignee)	**Convoy Number (if applicable)**
Final Destination	**Container Number (if applicable)**
Route	**Transporter (Print Contractor Name)**
Rail Wagon **Vessel or** **Vehicle Plate No.**	**Driver (Print Name)** **Signature**

Control No. PO or Donor	Item Description	Packing Unit (PU)	Pieces per PU	PU Weight Gross Kg	No. of PU Loaded	No. of PU Unloaded	Loss / Damage Remarks

Total No. of PUs Loaded _____ **Total Kg Loaded** _____

Delivery Note prepared by (Print Name):	Date	Signature
		OFFICIAL SEAL

** All items have been LOADED

Loading Supervisor (Print Name):	Date	Signature	Loading Time: Start Finish

** All items have been RECEIVED except as circled and as per remarks above, or on the reverse;

Unloading Supervisor (Print Name):	Date	Signature	Unloading Time: Start Finish

OFFICIAL SEAL

1. The Consignee at the receiving warehouse must check the quantity delivered and note any loss or damage.
2. ** Any losses or damages must be noted on this form by the Unloading Supervisor.
3. * The consignee at the receiving warehouse must sign all three copies of this Delivery Note and hand over two copies signed and stamped to the driver who will return the Blue copy to the Issuing Warehouse / Consignor.

UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES

Daily Stock Report

Prepared by:
Checked by:
Distributed:

Organization / Office:	Location:	Date:

Commodity					Stocks Quantity in Pieces or Net Kgs				Remarks:
Control No. PO or Donor	Description (Specific)	Packing Unit (PU)	Pieces per PU	Net Kg per PU	Opening Balance	Issued	Received	Closing Balance	

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Voluntary Repatriation

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Situation

Voluntary repatriation operations, even when planned in advance, may have many of the characteristics of an emergency, as defined in this Handbook. They often have to be organized at short notice and require "an extraordinary response and exceptional measures". Mass unplanned repatriation, especially when carried out in less than optimum conditions can resemble an emergency caused by a sudden influx of refugees.

Objectives

To seek permanent solutions for the problem of refugees by assisting with their voluntary repatriation in safety and dignity and their successful and durable reintegration into their home society.

Principles of Response

- The decision whether or not to return home belongs to the refugees. They should neither be forced to return, nor prevented from doing so;
- The voluntary nature of the repatriation must be verified and safeguarded by UNHCR.

Action

- Deploy sufficient staff to collect information on the intentions of the returnees and to assess whether the repatriation is voluntary or not;
- Collect information in the country of origin concerning the conditions for return, share this information with the refugees;
- Define the nature of UNHCR's involvement in the repatriation, communicate this to all staff, and to governments and other agencies as appropriate;
- Provide assistance to returnees on the way home and upon arrival, if required, in line with the nature of UNHCR's involvement in the repatriation.

Introduction

1. Voluntary repatriation operations can have many of the characteristics of an emergency operation in that they too may require "extraordinary response and exceptional measures" and often have to be organized on short notice. This chapter gives brief guidance on voluntary repatriation particularly in emergency circumstances, but further reference must always be made to the Handbook, Voluntary Repatriation: International Protection, UNHCR, 1996.

2. Voluntary repatriation is the preferred solution for the plight of refugees. Article 1 of the Statute requires the High Commissioner, to assist "Governments and, subject to the approval of the Governments concerned, private organizations to facilitate the voluntary repatriation" of refugees falling within the scope of the Statute.

3. Voluntary repatriation is usually characterized either as:

i. "Organized" – i.e. where refugees return in an organized manner assisted by UNHCR, or

ii. "Spontaneous" – i.e. where refugees return by their own means rather than as part of an organized operation.

4. Spontaneous return may take place unexpectedly, sometimes in conflict situations. UNHCR needs to position itself to provide timely and effective protection and assistance along routes of return and in the country of origin. In addition information on the conditions prevailing in the country of origin should be provided to the refugees (e.g. concerning landmines, routes of return and border conditions).

Spontaneous, mass repatriations are the most likely to require an exceptional response and extraordinary measures.

UNHCR's Role in Voluntary Repatriation

5. UNHCR's role in voluntary repatriation includes the following:

i. Verify the voluntary character of refugee repatriation;

ii. Promote the creation of conditions that are conducive to voluntary return in safety and dignity;

iii. Promote the voluntary repatriation of refugees once conditions are conducive to return;

iv. Facilitate the voluntary return of refugees when it is taking place spontaneously, even if conditions are not conducive to return;

v. Organize, in cooperation with NGOs and other agencies, the transportation and reception of returnees, provided that such arrangements are necessary to protect their interests and well-being; and,

vi. Monitor the status of returnees in their country of origin and if guarantees given by the country of origin are adhered to. Intervene on behalf of the refugees if necessary.

6. UNHCR should maintain objective and up-to-date information about the situation in the country of origin. Personnel on the ground should stay in close touch with refugees' thinking on the possibility of voluntary repatriation, and keep the refugees and concerned governments informed accordingly.

7. A distinction should be made between "promotion" and "facilitation" of voluntary repatriation. Repatriation should only be promoted when it appears, objectively, that the refugees can return in safety and with dignity[1] and the return has good prospects of being durable. UNHCR can promote voluntary repatriation without being in charge of organizing all aspects of the return movement. Frequently, members of a group will make their own arrangements for return, with or without assistance from UNHCR.

8. When UNHCR does not consider that, objectively, it is safe for most refugees to return, but even so refugees indicate a strong desire to return voluntarily and/or have begun to do so on their own initiative, UNHCR must be careful not to promote the repatriation, but may take some steps to facilitate it.

UNHCR must make clear to the authorities and the refugees that support for such repatriation is based on respect for the refugees' free decision to repatriate and cannot be interpreted as an indication of adequate security.

9. Facilitating repatriation can, depending on the circumstances, include providing information to the refugees, advising on the limits of UNHCR protection and material assistance

[1] *"Safety" means legal safety, physical security and material security or access to land or means of livelihood. "Dignity" includes the concept that the refugees are treated with respect by national authorities including restoration of all their rights.*

during and after their return, negotiating amnesties, establishing a presence in the country of origin and monitoring their treatment. The issue of material assistance requires careful handling, so that assistance is not interpreted as a pull factor nor as promotion of repatriation by UNHCR.

10. Where there is a mass spontaneous repatriation in conditions where UNHCR does not consider that, objectively, it is safe for most refugees to return, and in emergency conditions, Headquarters advice should be sought to define UNHCR's role in such circumstances.

Conditions For a Voluntary Repatriation

11. In a voluntary repatriation, there must be:

- Safeguards as to the voluntary nature of the return;
- Safeguards as to treatment upon return;
- Continued asylum for those who do not repatriate and remain refugees.

Voluntary Nature of the Return

12. Ensuring the voluntary nature of the return includes ensuring

i. The decision to repatriate is made freely;

ii. The refugees are making an informed decision based on an accurate country profile;

iii. The decision is made expressly.

13. Voluntariness must be viewed in relation both to conditions in the country of origin (calling for an informed decision) and the situation in the country of asylum (permitting a free choice).

Voluntariness means there should be no pressure on the refugee to repatriate.

14. A field office should analyze both factors, relying for the first, to a large extent, on direct interviews with all segments of the refugee community, including women. Consider refugee attitudes both towards changed circumstances in their home country and towards the situation in the country of asylum.

15. Voluntariness also means that the refugees should not be prevented from returning. In certain situations, economic and political interests in the country of asylum may lead to interest groups trying to prevent repatriation.

16. What ever the nature of the repatriation, the refugees should be kept fully informed of the situation in the country of origin in order to guarantee the voluntary nature of the return. Though refugees are often already well informed, it may be necessary to provide additional information on the situation in their home country.

17. Information should be available about their planned reception and prospects for reintegration into national life. They will want to know if they have the right to repossess their old houses and land, what the type and amount of material support they will initially receive, what they can take with them, etc.

18. Many of their questions may be best answered by:

i. Arranging for refugee representatives (including women) to make a visit to the home area to see the situation at first hand, if this is possible (go and see visits);

ii. Assisting with the exchange of letters;

iii. Enabling communication by radio with relatives in the country of origin;

iv. Displays of information about home conditions;

v. Formal or informal discussions with recent visitors to the area of return, or through visits to the refugee camps of returnees or country of origin local authorities.

19. Whatever the method, care must be taken to ensure that the refugees are given as fair (and objective) a picture as possible of conditions in their home area.

20. The refugees must freely express their intent to repatriate. They may be unused to taking individual or family decisions of this nature, but programmes must be structured so that their rights in this regard are safeguarded, for example by using volrep declaration forms.

21. In instances of organized return, the use of a voluntary repatriation declaration form is recommended (see Annex 1). Where there is any risk of coercion, either from outside or by factions among the refugees, the form should be signed in private in front of a UNHCR officer or other neutral witness. He or she may need to interview the refugees to ensure that their decision is truly voluntary. Where circumstances allow, more informal confirmation of voluntariness than these may be used and simple lists of names may suffice.

In cases of massive spontaneous return, completion of a voluntary repatriation form will not be realistic and UNHCR must position officers along the routes of return to monitor, interview and intervene where necessary to determine if instances of coercion are taking place.

Treatment on Return

22. The durability of voluntary repatriation depends, to a large extent, on the protection given to returnees during their reintegration into their home country.

23. The state of origin bears responsibility for the protection of returnees, its nationals. However, UNHCR involvement with returnees is justified by virtue of its protection role on behalf of refugees and the Office's statutory responsibility to seek voluntary repatriation as a durable solution for refugees.

24. UNHCR cannot guarantee safe treatment to the returnees, though they will often request such assurances. UNHCR's involvement with returnees is set out in more detail in the UNHCR Handbook, the Voluntary Repatriation Handbook, which includes information on amnesties and monitoring.

Amnesties, Assurances, Guarantees

25. In any voluntary repatriation, appropriate legal safeguards are essential. UNHCR recommends that, in addition to conditions set out in a repatriation agreement, governments independently promulgate amnesties or legal guarantees for returnees. Such declarations should include the right to return, freedom of residence, and the provision of an amnesty. As a minimum, they should stipulate that returnees not be subjected to any punitive or discriminatory action on account of their having fled their country.

26. If the government consults UNHCR when drawing up an amnesty, it is particularly important to propose that the amnesty should be both:

i. A group amnesty – the amnesty should be extended on a group basis, rather than requiring individual determination;

ii. A blanket amnesty – the amnesty should whenever possible be a blanket one, not distinguishing between different types of prior 'crimes'. Such distinctions can create major problems, for example in a situation where a clear differentiation between political and criminal offenses may not be possible. Unless the amnesty is a blanket one, repatriates may not know if they are covered until they return, which may be too late. If a complete blanket amnesty is not possible, then a time limitation on the amnesty (offenses committed before or after or between given dates) should be the aim.

Monitoring

27. UNHCR must have direct and unhindered access to returnees to monitor their safety and reintegration conditions. This should include access to prisons or detention centers (liaison with ICRC and Human Rights will be important in this regard as well as information-sharing with other NGOs working with returnees).

28. If returnees are at risk due to inadequate state protection, UNHCR should intervene on their behalf as appropriate, for example by remedial action, or formal protest at local, national or even regional level, and ensure there is good reporting. If the insecurity persists, UNHCR would have to review its policy on return.

29. UNHCR's returnee monitoring role alone will never provide a mechanism for ensuring the safety of returnees and respect for international human rights standards in the country of return. It can be a helpful influence to enhance respect for amnesties, guarantees, the rule of law and human rights but should never be seen as a substitute for state responsibility.

Continued Asylum for Those who Remain Refugees

30. Any voluntary repatriation programme must be complemented by measures to ensure continued safe asylum of refugees and international protection for those who choose to stay longer in the country of asylum. Some refugees may continue to harbour a well-founded fear of persecution and who therefore do not wish to repatriate. There may be others who delay their decision, or even initially decide against repatriation, in order to see how the first fare.

31. This may mean the continuation of any existing operation, but for a reduced number of beneficiaries. Local integration in the country of asylum is the preferred option for a residual caseload of refugees who remain after the completion of a repatriation programme and who are unable for one reason

or another to return to their country of origin. However, in rare circumstances, it may mean a resettlement project of some kind for those who remain refugees.

32. If there is a serious problem of coercion, or intimidation, it may be necessary to move those who decide not to repatriate to another location immediately after they have reached this decision. This, too, should be foreseen and covered in any voluntary repatriation agreement.

Other Protection Concerns

Vulnerable groups

33. Throughout all phases of the operation particular attention has to be paid to vulnerable groups such as unaccompanied children, unaccompanied elderly, the disabled and chronically ill as well as specific needs of unaccompanied women and single heads of households. In large scale spontaneous repatriation movements, family members may become separated during the operation and it will be necessary to establish tracing services to reunite families. During registration the identity of vulnerable refugees, particularly those with special needs, and of persons with close links to the vulnerable in the country of asylum or country of origin, should have been recorded.

Preparing for Repatriation

34. The steps below should be considered in any kind of repatriation, including in emergency circumstances. The management principles described in chapters 1 to 9 should be referred to (e.g. planning, needs assessment and implementation) and reference should also be made to chapter 18 on supplies and transport.

Being Prepared for Spontaneous Repatriation

35. Proactive steps to ensure preparedness for spontaneous repatriation include:

i. Being well informed about the refugee caseload, in particular its origin, history, composition, reasons for flight, and its view of developments in the country of origin;

ii. Liaising closely with the UNHCR office in the country of origin to determine whether internally displaced people are returning home or other developments which could lead to a return movement. Such return movements are often sparked by refugee fears that they could lose their land, property or jobs if they do not return;

iii. Being in close touch with the prevailing concerns of the refugees.

36. If indicators for a spontaneous repatriation are present, contingency planning should take place, including identifying protection and material assistance needs in the country of origin and en route, and establishing a capacity for monitoring in areas of return including a direct UNHCR or operational partner presence.

Agreement Between the Parties

37. Whenever possible, a formal voluntary repatriation agreement should be concluded between the governments of the countries of asylum and origin and UNHCR in the form of a tripartite agreement. A tripartite commission should in any event be established as soon as possible when voluntary repatriation is forseen. However, it is important that UNHCR not enter into tripartite repatriation arrangements without due consultation with the refugees, and that their preoccupations are always kept foremost.

38. UNHCR's role in developing repatriation agreements is to:

i. Work with the two governments to ensure that any such agreement respects the basic protection considerations already outlined;

ii. Help provide material assistance, where necessary, to enable the agreement to be implemented;

iii. Monitor the return programme, with particular attention to protection, and to ensure free and unhindered access will be given to returnees. UNHCR should also be present in the country of origin to monitor returnee reintegration.

39. The actual content and scope of the formal agreement will depend on the circumstances. An example can be found in Annex 5 in the Handbook Voluntary Repatriation International Protection Handbook.

40. The question of whether those wishing to repatriate are in fact nationals of their claimed country of origin may arise. Responsibility for determining this rests with the government of the country of origin. However, if particular issues arise over nationality claims or problems related to statelessness that cannot be resolved at field level, contact HQ for advice on how to proceed.

Coordination

41. UNHCR is likely to be responsible for the practical coordination of an operation which by definition will involve more than one country.

42. Cross border communication and coordination between UNHCR offices on both sides of the border can make or break an operation.

The underlying principle of cross border coordination should be that voluntary repatriation operations have to be determined by the conditions, absorption capacity and preparedness in the country of origin.

43. One UNHCR officer should be designated with overall responsibility for the repatriation operation in countries of asylum and origin, and for the actual movement, for example the Representative in the country of origin. The need for a coordinator is even greater when substantial repatriation will take place from more than one country of asylum. The designation of a focal point officer at Headquarters is equally important.

Staff

44. Because of UNHCR's protection responsibilities, such operations are often staff-intensive in the field. UNHCR staff may be needed to:

- ❏ Witness the refugees' voluntary declaration of a wish to repatriate;
- ❏ Maintain a presence, sometimes a continuous one, in the settlements, along routes of return, at border crossing points and in the transit and arrival centers;
- ❏ Accompany the returnees during the journey;
- ❏ Monitor treatment of the returnees on return;
- ❏ Mount those parts of the logistical operation not contracted out to operational partners and monitor those that are.

Estimation of Numbers

45. An important element for planning is the number of refugees likely to repatriate, which will rarely be known accurately for a variety of reasons. Nevertheless, a best estimate will be required, and assumptions will need to be made. Plans must be flexible, taking into account the fact that a common pattern is a slow start as refugees wait to see how the initial movements go and how the first repatriates are received.

46. Information should be obtained on:

i. The numbers of refugees intending to repatriate. Estimates should be obtained by random sampling of intentions, discussions with refugee elders, leaders, women, teachers and others in touch with the community and who are aware of likely intentions. Assumptions can also be drawn from observing current spontaneous return and identifying obstacles being faced by the returnees;

ii. The number of refugees for whom repatriation is unlikely to be an option at this stage;

iii. Current location and numbers of refugees in the country of asylum;

iv. Province and district of origin (intended destination) in the country of origin. Determination of priority provinces and districts of return will be based on the number of potential returnees;

v. Lists of those with special needs.

47. Information for a repatriation operation, including iii – v above, should be computerized if possible using the FBARS (Field Based Registration System) and consist of information obtained during the initial registration when the refugees first arrived and periodically updated thereafter (see chapter 11 on registration and population estimation).

Likely Routes of Return

48. Identify principal routes of return from the refugee camp to the destination in the country of origin based on the likely methods of return (roads, trains, airports, etc.). Identify border crossing points (primary, secondary, tertiary and minor foot paths). Consider which routes are safer, and where there may be dangers of mines.

49. A range of maps with varying degrees of detail should be compiled. Data from FBARS can be imported into maps, charts and graphs. Use standard names and spelling for all locations since in may cases these may have changed.

Mass Information Campaign

50. In addition to ensuring the refugees have access to accurate information on conditions in the country of origin, they should also have direct access to information about the vol-

untary repatriation operation itself. Posters, leaflets, verbal presentations, radio and TV programmes, etc. in the refugees' language(s) should be used to explain as thoroughly as possible the envisaged voluntary repatriation operation. A simple leaflet, setting out the formalities to expect on arrival and arrangements made, can do much to help the repatriates and facilitate the reception process. It is important that at each stage of this information campaign care is taken to ensure it is as objective as possible and that no false expectations are raised. Do not hesitate to tell a refugee that the answer to some questions about specific conditions in the country of origin is not known.

It should also be made clear to the refugees that on return he or she is outside the scope of UNHCR's protection responsibilities and once more subject to national laws.

Departure

51. Registration: Annex 1 contains a sample registration form – the Voluntary Repatriation Form (VRF), including a declaration of intent to repatriate. Where the Field Based Registration System (FBARS) for the computerization of the registration data has been used, pre-completed VRF forms can be produced. These computer printed forms contain the required data on those individuals and families wishing to repatriate and the print-outs can be signed by those concerned.

52. Deregistration: Upon departure to their country of origin, repatriates have to be deregistered from any camp or assistance related records to ensure a proper scaling down and adjustment of assistance in the country of asylum.

53. Assembly prior to departure: Unless repatriation can take place directly from the settlements, special arrangements will be required for transit centers prior to the actual move, including transport, accommodation, food and basic health care as well as the orderly completion of the necessary administrative formalities. In some circumstances, registration may conveniently take place at the transit centers.

54. If repatriation takes place by means of organized transport, computerized passenger manifests, allocating passengers to convoys, could be prepared using the FBARS repatriation module. This will also allow the system to deregister refugees who are repatriating and exclude them from assistance in the camps.

On Route

Organized Repatriations

55. Identify sources of emergency assistance already available along the routes of return (medical facilities and potable water sources). Where sufficient assistance is not already available there will be a need to establish temporary "way-stations" for rest and overnight accommodation, food distribution (prepared food or cooking facilities), first aid stations, water points, etc. The form and degree of assistance required will, in part, depend on the means of transportation used by the returnees. Other issues for consideration include availability of fuel and facilities for vehicle repair.

56. A considerable UNHCR presence will be required to monitor and verify the voluntary nature of return, to assess needs and to coordinate with offices in the country of origin and asylum. They should provide up to date information on numbers, needs and likely routes to be used.

Mass Spontaneous Repatriations

57. Where UNHCR is providing assistance in mass spontaneous repatriation, the same issues need to be considered as above. However, providing the assistance to a large unorganized mobile population will present challenges, and there will be additional protection concerns. The following steps should be taken:

General Arrangements

- ❏ Establish or strengthen positions on the routes (way-stations) for the provision of protection and assistance for the mobile population. Factors determining location of way-stations include, availability of water and mode of transportation of the refugees. If the refugees are traveling mainly on foot, the distance between the way stations en route should be closer to one another than if the refugees are traveling mainly in vehicles;
- ❏ Establish a visible UNHCR presence at way-stations using flags, UNHCR stickers and other visibility material. Ensure that UNHCR staff can be clearly identified, particularly those in mobile teams;
- ❏ Designate which UNHCR office will have responsibility for which sections of the route;
- ❏ Make arrangements to support UNHCR staff living temporarily at way-stations by providing tents or other accommodation, drinking water, cooked meals, etc.;

- ❑ Establish mobile assistance along the routes, between way-stations;
- ❑ Install fax, PACTOR or other means of written telecommunication at UNHCR temporary offices along the route;
- ❑ Equip all UNHCR vehicles with communication equipment;
- ❑ Arrange for a common radio channel through which all organizations involved can communicate;
- ❑ Put one experienced radio operator and/or technician in charge of coordinating the telecommunications along the whole route;
- ❑ Have debriefing meetings in the evening and allocate tasks for the following day;
- ❑ Introduce a single common numbering system for all vehicles;
- ❑ Communicate the daily movement plan through staff meetings, bulletin boards and daily sitreps;
- ❑ Provide information to the refugees on the location of way stations, etc. through the placement of signs along the route in languages that the refugees understand, through announcements on local radio stations and announcements using megaphones;
- ❑ Make preparations for reception in the country of origin – at the border transit centers, and in likely districts of return, e.g. prepare the local population, as well as local government, and negotiate reception and treatment at the border;
- ❑ Establish or strengthen a presence in the country of origin to facilitate integration and monitor treatment of returnees.

Protection and material assistance

- ❑ Set up temporary water tanks with tapstands at way-stations (e.g. using bladder tanks);
- ❑ Fill water tanks by pumping from local sources or tankering, ensuring adequate treatment of the water;
- ❑ Preposition sufficient quantities of water treatment chemicals at way-stations and/or water collection points;
- ❑ Establish mobile water maintenance teams;
- ❑ Arrange for water tankering and refilling of water tanks at night if necessary;
- ❑ Fit water tankers with distribution taps for mobile water distribution;
- ❑ Provide refugees with small jerrycans (2-5 liter) which can be carried easily;
- ❑ Demarcate defecation areas (or trench or other latrines) at way-stations, designate people to encourage and control their use;
- ❑ Identify teams for cleanup of defecation (or latrine) areas, during their use and to restore the area following the end of the population movement;
- ❑ Preposition lime for cleanup of defecation areas;
- ❑ Reinforce existing hospitals and health centers which are on the routes with staff and supplies. Establish health facilities at way-stations and mobile health teams in between the way-stations. Ensure that there are adequate supplies of Oral Rehydration Salts with health centers and mobile health teams;
- ❑ Try to prevent refugees concentrating in one area to avoid transmission of epidemics;
- ❑ Preposition high energy biscuits or other convenient food (preferably types requiring little or no cooking) and distribute them at way stations;
- ❑ Position staff with responsibility for unaccompanied minors at all way stations;
- ❑ Establish mobile teams to identify and collect unaccompanied minors;
- ❑ Ensure that staff responsible for the care of unaccompanied minors are highly visible;
- ❑ Clearly define which types of people are to be considered "vulnerable" for the purposes of the population movement and ensure that all the organizations involved are using the same criteria for identification and care;
- ❑ Arrange separate transport to collect vulnerable persons, and their families.

Travel Formalities

58. Immigration formalities: Every effort must be made to avoid the need for individual or family clearance to repatriate by the country of origin before movement. Not only would this create major practical problems and delays, it would also be contrary to the spirit of any properly comprehensive general amnesty. If individual travel documentation is required at all, the registration form should suffice.

59. Customs formalities: Customs formalities are generally waived or simplified in repatriation operations but this should be checked well in advance. Special arrangements may be needed where the refugees wish to repatriate with personal possessions such as vehicles or livestock.

60. Health formalities: Health requirements (vaccination certificates, etc.) should not exceed those required for normal travelers. Extra vaccinations, e.g. cholera, typhoid, are sometimes requested on the grounds that without them the refugees would pose special health hazards. Where vaccinations are required, WHO's advice should be sought and if necessary they can be conveniently recorded on the registration form if the refugees are not already in possession of individual vaccination cards.

On Arrival in Country of Origin

61. The principle of return in safety and dignity does not cease to apply once the return movement is completed, but applies and should be monitored until such time as the situation in the country of origin can be considered stable, national protection is again available and the returnees are reintegrated into their community.

Registration on arrival

62. In certain situations, in particular in an emergency repatriation, it may be the case that no repatriation registration was undertaken in the country of asylum. In this case a system should be set up to register the returnee population to facilitate UNHCR access to all returnees in the different areas of return. In some circumstances, a returnee card may be appropriate.

Monitoring and UNHCR presence

63. A UNHCR presence is vital for returnee monitoring. Presence by other appropriate organizations, and liaison with them, is also important. The purpose of monitoring is to assess whether national protection has been effectively restored and extended to all returnees. The basic principle is non-discrimination – that returnees are treated the same as the resident population and are not targeted or discriminated against in any way. Monitoring should cover general conditions (human rights violations, and security, food security, access to basic facilities and property, freedom of movement, honouring of any guarantees), as well as random individual monitoring.

Reception by resident population

64. Where the return is spontaneous there may be less time to make preparations in the country of origin. Steps should be taken as soon as possible to prepare the resident local population for the arrival of the returnees to promote acceptance and integration if necessary.

Material Assistance

65. Material assistance and protection are interlinked and should be usually reinforcing. The provision of material assistance to returnees enhances the possibilities to monitor this population and is important in making return a lasting solution. Where assistance is given without discrimination on a community basis it can also help with acceptance of the returnees and integration. The question of the nature and degree of assistance programmes in the country of origin, as well as the length of time UNHCR should remain involved in the country of origin, are covered in more detail in the references listed below.

Access to land and property

66. Property is a key resource for returning refugees – either in terms of access to accommodation and return to one's home, or as a means of livelihood. Resolving this can be very complex, but must be addressed if the repatriation is to be successful and durable. UNHCR can play a role through negotiating with the authorities to protect the legitimate rights of returnees.

Landmines

(Please refer to chapter 23 on staff safety for safety advice on mines.)

67. The presence of landmines on main routes of return and in returnee settlement areas poses tremendous danger for repatriating refugees and is therefore a major protection concern to UNHCR.

The need for return "in safety and dignity" means that UNHCR cannot promote the voluntary repatriation of refugees in patently dangerous situations with the risk of injury or death.

68. Within the UN system, issues relating to mine clearance are primarily the responsibility of the department of Peace Keeping Operations (DPKO). Where necessary UNHCR may help fund minefield surveys and demarcation, but involvement in actual mine clearance is

exceptional and requires approval from Headquarters. The focus is therefore on less costly measures that lead to immediate risk reduction for the refugees like mine awareness campaigns. The danger of mines should be considered from the earliest stages of planning a repatriation.

69. The following activities should be considered:

Identification of return routes and potentially dangerous areas of return and landmine survey:

UNHCR should obtain reliable information on areas seriously affected by the presence of landmines and discourage refugees from traveling to or through such areas. While a landmine survey is a national responsibility, UNHCR may also be able to contribute information obtained through its presence in the country of origin as well as through interviews with refugees in the country of asylum. DPKO have a database on mines which includes country specific information on estimated numbers and types, and progress in clearance.

Repatriation method: The presence of mines may have an impact on the proposed repatriation method – for example it may be necessary to encourage refugees to repatriate by means of UNHCR organized transport rather than returning spontaneously.

Mine awareness campaign: If landmines are a factor, then mine awareness campaign should be part of the mass information campaign prior to departure in the country of asylum, and continue in the country of origin. Ensure that the campaign reaches all sectors of the population – both men and women should be involved with the planning and training activities of the awareness campaign. The campaign must be sensitive to levels of literacy, roles in society, and culture. It should cover: existence, appearance and danger of landmines, how to avoid injury, safe rescue procedures, and recognizing warning signs.

Demarcation (marking mined areas) and mine clearance. UNHCR should ensure that returnee areas and routes of return are included as priorities in national demining and demarcation plans. Returnees and local population must be taught about the demarcation signs used.

Key References

Registration – A Practical Guide for Field Staff, UNHCR Geneva, May, 1994.

Voluntary Repatriation: International Protection, UNHCR, 1996.

Voluntary Repatriation. Training Module. 2nd Edition, UNHCR, Geneva, 1993.

An example of the type of form that might be used for a large-scale repatriation is given below. Where FBARS is used, it produces a pre-completed form with information taken during registration, which will then only need the signature. This form can be modified to suit the requirements of the operation.

Notes for those drawing up the form

1. Agree the information required with the authorities. All of the items in the example below may not be necessary.

2. Agree who needs to complete a separate form. The example is designed to be completed by each person over 18 years old and unaccompanied children, but it may be sufficient to have the head of the family group complete one form for all accompanying dependents.

3. Agree on the number of copies and language(s): normally original plus three copies with the following distribution: original – authorities; UNHCR in country of asylum; copy 1 – applicant; copies 2 and 3 – for travel and arrival formalities.

4. If at all possible, print the forms in sets on 'pre-carboned' paper.

5. Draw up simple completion instructions.

UNHCR

Voluntary Repatriation Form

Linked Cases:

Family/Group No:

Family Name	First Name	Sex	Y O B	Place of Birth	Relationship
					PRA

Intended Departure Date: _____ Reception Center: _____

Intended Destination: _____ _____ _____

District Admin Post Location

I, the undersigned principle applicant, declare that I (and my dependents) after due consideration wish to be repatriated to _____

Applicant: Date: Witness:

General Considerations

Below are some advantages and disadvantages of the common means of transport. Whichever form of transport is used, the plan should also take into consideration:

1. Food, accommodation and minimum emergency health care during the journey. Where distances are short, it is recommended that only material assistance needed for the duration of the journey, plus, if essential, for the first few days after arrival, be distributed prior to departure. This will help reduce any incentive to "repatriate" several times;

2. Capacity to move all reasonable private possessions of the refugees, if at all possible at the same time as their owners. Remember that what refugees carry with them on return will be used to ensure more successful reinstallation and move more quickly towards self-sufficiency (i.e., roofing material, livestock, etc.);

3. Appropriate security and the maintenance of public order during all stages of the journey;

4. Arrangements for the safe transfer of the required documentation, passenger lists, registration forms, etc., and for keeping statistical records of the progress of the operation;

5. Escort or monitoring of the actual repatriation by or on behalf of UNHCR. At least for the first movements, a UNHCR staff member should accompany the returnees. Ensure voluntariness even during the movement stage.

ADVANTAGES	DISADVANTAGES
FOOT	
(i) Spontaneous and self-organized	(i) Returnees can take little household effects
(ii) No logistical requirements necessary	(ii) Requires first aid medical stations, provision of potable water and food along route
	(iii) Special assistance required for vulnerable groups (children, elderly, disabled)
	(iv) Increased security risk. Risk of separation of families
TRUCK	
(i) Can be used on most roads	(i) Open to elements
(ii) Usually available	(ii) Danger to passengers
(iii) Plenty of space for luggage	(iii) Uncomfortable
BUS	
(i) Greater passenger capacity in safety	(i) Limited luggage space except on roof
(ii) Faster than truck if roads allow	(ii) Slower unloading and loading (e.g. at border and road checks
(iii) More comfortable	

Notes for truck and bus

1. Assuming both bus and truck are available, the deciding factor may well be journey distance. If road conditions allow, a bus is usually preferred for longer journeys. Check with the refugees if a truck is acceptable, consider how small children would fare, what passengers would hold on to and how luggage will be secured. Some form of sun shade or other protection may be necessary.

2. For both truck and bus, the following facilities will be needed:
   – vehicle fuel;
   – food and water for repatriates during journey;
   – emergency health care;
   – breakdown or recovery service;
   – vehicle insurance for the country of destination.

3. For any movement by road, try to avoid having to change vehicles at the frontier. While it is generally easier to use vehicles from the country of asylum, consider if having those from the country of origin coming to fetch repatriates has advantages. Ensure that drivers do not work excessive hours and that they have immigration and other clearances through to the destination.

4. It may be difficult to keep trucks together in tightly grouped convoys, and this is often impracticable on dusty roads in any event. However, there must be one person clearly identified as responsible for each group of vehicles. Seek local advice on how to marshal and control the vehicles. Prearranged stopping points where all vehicles regroup, with the person in charge in the last vehicle is one solution. Make sure all drivers are aware of breakdown or accident procedures.

TRAIN

Advantages	Disadvantages
(i) Easy overall control including border crossing	(i) Much less flexible: secondary transport required to and from railhead
(ii) Plenty of luggage space	(ii) Often slower than road
(iii) Can be made self-sufficient (fuel, food, water, etc.) over longer distances	

Notes

1. Movement by rail rather than road may be the better solution where large numbers are repatriating to the same initial destination.

2. To avoid delays at the border, try and organize immigration, customs and health formalities either only at the final destination or by embarking officials who complete them during the journey.

AIR

Advantages	Disadvantages
(i) Swift, convenient and easily controlled	(i) High cost
(ii) Assembly and reception facilities are likely to exist already	(ii) Secondary transport required to and from airport
(iii) Optimum means for long distances and especially for the sick, disabled and otherwise vulnerable	(iii) Limited luggage capacity

Notes

1. For any large scale repatriation, existing commercial flights will be insufficient (and more expensive than chartering). In general, the most economical aircraft on a medium or long haul is a full wide-bodied jet (i.e. jumbo or airbus type).

2. UNHCR has considerable experience in chartering aircraft for repatriation operations. The agreement is likely to be concluded from Geneva and advice should be sought from Headquarters (the Regional Bureau and Supply and Transport Section) regarding procedures and standards of safety.

3. In addition to practical matters such as runway length, consider requesting from the governments concerned:

– concession to use duty free fuel (check fuel availability);
– waivers of in-flight route charges, landing and parking fees;
– payment only for actual cost of handling charges rather than the fixed commercial fees.

BOAT

Advantages	Disadvantages
(i) Greater passenger and luggage capacity	(i) Secondary transport to or from port required
(ii) Assembly and reception facilities already likely to exist	(ii) Slow and costly
(iii) Comfortable	(iii) Sea sickness

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Administration, Staffing and Finance

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Introduction

1. The purpose of this chapter is to provide general guidance on UNHCR's basic administrative procedures and actions in an emergency. Nothing in this chapter should be read as altering any existing rules, regulations and instructions, in particular the UNHCR Manual. The latest edition of The Checklist for the Emergency Administrator (hereinafter referred to as the Checklist) is an essential reference for administration in emergencies. The Checklist comes in three parts:

i. The actual checklist (a few pages). This is reproduced as Annex 1;

ii. Annexes to the checklist (in a large folder) which are primarily samples of the most frequently used administrative forms and extracts from the UNHCR Manual;

iii. A computer diskette containing many of the forms.

Throughout this chapter references are given to the relevant item in the Checklist.

2. The chapter considers particularly the opening of a new office in an emergency, but may also be helpful when expanding an existing office or establishing Sub or Field Offices.

3. The status of an established UNHCR office is governed by an agreement between the host government and UNHCR, called a Cooperation Agreement, also referred to as a "Branch Office Agreement" or an "Accord de Siège". (See Checklist section on Premises). Until such an agreement is concluded, UNHCR will be covered by UNDP's agreement with the host government. In addition, the Convention on the Privileges and Immunities of the United Nations, 1946[1], is applicable to UNHCR and covers such matters as the inviolability of United Nations premises, the right to operate foreign currency accounts, exemption from direct taxes and customs duties on articles for official use, and facilities and immunities for communications. Specific considerations in respect of the emergency operation, for example regarding the handling of relief supplies, would be set out in the exchange of communications concerning the government's request for material assistance and in the project agreement (see chapter 8 on implementing arrangements).

[1] *Contained in UNHCR, Refworld CD-ROM.*

Emergency Staffing

(See Checklist section on Personnel, Staff Conditions & Security). See also the Staff Rules and the Staff Administration and Management Manual, also the InSite database available on CDRom.

Introduction

4. As soon as possible the Head of Office should communicate to Headquarters the projected staff requirements at both general service and professional levels with the necessary detail to enable Headquarters to review these in accordance with established personnel procedures and to approve the staffing table for the emergency. Emergency staffing resources should be used for the initial emergency period only. In the initial period, prior to the creation of posts, national staff could be recruited and paid for under Temporary Assistance.

5. There should be no delay in committing necessary personnel. However, solely adding personnel will not meet the organizational needs of an emergency: the operations plan and definition of responsibilities must determine personnel needs, not vice versa. Experience shows that for a given operation, smaller teams with clear allocation of responsibilities are usually more successful than larger teams whose members have less clearly defined roles.

Additional staff, who are unclear as to their role, will add to the management burden in an emergency

Staffing must be flexible. Numbers are likely to vary over time.

Recruitment

6. It is important that the different advantages of national (also referred to as local) and international staff are understood, and that these different strengths are properly incorporated into a staffing plan. National staff members understand the local situation and are sensitive to issues that often escape the notice of the international staff member. They often enjoy a wide range of contacts that enable them to "get things done".

7. Very significantly, national staff may speak the refugees' language. Correspondingly, international staff members bring to the operation an impartiality and an embodiment of the international character of UNHCR, which is essential. They will also have experience from elsewhere to contribute to the management of the emergency.

8. Headquarters is responsible for international staff identification, recruitment and deployment. The need for international staff will depend on the scale of the emergency and implementing arrangements.

UNHCR has developed a number of standby arrangements whereby suitable international staff can be deployed rapidly to an emergency operation.

9. The following table shows staff functions which may be needed in a large emergency.

Type of function
Overall management and leadership
Management of the administration in large emergencies
Core UNHCR functions in an Emergency Team: Field, Protection, Programme
Administrative and finance functions for an Emergency Team, to set up new offices and train staff
Community services functions
Supply and transport functions
Technical functions – technical coordinators (e.g. for health, water, nutrition) and – other technical support e.g. health assessment, epidemic preparedness and response, health monitoring systems, engineering (physical planning, water, sanitation, roads)
Support functions, e.g. base camp management, telecommunications and staff safety

10. The need for at least the following international staff (comprising an emergency team) should therefore be considered in a large scale emergency.

- ❏ Emergency Team Leader (with one of the senior officers also possibly acting as Deputy to Team Leader);
- ❏ International Secretary or Assistant for the Team Leader;
- ❏ Senior Protection Officer;
- ❏ Protection Officer(s);
- ❏ Senior Programme Officer;
- ❏ Programme Officer(s);
- ❏ Sector Coordinators, e.g. Community Services, Water, Health, Nutrition;
- ❏ Field Officers deployed at the refugee sites;
- ❏ Senior Administrative Officer;
- ❏ Finance Officer/Personnel Officer;
- ❏ Staff Safety Officer;
- ❏ Public Information Officer;
- ❏ Logistics Officer;
- ❏ Telecoms Officer.

11. The emergency team could be composed of staff deployed from emergency standby arrangements only, or a mix of the latter plus UNHCR staff already posted to the area. Emergency standby and staffing arrangements include an internal roster of UNHCR staff and emergency standby arrangements with other organizations. Details of these arrangements can be found in the Catalogue of Emergency Response Resources, Appendix 1.

12. For all staff, prior experience of an emergency operation is of course, a great advantage.

The overriding staffing priority is to fill key managerial posts with experienced UNHCR staff of the right calibre.

13. In a country where a major emergency is added to a previous small-scale programme it may be necessary to replace the existing Head of Office with a more experienced Head of Office at least for the duration of the emergency.

14. Administrative staff are another priority. An experienced administrative assistant will be an essential member of the team if a new office is being opened, and in large emergencies experienced finance and personnel officers are likely to be necessary. Without persons with these skills, other staff will have to devote a disproportionate amount of time to UNHCR internal administration. National administrative staff must be identified and trained, but this in itself requires experienced supervision.

15. Each refugee emergency will require a certain number of specialist skills even at the assessment and initial phases of the emergency. Where these are not available in-country, the assistance of Headquarters for recruitment of specialists through standby arrangements should be sought without delay. See Appendix 1, Catalogue of Emergency Response Resources for more details of these standby arrangements.

16. Informal volunteers, both nationals and members of the diplomatic and expatriate

communities may come forward to help. The value of these outside volunteers will vary considerably with the situation. It will be important to assess the skills of the volunteers, the time they can devote and the availability of management personnel needed to coordinate and support them.

Lack of proper supervisory support may lead to the volunteer taxing already overextended staff as much as, or more than, the value added.

Reporting lines

17. In situations where an emergency team is deployed to an area of the country where there is no UNHCR office, the emergency Team Leader will normally report to the UNHCR Representative in that country or the Regional Representative or Special Envoy as appropriate in the individual circumstances.

18. When an emergency team is deployed into an area where a UNHCR office already exists and has responsibility for the operation, then the emergency team should integrate into the staffing structure of the existing office. The decision as to who should head the operation, the existing Head of Office or the Emergency Team Leader, will depend on the circumstances and the relative experience and seniority of the individuals. The decision as to who will head the operation must be clearly communicated to all staff at the outset to avoid any ambiguity in responsibilities and reporting lines.

Management

19. Sound personnel management, supervision and leadership are very important to the success of an emergency operation, but can easily be overlooked. The initial motivation of those involved is a major asset, but for persons at levels that do not allow an overview of the operation, this can be replaced by disappointment and frustration if supervisors are too busy to plan, organize, direct, control and continue to motivate their staff.

20.

Responsibilities, roles and tasks must be clearly defined and understood.

Job descriptions are the most common management tool for defining individual responsibilities, even if the imperatives of an emergency mean their frequent revision. They are important for UNHCR staff, and even more so for seconded staff (such as United Nations Volunteers – UNVs, consultants and staff deployed through the emergency standby arrangements), and informal volunteers. Responsibility should be delegated to the lowest possible level, and with it must go the necessary authority. Responsibility without authority is useless.

21. Staff meetings should be convened regularly from the start. Team welfare will have an important bearing on the success of the emergency operation.

Everyone must be made to feel part of the UNHCR team. This includes consultants, seconded staff, and volunteers.

22. Very long hours will often be necessary, but supervisors must ensure that staff have time off, away from the refugee site, and do not get so overtired that their efficiency and the professionalism of their approach suffers.

23. All field staff have a particular responsibility to safeguard their own health, but also have a role to play in ensuring that their colleagues remain in good mental and physical health (see chapter 22 on coping with stress). Early corrective action can avert the need to hospitalize or evacuate key staff.

24. In an emergency there may be many occasions when staff see clearly that by devoting time to helping individual refugees or families in distress they could alleviate suffering directly. To seek to do so is very understandable but it can lead to a personal emotional involvement at the expense of the staff member's wider responsibilities towards the refugees as a whole, and to resentment among other refugees. Direct responsibility for individual care is usually best assured by the refugee community. For all staff, compassion must be tempered by a professional approach. Guidance by supervisors is often needed on this point.

25. Particular attention must be paid to proper supervision and encouragement of newly recruited national staff. Often the Head of Office and other international staff are extremely busy, out at meetings or in the field, and the other staff, who may know little about UNHCR and less about the operation, lack guidance and a sense of involvement. Some of the general information in the emergency office kit may be useful for briefing

newly recruited national staff. In all cases the new staff should receive a briefing from their direct supervisor covering, at a minimum, general information on the operation and the role of the new staff member.

Personnel Administration

26. UNDP may be able to help in determining conditions of service and even in identifying national field staff.

27. Careful attention must be paid to the administration of out-posted field staff. A convenient way of administering Field Officers, at least initially, is to ensure that the Travel Authorization (PT8) issued authorizing the mission to the country of operation also covers internal travel and DSA. If the latter is not covered, an addendum to the original PT8 is issued. Normally in emergency situations, and to avoid staff carrying too much cash, a DSA advance is given on a monthly basis. This advance is charged to the suspense account code as indicated on the UNHCR account codes listing (VF 324) and recorded on the reverse side of the original PT8. Upon completion of the mission, the office settling the travel claim, must ensure that the travel advances are deducted from the entitlements.

28. Particular care must also be taken to ensure the proper administration of out-posted national staff, for example, Field Officers' drivers. It should be noted here that while Heads of Office can authorize out-posted staff to drive official vehicles on official travel, as in an emergency this is likely to be necessary, every effort should be made to provide Field Officers' with drivers from the start. They can be of great help to Field Officers in a variety of ways.

29. All out-posted national staff must have contracts, understand their terms of employment and benefits, including the cost and benefits of the UN health insurance scheme, receive their salary regularly, work reasonable hours and take leave due.

All staff should have job descriptions and understand them.

Obvious as these requirements are, they can be difficult to meet in an emergency. There may be important extra demands on UNHCR drivers, both beyond simple driving and also as a result of their working for itinerant Field Officers and thus spending considerable time away from home. These factors must be taken into account.

Staff Visibility

30. A means for visual identification of UNHCR staff may be necessary, particularly outside the capital. Visibility materials, available from Headquarters, include flags, stickers (including magnetic stickers), vests, armbands, T-shirts and caps (see the Catalogue of Emergency Response Resources Appendix 1).

31. Consideration should also be given to adopting a UNHCR identity card with a visible photograph that can be worn as a pocket badge. Arrangements should be made as soon as possible for UNHCR staff to receive diplomatic identity cards issued by the government. Pending that, an official attestation in the local language could probably be quickly obtained for each out-posted Field Officer from UNHCR's government counterpart and might be very useful.

Staff Accommodation

32. At the start of an emergency, international staff will be on mission status and will generally be accommodated in hotels. Should the daily subsistence allowance (DSA) not cover the basic cost of adequate hotel accommodation, Headquarters should be informed at once and all hotel receipts retained. Conversely, DSA is reduced if official accommodation and/or meals are provided. If it is clear that special arrangements will be required for personal accommodation for staff who are assigned to that duty station, Headquarters should be informed, with details of local UN practice.

33. In extreme hardship areas, where there is no suitable staff or office accommodation, a standard staff and office accommodation package is available. This consists of prefabricated units which are stockpiled and which can be airlifted to the operation. Further information is provided in the Catalogue of Emergency Response Resources (Appendix 1).

34. Standard travel kits and field kits are also available from the emergency stockpile, and details of their contents are provided in the Catalogue of Emergency Response Resources (Appendix 1). The kits have been developed to provide staff with some basic personal items likely to be of use in the first days at such places, pending more appropriate local arrangements. The kits will normally only be issued to staff proceeding to isolated locations from or via Geneva, and when it is clear that there may not be time to obtain what is actually needed on arrival in the country of operation. If UNHCR is

already represented in that country, the Field Office should have a good idea of conditions to be expected and thus of what specific personal equipment may be needed, and this is probably best purchased locally.

35. Responsibility for the provision of the necessary personal items rests with staff members. Even when issued with kits, staff should check carefully what other items may be required; it is unlikely that a standard kit will meet all needs. Staff receiving kits will be required to account for them at the end of their mission, and will be expected to at least return the non-consumable items.

36. In difficult conditions it may be necessary to hire a base camp manager who will be responsible for organizing living arrangements for UNHCR staff. A description of the tasks of a base camp manager is provided in the Checklist.

Budget and Finance

(see Checklist section on Finance, Equipment & Supplies).

Authority to Incur Expenditure

37 Currently UNHCR classifies expenditure into two types:

i. Project expenditure;

ii. Administrative support expenditure.

This classification of expenditure may change in the future.

38. Authority to enter into obligations for project expenditure is given by a letter of instruction (LOI). Further details can be found in chapter 8 on implementing arrangements.

39. Authority to enter into obligations for administrative support expenditure is given by an Administrative Budget and Obligation Document (ABOD). This is issued by Headquarters and is addressed to Heads of Offices. It covers all non-staff costs including temporary assistance and overtime.

40. Authority for additional administrative support expenditure in an emergency is given to an existing Field Office by amending the existing ABOD. When an emergency occurs in a country where UNHCR is not already represented, an initial ABOD will be issued immediately. This can then be amended when more details of administrative requirements are known. Control of expenditure against funds allocated is by an Administrative Budget Control Sheet (ABCS) generated from the computerized accounting system.

Transfer of Funds

41. It is essential to have funds immediately available. Funds will normally be made available by bank transfer. However, such transfers, especially to out-posted Field Office bank accounts, sometimes suffer undue delays because of complicated banking channels. It is very important to select a local bank with a direct international correspondent relationship, if possible with Citibank N.A. New York or the UBS Bank in Switzerland. Further information can be provided by the Treasury Section at Headquarters.

42. At the start of an emergency it may be possible to hand carry a banker's cheque from Geneva to be credited directly to the Field Office bank account. If this is done, proper precautions must of course be taken to ensure the security of the cheque.

43. In very extreme cases, when no banking services are available, cash may be acquired locally (e.g. through local companies and traders) upon specific authorization from Treasury. Funds would be transferred to an account indicated by the trader after receipt of the cash by UNHCR. Cash may also be provided to Field Offices through professional courier services. Information about cash transfers, past, present and future, must be treated with absolute discretion.

44. Subsequently funds will be transferred by Treasury upon cash replenishment requests in the standard format shown in the box below. Care should be exercised that funds are called forward as close as possible to the date of their utilization to avoid unnecessary high bank balances over prolonged periods.

To: UNHCR Treasury (HQTY00)
From: Requesting Officer/Field Office Location
Subject: Cash Replenishment Request

Please effect an immediate transfer of funds based on the following information:

Balances on hand (all bank accounts and petty cash) at (dd/mm/yy): *(provide details of amounts and currencies)*

Total disbursement needs for the next x (maximum 4) weeks: *(provide details of administrative and programme needs, amounts and currencies)*

Replenishment amount requested: *(indicate amount and currency)*

Complete bank name and address, including UNHCR bank account number, and the Field Office's accounting system receiving bank code.

45. Disbursements for both administrative and project expenses are made in the Field either from a local UNHCR bank account or, pending the opening of such an account, through UNDP. In the latter case, UNHCR Headquarters will arrange with UNDP Headquarters for the local UNDP office to receive the necessary authority to incur expenditure on behalf of UNHCR. Settlement with UNDP will normally take place through the common Inter-Office Voucher (IOV) system for amounts of less than US$10,000 or through a special transfer of funds to UNDP New York for larger sums. As a rule, disbursements exceeding the equivalent of US$100 should be made by cheque; whenever local circumstances require regular cash payments in excess of this limit, Headquarters' approval must be obtained.

Bank Accounts

46. All local UNHCR bank accounts are opened by Treasury upon recommendation from the Field Office. The choice of a bank will be determined by its reputation, ease of access, services offered and charges. Other UN agencies, diplomatic missions and NGOs should be consulted. The following information is required:

i. Full name of the bank;

ii. Address, phone, telex and fax numbers;

iii. Type and currency of account;

iv. Bank's correspondent bank in New York or Switzerland;

v. Maximum amount of any one cheque;

vi. Suggested panel of bank signatories;

vii. Amount of initial transfer.

47. Treasury will designate the authorized bank signatories. Two joint signatories are normally required to operate UNHCR bank accounts. In exceptional circumstances, signature by one Officer may be authorized.

Particular care must be taken to ensure cheque book security.

Cheques must bear UNHCR in words, be consecutively numbered, verified on receipt, and kept in a safe by a staff member designated by the Head of Office. Cheques should always bear the name of the payee and should be crossed unless there is an overriding reason why this is not practicable. Under no circumstances should a bank signatory presign either a blank cheque or one which is only partially completed.

48. Field Offices will normally maintain one non-resident local currency bank account; circumstances may however also require the opening of a non-resident US dollar account and perhaps even a resident local currency account. Where problems of exchange control regulations are encountered, the Treasury at Headquarters should be informed immediately. Field Offices should ensure that the most favourable conditions are obtained for the transfer and conversion of UNHCR funds.

Exchange Rates

49. If there is a significant discrepancy, i.e. more than 3%, between the actual market rate and the prevailing UN rate of exchange, a request for a revision of the latter should be made. This request should be coordinated with UNDP and other UN organizations locally and addressed to UNDP New York. The communication should contain a summary of the fluctuations over the previous 60 days. If necessary, UNHCR Headquarters should be requested to intervene with UNDP New York.

Accounting Procedures

50. UNHCR accounting procedures may change. However, currently, whenever a Field Office operates its own bank account(s), it must report to Headquarters monthly on all transactions for each account. The procedure is the same for both administrative and project expenditure. Most importantly, a properly supported payment voucher must be completed and immediately entered into the electronic accounting system. Where this system has not yet been installed, a manual payment voucher (F.10) should be completed and immediately entered on a bank journal (HCR/ADM/800). It is essential that the voucher quotes the authority for payment (LOI, ABOD, PT8 (travel authorization). A "Mini Payment Voucher" book (F.11), designed especially for emergencies, may be used by out-posted Field Officers. An official UNHCR receipt voucher should be issued and entered on the bank journal for any receipts other than replenishments from Headquarters. Similarly, payments from petty cash have to be accounted for in the petty cash journal (HCR/ADM/800). It is imperative that all vouchers and journal entries list the correct account code, as indicated in the UNHCR account codes listing and on the PT8, or the project symbol marked on the LOI against which the transaction is to be debited/credited.

51.

Whatever the pressures of the emergency, accounts must be kept up-to-date and the monthly closure done on time.

Experience has shown that failure to do so will not only delay the replenishment of the bank account but will also result in far more work than would originally have been required.

Non-Expendable Property and Office Supplies

(see Checklist section on Finance, Equipment & Supplies).

Non-expendable property

52. Authority to purchase office furniture and equipment is given in the ABOD. Field Offices may purchase locally or regionally if the cost of the item is less than 15% above that available through the Supply and Transport Section at Headquarters[2].

53. The purchase of computer equipment, vehicles, telecommunications equipment and security equipment should be coordinated with Headquarters in order to ensure conformity with the organization's specifications. Local purchase should be considered and if the cost is within the 15% limit referred to above, the Field Office should forward three pro forma invoices, together with the item's specifications, to the Supply and Transport section at Headquarters for approval.

Asset Management System

54. The asset management system is an electronic system to track and manage all non-consumable assets owned by UNHCR (with a lifespan of over a year), regardless of funding source or user (including for example all vehicles, telecommunications and computer equipment, furniture and office equipment, buildings such as clinics, office, hospitals, and water purification and construction equipment). The system should be installed into at least one computer at the country office level. A decision should be made at the beginning if the extent of the operation requires that the system be installed in other offices within the country. The office must also have the system user manuals, bar-code labels and data entry forms (obtained from the Asset Management Unit at Headquarters).

55. Whenever an asset is purchased, whether locally, regionally, through Headquarters, or by implementing partners with UNHCR funding, it must be bar-coded and recorded in the asset management system.

56. Where items are acquired from stockpiles maintained at Headquarters, such as computer and telecommunications equipment, relevant data about the item will be sent to the Field on diskette so that the office can import the details into the asset management system.

57. Where an asset is re-deployed to another location, data about it should be sent on diskette to the receiving office for importation into the asset management system.

58. It is important that all assets are bar-coded and recorded in the asset management system from the beginning of the operation. Failure to do so will result in "lost" assets and in far more work than would originally have been required.

59. Offices maintaining their own asset management database should regularly send their databases to the country office for consolidation.

The consolidated database should be sent to Headquarters every three months.

Office Supplies

60. An emergency office kit (see Catalogue of Emergency Response Resources, Appendix 1) can be used to supply a new office with stationery and small office equipment. The stockpiled kits weigh approximately 120 kg packed in two cardboard boxes. Each kit is designed for an office with five international staff and ten national staff.[3]

1. Office supplies, as well as printed stationery and forms, can be purchased locally, regionally, or if this is too expensive, office supplies and printed forms listed in the UN catalogue may be ordered on a stationery request form (GEN-236/1) directly from Headquarters. The emergency kits are not intended for re-supply, even in emergencies.

[2] *Costs of items available through Headquarters are quoted in UNHCR's Catalogue of Most Frequently Purchased Items, UNHCR, Geneva, (updated regularly) and in IAPSO's catalogue of Office Equipment, IAPSO (updated regularly).*

[3] *Further information is also contained in the Catalogue of Emergency Response Resources (Appendix 1).*

61. Orders for items not listed in the UN catalogue[4] and which are not locally available should be requested from Headquarters, giving all necessary details and specifications.

Office Premises

(Checklist section on Premises)

62. The order of priority for obtaining offices is:

i. Rent-free from the government;

ii. In common UN premises;

iii. Government-provided offices against reimbursement by UNHCR and

iv. Commercial rent.

63. Interim arrangements may be necessary, but the early establishment of the UNHCR presence in a convenient location will be of obvious importance to the success of the operation.

64. Office space per person should not exceed about 14m², but an approximate addition of 30% is needed to allow for a reception area, interviewing room, meeting room, and services area (filing, copier, etc.) as appropriate to the scale of the operation.

65. Considerations in selecting office premises include:

- ❏ Location (distances from ministries, implementing partners, bank, post office, airport, etc.);
- ❏ Security (for authorized access to individual refugees and UNHCR staff, to prevent unauthorized access, and for the physical security of offices, files, etc.);
- ❏ Parking facilities;
- ❏ Utilities (electricity, water, heating, air-conditioning, wires for telephone, toilets, simple kitchen facilities, storage room, etc.);
- ❏ Physical layout and orientation of the building. Ensure that the building and grounds are suitable for radio and satcom antennas and that there is no interference from neighbouring installations e.g. pylons;
- ❏ Provides for a large enough meeting space for UNHCR to discharge its coordination responsibilities through coordination meetings;
- ❏ Room for expansion; in emergencies the numbers of staff can fluctuate considerably;
- ❏ The condition of the office.

66. The use of residential accommodation (e.g. a villa) as an office may be an option.

67. Once office premises have been selected, the government, diplomatic community, other UN agencies and NGOs should be informed accordingly, and the relevant information provided to neighbouring UNHCR offices and to Headquarters.

Official Transport

(See Checklist section on Communications & Transport. In addition, chapter 18 on supplies and transport deals with all transport issues, focusing on transport for operational needs).

Vehicles

68. It is essential for UNHCR staff to be mobile. Action to ensure enough of the right type of official vehicles will be a high priority. Consult the Supply and Transport Section at Headquarters regarding the purchase of vehicles (see chapter 18 on supplies and transport for more information about the purchase or acquisition of vehicles). Once the vehicle is sold or passes from UNHCR's control (e.g. at the end of a lease agreement), ensure that any official UN or UNHCR logos and stickers are removed. Magnetic stickers (available from Headquarters) can be quickly attached and removed from vehicles and re-used.

69. Requests to Headquarters for vehicle purchase should give full details (make, type of body, number of doors, long or short wheelbase, left or right hand drive, petrol/diesel, special options: sand tires, extra fuel tanks, air-conditioning, heater, mine protection, anti-theft device, etc.). The duty-free on-the-road price and delivery time must be given if local purchase is requested.

70. In many countries duty-free fuel may be available for official UN vehicles. Details of procedures should be obtained from the government and other UN organizations. Follow them from the start; retroactive reimbursement is often impossible.

71. Vehicle daily log sheets should be introduced from the day the official vehicle becomes operational and these should be designed in such a way as to show the daily mileage of each vehicle and the purpose of

[4] *Office Supplies, Forms and Materials, UN, Geneva, 1990.*

each trip. The daily log should also include the names of the driver and of the passenger(s). Mileage should be regularly checked against the purchase of fuel for that vehicle.

72. It is important that vehicles are insured and registered upon arrival. In respect of each official vehicle assigned to a Field Office, adequate insurance covering third party risks should be arranged locally with a reputable insurance company.

Light Aircraft

73. There may be situations when a light aircraft is the only way to ensure satisfactory communications between the various UNHCR locations. The need may be temporary, for example to expedite needs assessment and the initial response, or longer-term when the existing communications infrastructure does not adequately cover the location of the refugees and the journey by road is long and uncertain. In some circumstances, security is also a consideration.

74. Immediate action to provide the necessary flights is essential. Initially, or where the need is short-term, this is likely to be by commercial charter unless the UN system already has a light aircraft and spare capacity. If locally based charter companies exist, seek impartial local advice on their reliability, obtain as many offers as possible and send these to Headquarters with a recommendation. Include details of passenger insurance coverage. This information should be complemented by an indication of the required weekly flight plan (e.g. per week: 3 return flights capital/location X; 1 return flight capital/location Y; 1 round trip flight capital/X/Y/capital), and the estimated cost for the necessary flights (total or per month).

75. Where local charter is not possible or a long-term need is foreseen, inform Headquarters with as much detail of the requirement as possible and ways it might be met (for example, of charter companies from neighbouring countries known to operate in the country of operation). Some government disaster corps and a number of NGOs operate light aircraft. Some are specialized in this field like Aviation Sans Frontieres (ASF), and the Missionary Aviation Fellowship (MAF). If there is already such an operation in the country their advice should be sought.

Office Organization

(Checklist section on Filing & Documentation and Communications & Transport).

Filing and Documentation

76. A simple office communication system should be put in place immediately. This can be implemented by, for example, pigeon holes (ideally one for each staff-member and one for each collaborating organization), white-boards and notice-boards. This will help to ease communication problems in the confusing early days of an emergency.

77. A suitable filing system and registry controls should be set up immediately on the opening of a new office. Annex 2 gives some guidance as to what might be required and how filing could be organized.

78. A rubber stamp to show date of receipt, file, action officer and remarks will be very useful. The practice of putting a chronological number on **every** outgoing communication is strongly recommended and will be particularly helpful in the confused early days. Everything should have copies on the chronological file in addition to a subject file.

79. As a precautionary measure, offices should have a shredder to destroy any unwanted documents or correspondence. In some countries waste paper is sold and used in markets for packaging, so care should be taken that discarded UNHCR documents are not used in this manner.

Communications

80. Communications needs are discussed in the communications chapter. A simple checklist for a new office is given below; the order will not necessarily be the priority.

- ❏ Identify the need for a telecommunications network as soon as possible (radio, e-mail, satellite, etc.);
- ❏ Obtain necessary permission from the authorities to operate the equipment with the assistance of the RTO or HQ Telecoms if necessary;
- ❏ Obtain immediate access to a telephone and fax and tell Headquarters (and neighbouring UNHCR offices as appropriate) the numbers and where they are located;
- ❏ Set up controls and registers for incoming and outgoing communications from the start;
- ❏ Establish a pouch system between the offices within the country of operation and Headquarters;

- ❏ Consider communications needs in selecting office premises;
- ❏ Obtain a PO box number and tell Headquarters (and local authorities, etc.) the number;
- ❏ Once the UNHCR telecommunications network is installed, inform government, UNHCR Headquarters, neighbouring UNHCR offices, diplomatic corps and others, and ensure correct listing in national telephone directories, in the local UN and diplomatic lists, and in the UNHCR directory.

Key References

Checklist for the Emergency Administrator, UNHCR Geneva, 1998 (and updates).

Most Frequently Purchased Items, UNHCR, Geneva, 1998 (updated annually).

NGO Directory, UNHCR Geneva, 1996 (And subsequent updates).

Office Equipment, IAPSO, Copenhagen, 1998.

The UNHCR Manual, Chapter 9, (Chapters on financial regulations and rules, especially those financial rules for voluntary funds that are administered by the High Commissioner). UNHCR Geneva, 1995 (and updates).

Annex 1 – CHECK-LIST FOR THE EMERGENCY ADMINISTRATOR

(Note: This checklist is regularly updated, the latest version should be consulted)

This checklist is intended as a practical tool for UNHCR staff when responding to emergencies and assigned to duty stations where there is no established UNHCR presence, or where the existing office needs to be strengthened as a result of new events. The complete Checklist consists of three components listed below. Only the first part, the checklist is reproduced here. The complete checklist in its three components can be obtained from the Emergency Preparedness and Response Section at Headquarters.

The 3 components are:

1. The **Checklist** itself which lists most activities requiring consideration when establishing a Branch, Sub or Field Office. Not all items will be relevant. The administrative officer together with the Head of the Office will need to determine what action is to be taken. The list is not presented in an order of priority and it is therefore important to set your own priorities depending on the local circumstances. The list does not cover administrative procedures and action required for the ongoing needs of the office, but concentrates on those related specifically to the establishment of an office. Each item is preceded by a box which you may tick off as action is taken.

2. **Annexes,** which are primarily extracts from existing documentation. These have been included for ease of reference and are not substitutes for existing manuals and instructions of which the most important is the UNHCR Manual to which frequent reference should be made. Not all relevant UNHCR forms are included, as these are available in the Emergency Office Kit, or directly on request from Headquarters.

3. A **computer disc** which contains the format for all forms or documents which are indicated by an (*) in the Checklist. These forms or documents can be copied and amended to suit local needs. (It is recommended that the original format is not amended directly.)

The importance of setting up effective administrative procedures from the outset cannot be over-stressed. They will have important consequences for the effective administration throughout the operation.

ESTABLISHING AN OFFICE CHECK-LIST FOR THE EMERGENCY ADMINISTRATOR

	ACTION	ANNEXES
	PREMISES	
❑	1. Establish a **UNHCR Cooperation Agreement** if not already in place or consider its amendment if one already exists but circumstances have changed	a. Model Agreement (*) b. Example Agreement c. UN Convention on Privileges & Immunities
❑	2. Identify need for **Sub or Field Offices**	a. Excerpt from UNHCR Manual
❑	3. Identify **Office Premises**, negotiate lease and seek approval from Geneva	a. Excerpt from UNHCR Manual b. Standard lease (*) c. Note on selecting
❑	4. Consider the use of **UNHCR stickers and UN flags, posters and visibility material.** Request more from HQ if necessary	a. Flag Code b. List of stockpiled visibility material
❑	5. Consider **"Base Camp"** requirements and need for Base camp manager, in situations where this is applicable	a. Base camp manager
	COMMUNICATIONS AND TRANSPORT	
❑	6. Determine immediate needs for and set up **communications:** Telephone, E-Mail, fax, telex and/or radio and pouch. Complete communications questionnaire and send to HQs Attn. Telecommunications Unit	a. Communications Info Kit including Communications Questionnaire b. Telecommunications inventory forms (*) c. Pouch Service Instructions
❑	7. Establish **telecommunications procedures.** Train staff and advise procedures	a. Sitor/Pactor Manual b. Voice procedure c. Codan user instructions (*) d. Handover letter for handsets (*) e. Handset user instructions (*) f. Radio room discipline (*) g. Communications procedures
❑	8. Establish log for recording long **distance phone calls** giving particular attention to private phone calls	a. Excerpt from UNHCR Manual b. FOM 01/93 including Telephone log form (*)
❑	9. Prepare forms for **telex/fax** messages	a. Model format (*)
❑	10. Establish **communications log** and chron files	a. Radio message chron forms(*)
❑	11. Establish a regular system (shuttle) for **transport of mail and personnel** between sub office and branch office (if necessary)	a. Shuttle Passenger Manifest (*)
❑	12. Determine **Admin Vehicle needs:** Landcruisers, Pick ups, saloons and/or minibus	a. Excerpts SFAS Handbook b. Excerpts IAPSU Catalogue
❑	13. Establish procedures for **light vehicle** use: – Authority for UNHCR staff to drive official vehicles – Driver trip logs – Vehicle tracking system	a. Excerpt from UNHCR Manual b. Driver Log format (*) c. Vehicle Tracking format (*) d. Excerpt from ICRC Handbook

	– Maintenance logs – Construct key box & ensure key security – Identify best means for vehicle servicing – Make arrangements for the purchase of Duty Free petrol – Undertake driver education sessions	e. Authority to drive official vehicles (*) f. Inventory record form g. Vehicle inspection check list h. Rules for drivers i. Vehicles in UNHCR operations j. Fuel receipt voucher (*) k. Mileage rates
PERSONNEL, STAFF CONDITIONS AND SECURITY		
❑	14. Establish **staffing table** with Organigram and job descriptions. Send to the Desk at HQs	a. Typical field office structures b. Additional example organigram c. Post creation and review procedures d. Benchmark job descriptions
❑	15. Identify **sources for local staff** recruitment. Prepare simplified Job Application Form for local Staff. (P11 to be used only for candidates who are being seriously considered)	a. Simplified job application form (*)
❑	16. **Recruit** essential and urgently required local staff. Set up local recruitment committee. Following selection, issue short term contract and arrange appropriate medical check	a. Excerpt UNHCR Manual and related recruitment forms b. Interview notes & Report Form (*) c. Recruitment tests for local staff (*) d. Regulations for NPOs – excerpt from APPB regulations
❑	17. Identify **UN Examining Physician** if necessary if no UNDP Office and inform SASS for JMS approval	
❑	18. Set up **Personnel files** for all staff	
❑	19. Establish **leave recording** system	a. Secretariat Instruction on time, attendance & leave b. Example leave recording forms
❑	20. Establish **Working Hours, Overtime and DSA** for local staff on mission in country in accordance with UNDP practice	a. Excerpt from UNHCR Manual b. IOM 61/88 and IOM/120/88 on salary advances c. Copy OT recording form (*) d. IOM 76/89 on Overtime for local staff
❑	21. Establish local **mission tracking** system	a. Mission recording format (*)
❑	22. Send variable information on **"Appendix B"** for your duty station to Geneva	a. Format appendix B
❑	23. Check that **DSA** appropriate for duty station and if considered to be inappropriate complete DSA Worksheet if no UNDP Office and transmit to SASS	a. Excerpt from UNHCR Manual b. DSA Worksheet & guidelines
❑	24. If new duty station complete **Classification of Duty Station** questionnaire & send to HQs	a. Excerpt from UNHCR Manual b. Classification of Duty Station Questionnaire

❑	25. Review the validity of the **post adjustment** and if considered inappropriate advise DHRM	a. Excerpt from UNHCR Manual
❑	26. Determine appropriateness of **salary level of local staff** and if inappropriate advise DHRM	a. Excerpt from UNHCR Manual b. Excerpt from CCAQ GS Survey Manual
❑	27. Arrange payment of **salary and allowances** of international staff	a. Salary distribution request form and FOM/20/95 & Add.1
❑	28. Negotiate discounts in local **hotels** and advise HQs. Ensure guaranteed room availability for mission staff	
❑	29. Consider **security** procedures and an appropriate evacuation plan	a. Excerpts from UN Field Security Handbook b. IOM 47/92 on Field Security reporting
❑	30. Collect **personal data** on international staff and request staff to complete inventories if warranted by security situation	a. Personal Data form b. Personal Effects Inventory form
❑	31. Identify best means and procedures for **medical evacuation** of staff	a. Guidelines for Medevac Plan b. IOM/104/94 and IOM/26/95 – Guidelines on Medevac
❑	32. Establish frequency and procedures for **staff welfare missions** through MARS/VARI/STAR	a. Excerpts from FOM/105/94 + addenda
❑	33. Review the **living and working conditions,** report to Headquarters and request field kits, travel kits and staff accommodation as appropriate	a. Structure of living and working conditions report (*) b. Example of Emergency Operation Living conditions paper c. Excerpts from Catalogue of Emergency Response Resources (field kits, travel kits, staff accommodation) d. FOM/70/95 on Accommodation provided by UNHCR
❑	34. Design and begin **training and coaching** programmes in office procedures for local administrative staff	a. Excerpts from UNHCR Training Module b. Notes on Coaching Skills c. Using Interpreters (*) d. FOM 102/88 on Language Training
	FINANCE, EQUIPMENT AND SUPPLIES	
❑	35. Survey local banks. Propose bank signatories and interest level and request HQ to open **bank account.** Propose ceiling and request approval for petty cash account	a. Excerpt of UNHCR Manual b. Questionnaire on Opening Bank Account
❑	36. Establish **accounts procedures:** Vouchers, Journals, files, signatory arrangements etc.	a. Allotment Account Codes For essential guidelines on accounting procedures refer to Part 5, Chapter IX of the UNHCR Manual and to the FOAS Manual

❑	37. Request Emergency Allotment Advice if not already received & finalize **administrative budget** request to HQs on ABPS	a. Copy of Emer. Allotment Advice b. Excerpt of Operating Instructions of ABPS c. FOM 120/94 Field Office Admin Budget Procedures
❑	38. Purchase and inventorise **non expendable property,** particularly furniture, vehicles and equipment and decide which to be charged to admin allotment and which to project expenditure (if any)	a. Excerpt from UNHCR Manual
❑	39. Check stocks of **stationery and supplies,** sort forms into Manila folders & order stationery and forms required from Geneva	a. Excerpt from UNHCR Manual
❑	40. Investigate the possibility of the **local printing** of stationery. If possible and the cost is reasonable, request permission to do so from HQs. Proceed only once address, telephone number, etc. known and not likely to change	a. Examples of stationary Exam-plestationery
❑	41. Survey **EDP facilities** and needs and recommend improvements/request additional equipment. If necessary request services of ICSS consultant to assess optimum Admin (and programme) needs	
	FILING AND DOCUMENTATION	
❑	42. Advise BO or HQs which **newspapers and periodicals** to be sent on a regular basis. (This is part of field office budgeting (ABPS) but worthwhile arranging separately)	a. Entitlement
❑	43. Set up **file list,** chron files and document registration system	a. Filing principles (*) b. Standard file list (*) c. Chron Register Format (*)
❑	44. Set up **distribution system** with central location of trays. Consider local construction of pigeon holes. Establish document circulation system	a. Example Action Sheet (*) b. Example Circulation Slip (*)

** Available on the computer disc which accompanies The "Checklist For The Emergency Administrator".*

Annex 2 – Suggested Field Filing System

1. A file list should be set up immediately on the opening of a new office. It should be done in such a way that it can expand and contract to take account of new situations. One must achieve the correct balance between being too specific and too general.

2. Three types of files should always bear a standard format reference or symbol whether maintained at Headquarters or in the Field: personnel (PER/IND) files, individual case (IC) files and project files. The latter symbol is always allocated by Headquarters.

A *personnel file* bears the file reference PER/IND FAMILY NAME, Given Names, e.g. PER/IND SMITH, Ms Jane Marie

An *individual case* file bears IC FAMILY NAME, Given Names RUR (country of residence)/RUR (country of origin)
e.g. IC SMITH, Ms Jane Marie RUR/RUR

A *project file* bears Year/Source of fund/Country of operation/assistance type/project number, e.g. 98/EF/RUR/EM/140.

3. An indication of subject files which might be required is given below. The number designates a subject not a file. Accordingly, files may comprise two or more file numbers.

A file should "tell a story".

Do not make subsequent perusal difficult by filing items out of sequence.

4. Security should be considered when filing documents, in paper and or electronic form. Files which should be destroyed in the event of evacuation of the office should be marked in advance. These should include individual case files and personnel files.

Suggested File List

1. General & External Affairs

100 UNHCR Structure/Mandate & Gen. Info.
101 Executive Committee
102 IOM/FOMs

110 Relations with (host) Government
111 Relations with local Consulates
112 Inter-Agency Meetings
113 NGOs (general & alphabetical by agency)
114 UN Agencies (general & alphabetical by agency)
115 Inter-Governmental Organizations (general & alphabetical by agency)

120 Reports from the field
121 Situation Reports (SITREPS)
122 Camp profiles

130 Missions to the office (UNHCR & alphabetical)
131 Missions by office staff (alphabetical)
132 Visitors to the office (non-UNHCR & chronological)
133 Public Information Activities & Media Relations
134 Press releases & Press clippings
135 Conferences and Special Events

140 Training/Seminars/Workshops

150 Fund Raising/Contributions

2. Protection

200 Protection General – UNHCR
201 Human rights/Country of Origin Info. (RUR – Alphabetical)

210 Protection (host country)
211 Detention
212 Determination
213 Tracing
214 Family Reunion
215 Physical Security of Refugees
216 Registration

3. Operations & Assistance

300 Field Operations General
301 Field Operations (by site/camp)

310 Programme General (UNHCR) including FOBS
311 Assistance Programme General (host country)
312 Emergency Management
313 Technical Support
314 Procurement

320 Food/Nutrition
321 Health
322 Water & Sanitation
323 Site Planning & Shelter
324 Non-Food Items & Domestic Supplies

325 Logistics (procurement, transport, storage)
326 Community Services, Counselling, Community Development
327 Education
328 Productive Activities & Income Generation
329 Camp Management

330 Repatriation
331 Local Settlement
332 Resettlement

4. Administration & Finance

400 Administrative Policy
401 Administrative Instructions

410 Office Premises
411 Office and Personnel Security
412 Asset Management
413 Expendable property & Supplies
414 Utilities
415 Records Management/Filing
416 Communications
417 Transport/Vehicles

420 Staff Rules & Regulations
421 Office Staffing
422 Applications for Employment/Recruitment
423 Salaries/Benefits/Allowances/Living Conditions
424 Taxation/Exemptions/Privileges & Immunities
425 Leave & Holidays
426 Travel/Mission & Leave Rosters

430 Accounting & Finance Procedures
431 Rates of Exchange
432 DSA Rates
433 Administrative Budget & Obligation Document

20 Administration, Staffing and Finance

21

Communications

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Introduction

1. Good communications are essential in an emergency. Effective communications require appropriate equipment, infrastructure, and good management.

Communications Management

2. With improved means of communications, even from very remote locations, the proper management of communications has assumed great importance. The structure and flow of communications should reflect that of the management of the operation, with communications being channelled in a properly structured manner.

At each level reports and information received should be analyzed and consolidated before being passed to the next level.

Raw information should not be routinely transmitted simultaneously through several levels of the management structure by copying reports widely, in addition to directing them to the person responsible for action. Distribution of information should be restricted to those who need it for the exercise of their functions and communications traffic in general should be restricted to that which is necessary.

3. Originators of communications should always ask themselves what the purpose of the message is, who will be receiving it, and whether the information contained is sufficient and appropriate for the purpose.

4. Under the pressures of an emergency there is sometimes a tendency to exchange incomplete information. If the information is insufficient for the purpose of the message, and if the matter cannot wait, then acknowledgement of gaps may save time and trouble. For example, "further information being obtained but meanwhile please react on points…"

5. The most appropriate means of transmission for the message should be considered in view of cost, urgency and bulk. For example, avoid using the telephone or fax when the message could be passed by electronic mail (e-mail). Similarly, large amounts of data, unless very urgent, should be sent via pouch or mail rather than by e-mail.

6. Using or developing standard forms can assist communications management, as they can act as a checklist for information usually transmitted in that form of communication (sitreps are an obvious example – see the annex to chapter 8 on implementing arrangements.)

7. An effective referencing system must be used – this is a major factor in ensuring good communications.

Use separate messages for clearly separate subjects.

Correct numbering and/or referencing will greatly help identify earlier communications. It will also provide a means to systematically track actions required and help maintain orderly and disciplined communication. See chapter 20 on administration for more information on a filing system. Annex 1 describes the official UNHCR message identification system which is used by the Telecommunications Unit.

8. The immediate requirement for communications may be satisfied by telephone, e-mail and fax. However, regular pouch, courier or mail services should be established as soon as possible. A checklist for communication needs which should be considered when setting up an office is contained in chapter 20 on administration. In addition, the Checklist for the Emergency Administrator contains guidance, forms and information for setting up different types of communications.

Telecommunications

9. Effective telecommunications requires staff and equipment dedicated to that task. When planning telecommunications requirements, the Regional Telecommunications Officer and the Telecommunications Unit at Headquarters should be involved as early as possible. These can help to identify experienced UNHCR telecommunications staff who could be deployed to the operation. Emergency staff can include telecoms officers from UNHCR's standby arrangements. If necessary these officers can be used to supplement UNHCR Telecom staff.

Telecommunications Infrastructure

10. The existing telecommunications infrastructure of the country may not support UNHCR's requirements, because the infrastructure may be either inadequate or damaged. Certain security situations can also result in the telecommunications facilities being closed down or drastically reduced

(in which case cellular telephone networks would also be unavailable).

11. UNHCR maintains a stockpile of telecommunications equipment for rapid deployment to emergencies (see Appendix 1, Catalogue of Emergency Response Resources). This equipment provides emergency response staff with immediate communication links from even the most remote locations.

Types of Telecommunications

12. The following are the principle means of telecommunication currently available for use by UNHCR:

i. **Telephone.** Telephones can be connected through standard landlines or cellular networks for communications within the country, and through international or satellite connections (VSAT, INMARSAT – see Annex 1) for communications with other countries;

ii. **Fax.** Facsimile (fax) operates over standard telephone lines, or satellite (VSAT, INMARSAT) connections. Fax facilities are available to and from most countries, however it is more expensive and less easily relayed than e-mail;

iii. **E-mail.** E-mail also operates over standard telephone lines or satellite connections. In the initial phase of an operation, e-mail can be obtained through portable satellite terminals, or using local phone lines if available, and later the SITA network or DAMA satellite system (see Annex 1) can be used if there is a suitable connection point;

iv. **Radio.** Radio can be used for voice and written communication (including e-mail and electronic data). Installation by qualified technicians is required. In an emergency it is almost always necessary to set up radio networks to ensure communications between UNHCR offices and between UNHCR and other agencies. The radio network will also provide an emergency backup for communications with Headquarters in the event of landline communications being cut. Mobile radios (handheld or installed in vehicles) enable staff in the immediate region to maintain contact with one another and with the office;

v. **VSAT** (or **V**ery **S**mall **A**perture **T**erminal – a slight misnomer as the smallest dish size is 1.8-2.4 metres in diameter). VSAT is used for telephone, fax, electronic data and e-mail communication. Installing VSAT is a substantial undertaking and must be carried out by qualified technicians;

vi. **Telex.** Although telex is used less and less, it still remains an option where it is available.

UNHCR Telecommunications Network

Field Preparations

13. The need for a UNHCR telecommunications network should be discussed at the highest appropriate level in the concerned ministry dealing with UNHCR matters (for example, the Ministry of Home Affairs). The advice of the technically competent authorities should be sought (for example the Ministry of Communications or post and telecommunications service). Note that Section IX of the Convention on the Privileges and Immunities of the United Nations provides that "the UN should enjoy for its official communications, treatment not less favourable than that accorded to diplomatic missions in the country".

14. Contact the Telecommunications Unit at Headquarters or the Regional Telecommunications Officer as soon as the need for a telecommunications network is known. Give the proposed number and location of offices, and distances between them, so they can advise on the type of equipment needed.

15. Permission to operate a radio station and frequency clearance must be obtained – in most countries there is a standard government application form. In the case of HF and VHF, check with UNDP and other UN organizations in case they have already received clearance for any frequencies. The Telecommunications Unit or the Regional Telecommunications Officer can give advice on completing the government application form.

16. It is also necessary to obtain permission to operate satellite communications installations. The competent authority will need to know specific information about operating frequencies and characteristics of the equipment. This information can again be obtained through the Regional Telecommunications Officer or the Telecommunications Unit at Headquarters.

Office Accommodation

17. The physical requirements for telecommunications equipment should be kept in mind when choosing office accommodation (see chapter 20 on administration). For example, a radio antenna will require space either

on the roof of the building or in an open area at ground level, and a room for the operating equipment very close to the antenna. Note that for optimum results, the cable connecting the radio equipment with its antenna should be as short as possible, and not more than 50 meters if possible.

18. VSAT installations in particular require an uninterrupted view towards the horizon in the direction of the equator (i.e. towards the southern horizon in the northern hemisphere, and towards the northern horizon in the southern hemisphere). The angle of elevation of the VSAT dish above the horizon will depend on the latitude of the office, the highest angle would be on the equator. If the VSAT is installed on a building (on a flat roof for example), the building must be strong enough to bear the weight. If it is installed at ground floor level, there should be enough space around it for a safety margin (4 m radius) to avoid the possibility of anyone coming too close to the transmitting antenna.

Radio Equipment

19. There are two types of radio equipment generally used by UNHCR in field operations for voice and data transmission: HF and VHF Radio.

20. Generally, HF communications are used for longer distances than VHF. The distance over which VHF is effective can be greatly extended by the installation of repeaters. VHF and HF radio would therefore be installed in the offices and in vehicles as appropriate; depending on the distance from base the vehicle is expected to travel.

Radio Call-signs

21. Each radio installation will have its own unique call-sign. The office installation is known as the "Base" station, the vehicle installations are "Mobiles". It is useful to have a formal naming convention for the call-signs, in order to provide a logical reference. For example, one letter can be used to signify the country of operation, one letter to signify the location, followed by one letter for the agency concerned. Remaining letters and figures may be added to provide additional clarity, if the number of users on the network is particularly high. (The country letter is normally omitted, unless cross-border operations are taking place.)

22. For example, a UN**H**CR office installation in **R**uritania, **T**ownville would be **(R) T H Base**, shortened to T H Base. A vehicle installation for the same office would be **(R) T H Mobile 1** (T H Mobile 2, etc.)

23. The phonetic alphabet (see in the Toolbox, Appendix 2) is used so that the callsigns can be more readily understood over the radio, thus the above example becomes **Romeo Tango Hotel Base** (shortened to Tango Hotel Base), or **Romeo Tango Hotel Mobile One**.

24. Call-signs for individuals using hand-held radios will normally follow the structure, for example (for UNHCR Townville, Ruritania):

T H 1	("Tango Hotel One") Representative
T H 1 1	Deputy Representative
T H 1 2	Other staff member in Representative's office
T H 2	Senior Administrative Officer
T H 2 1	Administrative Assistant
T H 2 2	Other administrative staff member
T H 3	Senior Logistics Officer
T H 3 1	Logistics Assistant
T H 3 2	Other Logistics Staff member

25. The phonetic alphabet is set out in Appendix 2, Toolbox. Further information and other procedures may be found in "UNHCR Procedure for Radio Communication" (pocket sized reference booklet).

Field – Headquarters Telecommunications

26. E-mail allows the field to communicate directly with individuals at Headquarters and at field offices where a Local Area Network (LAN) E-mail Post Office is installed. However, e-mail messages sent directly to individual staff e-mail addresses may not be read and acted upon immediately if the staff member is unexpectedly absent. It is better, therefore, to address messages that require immediate attention to a generic e-mail address, these are addresses with the form HQxxnn, where xx are letters indicating the organizational unit and nn are digits denoting a sub unit, e.g HQAF04 is the generic e-mail address of Desk 4 of the Africa Bureau. Urgent messages may be copied to the Telecommunications Service Desk at Headquaters, who will alert the relevant Desk Officer, or Duty Officer, as appropriate.

Telecommunications Unit – Operating Hours

27. The Telecommunications Unit at Headquarters is staffed between the following local Geneva times:

0700-2100	Monday to Friday
0800-1700	Weekends and Public Holidays
Telephone	41 22 739 8777
E-Mail	HQTU50

Swiss time is one hour ahead of GMT in winter and two hours ahead in summer. Arrangements can be made to extend these working hours, as necessary, in emergencies.

Key References

Checklist for the Emergency Administrator, UNHCR, Geneva, 1998.

UNHCR Procedure for Radio Communication, UNHCR, Geneva.

Common name or acronym	Full name	Description and Use
Codan	Manufacturer's name	High frequency radio system using voice communication, commonly used in vehicles
DAMA	**D**emand **A**ssigned **M**ultiple **A**ccess	Satellite (VSAT) system which allows multiple lines of telephone, fax and data to be transmitted via satellite
DTS	**D**igital **T**ransmission **S**ystem (proprietary name)	A successor to PACTOR, allowing the transmission of e-mail messages by radio
HF	**H**igh **F**requency	Range of frequency of radio waves used for long distance radio communication
INMARSAT	International Mobile Satellite Organization (originally called **In**ternational **Mar**itime **Sat**ellite Organization)	Phone system which provides global phone, fax and data transmission via satellite
Pactor	**Pac**ketised **T**elex **O**ver **R**adio	System whereby printed messages can be sent by radio
SATCOM	**Sat**ellite **Com**munications	Generic term for any satellite communications system
SATCOM A, B, C, M, Mini-M	Refers specifically to INMARSAT terminals used by UNHCR	Telephone system used for voice, fax and data communications. The equipment comes in various sizes, from suitcase size to small laptop and with varying capabilities from simple telex to video-conferencing
SITA	**S**ociété **I**nternational de **T**élécommunications **A**éronautiques	An organization which provides a global communications network for airline reservations and ticketing. It can also provide a communications network for non-airline customers (e.g. UNHCR)
UHF	**U**ltra **H**igh **F**requency (Higher than VHF)	Range of frequency of radio waves used for short distance radio communication
VSAT	**V**ery **S**mall **A**perture **T**erminal	Satellite system which allows multiple lines of telephone, fax and data to be transmitted via geo stationary satellite
VHF	**V**ery **H**igh **F**requency	Radio waves used for short distance radio communications (e.g. handsets or walkie-talkies)
VHF Repeater	**V**ery **H**igh **F**requency Repeater	Equipment used to extend the range of VHF short distance radio communications to a range of 20 to 80 km, depending on the topography

Annex 2 – Message Identification

The following instructions are for telecommunications operators who need to keep a formal log of all messages received and transmitted (including e-mail, fax and PACTOR). The principles are that in each case "HCR" must appear in the prefix and whatever the type and means of communication, each message must bear one number unique to that transmission for each addressee.

Components of the message identity are:

- Message from Headquarters to the Field: HCR/**aaaaa**/9999
- Message from the Field to Headquarters: **aaaaa**/HCR/9999

  where **aaaaa** is the official UNHCR location (Duty Station) code of the Field Office concerned, and 9999 is a four figure sequential number starting at 0001 on the 1st of january each year.
- Between field offices: aaaaa/bbbbb/HCR/9999

  where **aaaaa** is the five letter location code for the sending field office and **bbbbb** is the five letter location code for the addressee, and **9999** = four figure sequential number, starting at 0001 on the 1st of January each year.
- To non-UNHCR addressees: aaaaa/**MSC**/HCR/9999

There are two categories of four figure sequential numbers which may be used:

Category A is used for communications between Headquarters and field offices and between field offices with a considerable message exchange. The number used would be the next in the series for communications that year between the originator and addressee.

Category B is for UNHCR addressees who do not fall into Category A and for non-UNHCR addressees. If there are many such messages, two series may be used: UNHCR and non-UNHCR. All series or sequences restart at 0001 on the 1st of January.

Examples

Category A messages:

HCR/ANGLU/0123 means the 123rd message from Headquarters to Luanda, Angola this year.
ANGLU/HCR/0210 means the 210th message from Luanda, Angola to Headquarters this year.
ANGLU/RSAPR/HCR/0097 means the 97th message from Luanda to Pretoria, South Africa this year (where Luanda and Pretoria use sequential numbering).

Category B messages:

ANGLU/SENDA/HCR/**0024** means a message from Luanda to Dakar, Senegal, and which is the 24th Category B message this year from ANGLU (where Luanda and Dakar do not use sequential numbering).

If there is more than one addressee, a separate message identity must be used for each. If the message is being sent to some addressees for information only, this should be indicated in brackets after the respective message identity. For example messages from Luanda to Headquarters for action, copied to Dakar for information, would bear the following:

ANGLU/HCR/0124
ANGLU/SENDA/HCR/0024
(SENDA for info)

In order that the system can work effectively any missing sequential number in **Category A** must be reported to the other category A addressee as soon as possible, and the last number of the year (or of a series) must be reported to each category A addressee. If a category A number is duplicated by mistake, correct this by allocating the next available number and reporting this number to the addressee by a service (SVC) message. Note that the SVC message itself should also be numbered. Indicate the date or subject to avoid any danger of confusion.

22

Coping with Stress

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Introduction

1. Stress is a feature of life which can be both protective and harmful. Unfortunately "stress" is too often viewed in a negative context when, in fact, it enables us to cope with change. Protective stress is part of a natural process – when threatened, the body always reacts with the same general adaptive mechanisms. The physical symptoms that occur when we are under stress enables us to "flee" or "fight" the threat. This response is a basic life protecting mechanism, enhancing physical and mental defences and preparedness – it focuses attention, and mobilizes the energy and resources necessary to be able to take appropriate action. Stress therefore allows us to remain productive even in the face of changing and challenging situations. Stress reactions are dependent on our personality, our professional experience and our physical and emotional well-being.

In an emergency, reactions to stress are normal.

2. However, when the circumstances inducing the stress are excessive, very intense or continuing over a period of time, stress may begin to negatively affect an individual's personality, health and ability to perform.

3. Stress takes up an enormous amount of energy. Being in a stressful situation is physically and mentally exhausting. However, once out of the crisis environment and given time to rest, people usually recover their normal equilibrium.

4.

Understanding normal reactions to stressful situations, knowing how to handle these and early attention to symptoms can speed recovery and prevent long-term problems.

Identifying Stress Symptoms

5. Emergency personnel are exposed to many types of stress and what is needed is to have the "ideal" level. Too little causes boredom, lack of stimulation and fatigue, too much and we become overwhelmed physically and mentally. The names given to the harmful types of stress are cumulative stress and traumatic stress.

Cumulative stress

6. Cumulative (or chronic) stress builds up slowly as a result of the magnitude and multiplicity of demands, lengthy working hours and daily frustrations and difficulties of living and working in emergencies. Because stress reactions develop so slowly and imperceptibly it is quite often difficult to notice them in oneself, they are, however, usually noticeable to close colleagues.

Once removed from a stressful situation and with the possibility for rest and relaxation, a person generally recovers quickly and may become aware of the difference in how one responds to situations when one is not experiencing stress.

Individuals in emergency work, who are experiencing high stress levels, are not the best judges of their own ability to cope.

Team leaders need to be particularly observant of individual reactions during an emergency.

7. Symptoms of stress can be physical and psychological. There could be changes in ordinary behaviour patterns, such as changes in eating habits, decreased personal hygiene, withdrawal from others and prolonged silences. Symptoms of cumulative stress can be seen in every facet of our lives. The following non-exhaustive list gives an indication of some of the most observed symptoms:

Physical symptoms:

i. Gastro-intestinal
Dry mouth, impression of having ones heart in ones mouth, nausea, vomiting, sensation of bloating, heartburn, abdominal pain, appetite changes diarrhoea, constipation;

ii. Cardiovascular
Elevated blood pressure, rapid heart beat, hot flushes, cold hands and feet, sweating;

iii. Respiratory problems
Breathlessness, panting, sensation of not being able to breathe;

iv. Musculoskeletal
Cramps, back pain, trembling, nervous ticks, grimacing;

v. Neurological
Headache.

Psychological symptoms:

I. Emotional
Anxiety, anguish;

ii. Behavioural
Sleep problems, abuse of cigarettes alcohol or drugs, modification in ones libido;

iii. Intellectual
Concentration difficulties, memory difficulties, problems with reasoning and verbal expression.

8. The presence of several of these symptoms may mean that a person's coping ability is diminishing and work performance is being affected. However, the signs and the degree of stress presented by a person in any given situation will vary, depending on the level of stress experienced, previous emotional experiences and the personality of the individual.

9.

If the cyclic causes and resultant symptoms of cumulative stress are not promptly addressed, exhaustion sets in, leading eventually to "burnout". Should this happen one needs rest and counselling.

Traumatic Stress

10. Traumatic stress is brought on by unexpected and emotionally powerful events ("critical incidents") that overwhelm the individual's usual coping abilities. Critical incidents may arise in the context of a major disaster or emergency, and could be, for example, injury or death of a colleague, hostage taking, deaths of children, undergoing great personal risk, being a powerless witness of violence, or seeing or being associated with a tragic event accompanied by intense media coverage (especially if this is inaccurate).

11.

Staff might experience acute reactions during a critical incident or a delayed stress reaction minutes, hours or days after the event. In rarer cases reactions may come after a few months or years.

12. The reactions after a critical incident can resemble those of cumulative stress but they can be much more pronounced. Vomiting instead of nausea as an example. The following are mental survival mechanisms that allow us to deal with the event:

Emotional numbing, changes in the perception of time, along with a sense of ones live flashing before ones eyes, highly focused attention or tunnel vision, hyperarousal with sharpened senses.

These initial responses can be replaced in the period of time immediately after the incident by:

Hyperactivity, exaggerated humour, argumentativeness, social withdrawal, fear, anxiety, sadness, grief, memory problems, poor concentration, slow thinking and loss of perception in addition to the physical symptoms mentioned above.

13.

It should be emphasized that these symptoms are normal reactions to abnormal events and in most cases will disappear.

14. However, occasionally a serious condition termed Post Traumatic Stress Disorder (PTSD) can result from critical incidents. The risk of PTSD can be considerably reduced by preparation, on-site care, and post incident defusing or debriefing.

15. The diagnosis of PTSD is made by a psychiatrist or psychologist based on the presence of various elements which include:

i. Invasive memories (flashback);
ii. Nightmares and sleep disturbance;
iii. Repeated reliving of the event;
iv. Detachment;
v. Avoidance of trigger persons or situations;
vi. Hyperarousal;
vii. Anxiety, depression, grief, anger;
viii. Suicidal thought;
ix. Reactions intensifying over time;
x. Clear alteration of personality;
xi. Withdrawal from others;
xii. Continued rumination about event;
xiii. Constant expectations of a new disaster;
xiv. Persistent sleep difficulties;
xv. Total absence of reactions;
xvi. Phobia formation;
xvii. Reactions continuing for 3 to 4 weeks.

Techniques for dealing with Stress

Preventing and Minimizing Harmful Stress

16.

It is important to recognize that it is impossible to take care of others if you do not take care of yourself.

17. Being well prepared, both physically and psychologically, is an important way to reduce the chances of harmful stress. This

preparation not only includes understanding stress and how to handle it, but also educating oneself in advance on the living conditions, job, likely problems, local language and culture. It is important to be both physically and psychologically fit to work in a particular situation.

18. To prevent stress overload during an emergency, firstly, know your limitations. In addition, there are several practical steps to take:

i. Get enough sleep;

ii. Eat regularly;

iii. Control intake of alcohol, tobacco and medicines;

iv. Take time for rest and relaxation;

v. Take physical exercise. Physical exercise releases tension and helps maintain stamina and good health (any sort of exercise for at least 20 minutes per day). Beneficial exercise for stress reduction also includes deep breathing and muscle relaxation exercises;

vi. Give expression to the stress: Put words to the emotions you feel – find a colleague whom you trust to talk with;

vii. Keep a diary, it may not be as effective as talking, but it can help.

The expression of emotion has proved to be an effective technique in reducing stress.

19. Other ways of reducing stress are:

i. *Inward coping:* When a person performs difficult work in physically and emotionally threatening conditions, internal dialogue can add to the stress if it is highly negative and self-critical. To remain focused on the task, avoid unhelpful internal dialogue such as, "I'm no good at this. Everything I am doing is making things worse". Instead make positive helpful statements to talk oneself through difficult moments. For example, "I don't feel like dealing with this angry person right now, but I have done it before, so I can do it again";

ii. *Peer support:* Use the "buddy system": staff members may agree in advance to monitor each other's reactions to identify signs of excessive stress and fatigue levels;

iii. *Setting an example:* Supervisors in particular have an important role to play as they can provide an example in the way they handle their own personal stress, e.g. by eating properly, resting and taking appropriate time off duty. The team leader who tells a colleague, "Remind me to eat, and get me out of here the moment you notice any sign of fatigue. I'm no good when I'm tired", is setting a positive example for the staff;

iv. *Permission to go off duty:* In a crisis many staff members need to be given permission to take care of themselves. People do better in difficult situations when they feel that other people care about them. Team leaders are responsible for giving such specific permission to themselves and to their staff, for example, by giving permission to take the afternoon off, etc. The correct use by staff members of Mars and Vari can serve to alleviate stress.

Dealing with Critical Incidents (Traumatic Stress)

20. Stress defusings and debriefings are ways of protecting the health of staff after crises. The person or people who experienced the critical incident talk about the incident, focusing on the facts and their reactions to it. They should take place in a neutral environment, and never at the scene of the incident. They should be led by a trained professional. The information given below is intended to illustrate these processes and does not give sufficient detail to enable an unqualified person to perform either a debriefing or a defusing.

Defusing

21. Defusing is a process which allows those involved in a critical incident to describe what happened and to talk about their reactions directly after the event. A defusing should take place within a few hours of the event, its format is shorter than that of a debriefing. It consists of three steps:

i. Introduction
Introduction of everyone present, a description of the purpose of the defusing, and stimulation of motivation and participation;

ii. Exploration
Discussion of what happened during the incident;

iii. Information
Advice to the participants about potential reactions to the incident, guidance on stress management, practical information, questions and answers.

Confidentiality is important. It should be possible to express strong emotions, secure in the knowledge that this will stay within the group.

22. Angry feelings can be a normal reaction to an upsetting event and staff should be able to "let off steam". This is not the time for criticism of professional performance – this should be dealt with at a separate meeting.

Critical Incident Stress Debriefing (CISD)

23. In cases where staff have to deal with intense distress, defusings may be insufficient and need to be followed by a formal debriefing from a mental health professional. Debriefing is a process designed to lessen the impact of a critical incident. It occurs in an organized group meeting and is intended to allow those involved in a critical incident to discuss their thoughts and reactions in a safe, non-threatening environment. The team leader or a responsible member of the emergency team should request the Division of Resource Management at Headquarters to provide or help identify a mental health professional to conduct a debriefing. Sessions are normally held for groups of staff having undergone intense stress. They aim to integrate the experience, provide information on traumatic stress reactions, and prevent long-term consequences including Post Traumatic Stress Disorder, and help staff manage their own personal reactions to the incident.

24. If a debriefing or defusing is not offered spontaneously after a trauma is suffered, request one. Information on individual consultations for UNHCR staff members and workshops on stress related issues can be obtained from the Staff Welfare Unit, HQ Geneva.
Telephone: 00 41 22 7397858
Confidential Fax: 00 41 22 7397370

Key References

An Operations Manual for the Prevention of Traumatic Stress among Emergency Services and Disaster Workers, Jeffrey T. Mitchell and George Everly, Elliot City Maryland, 1995.

Coping with Stress in Crisis Situations, UNHCR, Geneva, 1992.

Humanitarian Action in Conflict Zones – Coping with Stress, ICRC, Geneva, 1994.

International Handbook of Traumatic Stress Symptoms Edited by John P. Wilson & Berverley Raphael, 1993.

Managing Stress, Terry Looker, Olga Gregson, London, 1997.

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Staff Safety

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Introduction

- The primary responsibility for the safety of staff members, their dependants and property and that of the organization, rests with the host government;
- Every effort should be made to facilitate the tasks of the government in the discharge of its responsibilities by making appropriate supporting arrangements and through regular liaison and exchange of information with the host country security officials;
- All of the recommendations below should be considered in addition to, and complementary with, actions taken by the host country security officials;
- Every office should have a security plan and a medical evacuation plan;
- The cardinal rule for landmines is that when in doubt, stay away. Inform the host country military. Any suspicious object should be treated as a landmine or booby trap.

The UN Security System

1. UN system-wide arrangements are described in detail in the UN Field Security Handbook (see references) and outlined here.

UN organizations have agreed to system-wide arrangements for the safety of UN staff and property in the field.

The UN Security Co-ordinator (UNSECOORD), based in New York, acts on behalf of the Secretary-General to ensure a coherent response by the UN to any security situation. UNSECOORD produces monthly publications on security conditions on a country by country basis. In addition, the Field Safety Section at Headquarters can provide country specific information and advice.

2.

The primary responsibility for the security and protection of staff members rests with the host government.

This responsibility arises from every government's inherent role of maintaining law and order within its jurisdiction.

3. UNHCR and other UN organizations may lend assistance, when possible and to the extent feasible, to protect other people such as staff of NGOs working in co-operation with them. UNHCR has no legal obligation towards others working with refugees.

4. In each country, a senior UN official called the Designated Official (DO) is the person in charge of the security management arrangements of the UN system. The DO is accountable to the Secretary-General through UNSECOORD for the safety of UN personnel.

5. The principle responsibilities of the DO include:

- ❏ Liaising with host government officials on security matters;
- ❏ Arranging a security plan for the area and including provision for relocation of National staff and evacuation of International staff;
- ❏ Informing the Secretary-General (through UNSECOORD) of all developments which may have a bearing on the safety of staff members;
- ❏ Carrying out relocation or evacuation where a breakdown in communication makes it impossible to receive the Secretary-General's prior approval;
- ❏ Forming a Security Management Team (SMT);
- ❏ Informing the senior official of each UN organization of all security measures.

6. The DO will form an SMT, the function of which will be to advise him or her on security matters. The SMT is normally composed of: the DO; field security officers; a medical officer; an internationally recruited staff member familiar with local conditions and languages; a staff member with a legal background and any agency staff who by training, background or experience will contribute to the team.

7. In large countries with regions separated from country headquarters in terms of distance and exposure to emergencies, a UN staff member may be designated as the Area Security Co-ordinator (ASC). The ASC acts on the DO's behalf and will normally have responsibilities for staff safety similar to those of the DO, but within that region of the country. UNHCR may be requested by the DO to undertake this role.

8. The ASC (or DO where there is no ASC for the region) will appoint security wardens who will have responsibility for security within particular predetermined zones. A separate warden system for nationally recruited and internationally recruited staff may be required. The warden system should include all humanitarian agencies.

9. The primary tool for security preparedness is the security plan, which is the key feature of the UN security system.

Essential Plans

10. In addition to the basic security plan, UNHCR offices must have a medical evacuation plan, and may have a movement control plan and routine radio checks.

The Security Plan

11. The security plan will be country specific and have five phases. The DO may implement measures under Phases One and Two at his or her own discretion, and notify the Secretary General accordingly. Phases Three to Five will normally be declared by the DO only with the prior authorization of the Secretary-General. However, if there is a breakdown in communications, DOs may use their best judgement with regard to the declaration of phases Three to Five, and report to the Secretary-General as soon as communications allow.

12. The UN security phases are:

Phase I: Precautionary
In this phase, clearance from the DO is required prior to travel.

Phase II: Restricted Movement
This phase imposes a high level of alert on the movements of UN staff members and their families. During this phase all staff members and their families will remain at home unless otherwise instructed.

Phase III: Relocation
This phase is declared by the Secretary General, on the advice of the DO. It includes concentration of all international staff members and their families, relocation of non-essential staff and families elsewhere in, or out, of the country. Deployment of new staff must be authorized by the Secretary General.

Phase IV: Programme Suspension
This phase is declared by the Secretary General, on the advice of the DO. It allows for relocation outside the country of all international staff not directly involved with the emergency, humanitarian relief operations, or security matters.

Phase V: Evacuation
This phase is declared by the Secretary General, on the advice of the DO. The evacuation of all international staff should be carried out according to plans prepared beforehand.

13. The person responsible for security at each location (DO, ASC) should draw up a security plan within the framework of the country security plan. This will need to be regularly updated. Each situation will be different and will require different levels and structuring of the plan. Guidelines for drawing up the plan are in the Field Security Handbook, and copied in the Checklist for the Emergency Administrator.

14. The following are typical headings in a security plan:

A. *Summary of the security situation at the duty station.*

B. *Officials responsible for security:* those in the local area, in Geneva and in New York, with their call signs, phone and fax numbers.

C. *List of internationally recruited staff members and dependants.* This will need to be updated constantly, and should include basic details such as full name, nationality, date of birth, passport and laisser-passer numbers with date and place of issue. A means of tracking visiting missions should be established. The UN Field Security Handbook contains annexes to record this information in a standard format; copies of these are also found in the UNHCR Checklist for the Emergency Administrator.

D. List and details of locally recruited staff and their dependants. This will need to be updated constantly.

E. *Division of area into zones.* Zones should be marked on a map with the numbers and residences of staff-members clearly marked. The map should indicate the warden responsible for each zone.

F. *Communications.* This should include details of phone numbers, call-signs and radio frequencies of all staff, including those of offices in neighbouring countries.

G. *Selection of co-ordination centre and concentration points.* The plan should indicate a number of co-ordination centres and concentration points, and should indicate the stocks and facilities which should be available at these points. It may not be possible for all staff-members to reach the same concentration point and alternatives should be foreseen.

H. *Safe haven and means for relocation and evacuation.* The plan should include in-

formation on all possible means of travel – by air, road, rail and ship as applicable. Normally only internationally recruited staff can be evacuated outside the country. Under the UN security system, the provisions for evacuation outside the country may be applied to locally-recruited staff members in only the most exceptional cases in which their security is endangered, or their property is lost or damaged as a direct consequence of their employment by UN organizations. Under the UN security system, a decision to evacuate locally recruited staff can only be made by the Secretary-General (based on recommendations by DO and UNSECOORD). However, during phases 3, 4 or 5, the DO may exceptionally either a) permit locally recruited staff to absent themselves from the duty station on special leave with pay or b) may relocate them to a safe area within the country and authorize payment of DSA for up to 30 days. Up to three months salary advance may be paid and a grant to cover transportation costs for the staff member and eligible family members. Arrangements to pay locally recruited staff these various amounts should be included in the plan.

I. *Essential supplies:* The plan should include estimates of the requirements for essential items of food, water, fuel etc. which will be needed by the community for a reasonable period of time. Individual items to be kept ready should also be listed. These include: passports, laissez-passers, vaccination certificates, travellers cheques and cash.

J. Plan for handing over the running of the office to the National Officer in charge.

Planning for evacuation

15.

The security plan should note who will take what actions at the UNHCR office in the event of evacuation.

These actions include how to deal with confidential documents and individual case files (including those on computer files), financial data, cash, radios, computers and vehicles.

16. Any paper files which need to be destroyed in the event of sudden evacuation of the office should have been marked in a manner agreed-upon and understood by all staff. Such files would include: individual case files, local staff personnel files, etc. If time permits, the shredding and/or burning of these files should be a top priority. Emptying sensitive files onto the floor and mixing their contents with others will afford some protection if there is no time to burn them. Staff should be sensitive to the security situation and bear in mind when creating paper or electronic documentation that it might have to be left behind.

17. It should be agreed in advance which electronic files (including electronic mail files) should be deleted first. In order to truly destroy confidential electronic records from a computer disk (regardless of whether it is a hard disk or a floppy disk), it is necessary to use special software designed for this purpose. Merely deleting the file(s) does not remove the information from the disk, it only marks the space which the file occupies on the disc as being available for re-use.

Medical Evacuation Plan

18. Every office should have a medical evacuation plan to cover evacuation from that office. The plan should include information about the nearest medical facilities inside and (if appropriate) outside the country, what types of service they provide and to what standard, means of transport to these facilities in case of evacuation, and types of evacuation scenarios (the Checklist for the Emergency Administrator includes a format for a Medevac Plan, as well as flow charts [1] for decision making for evacuation).

19. All heads of UNHCR country offices (i.e. representatives, chiefs of mission or, in their absence, the officer in charge) may authorize, without reference to Headquarters, medical evacuation of staff in the circumstances set out in detail in IOM/104/94FOM/107/94, New Medical Evacuation Scheme, and IOM/FOM 26/95, Medical Evacuation in Extreme Emergencies – SOS Assistance. These IOM/FOMs are included in the Checklist for the Emergency Administrator. Briefly, medical evacuation can be authorized:

i. For all international staff and consultants and eligible family members, in order to secure essential medical care which cannot be secured locally as a result of inadequate medical facilities (and which must be treated before the next leave outside the duty station);

ii. For local staff and eligible family members, in situations of great emergency when a

[1] *Contained in IOM/104/94 FOM107/94.*

life-threatening situation is present, or in cases of service-incurred illness or accident.

In addition, evacuation can be arranged in extreme emergencies through SOS Assistance (a private company which provides 24 hour world-wide emergency evacuation). However, this is very expensive and not covered by UN insurance. It can be used in life threatening situations, and where an evacuation by normal means cannot be organized in view of the gravity of the illness or injury. A password is needed before SOS Assistance takes action for UNHCR – heads of offices should ensure they obtain this password from the Division of Human Resource Management. The password should be known by the Head of Office and the Deputy Head of Office.

20. The medical evacuation plan should be written with close reference to the relevant IOM/FOMs, and the advice of the UNHCR programme health coordinator should be sought, as well as that of any medical NGOs. When an evacuation may be necessary, a UN Examining Physician should assist in decisions as to the degree of urgency and facilities required.

Movement Control Plan

21. A movement control plan should be prepared when there is a need to track the movement of vehicles, and should provide a means to determine the current location of the vehicles and passengers and whether they are overdue from a trip. The plan usually consists of a fixed schedule of radio calls to the vehicle from the base station (e.g. every 30 or 60 minutes) in order to report the current location of the vehicle to the base station. This information should be updated on a white-board following each radio-call. The driver of every vehicle should confirm safe arrival at the end of the trip.

Routine Radio Checks

22. Routine radio checks should be instituted when the current location and welfare of staff-members needs to be known. Radio calls from the base station can be made on a fixed schedule or randomly.

Security

23. Keys to effective security are:

i. First and foremost, personal awareness on the individual level;

ii. Appropriate behaviour to diminish the risk of security incidents;

iii. Appropriate response by the individual to security incidents.

Personal Security

24. For personal security, bear in mind the following:

- ❏ Be aware of and alert to your surroundings;
- ❏ Observe the behaviour of other people living in the area. Local people will probably know more about general security threats than you do;
- ❏ Don't travel alone;
- ❏ Don't carry large amounts of money;
- ❏ Don't travel after dark if it can be avoided. Most security incidents occur after dark;
- ❏ When leaving base, make sure someone knows where you are going and when you are expected back;
- ❏ Lock vehicle doors and keep the windows rolled up when travelling;
- ❏ Park vehicles to allow for fast exit;
- ❏ Don't take photographs around military personnel or military installations;
- ❏ Have cash, documents, and an emergency bag packed and ready to go at all times;
- ❏ Always be polite: be aware that your behaviour to local officials, police or military can rebound negatively on other staff.

Residential Security

25. Several steps can be taken to improve residential security:

- ❏ Make sure there are good solid doors. Never have glass doors on the exterior;
- ❏ Install a peep hole, a safety chain and a security bar;
- ❏ Keep the entrance door locked at all times, even when at home;
- ❏ Install bars and grills, at least on the ground floor;
- ❏ All windows should have locks;
- ❏ Draw curtains at night;
- ❏ Install outside lighting;
- ❏ Have emergency power sources, candles and torches;
- ❏ Keep a watchdog or other animals like goats, geese or peacocks;
- ❏ Install a telephone or walkie-talkie.

Depending on the circumstances and if authorized by UNSECOORD from the UN system, UNHCR can cover the costs of some of the improvements listed.

Base Security

26. Base security should be improved by:

❏ Hiring guards:

❏ The host country authorities sometimes provide guards. Guards hired by UNHCR are not permitted to carry lethal weapons while on duty. Guards should be trained and briefed, and should wear a uniform or some identifying garment;

❏ Ensuring there are lights:

❏ Lights should be powerful and should light up an area outside the perimeter fence, providing a barrier of illumination in which intruders can be detected.

❏ Installing fences and controlling access:
Double fences with razor wires form an effective barrier. There should be more than one entrance/exit. Sensitive locations (for example, the accommodation area, communications room, generators and fuel store) may need to be surrounded by a barrier of sandbags. Procedures to control access to the compound need to be established. The fenced compound should be self-contained and equipment (e.g. spare tires, jacks, fire extinguisher, first aid kits, generators, water pumps), should be checked and maintained on a routine basis.

Field Security

27. Several steps should be taken by relevant staff and heads of office to improve field security:

❏ Develop a movement control plan (see above);

❏ When planning to travel, check the latest security situation with the DO, others who have been there, host country officials other UN agencies, NGOs, traders;

❏ Get all required authorizations, from the DO and host country authorities;

❏ Ensure that all staff know what to do in case of accident or breakdown – simple procedures should be established;

❏ Ensure that vehicles are properly equipped with extra food and water, sleeping bags, mosquito nets, tents, water filters, fuel, tow rope, jumper cables, spare tire, tire jack, flashlight, batteries, first aid kit, travel documents, radio, vehicle insurance papers, shovel and maps;

❏ Ensure that vehicles are in good mechanical condition and are checked regularly. Certain items, such as brakes, tire wear, fluid levels, lights, installed radios, should always be checked prior to every field trip;

❏ Ensure that all staff know what to do at checkpoints – establish procedures for staff to follow. It is against UN policy to allow anyone carrying arms in UN vehicles.

Cash Security

28. Ideally staff members should not carry large sums of money in cash. If there is a functioning banking system in the area, then this should be used to the maximum extent possible.

29. If it is necessary to transport cash then arrangements should be made with the host country authorities for protection of the funds. Cash in large amounts should be kept on hand for the shortest possible time, and should either be deposited in a bank or be disbursed quickly to pay salaries or meet other legitimate expenditure. Advance payments could be considered to reduce amounts of cash being stored (provided financial rules are adhered to).

30. Measures which can contribute to security while transporting cash include making use of:

i. Professional couriers;

ii. Armoured vehicles;

iii. Armed guards;

iv. Deception. There should be no regularity in the arrangements: The timing, route, and other details should change every time;

v. Discretion.
The number of people knowing about the movement of cash, the identity of persons carrying cash, their routes and timetables, should be kept to the barest minimum necessary.

Crowd Control and Security

31. If crowds cannot be avoided:

❏ Ensure that clear information is provided to the crowd, so that they know what is going on and what to expect;

❏ Work with representatives of the people to organize the crowd into small groups and get them to sit down;

❏ Do not engage in unruly group discussions;

❏ When discussing grievances, meet with a small number of representatives of the crowd, never with the mass meeting;

❏ Provide sanitary facilities, water, shade and shelter;

❏ For crowd control, use monitors from among the people themselves;

❏ If confronted by a crowd when in a vehicle, do not get out. Check that the doors are locked and drive away carefully;

❏ Maintain poise and dignity if confronted by a hostile crowd, do not show anger.

Mine Awareness

32. In countries with high risk of mines, all offices should ensure there is appropriate training and reference materials (see references) – the information contained here is not sufficient, but provides only broad guidance.

33. It is extremely difficult to spot a mined area, so the first priority is to ensure you have up to date information about possible mined areas from local residents and de-mining organizations. Travel with a map marked with this information and update it by checking with local residents.

34. Be aware of the following:

❏ Signs: learn which signs indicate known mined areas (whether local signs, UN or other signs);

❏ No-go areas: avoid areas which are avoided by the local population;

❏ Visible mines or indicators: some mines are visible. There may also be evidence of mine packaging;

❏ Disruption in the local environment: for example disturbed soil if recently laid, and depressions in the ground in an old mine field;

❏ Trip wires;

❏ Mine damage (e.g. dead animals) which could indicate the presence of other mines.

35. When driving, the following precautions should be taken:

❏ Wherever possible stay on hard surfaced roads.

❏ Always follow in the fresh tracks of another vehicle, at least 50 m behind the vehicle in front.

❏ Flak jackets can be used as a seat cushion and as a foot protection.

❏ Wear the seat-belts, and keep windows rolled down and doors unlocked.

36. If you encounter a mine:

❏ Keep away, do not touch it;

❏ Do not try to detonate it by throwing stones at it;

❏ Stop the vehicle immediately;

❏ Stay in the vehicle, even if it is damaged and call for assistance.

37. If you have to leave the vehicle:

❏ Notify your location by radio;

❏ Do not move the steering wheel;

❏ Put on any protective gear available;

❏ Climb over the seats and leave the vehicle by the rear, walk back along the vehicle tracks. Never walk around the vehicle;

❏ Leave at least a 20 m gap between people;

❏ Close the road to other traffic.

38. When travelling on foot:

❏ Never walk through overgrown areas: stick to well used paths.

39. If there is a mine incident:

❏ Do not immediately run to the casualty. Stop and assess the situation first. There may be other antipersonnel mines in the vicinity, and administering first aid to one victim could result in another victim;

❏ Only one person should go to the casualty, walking in his exact footprints, to apply first aid;

❏ Do not attempt to move the casualty unless absolutely necessary, call for mine-clearing and medical assistance.

40. Within the UN system, mine clearance and related issues are primarily the responsibility of DPKO. Chapter 19 on voluntary repatriation contains some information about programme aspects of mines.

Protection Equipment:

41. Typical equipment that has been used by UNHCR includes:

i. Bullet proof vests for protection against most bullets;

ii. Flak jackets for protection against shrapnel;

iii. Helmets for protection against shrapnel;

iv. Ballistic blankets fitted in vehicles, for protection against hand grenades and anti-personnel mines;

v. Armoured cars;

vi. Shatter resistant windows;

vii. Military combat rations for concentration points;

viii. Metal detectors for body searches.

42. These items can be ordered through the Supply and Transport Section in co-ordination with the relevant Bureau and Field Safety Section.

Security Management

43. Heads of offices, whether at field or branch level should take action to ensure the security and safety of staff members. In addition to the responsibilities implicit in the above sections, appropriate security management measures also include:

- ❏ Ensuring both you and your staff have access to relevant, accurate and up-to-date information;
- ❏ Providing systematic briefings with all staff on the security situation and on the security plan itself. Bear in mind that some staff, particularly national staff, may provide valuable input into these briefings because of their local knowledge;
- ❏ Encouraging staff awareness: a key to effective security is personal awareness and good individual response to security situations;
- ❏ Providing training to all staff on hazards specific to the duty station;
- ❏ Ensuring the availability of materials on staff stress management and security in the duty station (see key references);
- ❏ Reporting security related incidents to Headquarters (Field Safety Section);
- ❏ Ensuring there is good communication with other organizations and NGOs about the security situation;
- ❏ Ensuring the office has a medical evacuation plan. In addition, the country representative should ensure he or she (and their deputy) has the SOS Assistance password in the case of extreme medical emergency.

Key References

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23 Staff Safety

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Working with the Military

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Introduction

- In humanitarian emergencies UNHCR staff will sometimes work alongside military forces: these might be UN forces ("blue berets"), national or regional forces acting under mandate from the UN, or other national or regional forces;
- Humanitarian agencies must be, and be seen to be, neutral and impartial acting solely on the basis of need. It is important that these agencies maintain independence even from UN authorized military activities;
- Each operation will need to develop a coordinating structure suited to the situation, the type of forces and the required civil-military relationship;
- The UN Department of Peace-keeping Operations (DPKO) is responsible for all UN peacekeeping operations and has overall responsibility for UN relations with military forces.

1. Working with military forces can bring both opportunities and challenges for humanitarian agencies.

2. Military forces can support humanitarian agencies only within the limitations of their own resources and priorities, and within the limitations of their authority to provide humanitarian assistance, including how and to whom the assistance is provided.

Legal Framework for International Military Action

3. One of the purposes of the United Nations, as set out in its Charter, is to maintain international peace and security. The Charter invests the Security Council with this specific responsibility, and describes the measures which can be taken to achieve this in Chapters VI and VII of the UN Charter.

4. Chapter VI, dealing with the peaceful settlement of disputes, mandates both the Security Council and the General Assembly to make recommendations upon which the parties in dispute can act. Peacekeeping operations under Chapter VI take place, at least in theory, with the consent of the parties to the conflict.

5. Chapter VII, dealing with mandatory measures, allows for enforced solutions to a dispute where the Security Council has identified "a threat to the peace, a breach of the peace or an act of aggression". Article 42 provides for the use of armed force "as may be necessary to maintain or restore international peace and security".

Categories of Military Forces

6. The military forces with which UNHCR may be involved or encounter include:

i. UN forces (peacekeeping);

ii. Regional or other forces acting under UN authority;

iii. Regional military alliances (e.g. NATO and ECOMOG), ad hoc coalitions,

iv. National forces;

v. Non-state forces.

UN Forces

UN Peacekeeping Forces

7. UN forces ("blue berets") usually fall into the categories of observer missions or peacekeeping forces. These UN forces are assembled from countries willing to contribute and who are acceptable to all the parties to the conflict.

8. Observer Missions are made up mainly of lightly armed officers whose main function is to interpret the military situation to assist political and diplomatic mediation.

9. Peacekeeping forces usually contain combat units with logistics support. In the past, peacekeeping activities have included:

i. Positioning troops between hostile parties, thereby creating buffer or demilitarized zones and the opportunity to act as a liaison between the parties to the conflict;

ii. Promoting the implementation of ceasefires and peace accords by observing and reporting on military activity, assisting in the disengagement, disarmament and demobilization of forces and prisoner exchanges;

iii. Assisting local administrations to maintain law and order, facilitating free and fair elections by providing security;

iv. Protecting humanitarian relief operations by securing warehouses and delivery sites and routes, escorting humanitarian aid convoys, ensuring security for humanitarian aid workers, and providing logistics support;

v. Supporting humanitarian operations by undertaking engineering tasks for the maintenance of essential utilities, services and aid delivery routes in a time of crisis, disposing

of mines and other weapons, delivering humanitarian relief supplies or providing logistics assistance to humanitarian agencies.

UN Mandated or Authorized Forces

10. Under Chapter VII of the UN Charter the Security Council may authorize or mandate the deployment of national or regional forces with a "war-fighting" capability. These forces normally will have tighter security rules than UN peace keeping Forces and Observer Missions, and UNHCR staff may find access to facilities or information more difficult. Mandated forces often do not report to a civilian chief inside the area of operations, and may therefore see themselves as acting independently of the international authority directing the civil and humanitarian programmes.

Regional Forces

11. UNHCR may also work alongside regional forces such as peacekeeping or intervention forces set up under the direction of regional institutions (for example, the Organization for African Unity, (OAU) or NATO.

National Forces

12. Humanitarian agencies may have to coordinate or negotiate with host country military, police, gendarmerie, militia or other armed elements. UNHCR staff should balance the advantages and disadvantages of accepting assistance or security from such forces, particularly in circumstances where there is no clear command structure.

Non-state Forces

13. These often consist of rebel groups, militia and other armed groups which have little or no sense of discipline, a poorly defined chain of command and often no discernible political programme.

Possible Roles of Military Forces in Humanitarian Operations

Delivering Humanitarian Assistance

14. In exceptionally large emergencies and as a last resort, military assets could be used to deliver humanitarian assistance, for example in the form of an airlift.

15. UNHCR has entered into an understanding with a number of governments that those governments will provide pre-packaged, stand-alone emergency assistance modules, called Government Service Packages (GSP). There are twenty different types of packages providing assistance in certain technical or logistical areas such as long range airlift, road transport, water supply and treatment, sanitation and road construction. GSPs are not designed to be substitutes for traditional implementing arrangements in these areas, but are to be used only as a last resort in exceptionally large emergencies, where every other avenue has been exhausted.

16. Due to their extraordinary scale and cost it is assumed that GSPs, if called upon, will represent additional funding and will not be deployed at the expense of funds that would otherwise have been available to UNHCR. The Military and Civil Defence Unit also has arrangements with governments to use these pre-packaged emergency resources, as well as packages covering other areas. Within UNHCR, the responsibility for the development and deployment of GSPs rests with the Director of the Division of Operations Support. Further information can be found in the Catalogue of Emergency Response Resources (see Appedix 1).

17. When these assets are deployed the operation must maintain its civilian character and appearance. The guiding principles of impartiality, neutrality and independence from political considerations must be carefully adhered to.

Information Support

18. Military forces usually have a greater capacity to collect information than humanitarian agencies. This includes aerial reconnaissance information which may be of value in tracking the movement of refugees and in site selection. Care must be taken, however, in the interpretation and use of such material: the information it provides needs to be carefully weighed against information available from other sources, in particular first hand information form UNHCR staff on the ground.

Security of Humanitarian Operations

19. The Geneva Conventions of 1949 (see Annex 1 to chapter 2 on protection) oblige the parties in conflict to grant access for humanitarian aid, but does not provide for its forcible imposition should access be denied. Parties to a conflict may be unable or unwilling to control threats to the safety of humanitarian personnel and operations. Peacekeeping mandates may therefore include specific duties relating to the security of humanitarian

personnel, including creating the conditions in which humanitarian operations can be carried out in safety.

20. However, using force to protect humanitarian assistance may compromise the foundation of those activities, since the actual use of force, by its nature, will not be neutral. Before using peacekeeping or other forces to protect humanitarian activities, the priority should always be to negotiate with all the parties to the conflict to try to ensure humanitarian access. The use of military force to secure the provision of humanitarian assistance should never become a substitute for finding political solutions to root causes of the conflict.

21. Where it is necessary to use peacekeeping forces for the security of humanitarian operations, it is particularly important to maintain a neutral stance and to ensure that this impartiality and neutrality is apparent to all parties.

Evacuation

22. Any plan for evacuation of humanitarian workers should be coordinated with any military forces present (see Chapter 23 on Staff Safety).

Coordination Between Military Forces and Civilian Agencies

UN Coordination

23. The Department of Peace-keeping Operations (DPKO) is responsible for UN peacekeeping. This includes the deployment of its military and civilian personnel to a conflict area (with the consent of the parties to the conflict) in order to stop or contain hostilities, and supervise the carrying out of peace agreements. DPKO therefore has overall responsibility for the UN's relations with military forces.

24. Where a UN force is deployed, there will usually be a Special Representative of the Secretary-General with overall responsibility for all related UN operations, including humanitarian operations.

25. There is a Military and Civil Defence Unit (MCDU) within the UN Office for the Coordination of Humanitarian Affairs (OCHA). The task of the MCDU (based in Geneva) is to help ensure the most effective use of military and civil defence assets in support of all types of humanitarian operations, including refugee emergencies, where their use is appropriate. Among UN humanitarian organizations, the MCDU is the focal point for governments, regional organizations and military and civil defence organizations concerning the use of these assets.

Establishing Principles and Reconciling Mandates

26. Misunderstandings between military forces and civilian agencies can be avoided if, at an early stage, time is spent on clarifying:

- ❏ The objectives and strategies of the operation as a whole, and of each of its civilian and military components;
- ❏ The basic principles, legal constraints, and mandates (local or global) under which each organization or force operates;
- ❏ The activities, services, and support which the organizations or forces can expect from each other, as well as any limitations on their ability to deliver;
- ❏ Which aspects of the operation will be led by the civilian agencies and which by the military forces, and when there should be consultation before decisions are made;
- ❏ The fora in which the humanitarian agencies make decisions about their operations (e.g. the coordinating body described in chapter 7, on coordination).

Liaison Channels

27. Proper communication channels need to be developed between civilian and military organizations in order to deal with the differences in organizational priorities, structure and size. The risk of civilian agency staff being overwhelmed by multiple approaches from the military can be avoided by providing a single point of contact for the military through the designation of one UNHCR staff member as a liaison officer where the size of the operation justifies this. The military forces may have specialist civil affairs units. These units will often be made up of reservists with particular civilian skills or military specialists and act as the main point of contact between the humanitarian and military organizations. Within the military, the hierarchy is as follows: General, Colonel, Lieutenant Colonel, Major, Captain, Lieutenant, Warrant Officer, Sergeant, Corporal, and Private.

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Catalogue of Emergency Response Resources

Human resources
Staff support
Operations support items
Operations support services
Financial resources
Emergency training

United Nations High Commissioner for Refugees
March 1998 – Rev. 6

Note: This catalogue is updated regularly, please consult the latest edition

Introduction

The purpose of this catalogue is to provide information on the range of available emergency response resources and the means by which they can be requested. The need for such resources emanated from a strategy to enhance UNHCR's capacity to respond to emergencies which was instituted at the end of 1991. Many Sections in UNHCR have a key role in maintaining and developing these resources, which have already been extensively used in emergency situations. The need to introduce additional emergency response resources or adapt existing ones is constantly under review. The Catalogue is, therefore, updated on a regular basis so as to incorporate amendments and additional resources.

It should be emphasized that the resources listed in this catalogue are intended for emergency response only. Given the need to ensure a minimum capacity and maintain a high level of readiness it is not usually possible to use them for ongoing operations for which response to needs should be planned.

The Emergency Preparedness and Response Section, UNHCR, welcomes feedback on the effectiveness of the resources as well as suggestions for additions.

EPRS

March 1998

While this catalogue may be of interest for information purposes to persons and agencies external to UNHCR, it is intended for use by UNHCR staff for emergency response.

The catalogue may be obtained by direct request to:

Emergency Preparedness and Response Section, UNHCR Headquarters (EM00), P.O. Box 2500, CH-1211 Geneva Depot 2, Switzerland, Fax: (++41-22) 739 7301, E-mail: hqem00@unhcr.org

human resources

Emergency Preparedness and Response Officers (EPRO)
Senior Emergency Administrator (SEA)
Emergency Finance and Administrative Assistants (EFAA)
Emergency Response Team Roster
Field Staff Safety Section (FSS)
Norwegian and Danish Refugee Council Emergency Staff
United Nations Volunteers
Arrangement with Specialist Agency – Red R (Australia)
Arrangement with Specialist Agency – Radda Barnen (Sweden)
Arrangement with Specialist Agency – SRSA (Sweden)
Arrangement with Specialist Agency – CDC (USA)
Technical Consultants

staff support

Staff and Office Accommodation
Personal Travel Kits
Field Kits
Office Kits
Emergency Kit for Unaccompanied Children
Computer Equipment
Vehicles
Telecommunications Equipment
Visibility Material
Emergency Operations Room

operations support items

Tents
Emergency Health Kit
Blankets
Kitchen Sets
Jerry Cans
Plastic Sheeting
Prefabricated Warehouses

operations support services

Government Service Packages
Emergency Capacities of Non Governmental Organizations (database)
Standby Arrangement for Trucks and Aircraft (EMERCOM of Russia)

operations management tools

Contingency Planning: a practical guide for field staff
Refugee Registration Package
Handbook for Emergencies
Checklist for the Emergency Administrator
Commodity Distribution

financial resources

UNHCR Emergency Fund
UNOCHA Central Emergency Revolving Fund (CERF)
Distance Learning Modules
Emergency Management Training Programme (EMTP)
Workshop on Emergency Management (WEM/ERT)
Targeted Training

Emergency Preparedness and Response Officers (EPRO)

The Emergency Preparedness and Response Section (EPRS) is staffed with five Emergency Preparedness and Response Officers who are on standby for emergency response. In the event of an emergency where the UNHCR Branch Office lacks adequate resources to respond or where UNHCR has no prior presence, the EPRO can be deployed at very short notice to lead an emergency team or existing staff in the establishment and/or strengthening of UNHCR's presence. An EPRO may also be deployed to lead a needs assessment mission which will make recommendations relating to the deployment of other emergency resources.

The EPRO reports directly to the UNHCR Representative or, where there is no existing office, to the Regional Bureau at Headquarters. Prior to each deployment, the EPRO's terms of reference will be established by the Bureau. The duration of deployment will depend on the nature of the operation, but should be limited to the critical emergency phase during which the basic structures and direction of the operation will be put in place. In general this period is not expected to exceed two months. An EPRO cannot be deployed to fill management or staffing gaps in existing operations.

In addition to operational deployment, EPROs are responsible for emergency preparedness activities, including:
- monitoring regional developments
- assisting in the contingency planning process
- developing management tools to enhance effective emergency response
- participating in the review of procedures to improve emergency response
- identifying emergency training needs on the basis of deployment experiences
- serving as resource persons for emergency management trainings.

To ensure adequate regional coverage in preparedness activities, each EPRO is assigned responsibility for a specific geographical area. However, where operational deployment is concerned, maximum flexibility will be maintained.

How to request

The deployment of an EPRO is normally accompanied by the deployment of other emergency resources in order to mount an effective response to an emergency situation. Should a comprehensive response package be required, a request from the Director of the Bureau should be addressed to the Director of DOS.

After clearance at the Director level, the Head of Desk should advise the Chief of EPRS (preferably in writing) the destination, proposed duration, terms of reference, language requirements as well as any other specific skills required for the assignment. EPROs may in principle be deployed with 72 hours notice. Should an EPRO not be available, an experienced ERT member (see section IV) may be deployed instead.

The mission costs of the EPRO will be charged to the respective country programme.

Senior Emergency Administrator (SEA)

One Senior Emergency Administrator (SEA) is based in EPRS on a standby capacity. This staff member has experience and training in all aspects of administration (human resources, finance and general administration), as well as proven managerial skills and experience. When not deployed on emergencies SEAs may be assigned to non-emergency situations where the need for skilled administrative capacity is deemed by the concerned technical/functional section in Headquarters (e.g. DFIS, PCS, SSS etc.) to be critical. In such cases deployment will range from short assessment and advisory missions to assignments lasting a maximum of three months.

A brief description of possible functions follows:
- identify and administer office premises
- establish and improve office procedures
- plan staffing needs, recruit and administer staff
- oversee finance and banking procedures
- ensure proper procedures for communications
- oversee transport arrangements
- oversee security plans
- ensure adequate staff support and staff training
- supervise phase out of emergency team and hand-over.

The SEA will supervise administrative staff, both international and local, and relieve the operations manager of administrative concerns. It should be noted that this is a senior management position and deployment will be to major emergency complex operations. Alternatively the SEA may be called upon to cover numerous field offices on a "roving" basis.

Emergency Finance and Administrative Assistants (EFAA)

Two Emergency Finance and Administrative Assistants (EFAAs) are based in EPRS on a standby capacity. These staff members have experience and training in all practical aspects of administration (human resources, finance and general administration). Particular attention has been paid to thorough financial and accounting skills. During an emergency deployment, the EFAA's main objective is to set up proper administrative procedures and also to train locally recruited staff in UNHCR practices and procedures so that they may work independently upon the departure of the Emergency Response Team. When not deployed in emergencies EFAAs may be assigned to non-emergency situations where the need for skilled administrative capacity is deemed by the concerned technical/functional section in Headquarters (e.g. DFIS, PCS, SSS etc.) to be critical. EFAAs have also been trained as Programme Assistants and can act in this capacity in an Emergency Response Team. Assignment lengths for all deployments will be up to three months.

A brief description of possible functions follows:
- identify banking facilities and make banking arrangements
- establish field office accounts; prepare and monitor administrative budgets
- establish control measures (vehicle & telephone logs, inventories, travel authorizations etc.) for all expenditure
- handle all personnel programme management and administration matters
- recruit and/or train local staff in finance and personnel administration

The EFAA may be assigned as part of an emergency response team, reporting either to an EPRO, SEA, BO Administrative Officer or Head of Sub Office. The EFAA may supervise local administrative staff.

How to request

A written request from the Head of Desk, cleared with the Bureau Director, should be addressed to the Chief of EPRS, stating the destination, proposed duration, terms of reference, language requirements and any other specific skills required for the assignment. Deployment decisions will be made in consultation with the concerned technical sections. An SEA or EFAAs may in principle be deployed within 72-hours notice.

Requests for deployment in non emergency situations may be entertained as long as the assignment is not simply to fill a management gap. It should be understood, however, that these assignments are time-limited, and require clear terms of reference. An SEA or EFAAs may also be withdrawn in case of an emergency. The mission costs of an SEA or EFAAs will be charged to the respective country programme.

Emergency Response Team (ERT) Roster

The Emergency Response Team (ERT) Roster comprises a pool of some 30 internal staff members, drawn from various duty-stations and sections in Headquarters, who are on standby for emergency deployment. While ERT Roster members may be proficient in specific functional areas of UNHCR operations (protection, programme etc.) they are expected to function with as much versatility and flexibility as possible in order to cope with the demands of emergency situations. The roster is reviewed twice a year (January and July) with new rosters commencing at the beginning of April and October. The inclusion of staff members on the ERT Roster is cleared in advance with supervisors. Staff not deployed during one six month period may, with the agreement of the staff member and their supervisor, be included in the following roster. At the beginning of their term on the roster, staff members attend the Workshop on Emergency Management (WEM/ERT) [see section on Emergency Training] where they are prepared for deployment as members of an ERT.

Members of the ERT Roster can only be deployed to meet the critical needs of an emergency or a repatriation operation when existing resources are unable to cope or where UNHCR has no prior presence. While ERT Roster members are normally deployed with an EPRO, they may exceptionally be deployed to complement existing staff or to act as Team Leader depending on the nature of the emergency and on EPRS' resources at a given time. ERT Roster members are on standby for emergency deployment for a fixed period of six months during which they may be deployed for a maximum of two months. No extension of an ERT Roster member's deployment can be envisaged, as this could have adverse repercussions on the releasing office.

UNHCR staff who wish to be considered for inclusion on the ERT Roster should write to the Chief of EPRS through the Head of their Section/Branch/Field Office. Such communications should be copied to the Bureau Administrative Officer. Lastly, staff members already deployed in emergency duty stations are usually not considered for inclusion in the ERT.

How to request

Once emergency response has been approved at the Director level the overall staffing needs for the specific situation should be discussed between the Desk, DRM and EPRS, on the basis of which, the source of these staff will be determined. If ERT Roster members are required, EPRS will activate their deployment. As with all staff resources, clear terms of reference, duty station, anticipated duration of assignment and special skill requirements need to be specified from the outset by the Desk. Furthermore, it is important for the Desk, EPRS and DRM to work out a plan for the withdrawal of the ERT Roster members from the emergency deployment, and frequent joint meetings until the replacement arrangements are firm.

The mission costs of ERT Roster members will be charged to the respective country programme.

Field Staff Safety Section (FSS)

The Field Staff Safety Section comprises three Field Staff Safety Advisors (FSSAs) who are based in Geneva. Although the main occupation of those based in Geneva is the carrying out of regular security assessment missions, they also provide support to the field on request. They are also engaged in the formulation of policy, the training of UNHCR deployed staff members, and recruitment/deployment of FSSAs to hazardous areas around the world.

FSS can be requested to provide security assessments and to temporarily deploy FSSAs on missions to emergencies. An FSSA may be available to be deployed either from Geneva, or a temporary redeployment from another duty station, depending on the security situation in the various regions at the time of the request.

FSSAs can be requested to provide assessments on physical security of residences and offices, prepare and provide comments on various security plans (communications, movement control, evacuation, medevac, etc.), establish liaison with host country security authorities for the safety of staff members, provide security training for staff members, etc. Depending on the desires of the Head of Office, these services can also be made available to other UN organizations and NGO partners.

How to request

A written request should be addressed to the Head of Desk and copied to FSS, stating destination and proposed duration of mission, language requirements and other specific skills required.

The mission costs normally will be charged to the respective country programme.

Norwegian and Danish Refugee Council Emergency Staff

To complement internal staff resources for emergencies, a standby arrangement has been established with the Danish and Norwegian Refugee Councils. Under this arrangement, Nordic staff who have been pre-identified, screened and trained can be deployed within 72-hours notice to UNHCR operations anywhere in the world. Nordic staff are issued UN certificates and participate in operations as UNHCR staff members. Although, in principle, this arrangement can provide for any profiles normally needed in a UNHCR operation, it has been found to be particularly effective in the deployment of telecommunication experts, base camp managers, logistics and field officers. With prior training, Nordic staff have also been found to be effective protection officers.

As an emergency resource, Nordic staff can only be deployed a maximum of six months. Since the secondees are normally on leave of absence from their normal jobs, it is important that no extension beyond this period be requested. It must be emphasized that, although the maintenance of the standby roster is provided free of charge to UNHCR, all costs related to the deployment of staff will be charged to the relevant programme. Nordic staff will only be deployed if it has been established that urgent staffing requirements cannot be met from internal sources.

How to request

A request form (available from EPRS) for DRC/NRC deployment should be completed by the requesting Desk and submitted to EPRS describing briefly:

- the emergency situation;
- details of staff requirements (number of staff required, functional title(s), duty station, date of deployment, duration, language, if briefing in Geneva is necessary, supervision arrangements in the field);
- information on living conditions at the duty station.

EPRS will act as contact with the Councils and liaison with the Desk (specifically on operational requirements, budget submission, preparation of letter of mutual intent and sub-agreements) from the requesting period up to repatriation travel of the secondees. The terms and conditions of deployment are governed by the Agreement between UNHCR and DRC/NRC. The Desk and Field should avoid subsequent independent negotiations with the DRC/NRC staff. Checklists providing more detail of the procedures to be followed are available upon request from EPRS.

United Nations Volunteers (UNV)

A similar arrangement as that with the Nordic Councils has also been established with UNV/HRLO (Humanitarian Relief and Liaison Office). The parameters defining UNV deployment are stipulated in the Exchange of Letters signed between UNHCR and UNV in November 1992. Under this arrangement, UNVs can be deployed to UNHCR emergency operations within one week, instead of in several months as under normal UNV procedures. UNV recruitment is done with the participation of UNHCR representatives/or designated officers in the field. This complements the Nordic arrangement in that it offers a wider mix of nationalities as well as more language capabilities.

UNVs are deployed on a short term basis instead of the traditional two-year UNV assignment. Thus they can be deployed to meet urgent emergency staffing needs for a three to twelve month period. Where a longer period is foreseen (for example 6-12 months), it is desirable to request this from the outset-instead of a shorter period with extensions – since this allows for better planning. From experience, UNVs are needed in emergencies for a minimum of three to six months. If necessary they can also be called upon to meet staffing gaps in the transition from an emergency team to the assignment of long-term staff. UNVs deployed under this arrangement can only be considered for staff recruitment by UNHCR after they have served a minimum of twelve months as UNVs. The costs of these deployments will be charged to the relevant programme.

How to request

For emergency deployment, EPRS will liaise with the Humanitarian Relief Liaison Office of UNV in Geneva, to ensure that UNVs are identified, selected and deployed according to the requirements of the emergency operation.

The Desk will be required to complete a UNV Post Description form (available from EPRS) indicating project information, post description and conditions, and living conditions at the duty station. This is submitted with a covering letter, from the Desk directly to the Chief of UNV/HRLO, with a copy to EPRS specifying availability of funds and indicating the project to be charged. A checklist providing detailed procedures of UNV deployment is available from EPRS.

Arrangement with Specialist Agency — Red R (Australia)

A Memorandum of Understanding has been concluded with Registered Engineers for Disaster Relief (Red R) Australia, through which Red R (Australia) will provide, on short notice, qualified and experienced engineers to join emergency response teams or be assigned separately to emergencies for periods up to three months. Red R maintains a roster of experts in physical planning, water, sanitation and road construction. The costs of maintaining the roster as well as for the deployment of 20 engineers for three months each year are provided through a grant from the Government of Australia. All engineers on the roster undertake training through distance learning and attend short group sessions to prepare them for UNHCR emergency deployments.

How to request

Once it has been agreed that engineering specialists are required in an emergency operation, a request should be submitted to the Head of Desk and EESS, with a copy to EPRS. EESS is the focal point for contacts between Red R (Australia) and UNHCR and will inform Red R of the Terms of Reference as well as all other details relating to the mission.

Arrangement with Specialist Agency — Radda Barnen (Sweden)

A Memorandum of Understanding has been signed with Radda Barnen Sweden which permits the deployment of trained social workers to refugee emergency situations with 72 hours notice in order to take part in UNHCR needs assessment missions and in the initial establishment of community-based social services. The terms of reference of the community services co-ordinators would have a three-phased approach:

1) assessment, action plan and guidelines;
2) foundation of community services structures;
3) building up of community services.

Radda Barnen will maintain a roster of 20 experienced and trained people, six of whom may be made available at any time. Radda Barnen staff will be seconded to UNHCR for a period that will not normally exceed three months.

Staff seconded by Radda Barnen are deployed as members of the UNHCR team and report to the UNHCR designated officer in charge of the operation. Radda Barnen staff are funded by Radda Barnen and compensated in accordance with its personnel regulations.

How to request

Once it has been agreed that the inclusion of community services should be considered as part of the emergency response, a request for Radda Barnen deployment should be completed by the Head of Desk, and addressed to the Chief of EESS, with a copy to EPRS, describing the emergency situation, details of staff requirements, proposed duration, date of deployment, language requirements, if briefing in Geneva is necessary, supervision arrangements in the field and information on living conditions at the duty station.

Swedish Rescue Services Agency

In the most extreme field conditions, where an operation has to be established in an environment where almost all infrastructural support would need to be brought in from the outside, the Swedish Rescue Services Agency (SRSA) is on standby for deployment to provide a comprehensive range of staff support. SRSA can be deployed, with 72-hours notice, with equipment and a team of staff to establish office and housing facilities, sanitation, water, electricity, telecommunications, transport and nursing services, for UNHCR staff. On the basis of deployment experience, SRSA has repackaged its staff support services in order to be able to meet needs under different climatic conditions, as well as when only a part of its services are required.

It has been agreed that the involvement of the SRSA should be limited to a period of four to six weeks, which should provide UNHCR sufficient time to establish longer-term support facilities. Should it be necessary, a base-camp manager can be deployed to maintain the facilities established by the SRSA until such time as local arrangements can be found for the longer term. The decision to deploy the SRSA support team should only be made after a field assessment which might include a SRSA representative. While this standby facility has been provided to UNHCR free of charge, the actual cost of deployment will be charged to the relevant programme.

Where the UNHCR Staff and Office Accommodation package is used, the SRSA is able to provide a base camp manager familiar with the package to manage the facility during the initial stages of its use.

How to request

The deployment of the SRSA for staff support is normally a part of a comprehensive emergency response package and has to be approved by the HQ Task Force established to mount the emergency operation. On the basis of detailed information about the emergency situation and conditions in the field provided by the Desk, EPRS will formulate an official request to the Swedish Government in order to obtain Cabinet clearance for the deployment of the SRSA.

The Desk should ensure that budgetary provisions have been made and a project agreement between UNHCR and the SRSA should be prepared immediately after the budget has been submitted by the SRSA and agreed by UNHCR. Since deployment may occur prior to the finalization of the agreement, a letter of intent, prepared by the Desk, may be required in the first instance.

Arrangement with Specialist Agency — Centers for Disease Control (USA)

UNHCR maintains a Memorandum of Understanding with the U.S. Public Health Service (PHS) which establishes specific areas of collaboration with the Centers for Disease Control and Prevention (CDC). The specific areas covered under the terms of the MOU are: rapid health and nutrition assessment, improvement of epidemic preparedness and response, prevention and control of communicable diseases, training of local and international health staff, co-ordination of health care delivery services and nutrition programmes in emergencies, maternal and child health activities, sanitation, water supply and environmental health activities.

Within the standby arrangement CDC has identified a core group of experts who would be available at short notice to respond to technical assistance requests made by UNHCR for rapid health and nutrition assessments in emergency situations. Deployment of CDC staff would normally vary from four to eight weeks but could be extended to three months upon request.

Staff seconded by CDC are deployed as members of the UNHCR team and report to the UNHCR designated officer in charge of the operation. They will, however, be funded by CDC and compensated in accordance with PHS policy.

How to request

Once it has been agreed that CDC specialists are required in an emergency operation, HCDS will be the focal point for contacts and deployment requests to CDC. HCDS will inform CDC (and other relevant UNHCR sections) of the terms of reference as well as all other details relating to the mission.

Technical Consultants

The engineering and environmental services section EESS maintains a roster of some 500 individual consultants and consultancy companies, covering the following disciplines:

- agriculture, fisheries and livestock
- community and social services
- development planning and project planning
- economics and finance
- education
- emergency planning
- energy
- health/nutrition
- income generating activities
- environmental sanitation
- site planning, shelter and other infrastructure
- social sciences
- transport and logistics
- water supply

Names are constantly being added to the roster which is updated every six months to ensure that all consultants continue to be available. A short list of some 10 persons experienced in each of the major sectors and prepared for immediate deployment is maintained as a sub-category of the roster for emergency response.

Consultants may be deployed as part of contingency planning or needs assessment missions, as well as part of Emergency Response Teams. In the response phase, they will often be called in on mission to provide the necessary technical input into programme development.

How to request

Once the need has been identified, requests for consultants will be detailed in a memorandum from the Desk and EESS to DRM through PCS. EESS will normally recommend one (or more) consultants which will need the approval of one or more members of the Consultancy Committee (made up of EESS staff). The submission will include the terms of reference, the timing of the assignment, estimated cost and proposed source of funds and the CV of the prospective consultant. Where consultancy firms are thought to be more appropriate for the task, the selection of suitable candidates or firms must be in accordance with UN Financial rules.

Staff and Office Accommodation

A major difficulty encountered in recent emergency situations has been that of providing staff with acceptable living and office accommodation in areas where there is little or no infrastructure. To this end, a standard "staff and office accommodation" package has been elaborated which will provide acceptable living and working conditions for a maximum period of one year for UNHCR staff assigned to extreme hardship duty stations. One package can provide living accommodation for a maximum of 25 people and office space for approximately 40; it has been designed on a modular concept thus enabling deployment of selected elements when needed. Each package comprises:

– 25 individual fully furnished accommodation modules
– 5 four-person fully furnished local staff/visitors sleeper modules
– 10 ablution modules
– 1 laundry module
– 1 kitchen module
– 1 dining/recreation module
– 1 water system module
– 8 office modules
– 1 meeting room module

as well as furnishings; equipment; electrical systems; interior plumbing distribution; ablution fixtures (flush toilets only); camp water distribution; water purification and internal camp sewerage distribution; fire extinguishers for sleepers, kitchen, dining room and meeting hall; security fencing; compound lighting; electrical power supply; fuel storage; fire extinguishers and incinerator.

Two complete staff/office accommodation packages are stockpiled in Amsterdam. The cost of deployment of a complete package amounts to approximately $ 900,000. Upon request STS or EPRS will provide detailed costings of individual elements of the package.

How to request

1. Requests for the release of items from the Central Emergency Stockpile (CES) should be made by the Bureau through the CES Focal Point in STS and confirmed in writing, preferably by e-mail. After reviewing the request, STS will initiate form SF(1) which will be forwarded to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Emergency Stockpile project will be authorized by the Certifying Officer with availability of funds being confirmed by the FPCS.
2. The Field Office should provide detailed information on living conditions in the country concerned as well as the number of staff members for whom the accommodation is required. In addition, the Supplier will require detailed information relating to local conditions such as site ground conditions, grading and excavation conditions, distance to local services, availability and cost of local skilled labour; security services; construction materials; vehicles and site material handling equipment; electrical power, water supply, gasoline and diesel fuel.
3. Responsibility for the erection of the accommodation will rest with the Supplier. UNHCR will facilitate the work of the Supplier and will assist in obtaining visas, permits etc. To facilitate coordination, a copy of the contract with the Supplier, which spells out respective obligations will be provided to each requesting office.

Personal Travel Kits

The travel kit is a carry bag with a UNHCR logo, which is small enough to comply with airline cabin baggage size requirements. It includes a sleeping bag, pillow, mosquito net, towel, torch, small medical kit, rain poncho, plate/bowl, sun hat, water bottle and water filter. It weighs 8 kg and its value is US$ 360.

Travel kits will be provided to emergency response staff deployed to difficult locations during the very early phase of an operation where staff support arrangements have not yet been put in place. It can also be provided to field staff who are required to travel frequently to locations in the "deep" field where living conditions are unpredictable. Any staff member provided with a travel kit will not be entitled to another kit on any subsequent assignment. Once the emergency operation is under way, living conditions should improve, and at this stage the office should advise Headquarters that travel kits are no longer required by new staff. In some instances a number of travel kits may be sent in advance to a new office and allocated to staff in the field.

How to request

Personal travel kits are released on the basis of information from the field on living conditions. The Desk or PCS should submit a request to EPRS by e-mail (HQEM00). Upon approval, EPRS will forward an Emergency Stockpile Release Form (ESF1) to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of such funds being confirmed by DFIS.

Field Kits

Field kits can be provided for deployment to difficult locations. These have a comprehensive range of survival items for improving field conditions. The kit is intended to provide staff with total self sufficiency for three days. A stock of up to 100 kits is held by BSU at Headquarters and replenished up to the maximum level when stocks fall below 50 units.

The contents of the kit come in an aluminium waterproof trunk, weighing 50 kg with a value of US$ 1,360. It includes:

- Dome shaped tent; Sleeping kit (sleeping bag, camp bed, mosquito net, pillow, ground mattress
- Shower screen and water bag with shower attachment
- 3 dry food ration packs
- Water bottle, cooking pots, dishes and cutlery, plastic food containers
- Torch, candles, matches, fuel tablets
- Purification tablets and water filter
- First aid kit, sun screen and insect repellent
- Swiss army knife and compass
- Small back-pack and money pouch
- Rubber gloves, elastic bands, aluminium foil
- First aid manual
- Hand soap, bath towel, tissues, toilet paper, mirror, sewing kit
- Writing materials
- Plastic poncho, sun hat
- Tool kit, metal chain, padlock, nylon rope, scotch tape, masking tape

How to request

Field kits are released on the basis of information from the field on living conditions. The Desk or PCS should submit a request to EPRS by e-mail (HQEM00). Upon approval, EPRS will forward an Emergency Stockpile Release Form (ESF1) to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of such funds being confirmed by DFIS.

Office Kits

The Office Kit comprises items of stationery, supplies, forms and some small non-expendable office items, which are packed in 2 cardboard boxes, and which together weigh 120 kg. It is valued at US$ 1,200. Its contents include:

- UNOG stationery catalogue
- UNHCR Manual, Checklist for the Emergency Administrator
- Stapler, scissors, staple remover, hole punch, pencil sharpener, adhesive tape, staples, elastic bands, paper clips, pins
- Pencils, ball point pens, felt tip pens, rulers, correction fluid
- Stamp pad, date stamp, UNHCR Seal
- Desk diary, chron register
- Car pennants, key tags
- Shorthand pads, A4 note pads, note books
- Carbon paper
- Portable manual typewriter
- Desk calculator with printer tape
- Files, file folders
- Computer diskettes
- UNHCR Forms:
  - sickness insurance
  - leave application
  - sick leave report
  - properly survey board report
  - vehicle accident report
  - travel claims
  - travel authorization
  - inventory form
  - personal history form
  - leave & absence report
  - entry medical exam form
  - stationery order form
  - project cards
- Envelopes (various sizes)
- Letterhead, memorandum, plain & continuation page paper
- Compliment slip
- Telegram Forms

The Office Kit is intended as a start up for new offices, and is designed for offices with 5 international and 10 local staff (i.e. a standard Sub or Field office). Thus one kit per location should be sufficient, although in larger new offices 2 kits may be necessary. Thereafter procedures for the normal procurement of office supplies should be established.

How to request

The Desk or PCS should submit a request to EPRS by e-mail (HQEM00). Upon approval, EPRS will forward an Emergency Stockpile Release Form (ESF1) to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of such funds being confirmed by DFIS.

Emergency Kit for Unaccompanied Children

This kit was developed jointly by UNHCR and UNICEF and is intended to promote early identification, documentation, and reunification of unaccompanied children. The kit includes the Priority Action Handbook, Emergency Registration Books, basic supplies (such as cameras and film) and a kit container.

The Priority Action Handbook is intended as a practical tool for UNHCR and UNICEF staff who are first on the spot and responsible for launching emergency response programmes. The handbook offers a checklist of actions to be considered in any emergency, as well as examples of practical tools, coordination mechanisms, and programme models that have proven to be effective in previous emergencies. A computer diskette is included to facilitate quick reproduction and modification of generic forms, guides, and tools.

Emergency registration books are included to promote quick identification and documentation of separated children and to serve as a record of what happens to these children over time. Written in straightforward language (in French and English), the Registration Books are for use in any place and with any person who is responsible for caring for separated children. Helpful hints on how to care for infants and young children and on how to initiate phototracing are also included.

How to request

Ten kits are stockpiled by EPRS at Headquarters. These kits are available on request from the Senior Coordinator for Refugee Children and/or EPRS.

Computer Equipment

A stock of portable and desktop computer equipment, installed with standard UNHCR software, is maintained by ITTS. Unit value ranges between $ 2,000 and $ 3,000 for a computer, and between $ 500 and $1,500 for a printer. Please check the cost of equipment required with ITTS User Services.

Electrical plugs vary, so it would be prudent to determine the socket type at the destination and take an adequate supply of electrical adapters.

How to request

Requests for computers or printers should be made directly to ITTS, User Services or HQFOSUP with a copy to the Desk/Bureaux at HQ indicating the funding source (e.g. admin. or project code). Equipment will be taken from ITTS buffer stock and replenished from the funds indicated by the Desk/Requesting Officer. Please note that equipment cannot be released if funds have not been identified by the requesting office.

Vehicles

A stock of 20 vehicles is maintained for deployment to emergency operations — 15 left-hand drive and 5 right-hand drive in Amsterdam. In addition to these, additional requirements for emergencies can also be met through loans from regional stocks in various locations and through ex-stock procurement from manufacturers stockholder.

The model currently in stock is the Toyota Landcruiser MZJ 105RL-GCMRS which has the following specifications:

– Air Conditioner, power steering, radio AM/FM and cassettes, 2 speakers
– 4,200cc Diesel
– 5 speed floor shift
– 6 seater, lateral seats (4 people) back door swing out type
– Tyres: 7.5OR-16-6 Radial Block
– Sub fuel tank, 50L
– Air cleaner cyclone with precleaner
– Speedometer Km/h
– High Altitude Compensator
– Engine Coolant LLC 50PCT
– Double Battery 12V
– Burglar alarm, spare part kits, tool kits, seat belts, etc.

Insurance and UNHCR number plates: STS is now able in certain circumstances to arrange third party insurance and UNHCR number plates pending completion of formalities with the authorities concerned so that UNHCR-owned vehicles can be immediately operational upon arrival in a country. However, this is not applicable to all countries.

How to request

Requests for the release of items from the Central Emergency Stockpile (CES) should be made by the Bureau through the CES Focal Point in STS and confirmed in writing, preferably by e-mail. After reviewing the request, STS will initiate form ESF1 which will be forwarded to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of funds being confirmed by the DFIS.

Telecommunications Equipment

A stock of telecommunication equipment, adequate for establishing communication links for two emergency operations has been established. This equipment is intended to provide emergency staff with immediate communication links even from the most remote locations.

The stock, which will be replenished as it is deployed, consists of:

– 8 Pactors
– 80 Codans Base/MOB
– 100 VHF Base/MOB
– 300 VHF Handhelds
– 20 VHF Repeaters
– 14 VHF Packet
– 9 SATCOM M
– 4 SATCOM C
– 26 Natel D
– 10 Fax

How to request

Requests for the release of these items should be made in writing to the Telecoms Unit, RTO or HQTU01 and STS with a copy to the Desk/Bureaux at HQ after clearance with EPRS. Replacement costs will be charged to the relevant programme through the issuance of a Purchase Authorisation by the Desk.

Visibility Material

In any emergency operation it is important to consider the value of greater UNHCR visibility. There may be various reasons for enhanced conspicuousness, the most important of which are:

a) Security (in certain circumstances)
b) Protection (recognition by authorities and asylum seekers)
c) Public Relations (visibility in the media)

UNHCR holds a stockpile of items which could be used for the above purposes. They are listed below:

EPRS will provide, at no charge to a new emergency operation, a start up supply of up to 50 each, of caps, vests, armbands and T-shirts. EPRS will also provide up to 10 UNHCR flags which are available in two sizes:

medium	150 cm x 225 cm
large	200 cm x 300 cm

Public Information Section will sell, at cost to the operation, any subsequent need for caps and T-shirts.

BSU will provide:

- identification badges
- UN flags:

Car	30 x 50
Convoy	75 x 100
Small	100 x 150
Medium	150 x 225
Large	200 x 300

- UNHCR logo stickers for light vehicles
- extra large logo stickers for trucks
- rolls of scotch tape with UNHCR logo

How to request

Requests for these items should be made directly to the respective sections as appropriate (see above). For items purchased from PI Section an account code must be provided.

Emergency Operations Room

Based on problems experienced in managing past emergency operations at Headquarters, notably the bottleneck in information flow to and from Headquarters, it was agreed that an Emergency Operations Room (EOR) should be made available which would be used as a communications and information distribution centre during the initial stages of an operation. The EOR should be the focal point for:

a) the receipt of all communications related to a particular emergency and
b) the effective distribution of such communications within UNHCR and, when needed, to other agencies.

Thus, all incoming communications relating to the emergency would be routed directly to the EOR. The EOR should therefore facilitate the organization of a systematic flow of information which could subsequently be integrated into the ongoing operations of the relevant Bureau/Desk. It is expected that the EOR will become operational at the outset of the emergency operation and will remain at the disposal of the Bureau/Desk concerned for an estimated period of three months.

The EOR is equipped with:

– 2 work-stations (computer equipped)
– telephones, fax machine, e-mail, teleconferencing
– computer link to Telecommunications Unit pactor
– photocopier
– pigeon holes and filing cabinets
– clocks for two time zones

In addition, the EOR may be used as an airlift operation cell and staffed by personnel seconded from the defence establishments of Governments for the duration of an airlift.

How to request

At the beginning of an emergency operation the Bureau should submit a written request to EPRS asking for the use of the Room. The Emergency Operations Room will be assigned to the Bureau responsible for the emergency. At the outset of the operation, ITTS will liaise with the Bureau concerning the installation of the required communications equipment, dedicated telephone numbers, fax numbers and e-mail address. Ideally these numbers should be redeployed from the Bureau so that when the operation is integrated into the ongoing operation they may be "repatriated" and continuity ensured.

The Bureau will take full responsibility for supplies (stationery, photocopy paper, etc.) and running costs (communications charges, staff costs) during the period it occupies the EOR. It is emphasized that the EOR will be at the disposal of a given Bureau for the initial stages of an emergency operation only, in principle, for a maximum period of three months. Thereafter it should be possible to integrate the emergency operation into the normal activities of the Desk.

Tents

10,000 tents are stockpiled at various locations. UNHCR's standard family tent is a double fly centre pole tent (4x4 m) with 2 doors and 2 windows and is made of cotton canvas and provided with a ground sheet. The unit weight including poles and pegs is about 100 kg and the cost USD$ 200-220.

How to request

Requests for the release of items from the Central Emergency Stockpile (CES) should be made by the Bureau through the CES Focal Point in STS and confirmed in writing, preferably by e-mail. After reviewing the request, STS will initiate form SF(1) which will be forwarded to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of funds being confirmed by the DFIS.

Emergency Health Kit

The kit is designed to meet the needs of a population with disrupted medical facilities in the second phase of a natural or other disaster, or a displaced population without medical facilities. Its contents are calculated to meet the needs of a population of 10,000 persons for three (3) months or for 30,000 persons for one (1) month.

THE BASIC UNIT: 10 identical boxes, each 41 kg.

Total: 410 kg = US$ 2194

To facilitate distribution to smaller health facilities on site, the quantities of drugs and medical supplies in the basic unit have been divided into ten identical units, each for 1,000 persons. The basic unit contains drugs, medical supplies and some essential equipment for primary health care workers with limited training. Simple treatment guidelines, based on symptoms, have been developed to help the training of personnel in the proper use of drugs.

THE SUPPLEMENTARY UNIT: 14 boxes (3 boxes of drugs, 5 boxes of infusions, 3 boxes of renewable supplies and 3 boxes of equipment).

Total: 420 kg = US$ 2752

The supplementary unit contains drugs and medical supplies for a population of 10,000 persons for three months and is to be used only by professional health workers or physicians. It does not contain any drugs and supplies from the basic units and can therefore only be used when these are available as well. A manual describing the standard treatment regimens for target diseases, is included in each unit.

How to request

The kits are in stock at supplier's warehouse in Amsterdam. Requests should be made by the Bureau through the Desk at HQ with a copy to STS indicating quantity of complete kit, markings needed, project to charge.

One complete Emergency Health Kit is a total of 24 boxes for a total weight of 830 kgs, volume 3.40 cbm, packed on two pallets. Total cost: US$ 4,947 without transport costs. Delivery is within 24/48 hours to the airport of departure. It must be emphasized that although the standard kit is convenient in the second phase of an emergency, specific local requirements need to be assessed as soon as possible and further supplies must be ordered accordingly. STS has signed for a period of one year (1.9.97 to 31.8.98 renewable) a frame agreement for the list of UNHCR Essential Drugs. A request for a reasonable quantity of items listed could be quickly delivered. Please contact STS before ordering.

Blankets

150,000 blankets of various qualities (wool ranging from minimum 30% or minimum 50% are stockpiled with suppliers in Europe). Additional stocks are available from regional stockpiles.

Blankets are packed in bales of 30 pieces weighing about 48 kg depending on the quality of blanket. The cost of each blanket ranges from US$ 4.50 to US $5.00 depending on the quality.

How to request

Requests for the release of items from the Central Emergency Stockpile (CES) should be made by the Bureau through the CES Focal Point in STS and confirmed in writing, preferably by e-mail. After reviewing the request, STS will initiate form SF(1) which will be forwarded to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of funds being confirmed by the DFIS.

Kitchen Sets

30,000 Kitchen Sets are maintained by suppliers in Egypt. There are three types of set:

Type A	**Type B**	**Type C**
1x7 litre cooking pot 1x5 litre cooking pot 5 aluminium bowls 5 deep aluminium plates 5 cups 5 knives, forks, spoons 1 kitchen knife 1 x 15 litre steel bucket	Same as Type A but does not include knives, forks and bucket. The cost is thus reduced.	1x7 litre cooking pot 5 aluminium bowls 5 cups 5 spoons
Cost **US$ 21.10**	Cost **US$ 13.60**	Cost **US$ 10.20**

Kitchen sets can be produced at a rate of 20-30 000 per week.

Jerry Cans

50,000 semi-collapsible plastic 10 litre jerry cans are maintained by a supplier in Amsterdam. Jerry cans are usually packed in cartons of 100 weighing about 42,5 kg. The cost per jerry can is US$ 1.55

Plastic Sheeting

66,000 sheets of plastic are stockpiled at various locations. The sheeting, procured by UNHCR is of woven high density polyethylene fibre, laminated with low density polyethylene on both sides with a reinforced rim and eyelets along the edges. The standard size is 4 x 5 meters. It is blue on one side and white on the other with the UNHCR logo on both sides. The cost per sheet is US$ 6.75. The same material is available in rolls of 4 x 50 m for USD$ 66.00 per roll.

Prefabricated Warehouses

10 prefabricated warehouses are held with various suppliers and others are available from regional stockpiles.

The warehouse, once erected, is 24 metres long, 10 meters wide, 5.8 meters high at the apex and 3.35 meters high at the side. Each end has an opening allowing through access for heavy vehicles. The average capacity is 500 tons. The unit cost is approximately US$ 13,000 - 15,000.

How to request

Requests for the release of items from the Central Emergency Stockpile (CES) should be made by the Bureau through the CES Focal Point in STS and confirmed in writing, preferably by e-mail. After reviewing the request, STS will initiate form SF(1) which will be forwarded to the Certifying Officer (Head of Desk or other authorized signatory). The transfer of appropriate funds to the Central Emergency Stockpile project will be authorized by the Certifying Officer with availability of funds being confirmed by the DFIS.

Government Service Packages

In a number of major emergencies, Government Service Packages (GSPs) of some form were used: Coalition forces in the Kurdish Operation, Sarajevo airlift in Former Yugoslavia and various governments in selected sectors for the Rwandese influx. It was during this last operation that the concept was recognised as an exceptional response to complex emergencies and Governments requested UNHCR to take note of the lessons learned and pursue the development of what then became known as GSPs.

The concept assumes that GSPs are:

- A last resort in exceptionally large emergencies
- Use of military or civil defence assets
- Do not replace the traditional response capacity of NGOs
- Applicable to selected sectors only, where government assets are necessary
- Normally beyond the capacity of usual funding arrangements and thus seen as extra-budgetary donations in kind
- Self contained in terms of mobilization and operation
- Limited in duration of deployment and thus rapidly replaced by more cost effective arrangements

UNHCR developed 20 GSPs:

Air Operations Cell	Borehole Drilling
Strategic Airlift	Water Treatment
Theatre Airlift	Water Distribution
Airport Ground Handling	Water Storage
Warehousing/Storekeeping	Latrine Construction
Road Transport	Vector Control
Field Hospital	Solid Waste Management
Hydrological Survey	Waste Water Systems
Water Tanker Operation	Site Development
Surface Water	Road Construction

How to request

It will normally be clear at the Headquarters level that an emergency is of a magnitude that requires the mobilization of GSPs. The Desk will contact EPRS and request that the mobilization procedure commence. In coordination with UNOCHA, donor Governments will first be alerted and asked if they are willing to provide packages. Subsequently, as the requirements become more clear, implementation, sometimes commencing with a needs assessment mission, will begin. Any direct contact between UNHCR and the Missions will be handled by Donor Relations and Resource Service Mobilization in consultation with EPRS and in liaison with UNOCHA.

NOTE: Meanwhile UNOCHA established the Military and Civil Defence Unit (MCDU) which has expanded the list of GSPs (which are called Government Service Modules) and these are to be available for all agencies. They include the 20 GSPs listed above. The maintenance of GSPs will be the responsibility of UNHCR or the most appropriate lead agency, while coordination will rest with UNOCHA.

Emergency Capacities of Non Governmental Organisations

In recent years many of UNHCR's operational partners have taken steps to develop or enhance their emergency preparedness and response capacities. These are essential elements in complementing UNHCR's response to refugee emergencies, since traditionally, UNHCR relies on non governmental organizations to implement, on its behalf, activities in support of refugees. It is important that these resources are known and called upon when needed. In order to do this effectively, UNHCR has, since mid 1996, established a data base which captures the emergency capacity of important NGOs which work in refugee programmes. The database identifies standby capacities in the following sectors and holds data on agency policy, financial resources for emergencies, human resources stand-by capacity and material stockpiles.

Community Services	Health/Nutrition
Domestic needs	Management
Economic activities	Shelter
Education	Site Planning and Civil Works
Environmental sanitation	Transport/Logistics
Food	Water

On the basis of this data base, UNHCR is able to immediately determine the capacities of NGOs and call on them to cooperate with UNHCR in emergency response for refugee programmes.

How to request

In emergencies, Field Offices or Emergency Response Teams may advise Headquarters of operational needs to be filled by NGOs. The data base will provide options. Where there is no ERT and country operations have particular gaps or needs, the Office of the NGO Coordinator should be contacted and given details for follow-up.

Standby Arrangement for Trucks and Aircraft (EMERCOM of Russia)

Under a Memorandum of Understanding signed with EMERCOM of Russia (State Committee of the Russian Federation for Civil Defence, Emergencies and the Elimination of the Consequences of Natural Disasters) UNHCR is provided with priority access to airlift capacity and a trucking fleet maintained by EMERCOM on a standby basis. These standby capacities include the following:

- Two airfreighters IL-76 TD with a payload of 40 tonnes and cargo hull dimensions of 20 x 3.4 x 3.4 metres.
- At least 15 x 10 metric tonne (6 x 6 or 6 x 4) trucks (Kamaz type) accompanied by fuel tanker, mobile workshop, escort vehicles and personnel (drivers and coordinators) to man the fleet during the initial emergency phase and until such time as local capacities can be trained to take over the operation of the fleet.

The resources can be deployed within 72 hours of receipt of a written request from UNHCR. The maintenance of these capacities on a standby basis is provided at no cost to UNHCR, but the cost of deployment is charged to the relevant programme.

How to request

The Desk should consult with EPRS and STS on the appropriateness of the EMERCOM capacities for the specific needs of the operation. Once its deployment is agreed, EPRS will be the focal point for contact between EMERCOM and UNHCR. UNHCR will advise EMERCOM in writing (copied simultaneously to the Government of the Russian Federation through the mission in Geneva) of the type of the emergency operation, location, duration, type and quantity of EMERCOM services, equipment and personnel as well as the technical specifications of any special equipment required. At the time of deployment a "Sub-Agreement" will be signed between EMERCOM and the relevant Regional Bureau which incorporates the actual services to be rendered by EMERCOM and the costs to be borne by UNHCR.

Contingency Planning: A Practical Guide for Field Staff

The Contingency Planning Guidelines are designed to assist UNHCR field staff to plan for refugee related events at country level. These events may include a refugee influx, spontaneous unexpected repatriation, security problems in refugee camps, natural disasters affecting refugee camps, camp relocation etc. There are 4 sections and 6 Annexes in the Guidelines:

Section 1 – The Purpose: covers the "when" and "why" of contingency planning. It looks at the popular misconceptions surrounding this activity. It considers the relationship to early warning, operations planning and needs assessment and identifies indicators which will suggest when it is prudent to initiate the planning process.

Section 2 – The Process: covers the "how" of contingency planning emphasizing the importance of the process necessary to arrive at an effective plan. It describes an approach which is participatory and ongoing and suggests mechanisms which can be established in-country to update the plan and maintain the preparedness process.

Section 3 – The Partners: identifies, and considers the role of the various agencies in the planning process. It is a kind of a checklist to ensure that the appropriate actors are involved at the right stage.

Section 4 – The Plan: sets out a model format for a contingency plan. These Guidelines stress that the plan is simply a product of the process and as such is constantly changing and requiring update. Nevertheless the plan has an importance as a working tool and thus some guidance on the best approach to setting out the document is required.

Annexes

A - UNHCR's Standby Resources
B - Early Warning Indicators
C - Questionnaire for Sector Planning
D - Example Contingency Plan
E - Overhead Transparencies
F - Additional Reading

How to request

Copies of the Guidelines may be requested directly from EPRS.

Refugee Registration Package

This package consists of three elements: a Practical Guide for Field Staff, a Registration Kit, and computer software.

The Guide covers UNHCR's registration strategy, and provides practical ideas and tips to staff undertaking refugee registration exercises. In its 110 pages, the Guide describes registration strategies, explains the phases of registration and explores the various registration scenarios. In doing so, it deals with such activities as the initial fixing of a population, identifying vulnerable groups, crowd control, equipment required, estimating populations, protecting data and verification. Maps of typical reception and registration areas are included as are examples of tokens, cards and forms. The Guidelines were field tested in 1993 and the first document published and distributed in May 1994.

The Registration Kit is designed for 30,000 refugees (10,000 families), and includes an appropriate supply of wristbands, fixing tokens, temporary cards, registration cards, control sheets/passenger manifests, registration forms, Guidelines, code sheets, hole punches for cards, UNHCR caps and marker pens. The Kit is valued at approximately US$ 11,000.

In conjunction with the standard UNHCR registration form, the Field Based Registration System (FBARS) has been developed and field-tested. Introduction to the software is supported through, inter alia, regional training activities. The software, specifically designed to handle large caseloads, is fully supported by UNHCR.

How to request

The Food and Statistical Unit of PCS at Headquarters manages the stocks of Guidelines and Kits. All requests should be made directly to PCS/FSU. The Software may be requested by contacting PCS or ITTS. Except in emergency situations, requests should be made well in advance stipulating the estimated number of persons to be registered. Budgetary allocation will need to be made for the supplies requested. Additional supplies required which are not in the kits, such as files, megaphones, arm bands, UNHCR stamps etc. should be budgeted for and requested separately by the Desk to BSU.

Handbook for Emergencies

The Handbook For Emergencies was first published in December 1982 and is available in English, French, Spanish and Russian. The Handbook is intended as a managers' guide to setting up emergency operations for large-scale influxes and provides advice in a non-technical manner on how to tackle various aspects of emergency response. Managers would need to seek further advise for more technical information.

The Handbook, which is in a convenient A5 format with 300 pages of text and diagrams, will be useful, not only for UNHCR staff, but also for government officials and NGO staff.

The chapter headings are as follows:

1. Aims and principles of response
2. Protection
3. Needs assessment and immediate response
4. Implementing arrangements and personnel
5. Supplies and logistics
6. Site selection, planning and shelter
7. Health
8. Food and nutrition
9. Water
10. Sanitation and environmental services
11. Social services and education
12. Field level management

How to request

In principle an adequate supply of the Handbook is available at every UNHCR field location for the use of UNHCR staff members. It is also available on the UNHCR RefWorld/RefMonde CD-ROM.

The Handbook can be provided to NGOs and local authorities upon request. The sum of $15 per copy is charged when more than 10 copies are required. When requesting copies the name of the recipient organization and the intended use of the Handbooks should be specified.

Requests should be made directly to EPRS stating the language required.

Opening an Office: Checklist for the Emergency Administrator

The Checklist is intended as a practical tool for UNHCR staff when responding to emergencies, who are assigned to duty stations where there is no established UNHCR presence or where the existing UNHCR office requires additional administrative support as a result of a changed refugee situation. However it is also most useful as a reference tool in established offices, and for administration training purposes. The Checklist has 3 components all of which are contained in an A4 ring binder:

1. **The Checklist:** lists most activities requiring attention when establishing a (Branch, Sub or Field) Office. The list is broken down into 5 main sections:

   Premises
   Communications and Transport
   Personnel, Staff Conditions and Security
   Finance, Equipment and Supplies
   Filing and Documentation.

The list does not cover administrative procedures and action required for the ongoing needs of the office but concentrates solely on those matters related to the establishment of an office.

2. **Annexes:** extracts from existing documentation, which have been included for ease of reference and are not substitutes for existing manuals and instructions.

3. **Computer diskette:** contains the format for many forms or documents. These forms or documents can be copied and amended to suit local needs. The disc also includes a wide range of Printer Action Tables (PATs) and a standard memo Macro.

One Checklist should be available in all UNHCR Offices. The most recent version, Revision 6, was issued in March 1998.

How to request

Checklists are available on request from EPRS for new UNHCR offices. Since stocks are limited, please ensure that copies are not removed from the field offices.

Commodity Distribution: A Practical Field Guide

This guide outlines the procedures by which UNHCR field staff and operational partners can design and implement systems for commodity distribution. The field guide points out important issues on distribution and offers techniques and ideas based on best current practice. First published in June 1997, this document was produced through a series of consultations with agencies with a long involvement in commodity distribution, namely the World Food Programme, the Red Cross and Red Crescent Societies, and NGO implementing partners.

The Commodity Distribution field guide begins by acquainting the reader with a glossary of terms, commonly-used acronyms, and a summary of key points covered in the document. An overview of commodity distribution follows with a brief look at definitions, the main actors and their roles, the relationships between food and non-food items, and programme planning.

Other chapters of the field guide are devoted to the beneficiaries, categories of distribution and how to select the best for your particular situation, refugee involvement, and commodity distribution management. A final chapter addresses special issues in commodity distribution and provides answers to many of the common questions and problems encountered in the field.

A series of annexes provide (with some explanatory notes) commonly-used monitoring and reporting forms for both food and non-food item distribution.

How to request

Copies of Commodity Distribution: A Practical Field Guide can be made available by contacting HCDS or by e-mail at hqcs00@unhcr.org.

UNHCR Emergency Fund

The purpose of the Emergency Fund is to provide:

a) financial resources for assistance programmes for refugees and displaced persons in emergency situations for which there is no provision in the programmes approved by the Executive Committee; and

b) such additional administrative expenditure resulting from those emergencies as cannot be met from the Regular Budget, pending action by the Executive Committee or the General Assembly.

The High Commissioner may allocate up to US$ 25 million annually from the Emergency Fund, provided that the amount made available for any one single emergency shall not exceed US$ 8 million in any one year and that the Fund will be maintained at not less than US$ 8 million.

The Fund may be reimbursed if sufficient funds to a given Appeal are later received.

How to request

Use of the Emergency Fund must be authorized by the Officers indicated below, subject to prior clearance by the Chief of PCS and the Head of the Funding and Donor Relations Service. Requests for use of the Emergency Fund are to be submitted to PCS by the Head of Desk or the Chief of Section for projects in their area of responsibility. The Director of the Regional Bureau or Division will countersign all requests for the use of the Emergency Fund. PCS will attach to all requests for over US$ 2.0 million a status report on allocations made to date. Copies of all authorizations are to be sent to the High Commissioner's Office.

Amount	Officer designated by the High Commissioner	Alternate
Below US£ 2.0 million	Director, Division of Operational Support	1. Deputy High Commissioner 2. Officer in Charge
Equal or above US£ 2.0 million	High Commissioner	1. Deputy High Commissioner 2. Offier in Charge

OCHA Central Emergency Revolving Fund (CERF)

The Central Emergency Revolving Fund (CERF) of the Office of the Coordinator of Humanitarian Affairs was established in December 1991 to provide funds within the UN system to respond rapidly to emergencies. CERF, which has a target level of US$ 50 million, is financed from voluntary contributions and is used for cash advances to operational organisations and entities within the system. These advances are to be reimbursed as a first charge against income subsequently received, usually as a result of consolidated appeals. Under exceptional circumstances, the rules allow for the non reimbursement on allocations made under the Fund. CERF is managed by the UN Under Secretary General for Humanitarian Affairs.

How to request

The Head of Bureau or Chief of Section should address a memorandum to the High Commissioner, through the Director of Operational Support & the Head of Funding and Donor Relations Service seeking approval to request an allocation from the CERF. Once agreed, a letter is to be sent from the High Commissioner to the Under Secretary General for Humanitarian Affairs, requesting an allocation from the Fund. This letter should:

– define the purpose and objectives of the programme
– specify the amount of money requested
– indicate the initiatives which are being undertaken to raise funds for this programme to allow for the Fund's reimbursement.

The USG for Humanitarian Affairs will reply confirming that an allocation can be made available, the conditions under which it is made and the reporting requirements. These two letters will constitute a formal exchange between the Organizations. In exceptional circumstances involving particularly urgent emergencies, the USG may authorize advances prior to the formal exchange of letters. This must however be followed with a formal exchange within 30 days.

Distance Learning Modules

Beginning in early 1998, EPRS will be pilot testing two distance learning modules on the UNHCR Intra-Net. These self-study courses follow and complement the other training and capacity-building initiatives described elsewhere in this catalogue.

The first two modules will cover two critical aspects of emergency preparedness and response: contingency planning and operations planning. EPRS plans to make these courses first available to staff either electronically or in the conventional paper format. At a later date, operational partners and/or other UN agencies will be able to access the course materials.

This distance learning initiative is carried out in collaboration with the University of Wisconson-Disaster Management Center who will administer the course on behalf of UNHCR. This course has the added advantage of offering credits towards the UW's Disaster Management Diploma Program.

How to request

Look for a formal announcement on the opening of this course. All details on participation in the course will be covered in this announcement.

Emergency Management Training Programme (EMTP)

The first Emergency Management Training Programme (EMTP) Workshop was held in 1985. In the first 12 years, over 1,500 staff members from UNHCR, NGOs, Governments and other UN agencies have participated in the EMTP. The courses are normally geared to mid-career managers and support staff preferably with some emergency/field experience. The objectives of the programme are to acquaint the participants with the purpose and goals of emergency management, illustrate the needs for general management skills and demonstrate specific applications of emergency management skills to priority areas such as planning, logistics, health, shelter and nutrition, as well as to offer operational partners the opportunity to exchange experience and lessons learned.

While courses were initially held at the University of Wisconsin at Madison USA they have, since 1992, been organized on a regional basis. The intention is to add a regional focus to the training and discussions. Three courses are organized each year. Each course normally lasts 11 days and is attended by some 35 participants. In addition to the standard lecture format, training methods include case studies, problem solving exercises, group discussions, films, a review of current disaster literature and sometimes field visits. Each course includes a one day simulation of a refugee emergency.

Since 1993 courses have been held in the following locations:

Botswana (Gaberone)	Kyrgzstan (Bishkek)
Ethiopia (Addis Ababa)	Nepal (Katmandu)
Ghana (Accra)	Senegal (Dakar)
Guinea (Conakry)	Thailand (Bangkok)
Jamaica (Kingston)	Turkey (Ankara)
Jordan (Amman)	Venezuela (Caracas)
Tanzania (Dar-es-Salaam)	Japan (Tokyo)

How to request

Prior to each course, EPRS will decide on the participating countries and the number of UNHCR, NGO, government and other UN participants from each country. UNHCR field offices will normally propose the participants within these categories. EPRS may also identify a small number of participants from outside the region, from the headquarters of NGOs or UN agencies. Agencies and individuals are invited to write to EPRS to express their interest in participating in future courses. While every effort will be made to accommodate such requests, the demand is high and not all requests can be met.

Workshop on Emergency Management (WEM/ERT)

The Workshop on Emergency Management (WEM/ERT) is an internal UNHCR Workshop for members of the Emergency Response Team (ERT) Roster members. The pilot Workshop was held in October 1993; WEM is now organized on a regular basis in March and September each year.

The primary aim is to prepare ERT Roster members for deployment. The Workshop is highly participatory, focusing on providing practical tips, tools and techniques to equip staff in managing emergency teams or participating as team members in emergency/repatriation operations. It has a more specific focus than the EMTP, and while prior participation in the EMTP is not a prerequisite, it may be an asset.

The 3 main themes of the Workshop are:

1 managing your role
2 managing relations
3 managing oneself

5 stages of emergency deployment are covered:

1 pre-deployment
2 arrival
3 team building & delivery
4 handover
5 return

Workshops are held near Geneva for around 28 participants.

The timing of the Workshops coincides with the beginning of the six month term of the new ERT roster, currently April and October of each year. The course is facilitated by an external consultant and normally at least two EPROs act as resource persons.

How to request

Since participation in the Workshop is dependent on membership of the ERT it is first necessary to be placed on the ERT roster [see section on Human Resources]. All ERT members should attend the WEM.

Targeted Training

EPRS complements its two core training activities — the EMTP and the WEM — by providing support to ad hoc emergency training of three general kinds:

a) Country or Region specific courses with a particular focus, for example contingency planning.

b) Workshops for a specific target audience such as training for external standby staff from agencies such as the Nordic Refugee Councils, Redda Barnen etc., as well as for staff at HQs (WEM/HQs).

c) Emergency courses organized locally by UNHCR Branch offices. For these local initiatives, EPRS is unable to provide funds or resource persons but can offer guidance on course outline and materials to assist in the preparation of training sessions.

d) Special seminars for senior managers on Emergency Management (Advanced Emergency Management Seminar (AEMS)).

How to request

Training requests will normally originate from field offices. Where forward planning is possible, the training sessions should be incorporated into the annual training plan. Where sudden or changed circumstances are the basis for a training need, a submission should be sent to EPRS through the relevant Desk. It should once again be stressed that in doing so, one should not assume that EPRS can provide resource persons for such training.

Toolbox

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Table 1 – Key Emergency Indicators

Crude Mortality rate (CMR)	Normal rate among a settled population	0.3 to 0.5/10,000/day
	Emergency program under control	<1/10,000/day
	Emergency program in serious trouble	>1/10,000/day
	Emergency: out of control	>2/10,000/day
	Major catastrophe	>5/10,000/day
Mortality rate among children under 5 years old (U5MR)	Normal rate among a settled population	1.0/10,000/day
	Emergency program under control	<2.0/10,000/day
	Emergency program in serious trouble	>2.0/10,000/day
	Emergency: out of control	>4.0/10,000/day
Clean water	Minimum survival allocation	7 liters/person/day
	Minimum maintenance allocation	15-20 liters/person/day
Food	Minimum food energy requirement for a population totally dependant on food aid	2,100 kcal/person/day
Nutrition	Emergency level:	>15% of the population under five years old below 80% weight for height
	or	>10% of the population under five years old below 80% weight for height together with aggravating factors e.g. epidemic of measles, crude mortality rate > 1/10,000/day
Measles	Any reported cases. 10% or more unimmunized in the 6 months to 5 years age group	
Respiratory infections	Any pattern of severe cases	
Diarrhoea	Any pattern of severe cases	
Appropriate shelter	Protection from wind, rain, freezing temperatures, and direct sunlight are minimum requirements	
	Minimum shelter area	3.5 sq. m/person
	Minimum total site area	30.0 sq. m/person
Sanitation	Lack of organized excreta and waste disposal. Less than 1 latrine cubicle per 100 persons	

Table 2 – Public Health Emergency: Major Killers

Measles **Diarrhoeal Diseases** **Acute respiratory infection (ARI)** **Malaria** **Malnutrition**	A significant increase of incidence of these conditions should prompt an immediate response (or the reporting of just one case of measles)

Table 3 – Common Health Problems

Disease	Major contributing factors	Preventive measures
Diarrhoeal diseases	Overcrowding Contamination of water and food Lack of hygiene	• adequate living space • public health education • distribution of soap • good personal and food hygiene • safe water supply and sanitation
Measles	Overcrowding Low vaccination coverage	• minimum living space standards as defined in chapter on site planning • immunization of children with distribution of Vitamin A. Immunization from 6 months up to 15 years (rather than the more usual 5 years) is recommended because of the increased risks from living conditions
Acute respiratory infections	Poor housing Lack of blankets and clothing Smoke in living area	• minimum living space standards and • proper shelter, adequate clothing, sufficient blankets
Malaria	New environment with a strain to which the refugees are not immune Stagnant water which becomes a breeding area for mosquitoes	• destroying mosquito breeding places, larvae and adult mosquitoes by spraying. However the success of vector control is dependent on particular mosquito habits and local experts must be consulted • provision of mosquito nets • drug prophylaxis (e.g. pregnant women and young children according to national protocols)
Meningococcal meningitis	Overcrowding in areas where disease is endemic (often has local seasonal pattern)	• minimum living space standards • immunization only after expert advice when surveys suggest necessity
Tuberculosis	Overcrowding Malnutrition High HIV prevalence	• minimum living space standards (but where it is endemic it will remain a problem) • immunization
Typhoid	Overcrowding Poor personal hygiene Contaminated water supply Inadequate sanitation	• minimum living space standards • safe water, proper sanitation • good personal, food and public hygiene and public health education WHO does not recommend vaccination as it offers only low, short-term individual protection and little or no protection against the spread of the disease
Worms especially hookworms	Overcrowding Poor sanitation	• minimum living space standards • proper sanitation • wearing shoes • good personal hygiene
Scabies[1]	Overcrowding Poor personal hygiene	• minimum living space standards • enough water and soap for washing
Xerophthalmia Vitamin A deficiency	Inadequate diet Following acute prolonged infections, measles and diarrhoea	• adequate dietary intake of vitamin A If not available, provide vitamin A fortified food If this is not possible, vitamin A supplements • immunization against measles. Systematic prophylaxis for children, every 4 - 6 months
Anaemia	Malaria, hookworm, poor absorption or insufficient intake of iron and folate	• prevention/treatment of contributory disease • correction of diet including food fortification
Tetanus	Injuries to unimmunized population Poor obstetrical practice causes neo-natal tetanus	• good first aid • immunization of pregnant women and subsequent general immunization within EPI • training of midwives and clean ligatures scissors, razors, etc.
Hepatitis	Lack of hygiene Contamination of food and water	• safe water supply • effective sanitation • safe blood transfusions
STD's/HIV	Loss of social organization Poor transfusion practices Lack of information	• test syphilis during pregnancy • test all blood before transfusion • ensure adherence to universal precautions • health education • availability of condoms • treat partners

[1] *Scabies: skin disease caused by burrowing mites*

Table 4 – Screening of New Arrivals - Reception Activities

a) HEALTH SCREENING	
Nutritional screening	**Children 1 to under 5 years:** Measure the mid-upper arm circumference (MUAC). Any children with MUAC below 12.5 cm should be immediately referred to health or nutrition services for weighing and measuring and for nutritional assistance if required.
Measles immunization	**Children aged 6 months to 12 (or even 15) years:** Immunize entire group and issue "Road to Health" or other immunization record card. Note: It is often inpractical to vaccinate at the same time as screening. However screening could be used to evaluate the vaccination coverage.
Vitamin A prophylaxis	Given along with measles vaccine, but should not delay measles vaccination if vitimin A is not available.
Basic curative care	**As required:** On-site first-line care for dehydration, respiratory infections, presumed malaria, trauma, and other life threatening conditions. Referral to existing health care facilities.
b) DEMOGRAPHIC SCREENING	
Population estimation	**Everyone:** Estimate total population broken down by sex and age (0-4, 5-14, 15-44, and 44 years and over) Estimate numbers of vulnerable persons such as children up to 5 years old, pregnant/lactating women, handicapped, female heads of households, single women, and unaccompanied minors.

Table 5 – Approximate Staffing Levels for Refugee Health and Sanitation Services for a Population of 10-20,000

Community Health Worker	10-20
Traditional Birth Attendant	6-10
Public Health Nurse	1
Clinic Nurses Midwives	3-4
Doctors/Medical Assistants	1-3
Pharmacy Attendant	1
Laboratory Technician	1
Dressers/Assistants	10
Sanitarians	2-4
Sanitation Assistants	20

Table 6 – Site Planning Figures for Emergencies

RESOURCE	HOW MUCH YOU WILL NEED
Land	30 - 45 m^2 per person
Sheltered space (tents, or other structures)	3.5 m^2 per person
Fire break space	A clear area between shelters 50 m wide should be provided for every 300 m of built-up area. A minimum of 1-1.5 m should be provided between guy-ropes of neighboring tents on all sides
Roads and walkways	20-25% of entire site
Open space and public facilities	15-20% of entire site
Environmental sanitation	1 latrine seat per 20 people or ideally 1 per family sited not farther than 50 m from user accommodations and not nearer than 6 m. 1 x 100 liter refuse bin per 50 people 1 wheelbarrow per 500 people 1 communal refuse pit (2 m x 5 m x 2 m) per 500 people
Water	15 - 20 liters per person per day of clean water
Tap stands	1 per 200 persons sited not farther than 100 m from user accommodations
Warehouse space	For food grains in bags, stacked 6 m high allow 1.2 m^2 of floor space per tonne
Food	2,100 kcal/person/day This will require approximately 36 metric tonnes/10,000 people/ week of food assuming the following daily ration: 350-400 g/person/day of staple cereal 20-40 g/person/day of an energy rich food (oil/fat) 50 g/person/day of a protein rich food (legumes)

Table 7 – The Size of Things

Commodity volume per ton (m3/1,000kg)	Approximate	Standard package stacking height	Typical maximum
Water	1	none	n/a
Food grains/beans	2	50 kg bag	20-40 bags
Flour and blended foods	2	25 kg bag	20-30 bags
DSM in bags	2.4	25 kg bag	20-30 bags
DSM in tins inside cartons	4	20 kg/carton 4 tins/carton	8 individual cartons or 20 if palletized
Edible oil in tins inside cartons	2	25 kg/carton 6 tins per carton	8 individual cartons or 20 if palletized
Oil in drums	1.4	200 liter drum	2 drums upright with wood between the rims or 3 drums on their sides
ORS	2.4	35 kg carton	3-4 m
Mixed drugs	3.5	45 kg carton	3-4 m
Clinic equipment and teaching aids	4.5	35-50 kg carton	3-4 m
Kitchen utensils	5	35-40 kg cartons	3-4 m
Family tents	4.5	35-60 kg/ unit	4.5 m *
Compressed blankets	4.5	70 units/bale 85 kg/bale	4.5 m *
Loose blankets	9	unit	3-4 m

* where equipment for stacking allows

Table 8 – Capacities and Characteristics of Various Aircraft

Aircraft make or type	Volume* capacity in m^3	Weight* capacity in kg	Required* runway in m	Notes
Antanov AN-12	97	20,000	1,800	
Antanov AN-124	900	120,000	3,000	
Boeing B.707/320C	165	36,000	2,100	
Boeing B.747	460	100,000	3,000	
DC-3	21	3,000	1,200	
DC-6	80	11,000	1,500	
DC.8/63F	302	44,000	2,300	"stretch" version
DC.10/30F	412	66,000	2,500	
Fokker F.27	65	5,000	1,200	
Hercules L.100-30	120	15,000	1,400	Ramp for trucks, can land on earth/grass airstrips
Ilyushin IL-76	180	40	1,700	
Pilatus Porter	3	950	120	Small door
Skyvan	22	2,100	500	Ramp: can take Land Rover
Transall	140	17,000	1,000	Ramp for trucks
Twin Otter	12.4	1,800	220	Small door

*Note that the minimum length of runway required and the maximum load capacity both depend on the altitude of the airport and the temperature. Capacity is reduced for long distances as more fuel must be carried. Carrying capacity will also vary with the actual configuration of the aircraft.

Table 9 – Capacities of Various Surface Transport Means

Carrier Type	volume capacity in m^3	weight capacity in kg
Standard railway car	52	30,000
Standard sea/land container – 20ft/ 6.1 m	30	18,000
Standard sea/land container – 40ft/12.2 m	65	26,000
Large lorry and trailer	Varies	20-30,000
Large articulated lorry	Varies	30-40,000
Medium lorry	Varies	5-8,000
Long wheel base Landrover or pickup	Varies	1,000
Typical water tanker	8	8,000
Hand drawn cart	Varies	300
Camel	Varies	250
Donkey	Varies	100
Bicycle	Varies	100

Table 10 – Conversion Factors

To convert from	To	Multiply by
Length		
Yards (1 = 3ft = 36 inches)	Metres	0.91
Metres (1 = 100 cm)	Yards	1.09
Miles (1 = 1,760 yds)	Kilometres	1.61
Kilometres (1 = 1,000 m) The international nautical mile = 6,076 feet = 1.825 km	Miles	0.62
Area		
Yards^2 (1 = 9 ft^2)	Metres^2	0.84
Metres^2 (1 = 10,000 cm^2)	Yards^2	1.20
Acres (1 = 4,840 yd^2)	Hectares	0.41
Hectares (1 = 100 acres = 10,000 m^2)	Acres	2.47
Miles^2 (1 = 640 Acres)	Kilometres^2	2.59
Kilometres^2 (1 = 100 ha)	Miles^2	0.39
Volume		
US gallons	UK gallons	0.83
UK gallons	US gallons	1.20
US (UK) pints	Litres	0.47 (0.57)
Litres	US (UK) pints	2.11 (1.76)
US (UK) gallons (1 = 8 pints)	Litres	3.79 (4.55)
Metres^3	Yards^3	1.31
Yards (1 = 27 ft^3)	Metres^3	0.77
Weight		
Ounces (oz)	Grams	28.35
Grams	Ounces	0.035
Pounds (lb, 1 = 16 oz)	Kilos	0.454
Kilos (kg, 1 = 1,000 g)	Pounds	2.21
US short tons (1 = 2,000 lb)	Metric tons	0.91
US long tons (= UK tons,1 = 20 hundredweight (CWT) = 2240 lb)	Metric tons	1.02
Metric tons (MT, 1 = 1,000 kg)	US short tons	1.10
US long tons	UK tons	0.98
Temperature		
Centigrade	Fahrenheit	1.8 and add 32
Fahrenheit	Centigrade	Subtract 32 and multiply by 0.56

Weight of water (at 16.7° C, 62° F)

1 litter = 1kg; 1 US gal = 8.33 lb;
1 UK gal = 101 lb; 1 ft^3 = 62.31 lb

Table 11 – Radio Communications, Phonetic Alphabet

Letter	Phonetic Equivalent
A	Alpha
B	Bravo
C	Charlie
D	Delta
E	Echo
F	Fox-trot
G	Golf
H	Hotel
I	India
J	Juliet
K	Kilo
L	Lima
M	Mike
N	November
O	Oscar
P	Papa
Q	Quebec
R	Romeo
S	Sierra
T	Tango
U	Uniform
V	Victor
W	Whiskey
X	X-Ray
Y	Yankee
Z	Zulu

Table 12 – Typical Services and Infrastructure Requirements for Refugee Camps

1 latrine	per	1 family (6 - 10 persons)
1 water tap	per	1 community (80 - 100 persons)
1 health centre	per	1 camp (of 20,000 persons)
1 hospital	per	up to 200,000 persons
1 school	per	1 sector (5,000 persons)
4 commodity distribution sites	per	1 camp module (20,000 persons)
1 market	per	1 camp module (20,000 persons)
2 refuse drums	per	1 community (80 - 100 persons)

Memoranda

CONTENTS

Memoranda of Understanding with:

1. UNDP (1997)

2. UNICEF (1996)

3. WFP (1997)

Note: These Memoranda of Understanding are updated from time to time. The copies in this handbook are valid at the time of going to press. The latest version of these Memoranda should always be consulted.

FRAMEWORK for OPERATIONAL COOPERATION between UNHCR and UNDP

I. INTRODUCTION

1. The High Commissioner for Refugees (hereinafter referred to as UNHCR) and the Administrator of the United Nations Development Programme (hereinafter referred to as UNDP) have agreed that existing agreements on cooperation between their two organizations need revision taking into consideration the changing operational requirements of humanitarian assistance and development cooperation.

2. Building upon the experience gained through implementation of the agreement of November 1987 on "cooperation with regard to development activities affecting refugees and returnees" and joint work programmes subsequent to this agreement, the present framework affirms the commitment of both parties to promote a fresh culture of institutional collaboration, with particular attention to countries in special circumstances where a humanitarian crisis may be impending, is ongoing, or abating within a phase of recovery.

3. This Framework recognizes the respective mandates and responsibilities of each organization, and the need to build on the comparative advantages of each in arrangements for cooperation that provide added value both for the beneficiaries and for the discharge of these mandates and responsibilities. In this context, UNDP shall associate the special funds and programmes administered under its authority in support of the Framework.

4. In working to give effect to the present agreement, UNHCR and UNDP seek to reaffirm their support to United Nations system collaboration as provided for in General Assembly resolutions as well as decisions of the governing bodies of the two organizations. Mindful of the attributions of other organizations of the United Nations system, and in particular the members of the Inter-Agency Standing Committee (IASC), UNHCR and UNDP will support the mechanism for inter-agency coordination provided by the IASC, under the leadership of the Emergency Relief Coordinator (ERC). UNDP and UNHCR will also actively support and coordinate their efforts within the relevant frameworks established by the Administrative Committee on Coordination (ACC), and the Consultative Committee on Programme and Operational Questions (CCPOQ). At the country level, UNDP and UNHCR will promote and support the efficient and effective utilization of the United Nations resident coordinator system as well as inter-agency mechanisms such as the United Nations Security Management Team and the United Nations Disaster Management Team.

II. OBJECTIVES

5. The principal objectives of collaboration between UNHCR and UNDP shall be to:

   a) enhance early warning of the possible displacement of populations which might lead to refugee outflows with a view to devising early and timely preventive/remedial responses to critical problems, in both home and potential asylum countries;

   b) address the negative effect of large inflows of refugees on hosting areas, taking into account their impact on local economic, social and environmental resources;

   c) promote, at the community level, post-conflict recovery, peace-building and reconciliation in war-torn countries with large displaced populations; ensure that the reintegration of returnees is planned and supported in an effective and well-coordinated manner, providing sustainable basic services and economic opportunities, thereby reinforcing the linkages between the needs of returnees and other groups in the areas of return;

   d) foster an early and smooth phase-out of humanitarian assistance in favour of sustainable basic services and local development in areas that have suffered from severe damage and dislocation as a result of conflict; and

   e) work jointly to mobilize national and international resources for measures designed to attain the above objectives.

III. BASIC PRINCIPLES

6. The following basic principles shall guide UNHCR/UNDP cooperation:

a) Functional: cooperation shall be based on a pragmatic, mutual understanding of the concerns and mandates of the two organizations; both agencies have responsibility to ensure that their headquarters and country staff are aware of available opportunities for cooperation, its scope and orientation;

b) Complementary: country representatives of both organizations with the support of their respective headquarters, are encouraged to devise creative, complementary and mutually reinforcing operational initiatives at the country level;

c) Decentralized: flexible and practical operational procedures, with adequate delegated authority to country representatives for planning and management, will ensure that opportunities for cooperation are seized and allow for the necessary operational variations;

d) Verifiable: the cooperation shall yield tangible results to beneficiaries, with a demonstrated added value to the work of both organizations in pursuance of the objectives stated in this framework; and

e) Cost-effective: the cooperation shall be managed in a cost-effective manner with administrative costs justified against results.

IV. SCOPE OF COOPERATION

7. The scope of cooperation will vary depending on the operational context. Collaboration to cope with emergency calls for a different set of responses than those that may be needed to help a country recover from crisis. The elements of cooperation that are identified will be supported by management tools which will be jointly developed as required.

8. UNHCR and UNDP will aim to harmonize humanitarian and development action at three separate but interrelated levels:

a) Country specific: through situation-specific operational arrangements developed on a case by case basis in the light of the opportunities and constraints encountered in each context;

b) Inter-country: through operational cooperation covering both asylum countries and countries of origin of the refugees; and

c) Thematic: through a policy dialogue aimed at promoting conceptual and operational links between relief and development.

V. AREAS AND INSTRUMENTS OFFICES OPERATIONAL COOPERATION

9. In order to advance and facilitate operational cooperation, UNHCR and UNDP will:

a) share information on the possible or actual movement of refugees, displaced persons and returnees, consult each other throughout the process of planning and implementing their respective programmes and jointly evaluate activities related to prevention, impact on host communities and reintegration;

b) jointly participate in the formulation of a strategic framework for recovery and the United nations Country Strategy Note (CSN), ensuring that they properly reflect viable solutions to humanitarian crisis; UNHCR and UNDP shall align their prevention and rehabilitation assistance with the basic policy and assistance principles laid down in these frameworks;

c) undertake joint planning and programming missions aimed at strengthening the operational linkages between the two agencies in all work concerned with prevention, host country impact and reintegration; ensure that needs assessment is carried out in consultation with refugee leaders, communities in areas of return where appropriate, local government bodies, NGOs and other civil society organizations;

d) agree on the form and content of consultations to be held with national authorities in order to give effect to joint strategies and to implement programmes in the above-mentioned areas;

e) jointly invite donors, United Nations system partners and NGOs for periodic briefings and consultations on specific joint strategies, programmes and projects;

f) establish a joint approach to the effective utilization of United Nations Volunteers, under which initial assignments to UNHCR activities may be followed by a transfer to UNDP field-based programmes;

g) coordinate their approach to the development of civil society and notable with respect to the role of international NGOs and to capacity-building among national NGOs;

h) ensure, where appropriate and when resource availability permits, that UNDP support to local capacity building and UNHCR-funded local settlement and reintegration projects are mutually supportive and sustainable;

i) collaborate in joint reporting to the national authorities and institute periodic briefings to local donor representatives on programme progress and constraints, policy and sectoral issues pertaining to the orientation of aid for prevention, post-conflict recovery and peace-building, so as to generate understanding and additional support in the interest of the overall effort, and

j) collaborate in identification of priority needs addressing the development dimension of emergencies which are complementary to UNHCR humanitarian assistance and which are eligible for financing from UNDP's TRAC line I.1.3 resources.

10. Specific situations of cooperation are indicated below for the three principal operational areas, the first aiming at preventing a displacement crisis, the second at responding to the refugee impact on hosting areas, and the third at the reintegration of returnees and rehabilitation of communities and areas of return.

Prevention

11. UNHCR and UNDP shall:

a) given the complexity of early warning analysis, agree on a limited set of simple base-line indicators, including push and pull factors, in areas jointly identified as high risk situations; such indicators should be monitored on a continuous basis;

b) share assessments of risks of impending forced population displacement;

c) develop strategies in countries identified as being at risk, so as to address the causes of potential displacement without jeopardizing the fundamental right of persons to seek and enjoy asylum;

d) agree on joint initiatives to halt and reverse the deterioration of high risk situations, with clearly established roles and responsibilities, based on their mandates and comparative advantages, specifically in regard to resource and programme delivery requirements;

e) identify ways and means to strengthen local capacities for crisis management and mitigation, including conflict and dispute settlement at the local level, strengthening of judicial systems and the human rights regime, to the extent humanitarian concerns are affected;

f) where necessary, seek regional approaches to preventive action that address potential displacement; and

g) where preventive action of a political nature may be required, jointly consult the UN Department of Political Affairs (DPA).

Refugee impact on hosting areas

12. UNHCR and UNDP shall:

strengthen the operational linkages between refugee aid and development by jointly developing, in cooperation with national authorities and local communities, a comprehensive programme for support to receiving areas affected by massive influx of refugees and strengthening local and regional capacities to cope with and recover from refugee crisis.

13. The UNHCR Representative shall:

bring to UNDP's attention any adverse consequences of refugee concentrations on local communities.

14. The UNDP Resident Representative shall:

in consultation with UNHCR and the national authorities, propose and formulate programmes designed to meet the special requirements of local populations in areas exposed to the large-scale inflow of refugees including rehabilitation needs after the repatriation of the refugees.

Reintegration and rehabilitation

15. UNHCR and UNDP shall:

a) strengthen the operational linkages between the two organizations to ensure that the reintegration of returning refugees and the rehabilitation of receiving areas including basic services, are undertaken in a sustainable manner;

b) seek a common and mutually reinforcing approach to reintegration support in returnee areas, and agree upon appropriate action in relation to issues of conflict-resolution and sustainable development, aiming at cost-effectiveness in interventions, efficiency in coordination as well as added-value through the combined humanitarian and development effort;

c) in consultation with local authorities and implementing partners, jointly assess the human development situation in areas of reintegration, including identification of constraints to reintegration such as mines, land and property rights and opportunities for reintegrating skilled returnees in public services such as health and education; UNHCR shall make available information on the extent to which skills development has taken place in refugee camps prior to repatriation; and

d) coordinate their approach to and agree on division of responsibilities in relation to the reintegration needs of internally displaced persons in those cases where UNHCR is working with internally displaced persons.

16. The UNHCR Representative shall:

a) invite UNDP to participate in the initial situation analysis and needs assessment of areas to which refugees are expected to return. The joint assessment shall serve as a basis for collaborative action to facilitate reintegration focused on short and medium-term impact; and

b) ensure that UNHCR's reintegration strategy is developed with substantive inputs from UNDP, so as to enhance the development impact of UNHCR's initial reintegration support (including Quick Impact Projects, (QIPs)) and ensure its sustainability.

17. The UNDP Resident Representative shall:

a) undertake an analysis of local development management capacity, including the allocation of local resources for priority needs and for a sustained recovery;

b) consult with UNHCR in the identification and formulation of UNDP development activities so as to reflect appropriate follow-up and/or linkages with reintegration assistance; and

c) liaise with UNHCR on its approach to the reintegration of refugees, ex-combatants and internally displaced persons, so as to develop a common understanding of the nature and level of support required for the community reinsertion of the different categories of such populations where UNHCR is working with such populations.

VI. RESOURCE MOBILIZATION

18. Programmes aiming at the prevention of refugee situations, and sustainability of projects targeting host country communities, reintegration action and area development schemes require substantial additional and complementary resources to those provided under UNHCR's core funds or to resources available under UNDP's country programmes and TRAC allocations, including TRAC line I.1.3, assigned for "Countries in Special Development Situations".

19. To the extent feasible, when seeking extra-budgetary resources for the purposes of such programmes, the two agencies shall jointly approach donors as early as possible on the basis of agreed arrangements for implementation and programme delivery.

20. UNHCR and UNDP shall:

a) consult with the government and actively use fora such as Round Table and Consultative Group Meetings, as well as regional or local donor meetings, to attract and mobilize resources for jointly identified programmes in the area of displacement prevention, impact on refugee host communities and reintegration; and

b) cooperate actively in the elaboration of Inter-Agency Consolidated Appeals and possible future expansion, and ensure that the activities contemplated are consistent with the overall strategy of external support.

VII. IMPLEMENTATION, MONITORING AND FOLLOW-UP OF THE FRAMEWORK

21. In order to implement joint strategies of assistance to countries in special circumstances, as outlined in the preceding sections, mechanisms and procedures for regular and close consultation between the two agencies need to be systematized and reinvigorated, at headquarters and at the country level.

22. UNHCR and UNDP shall carry out joint reviews and lessons learnt exercises both at headquarters and country level as a general feature of their cooperation. The two organizations shall apply the findings for the further refinement of collaborative instruments and activities and shall coordinate and, as appropriate, collaborate in the development of joint training programmes for field-based management staff. UNHCR and UNDP shall also seek to contribute to the development of, and participate in, inter-agency training programmes such as those provided by the ILO Turin Centre on United Nations system coordination, the Disaster Management Training Programme (DMTP) and the United Nations Staff College Project.

23. UNHCR and UNDP shall work towards a common approach to conditions of service, security and welfare of field personnel and shall arrange for the exchange of field staff through loans and secondments, bringing the mutual experience of each organization to bear on the activities of the other.

24. UNHCR and UNDP shall:

at the country level

a) appoint a senior staff member within each office to act as focal point for the implementation of the Framework at the country level and, as appropriate, to support sub-regional and inter-country initiatives undertaken with the Framework. The focal points shall operate as a team and co-opt such other agency staff in their work as the situation may require, reporting jointly to the UNDP Resident Representative and the UNHCR Representative on a regular basis;

b) develop a joint operational plan of action to implement the Framework in the context of country-specific requirements and agree on task management arrangements for the effective formulation, implementation and monitoring of joint endeavours;

c) in support of the above and as warranted, establish joint offices in areas of repatriation to facilitate coordination of initiatives and the efficient transition of operations between the two organizations in support of sustainable area-based reintegration programmes;

at the headquarters level

d) conduct an annual senior level meeting to consider and provide guidance on general policy issues the inter-country ramifications of refugee displacement, and the implications of any joint initiatives in the field of prevention and reintegration;

e) conduct quarterly meetings of the UNHCR /UNDP Working Group to review issues of common concern regarding operational collaboration and to prepare the annual senior-level meeting; and

f) establish focal points within each organization to jointly take stock of achievements and constraints, to identify opportunities for collaboration and propose initiatives in this regard, to support country-level formulation and implementation of an operational plan of action and to monitor progress in implementing the present agreement.

VIII. VALIDITY

25. This Framework shall become valid from the date of its signature. It will be the subject of a general review and evaluation in December 1998.

26. This Framework supersedes the agreement of November 1987 entitled "UNHCR/UNDP Cooperation with Regard to Development Activities Affecting Refugees and Returnees".

27. Provisions previously agreed between UNHCR and UNDP relating to financial and personnel arrangements will remain valid until such time as they may be amended by separate agreements.

Geneva, 10 April 1997

James Gustave Speth
Administrator of the United Nations
Development Programme

Sadako Ogata
United Nations High Commissioner
for Refugees

MEMORANDUM OF UNDERSTANDING between United Nations High Commissioner for Refugees (UNHCR) and United Nations Children's Fund (UNICEF)

I. INTRODUCTION

1. This Memorandum of Understanding (MOU) between the United Nations High Commissioner for Refugees (UNHCR) and the Untied Nations Children's Fund (UNICEF) is aimed at encouraging and facilitating systematic, predictable, cooperative action between the two organizations. It seeks to build on the recognized comparative advantages of each organization and to establish operational modalities of cooperation which result in "value-added" elements.

2. Underlying this MOU is the recognition of the respective mandates and responsibilities of each organization.

3. UNHCR and UNICEF agree that their joint and separate actions on behalf of children (whether with refugee, displaced or returnee populations, as well as local populations affected by the presence of displaced persons or refugees), shall be based upon principles contained in the Convention on the Rights of the Child, in international instruments governing the rights of refugees and in other human rights instruments, as well as upon the related policies enunciated by the Executive Committee of the High Commissioner's Programme and the UNICEF Executive Board.

II. SCOPE

4. This MOU applies in countries where UNICEF has an established office or programme and covers activities in favour of the following beneficiary populations:

i) refugees;

ii) returnees;

iii) internally displaced persons;

iv) local populations in the country of origin, affected by the presence of internally displaced persons or returnees; or in the country of asylum affected by the presence of refugees.

III. RESPONSIBILITIES IN RELATION TO VARIOUS POPULATION GROUPS

5. The roles and responsibilities of UNHCR and UNICEF in relation to the population groups listed in (4) above, while distinct, are sometimes inter-related. Both UNHCR and UNICEF seek to assist national authorities with regard to the well-being of children.

(i) Refugees

6. According to the Statute of its Office, UNHCR is mandated to provide international protection to refugees and to promote durable solutions to their problems. UNHCR is ultimately responsible for the international protection and welfare of refugees, which may include the provision of assistance, in cooperation with host governments and in line with their international obligations.

7. UNICEF, for its part, has been called upon by its Executive Board (Resolution 1992/21) "to continue providing emergency assistance to refugee and displaced women and children, particularly those living in areas affected by armed conflict and natural disasters…in accordance with its mandate" and "in collaboration with other relevant United Nations Agencies and the international community." UNICEF's assistance to refugees, agreed in each case with the host government and with UNHCR, is selective and subject to the availability of resources over and above those committed in its Master Plan of Operations for the relevant country programme.

(ii) Returnees

8. UNHCR and UNICEF will consult with each other to ensure complementarity of activities for returnees.

9. The involvement of UNICEF with returnee children and women could be part, or an extension, of a regular country programme; such involvement may require undertaking new programme activities within the UNICEF-assisted country programme of cooperation. Normally, UNICEF actions, whether through reprogramming of existing resources or through mobilization of supplementary resources, are determined through consultation with government and other national partners.

10. UNHCR's responsibility for returnees is to ensure that voluntary repatriation takes place under conditions of safety and with dignity, assisting, where needed, the return and reintegration of repatriating refugees and monitoring their safety and well-being on return. The duration and scope of UNHCR's activities in favour of returnees are limited and vary according to the specifics of each voluntary repatriation operation. UNHCR's involvement may also be determined by specific tripartite or bilateral agreements with respective countries outlining the framework of voluntary repatriation operations.

(iii) Internally displaced persons

11. The interventions of UNICEF and UNHCR in favour of internally displaced persons are usually part of a broader United Nations coordinated plan of action.

12. UNICEF will assist governments and other authorities to fulfil their obligations to protect and aid internally displaced populations. Within the context of the country programme of cooperation, UNICEF focuses capacity-building approaches on community-level activities to help women and children with special needs and to assure their integration into national programmes for the provision of essential health, education and other social services.

13. UNHCR's involvement is selective, applying to persons displaced internally for reasons that would make them of concern to UNHCR if they were outside their country. This involvement is based on a specific request of the Secretary-General or a competent principal organ of the United Nations and is influenced by the consideration of how this might contribute to the prevention and/or solution of refugee problems.

(iv) Affected local host populations

14. UNICEF, through the assistance interventions in its country programme of cooperation, will support national authorities to ensure that the needs and well-being of the local host population are addressed.

15. The involvement of UNHCR with affected local populations is selective, and normally is focused on those living within the areas of refugee influx, return of repatriating refugees or internally displaced persons of concern to UNHCR.

IV. TYPES OF COOPERATIVE ACTIVITIES

(i) Advocacy, Promotion and Strategy Formulation

16. UNHCR and UNICEF will cooperate, whenever appropriate and feasible, in the advocacy and promotion of the rights and protection of children of joint concern, particularly in the following areas:

a. the right of the child to a name and nationality; the preservation of the child's identity;

b. the safety and liberty of children: the prevention of their recruitment into armed forces and groups; forced labour, torture, abduction, physical and/or sexual abuse and detention;

c. tracing, family reunification, the special concerns related to the evacuation of children and adoption.

17. Within the context of the Convention on the Rights of the Child (CRC) UNICEF and UNHCR will cooperate on the following issues:

a. promotion of implementation of the CRC;

b. organization of educational activities, e.g. seminars, training, or school-based projects, aimed at the dissemination of knowledge of the rights provided for in the CRC;

c. reporting on the implementation of the CRC to the Committee on the Rights of the Child, as well as follow-up on the implementation of the recommendations of the Committee. UNHCR and UNICEF will facilitate the inclusion of data on refugee children in country reports to the Committee on the Rights of the Child.

(ii) Operational Activities

18. The precise mix of UNHCR's and UNICEF's operational activities will vary according to situation-specific conditions and needs. UNICEF's particular strength and contribution arises from its long-term country presence and perspective, and lies in its ability to focus on relief and development in a mutually reinforcing manner. UNHCR's challenge is to provide relief or initial reintegration assistance in such a way that it is an effective complement to or precursor of development activities.

Contingency planning

19. Both UNHCR and UNICEF contribute to coordinated U.N. emergency contingency planning, normally undertaken in full cooperation with national authorities. Within this framework, UNHCR will invite UNICEF to participate in planning for possible refugee influxes. During such planning activities, UNICEF will review with national counterparts and UNHCR ways in which its ongoing country operations may quickly be adjusted to enable UNICEF to provide emergency assistance in pre-identified sectors.

20. To enhance the effectiveness of a collaborative response to emergencies, both organizations shall keep each other informed on the development and maintenance of their emergency response capacities, such as, for example, emergency staff training and rosters, standby arrangements, material stockpiles, or development of telecommunications networks.

Assessment and monitoring

21. UNICEF and UNHCR shall jointly agree on guidelines and specific methodologies for assessing and monitoring the situation of children of joint concern and will exchange information on programmatic action to be taken.

Support to unaccompanied children

22. Typically, unaccompanied children are found both within the country of origin and in the refugee population. Within the country of origin, UNICEF will assist national authorities to develop, coordinate and apply appropriate policies, standards and strategies for the care and family reunification of unaccompanied children. UNHCR takes the lead in relation to unaccompanied children among refugee populations. The two organizations will collaborate in the further development and use of global programming guidelines and standards and will ensure the necessary operational coordination and information-sharing between operations in countries of asylum and of origin. Both agencies will coordinate with ICRC in relation to tracing and reunification activities.

23. Where special arrangements for the care of unaccompanied refugee children are warranted, UNHCR, within its responsibility for overall coordination, shall consult with UNICEF to determine how UNICEF may participate in the management and implementation of such arrangements; such assistance may be provided in the following ways:

i. undertaking assessment(s) of the situation and needs of unaccompanied children among each refugee population;

ii. assisting in the adaptation of global principles and guidelines for the care of unaccompanied children, provided in Refugee Children: Guidelines on Protection and Care (UNHCR 1994) and in Assisting in Emergencies (UNICEF 1986/1996) and, when required, developing and issuing situation-specific guidelines in consultation with other organizations directly involved in the care of such children and/or family tracing;

iii. taking responsibility for coordinating the setting up and supervision of programmes for the care of unaccompanied children and for tracing and family reunion.

24. In countries of origin, UNICEF will ensure similar consultation and cooperation with UNHCR and with national authorities to facilitate the incorporation of unaccompanied returnee children into appropriate programmes.

Promotion of psychosocial well-being

25. UNHCR and UNICEF will collaborate in the further development of guidelines and training materials for activities addressing the needs of children traumatized by exposure to armed conflict and extreme violence.

26. Where children are exposed to armed conflict, violence, abuse or other great hardship within their own countries, UNICEF will collaborate with governments and other national partners to assess the psychosocial situation of such children, to establish guidelines for care and counseling, and to implement a national programme of cooperation aimed at helping traumatized children and at the prevention of further traumatization. UNICEF support will emphasize national capacity development, community- and family-based care strategies, and appropriate professional referral for the most seriously traumatized children. UNICEF will collaborate with UNHCR to facilitate the integration of returnee children into national programmes.

27. In the case of an influx of refugees similarly exposed to traumatic events, UNHCR, in consultation with UNICEF and other relevant national institutions and NGOs, will coordinate an assessment of the psychosocial situation of refugee children and the preparation of a programme of activities to help those who are traumatized and to prevent further traumatization. Such programmes should, to the extent possible, be designed with a view to community involvement, while for very seriously traumatized children special arrangements would be needed. A decision on the most appropriate modalities for implementation and the allocation of responsibilities will be taken by UNHCR after consultation with UNICEF and other organizations directly involved. UNICEF may take responsibility, inter alia, for the provision of technical assistance and the organization of training.

Support to families and children

28. Community-based activities focusing on the general well-being of refugee children are essential to UNHCR's emergency response. In case of a major refugee emergency, this response may need to be supported by additional capacity. At the request of UNHCR, UNICEF shall assist in the design and development of programme activities to strengthen family and community coping and self-help strategies and assure as healthy and nurturing an environment as possible for children.

29. The well-being, protection and healthy development of the child are best served in a secure, caring and informed family environment. Thus UNICEF gives priority to strengthening – or reviving – the capacity of the family to care for the child, to ensuring adequate family access to food and to income (for the mother especially), to essential knowledge and coping skills. UNICEF will collaborate with UNHCR to facilitate the integration of returnee families into appropriate family-support programmes.

Basic education

30. In seeking to provide educational opportunities for refugee children, UNHCR shall draw on the expertise of UNICEF to help assess and analyze the educational status and needs of children. UNHCR and UNICEF will jointly determine how UNICEF may contribute to adapting existing educational material, including resources for peace education and to the development and provision of basic supplies and equipment.

31. UNICEF will seek to ensure that in its regular country programmes of cooperation core educational and teacher training materials are identified which can form the basis of an early education intervention during an emergency situation. UNICEF will collaborate with UNHCR to ensure continuity in approach, content and teacher training between refugee basic education and the basic education system in the country of origin. UNICEF, in its collaboration with national authorities to rehabilitate or develop the basic education system of the country of origin, will collaborate with UNHCR to facilitate access for returnee children to national schools.

32. Both agencies will coordinate with UNESCO in relation to basic education activities.

Health Activities

33. UNHCR and UNICEF will continue to collaborate to meet the health needs of women and children (including adolescents) of concern to both. UNICEF will focus particular attention on support to local populations in the vicinity of refugee camps, working in conjunction with local authorities. Specific activities may include the further elaboration of standards, guidelines or manuals, as for example the production of "Reproductive Health in Refugee Situations."

34. Measles Immunization. UNHCR will advise UNICEF immediately of a new refugee situation where measles vaccination is a priority need. UNICEF will provide measles vaccine (and other antigens that may be required on an emergency basis) together with related equipment and supplies,

including cold chain equipment, vaccination cards and also Vitamin A supplements. Arrangements for vaccination with UNICEF supplies will be decided by mutual agreement, taking into account the implementation capacity of national immunization services, NGOs and others.

35. EPI. UNICEF will assist national health authorities of the host country to provide full EPI services, where feasible, to refugee women and children, and will help health authorities to maintain the standard and coverage of service provision for host populations affected by refugee influxes.

36. Support to Safe Motherhood Practices. In the context of a new refugee situation, planning for implementation of maternal and neonatal care programmes will be undertaken by UNICEF and UNHCR in coordination with host country authorities, NGOs and other relevant organizations. In addition, UNICEF will make available clean delivery kits for home and institutional deliveries, whether assisted by professional birth attendants or not. When required, UNICEF will provide support to strengthen existing national referral systems for women experiencing complications.

37. Infant and young child feeding. In stabilized refugee situations, UNICEF and UNHCR will collaborate to support normal growth and nutrition in infants and young children. Emphasis will be placed on the promotion, protection and support of exclusive breastfeeding for six months and on continued breastfeeding for two years or beyond, while ensuring that children are given sufficient good-quality complementary food and the necessary care. Both organizations will ensure compliance with the established UNHCR policy for the Acceptance, Distribution and Use of Milk Products in Refugee Programmes.

38. Health education in general will also be promoted by both organizations and UNICEF will support information, education and communication activities among refugee populations, drawing on, and adapting as necessary, existing materials available in the host country and the country of origin.

39. Both agencies will coordinate with WHO in relation to basic health activities.

Water and Sanitation

40. At the onset of a refugee emergency, UNHCR may approach UNICEF to assist in ensuring provision of adequate quantities of safe water and sanitary services, where feasible, to refugee populations. In the framework of its country programme of cooperation UNICEF will help national authorities to maintain the standard and coverage of service provision for affected host populations, and for returnee populations.

41. UNHCR and UNICEF will jointly review and adapt, as necessary, existing designs of sanitary facilities used in host countries in order to streamline approaches to environmental sanitation for refugees with those in force for host populations.

(iii) Reintegration Activities: Field-level Letters of Understanding

42. UNHCR will inform UNICEF concerning expected repatriation operations at an early stage of planning and negotiations for each operation or whenever large-scale spontaneous movements are expected. In preparation for the voluntary return of refugees to their country of origin, UNHCR, in consultation with the relevant government authorities, will agree on complementary initiatives focused on the areas of return, which will ensure the effective reintegration of the people, the availability of essential services, and the inclusion of these areas and their populations in longer-term national development programmes.

43. In each instance, such planning and proposed initiatives, whenever appropriate and feasible, shall be the subject of a field-level Letter of Understanding which reflects the particular circumstances surrounding the voluntary return and reintegration into the country of origin. In particular, such Letters of Understanding should set out, inter-alia, the specific institutional framework for cooperation; the agreed activities of each agency in support of returnee communities, especially those aimed at the capacity building of governmental structures and non-governmental organizations; and the intended linkages between the activities of both organizations.

V. FINAL PROVISIONS

Resource mobilization

44. Each organization is responsible for mobilizing the resources necessary to discharge the responsibilities set out herein. Should insufficient resources be available for immediate action, the other organization shall be consulted. For certain special operations, a decision may be taken to issue a Joint Appeal. Both organizations will participate in DHA-coordinated consolidated inter-agency appeal processes.

Public Information

45. UNHCR and UNICEF will share relevant information of interest to the media, NGOs and the public about children of joint concern. UNHCR and UNICEF will cooperate, at both Headquarters and field levels, to promote public awareness of the situation of children of concern and the work of each organization to address their needs. Where appropriate and feasible, this cooperation may take the form of joint or coordinated development of public information materials and activities. Each agency shall designate focal points at Headquarters for regular consultations in this respect.

Phase-out and handover

46. Prior to the agreed conclusion of any activities pursuant to this MOU or to a field-level letter of understanding, or where either UNHCR or UNICEF expects that resources will be insufficient for the purposes intended, a mutually agreeable plan for phase-out shall be prepared.

47. Each agency shall be responsible for any outstanding obligations or liabilities that they may have incurred. Assets, inventory or resources, if any, that remain after the conclusion of the activity of the MOU shall be considered for free handover to the Agency with a continuing presence or related operations in the area, to national institutions, or to suitable NGOs or other institutions responsible for the beneficiary population contemplated by the activity.

VI. GENERAL CONDITIONS

48. Nothing in this MOU shall effect the relations of either signatory to its Governing Body, nor the contractual relationship and administrative supervision of UNHCR and UNICEF to their operational partners.

49. The implementation of this MOU will be in compliance with the respective administrative and financial rules and procedures of UNHCR and UNICEF and be subject to the availability of funds.

50. This MOU will enter into force upon signature and shall be of indefinite duration.

51. This MOU may be terminated by either party upon 90 days written notice.

52. This MOU may be modified at any time by mutual consent of the parties.

53. The Executive Heads of both organizations will meet when necessary to discuss policy issues, and will nominate senior officials to meet at least annually (or regularly) to review strategic and implementation issues of particular interest to both organizations and to propose possible courses of action to address them.

Geneva, 14 March 1996

Signed for

United Nations High Commissioner for Refugees

Sadako Ogata
United Nations High Commissioner for Refugees

United Nations Children's Fund

Carol Bellamy
Executive Director

WFP/UNHCR COOPERATION

MEMORANDUM OF UNDERSTANDING ON THE JOINT WORKING ARRANGEMENTS FOR REFUGEE, RETURNEE AND INTERNALLY DISPLACED PERSONS OPERATIONS

REVISION EFFECTIVE AS OF 31 MARCH 1997

1. INTRODUCTION

1.1 Even before the conclusion of the 1985 Memorandum of Understanding (MOU), UNHCR and WFP had established a very close partnership in the service of refugees. This was significantly strengthened with the new working arrangements introduced progressively from the start of 1992. A revised MOU, reflecting experience with these new arrangements, became effective at the start of 1994. This 1997 revision reflects the experience in implementing the provisions of the first revision.

1.2 The MOU sets out its objectives and scope, and establishes the division of responsibility and arrangements for needs assessment, food mobilization, logistics, appeals, monitoring, nutritional surveillance, reporting, and coordination. The last section contains the general conditions governing the MOU.

1.3 The Statute of UNHCR mandates the Office to assume the function of providing international protection to refugees and of seeking permanent solutions to the problems of refugees. Within the United Nations system, UNHCR is thus responsible for the protection and welfare of refugees, and for helping to find durable solutions, including voluntary repatriation, local integration and resettlement in third countries. Subsequent General Assembly resolutions have given UNHCR certain responsibilities in respect of stateless persons and returnees. In specific situations, and further to a request from the Secretary-General or a competent principal organ of the United Nations, UNHCR may also act on behalf of persons displaced internally for refugee-like reasons and those threatened with displacement.

1.4 The definition of persons within UNHCR's competence in the Office's Statute places emphasis on a well-founded fear of persecution. Additional criteria have been progressively added to accommodate the evolving nature of refugee flows. In many situations, UNHCR now provides protection and assistance to refugees fleeing persecution, conflict and widespread violations of human rights.

1.5 WFP is the food aid arm of the United Nations system. WFP meets the emergency food needs of refugees and internally displaced persons (IDPs), and provides the associated logistic support; uses food aid to support economic and social development; and promotes world food security, defined as access of all people at all times to the food needed for conducting an active and healthy life. WFP thus has both an emergency and a developmental role. The latter is of particular relevance in WFP's cooperation with UNHCR and other agencies, including financial institutions, in rehabilitation activities in the country of origin. Within the scope of the MOU, WFP has the lead responsibility for mobilizing basic food commodities and the resources to deliver them.

1.6 To achieve its objectives, the MOU must be of value to UNHCR and WFP colleagues in the field, and reflect their experiences. Suggestions to improve its usefulness are encouraged. Full and open cooperation and exchange of information at all levels are prerequisites for the success of the vital partnership for which the MOU provides the framework.

2. OBJECTIVES AND SCOPE

2.1 Through the timely provision of the right quantity of the right food and related non-food inputs, UNHCR and WFP seek to ensure:

- the restoration and/or maintenance of a sound nutritional status through a food basket that meets the assessed requirements, is nutritionally balanced and is culturally acceptable; and
- the promotion of as much self-reliance as possible among the beneficiaries, through the implementation of appropriate programmes to develop food production or generate self-employment, which will thereby facilitate a progressive shift from general relief food distribution towards sustainable development-oriented activities.

2.2 UNHCR and WFP are committed to ensuring that food aid is targeted at the household level and reaches the most vulnerable, and that its delivery respects the guiding principles of humanitarian action. They will also work together to implement strategies to involve the beneficiary community, and particularly women, in all aspects of the management of food aid.

2.3 The MOU is a management tool contributing to the achievement of these objectives by defining clearly the responsibilities and arrangements for cooperation between UNHCR and WFP. It does so in a way that maximizes the strengths and comparative advantages of each organization for the benefit of all concerned, and that ensures the necessary coordination.

2.4 The MOU covers cooperation in the provision of food aid to refugees, returnees and, in specific situations as defined in paragraph 1.3, IDPs, provided that the beneficiaries number at least 5,000. Where the beneficiaries are located in developed countries (namely countries other than those listed in the OECD/DAC Annual Report as aid recipient countries that fall below the threshold for World Bank loan eligibility), the provisions of the MOU will still apply provided that the availability of the necessary donor resources would not be at the expense of WFP's relief operations in developing countries. This will be determined by WFP on a case-by-case basis.

2.5 UNHCR will meet the food needs of persons of its concern but outside the scope of the MOU as defined above, and those of any persons who, while falling within the MOU's scope, have been excluded by a situation-specific agreement with WFP.

3. PLANNING AND NEEDS ASSESSMENT

3.1 UNHCR and WFP will undertake contingency planning and maintain contingency plans for countries where this is deemed appropriate. Each will seek to ensure joint participation – with others concerned – in the process, and share relevant contingency plans where these could not be developed jointly.

3.2 The indicative energy, protein and micronutrient requirements established by FAO and WHO, adjusted as necessary to take into account the demographic composition and other relevant factors specific to the beneficiary population, will provide the basis for the calculation of food needs. A common set of agreed nutritional guidelines will be used for assessing the food needs for both the general and any selective feeding programmes that may be necessary.

3.3 The Government of the country of asylum and UNHCR are responsible for determining the number of refugees, while WFP and UNHCR will jointly assess the number eligible for food assistance. An accurate identification of beneficiaries and a sound assessment of their needs are essential for the mobilization and efficient use of the resources made available to both organizations.

3.4 UNHCR has developed and will maintain appropriate refugee-registration mechanisms. UNHCR has a joint responsibility with the host Government for ensuring that refugee numbers are established as accurately and as soon as possible after a new refugee emergency, and updated regularly thereafter. The size and the nature of the influx will determine the type of registration mechanism to be used. Pending registration, the most appropriate techniques will be used in order to estimate numbers and identify beneficiaries. In normal circumstances registration/verification will take place within three months of the start of a major influx. Arrangements must be made to register any new arrivals thereafter. Registration data should be verified and updated continuously, particularly during, but not limited to, food distribution. Verification of data on all beneficiaries should be repeated periodically, as required by the situation.

3.5 UNHCR will ensure that WFP is fully involved in the planning and execution of refugee enumeration/registration arrangements for actual or potential beneficiaries of food aid. Where a satisfactory registration has not been possible within three months, UNHCR and WFP will jointly determine the number of beneficiaries in need of food assistance. Operational partners and local representatives of donor Governments should be closely associated with this and other aspects of enumeration and registration. Should there be disagreement between the respective country offices on the number of beneficiaries to use in the absence of a satisfactory initial registration, the problem shall be referred to the headquarters level for resolution. Pending such resolution, WFP will provide food to the number of beneficiaries it estimates to be in need of assistance.

3.6 In consultation with the relevant government authorities, operational partners and experts, as appropriate, UNHCR and WFP will jointly assess the overall food aid and related relief requirements.

Both agencies will agree on the modalities of food assistance, composition of the food basket, ration size, duration of assistance, as well as on directly related non-food inputs which may have an impact on the nutritional status of the beneficiaries. Special consideration will be given to the needs of women, children and vulnerable groups. The views of the beneficiaries, especially those of women, will be sought. The proposed food assistance programme will take into account all relevant factors, including the socio-economic and nutritional status of beneficiaries, cultural practices, overall food availability, prospects for self-reliance, availability of cooking fuels, and the need to minimize the environmental impact of using the cooking fuels selected.

3.7 UNHCR is responsible for determining the nutritional status of refugees and for the implementation of such selective feeding programmes as may be found necessary in addition to the agreed general ration. The results of nutritional surveys will be shared with WFP. The nutritional status of the refugees will also be examined as part of a joint food aid needs assessment. The decision to implement selective feeding programmes will be taken in consultation with WFP on the basis of agreed guidelines. UNHCR will keep WFP informed regularly on the implementation of such programmes.

3.8 Whenever possible, UNHCR and WFP will promote the use of food and non-food aid to encourage and support the self-reliance of the beneficiaries and of their communities, as appropriate. Measures will include food for work, and the provision of non-food inputs such as seeds and agricultural tools.

3.9 In a major new emergency, the initial assessment to determine the number of beneficiaries and the most urgent food needs will normally be carried out within the framework of the emergency response being mobilized by both agencies, and would involve the participation of emergency response teams from UNHCR and WFP, as appropriate.

3.10 In ongoing operations, a review of food needs will normally take the form of a periodic joint assessment mission, undertaken either with country-based or outside staff. The composition of the mission will be mutually agreed. WFP will normally provide the mission team leader and a logistician, if required, and UNHCR a nutritionist and other specialist staff to help assess levels of economic self-reliance, if applicable. The participation as full mission members of selected donor and operational partner representatives will be encouraged so as to promote donor support for the mission's findings. The views of the relevant national authorities and of the beneficiaries will be sought. Jointly established guidelines for food needs assessment missions will be followed. Changes to the recommendations agreed by a joint food needs assessment mission shall be made only by mutual agreement, after discussion between the headquarters.

3.11 WFP will be closely associated with the planning and implementation of repatriation operations, and decisions on the use of WFP food will be taken jointly. If a repatriation commission is established by the Governments concerned and UNHCR, WFP should be a formal or informal observer at its meetings, whenever appropriate.

3.12 Food aid can also play a key role in the successful reintegration of returnees after their repatriation, when assistance to communities or areas is likely to be more appropriate than individual entitlements. Post-conflict rehabilitation activities are required not only for returnees but also for the affected population in the country of origin. Complementary linkages between the short-term reintegration efforts of UNHCR, such as quick-impact projects, and the development activities of WFP and others should be built so as to promote sustainable socio-economic recovery and a successful reintegration of returnees. Whenever appropriate, WFP will promote community and/or area-based projects in such sectors as food security, community services, infrastructure and production that would use food for work or monetized food aid. A joint (or multi-organization) reintegration strategy will be drawn up accordingly.

3.13 At the field level, joint plans of action setting out the agreed objectives and implementation arrangements for operations under the MOU shall be developed and updated regularly.

3.14 Should the UNHCR or the WFP country office consider that developments since the last needs assessment warrant a change in the agreed ration or number of beneficiaries, the other organization shall be advised immediately. The implications of these developments will be reviewed jointly and a course of action agreed.

3.15 Should the country offices not agree on a course of action, the issue shall be referred to both headquarters for appropriate resolution. Pending resolution, food assistance will be provided at the level established by the last agreed assessment, if applicable.

4. RESPONSIBILITIES FOR FOOD MOBILIZATION AND MILLING

4.1 WFP is responsible for mobilizing the following commodities, whether for general or selective feeding programmes: cereals; edible oils and fats; pulses and other sources of protein; blended foods; salt; sugar; and high-energy biscuits. Where beneficiaries are totally dependent on food aid, WFP will ensure the provision of blended foods or other fortified commodities in order to prevent or correct micronutrient deficiencies.

4.2 UNHCR is responsible for mobilizing complementary commodities. These include: local fresh foods; spices; tea; and dried and therapeutic milks.

4.3 The joint needs assessment will determine the specific commodities and quantities required. The assessment will also determine whether cereals are to be provided in whole grain or as flour. For practical, nutritional and environmental reasons, it is generally preferable to provide flour in the early stages of an emergency, but such provision may be difficult to sustain in protracted operations. If whole grain is provided, local milling capacity must be available, and the ration should include compensation for milling costs (normally 10 percent up to 20 percent, if justified), if these costs are borne by the beneficiaries. WFP is responsible for mobilizing the necessary resources for milling and will provide milling facilities to the beneficiaries where feasible.

4.4 WFP will consult UNHCR immediately should it become clear that WFP may not be able to ensure the timely arrival and/or milling of food to meet the needs agreed under the MOU, whether because of unavailability of resources, delayed deliveries, logistical problems, or any other constraints. Corrective action may include borrowing from the Central Emergency Revolving Fund of the United Nations Department of Humanitarian Affairs and UNHCR advancing funds to WFP against later reimbursement.

4.5 In particular cases where micronutrient requirements cannot be met through the ration, UNHCR will assume responsibility for the provision of the necessary micronutrients until the ration can be adjusted or fortified to meet these needs.

5. RESPONSIBILITIES FOR FOOD DELIVERY AND DISTRIBUTION

5.1 WFP is responsible for the timely transport to agreed extended delivery points (EDPs) of sufficient quantities of those food commodities it is responsible for mobilizing. WFP is also responsible for storing these commodities at the EDPs, and for managing the latter. WFP will keep UNHCR informed of the in-country logistical arrangements made to implement the agreed programme.

5.2 The location of an EDP will be proposed by the country offices, in accordance with agreed guidelines, and confirmed by UNHCR and WFP headquarters. The location selected should minimize overall costs and maximize management efficiency of the operation as a whole. EDPs should be located where sufficient warehousing space can be made available to ensure regular final distribution and the most efficient possible onward transportation, thus avoiding the need for further intermediate storage or trans-shipment between the EDP and the distribution location. Management and security considerations are particularly important. There should normally be a full-time UNHCR and WFP presence at the EDP location.

5.3 Unless otherwise agreed, UNHCR is responsible for the transportation of all commodities from the EDP and for their final distribution. Responsibility will be assumed ex-warehouse (i.e., EDP) or Free-on-Truck/Free-on-Rail, taking into consideration practice in the country. UNHCR shall make all logistical arrangements for the food commodities for whose mobilization it is responsible, and shall keep WFP informed of the logistical arrangements made to implement the agreed programme.

5.4 Arrangements for the final distribution of food commodities to beneficiaries will be agreed jointly by the Government and UNHCR, in full consultation with WFP and in conformity with the UNHCR commodity distribution guidelines. These arrangements will respect UNHCR and WFP's policy of ensuring the maximum possible appropriate involvement of the beneficiary community, and of women in particular, in all aspects of distribution. The final distribution of food commodities will normally be the responsibility of an implementing partner of UNHCR, whose designation shall be

jointly agreed by UNHCR and WFP. The distribution modalities and the responsibilities of the implementing partner for reporting on the distribution and use of food commodities will be the subject of a tripartite agreement among UNHCR, WFP and the implementing partner. UNHCR is responsible for ensuring that implementing arrangements also provide appropriate guidance to beneficiaries on how to prepare food in a manner that minimizes cooking time and safeguards its nutritional content.

5.5 In targeted feeding programmes such as school feeding, food for work, and in non-camp situations in the country of asylum or in situations where food assistance is targeted to both IDPs and refugees, UNHCR and WFP may agree to transfer the responsibility for distribution to WFP.

5.6 There is no automatic retroactive entitlement when full distribution of the agreed ration has not been possible. The decision on any retroactive distribution will be made jointly by UNHCR and WFP, taking into account the nutritional status of beneficiaries, measures taken by them, and any liabilities incurred in coping with the shortfall, its economic impact, and the future availability of resources.

6. RESPONSIBILITIES FOR FUNDING AND APPROACHES TO DONORS

6.1 UNHCR and WFP will each mobilize the cash and other resources necessary for the discharge of their respective responsibilities. Thus, WFP will mobilize all international and land transport, storage and handling (LTSH) costs, milling costs, if applicable, and any other resources required for the transport of its commodities up to the EDPs, storage at, and the management of, EDPs. UNHCR will mobilize cash and other resources necessary for all other aspects of commodity management and distribution from the EDPs onwards, and for all aspects from mobilization and purchase to delivery and distribution of the commodities for which it is responsible.

6.2 UNHCR and WFP will ensure that the resource implications for each organization are set out in all approaches to donors and related documentation in a manner that makes these responsibilities and their complementarity clear. Details on country-specific LTSH and distribution costs will be provided. Approaches to donors will be coordinated, and UNHCR will share with WFP in advance the text covering food needs in any appeal to donors. Joint approaches will be made whenever appropriate, both at the start of a new operation and at any time should it appear that the response of donors will not ensure the timely delivery of the necessary commodities.

6.3 UNHCR and WFP will urge donors to pledge commodities and cash for all food requirements under this MOU through WFP, rather than bilaterally. WFP will manage all contributions channelled through it, and coordinate and monitor donor pledges and shipments, including bilateral and non-governmental donations, of all commodities, seeking to adjust delivery schedules as necessary. UNHCR will be kept informed accordingly.

6.4 WFP will seek to ensure that bilateral food resources for refugees, returnees and IDPs falling under this agreement, whether channelled through WFP or not, are accompanied by the full cash resources needed to cover LTSH and other related support costs.

6.5 UNHCR will support WFP's specific approaches to donors to provide cash for local, regional or international purchase, so as to ensure that the needs of beneficiaries are met in the most timely and cost-effective manner possible. UNHCR will also support WFP's general approaches to donors for cash contributions to bring the Immediate Response Account (IRA) of the International Emergency Food Reserve (IEFR) up to, and maintain it at, the approved level, and for contributions to any similar fund, so that WFP can respond swiftly to new emergency food needs.

7. MONITORING AND REPORTING

7.1 WFP will maintain an effective system for monitoring the food pipeline and keep UNHCR closely and regularly informed, at the field and headquarters levels, of its status and developments. WFP will immediately alert UNHCR should it appear that the pipeline may not be able to meet agreed needs.

7.2 UNHCR will organize regular nutrition surveys and maintain, in consultation with WFP, an effective surveillance system for monitoring the nutritional status of beneficiaries. The results will be shared with WFP as an important element to measure the progress and efficiency of the joint feeding programme.

7.3 UNHCR will establish, in consultation with WFP, an effective monitoring and reporting system for each operation under this MOU, with special attention given to qualitative information on the socio-economic status of beneficiaries as this affects their food needs. The responsibilities of the Government or other implementing partner entrusted with the distribution of WFP food will be set out in the tripartite agreement referred to in paragraph 5.4 in a manner that allows effective programme management and meets WFP's and UNHCR's requirement to account to their donors. This agreement will require the partner entrusted with distribution to report directly to both WFP and UNHCR on the distribution and use of WFP food. UNHCR and WFP field staff will undertake periodic joint monitoring missions at the food distribution sites.

7.4 UNHCR and WFP will seek to have multilateral donors accept the documentation provided to their Executive Committee and Executive Board, respectively, as fulfilment of reporting requirements, instead of requiring donor-specific reporting.

8. COORDINATION

8.1 Close cooperation, and an open and frequent exchange of information and assessments between UNHCR and WFP at the field level are essential. This should also enable the resolution of most actual and potential problems without referring them to headquarters. Regular and structured meetings will be held in the field to review progress and developments, and ensure a coordinated response.

8.2 The UNHCR and WFP country offices, in liaison with the relevant Government authorities as appropriate, will establish food aid coordinating mechanisms that allow regular consultation and exchange of information with multilateral and bilateral donors, the diplomatic community, other United Nations organizations concerned and NGO partners. UNHCR will ensure that the necessary operational coordination mechanisms outside the capital are established in close consultation and with the participation of WFP.

8.3 WFP will share with UNHCR the authorizing documents for assistance under the MOU before they are finalized. Letters of Understanding (LOUs) between WFP and the Government will expressly provide for full access to and monitoring by both organizations of all aspects of the operation covered by the LOU. The need to associate UNHCR formally in a tripartite LOU will be considered jointly on a case-by-case basis.

8.4 WFP and UNHCR will collaborate on public information activities to promote awareness of the food and related needs of beneficiaries, understanding of each organization's role, and support for the work of each organization to address these needs. In all joint operations, WFP and UNHCR will acknowledge the role of the other to both the media and the general public in order to ensure the common goal of donor and host government support. At the field level, there should be adequate visibility for each organization.

8.5 At the headquarters level, coordination on operation-specific matters is the responsibility of the respective operations managers. Joint field missions will be undertaken when warranted by specific situations. Coordination on commodity and resource mobilization issues is the responsibility of respective resource mobilization services. Responsibility for coordination on overall policies and functional issues lies with the Directors of UNHCR's Division of Operational Support and WFP's Operations Department, who will encourage direct contacts among the technical, logistic and programme coordination staff concerned.

8.6 When either UNHCR or WFP is elaborating or developing emergency response capacities, systems and guidelines or taking any other action that could potentially benefit (or duplicate) the work of the other, the responsible unit in the other organization is to be informed and every effort should be made to maximize the benefits to both.

8.7 Each organization will develop and maintain its own training materials for discharging its responsibilities. Joint training courses will be held, with priority given to the field. These courses will focus on cooperation in implementing the provisions of the MOU and on a better understanding of the other organization's responsibilities and constraints. Such courses would normally use the training materials of each organization in combination. In addition, each organization will seek to offer the other places on courses with a more general relevance, such as emergency management training.

8.8 Joint headquarters-level meetings with Governments and others concerned by specific country or regional operations will be organized as required. If either UNHCR or WFP organizes a meeting with external bodies on operations covered by the MOU, the other organization will be invited.

8.9 The evaluation services of UNHCR and WFP will organize joint evaluations as appropriate, taking into account the scale and complexity of operations covered by the MOU. When an evaluation of a joint operation is organized by one organization, the other shall be informed and invited to participate.

9. GENERAL PROVISIONS

9.1 This revised MOU shall come into effect as of 31 March 1997, superseding the revised MOU dated January 1994.

9.2 It governs cooperation in all operations covered by its terms except those, or those parts of, operations as may be specifically excluded by mutual agreement.

9.3 The MOU may be modified at any time by mutual agreement. It will be kept under regular review by a joint task force established for this purpose by the Executive Heads of UNHCR and WFP.

(Signed)

Catherine Bertini

Executive Director WFP

(Signed)

Sadako Ogata

High Commissioner UNHCR

Glossary

See also chapter 2 on protection, Annex 1 for a table of international instruments with their short and full titles. Chapter 15 on food and nutrition includes a glossary of technical terms used in that chapter.

Asylum seeker	An individual whose refugee status has not yet been determined.
Bureau	Organizational division at UNHCR Headquarters dealing with a particular region.
Children	All persons under the age of 18 (as defined in the Convention on the Rights of the Child).
Convention refugees	Persons determined to be refugees by the authorities of States that have acceded to the Convention and/or Protocol. As such, they are entitled to claim the rights and benefits which those States have undertaken to accord to refugees.
EXCOM	The Executive Committee of the High Commissioner's Programme which currently consists of representatives from 53 states elected on the widest possible geographic basis from those states with a demonstrated interest in and devotion to finding solutions for refugee problems.
Financial Rules	The "Financial Rules for Voluntary funds administered by the High Commissioner for Refugees" (document A/AC/96/503/Rev.6 of 1 February 1996).
Headquarters	UNHCR headquarters in Geneva.
Implementing agreement	Agreement between UNHCR and a partner which defines the conditions governing the implementation of a project.
Implementing partners	Operational partner that signs an implementing agreement and receives funding from UNHCR.
Internally displaced persons	See definition in chapter 2 on protection.
IOM/FOM	An Inter-Office Memorandum/Field Office Memorandum originating from Headquarters and containing management and other instructions.
Mandate refugees	Persons considered by UNHCR to be refugees according to the Statute and other relevant General Assembly resolutions. This determination is not dependent upon the state of asylum being party to the 1951 Convention or 1967 Protocol. Mandate refugees can benefit from the High Commissioner's action. They do not, however, benefit from the rights accorded to Convention refugees, unless they are also recognized as refugees by a State party to the Convention.
Non-governmental organization	A private voluntary agency created to perform beneficial activities according to its statutes or constitution.
Operational	This term is applied to the organization directly implementing an assistance project, e.g. UNHCR becomes operational when it provides assistance directly to refugees.
Operational partner	Governmental, inter-governmental and non-governmental organizations and UN agencies that work in partnership with UNHCR to protect and assist refugees, leading to the achievement of durable solutions.
Refugee	For convenience, the word refugee is used in this handbook to describe any person of concern to UNHCR. Chapter 2 on protection provides definitions of the different categories of persons of concern, including refugees, internally displaced persons and stateless people.
Representative	The High Commissioner's representative in the country where the emergency occurs (regardless of the representative's official title).
The Field	The area, outside Headquarters, where UNHCR provides protection and assistance to refugees and which contains UNHCR's Regional Offices, Branch Offices, Sub-Offices and Field Offices.
The Statute	The Statute of the Office of the United Nations High Commissioner for Refugees (General Assembly Resolution 428 (v) of 14 Dec. 1950). "Statutory" should be understood accordingly.

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