OFFICE OF THE UN HIGH COMMISSIONER FOR REFUGEES
BACKGROUND GUIDE 2016

Written by: Ashley Boyer, Director; Kelly Morrison, Assistant Director; Jessie-Lynn Anik Mace, Director of Conference Services
Dear Delegates,

Welcome to the 2016 National Model United Nations Conference in Washington, DC (NMUN•DC)! We are pleased to introduce you to our committee, the Office of the United Nations High Commissioner for Refugees (UNHCR). This year’s staff is: Director Ashley Boyer and Assistant Director Kelly Morrison. Previously, Ashley completed both her B.A. and M.A. in Political Science and served as a Peace Corps Volunteer in Cartagena, Colombia. This will be her second year on staff, and she is excited to return to NMUN•DC. Kelly graduated with a B.A. in Political Science and Spanish from Lee University and will begin a PhD in Political Science at the University of Pittsburgh this fall.

The topics under discussion for UNHCR are:

I. Exploring Alternatives to Refugee Camps
II. HIV and Reproductive Health Services for Displaced Persons

UNHCR is an important organization within the UN system, and it plays an integral role in advancing global refugee policy. UNHCR administers emergency assistance when crises emerge and actively works to increase collaboration between states and Nongovernmental Organizations in order to address global refugee issues. To accurately simulate the committee, the best policy recommendations both in position papers and resolutions should not only be grounded in the policies and recommendations of the UNHCR, but also the success stories of Member States’ responses to particular refugee crises.

We hope you will find this Background Guide useful as an introduction to the topics for this committee. However, it is not intended to replace individual research. We highly encourage you to explore your Member State’s policies in-depth, as well as use the Annotated Bibliography and Bibliography to further your knowledge on these topics. In preparation for the conference, each delegation will submit a position paper. Please take note of the NMUN policies on the website and in the Delegate Preparation Guide regarding plagiarism, codes of conduct, dress code, sexual harassment, and the awards philosophy and evaluation method. Adherence to these guidelines is mandatory.

The NMUN Rules of Procedure are available to download from the NMUN website. This document includes the long and short form of the rules, as well as an explanatory narrative and example script of the flow of procedure. It is thus an essential instrument in preparing for the conference, and a reference during committee.

If you have any questions concerning your preparation for the committee or the conference itself, feel free to contact the Under-Secretary-General for the committee, Katrena Porter, or the Secretary-General for the conference, Lauren Shaw. You can reach either staff member by contacting them at: usgkat.dc@nmun.org or secgen.dc@nmun.org.

We wish you all the best in your preparations and look forward to seeing you at the conference!

Sincerely,

Ashley Boyer, Director
Kelly Morrison, Assistant Director
Committee Overview

Introduction

The Office of the United Nations High Commissioner for Refugees (UNHCR), also known as the United Nations (UN) Refugee Agency, is the UN’s primary agency for coordinating international action in order to protect refugees. UNHCR was created on 14 December 1950 by the General Assembly (GA) to address the European refugee crisis following World War II. The following year, the United Nations Convention Relating to the Status of Refugees (1951), which is the legal framework for protecting refugees, was adopted. UNHCR won the Nobel Peace Prize in 1954 for its dedication to the refugees affected by World War II. Nonetheless, the refugee crisis following the Soviet intervention in Hungary in 1956 made it clear that the UN needed a more permanent system to protect refugees. Soon UNHCR began supporting the rights of refugees from Africa, Asia, and Latin America, and today UNHCR is active in protecting refugees, IDPs, and stateless persons in almost every major conflict.

UNHCR’s resources are primarily focused on addressing the needs of refugees, internally displaced persons (IDPs), and those seeking asylum. UNHCR defines a refugee as a person who “owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country.” The second category of people served by UNHCR are IDPs, who are individuals that moved within their own country to find refuge from human rights violations, armed conflict, or general violence and who legally remain under the protection of their own government. The third major category of people served by UNHCR are asylum seekers, who are people who have fled their country and claim to be refugees, but whose claims have not been independently verified by a national asylum system. UNHCR also works to address the needs of stateless individuals. The legal definition of a stateless person is “a person who is not considered as a national by any State under the operation of its law.” There are many causes of statelessness, including discrimination by a state towards a particular group and the creation of new territorial boundaries by states. Statelessness affects an estimated 10 million people globally and can result in individuals not being able to access basic government resources, including attending school and receiving medical care. With its staff of 9,300 people working in 123 countries, UNHCR remains the leading international organization for protecting the millions of people that have been uprooted throughout the world.

Governance, Structure, and Membership

UNHCR is governed by the GA and the Economic and Social Council (ECOSOC) and its budget and biennial programs are approved by an Executive Committee (ExCom). The ExCom was created in 1958 and its purpose is to advise on international protection and discuss a wide range of other issues during its annual meetings in Geneva, Switzerland. The ExCom Standing Committee meets three times per year to discuss relevant issues and new

1 UNHCR, About Us, 2016.
2 UNHCR, History of UNHCR, 2016.
3 Ibid.
4 Ibid.
5 Ibid.
6 Ibid.
7 UNHCR, Who We Help, 2016.
8 UNHCR, Refugees, 2016.
10 UNHCR, Asylum Seekers, 2016.
11 UNHCR, What We Do, 2016.
12 Ibid.
13 Ibid.
14 UNHCR, About Us, 2016.
15 UNHCR, Governance and Organization, 2016.
16 UNHCR, Executive Committee, 2016.
developments. ExCom’s documentation is issued in a report that is submitted directly to the GA Third Committee. ExCom was originally composed of 24 Member States; it increased to the current amount of 98 Member States in 2015. ExCom members are selected from representative geographical regions and are elected by ECOSOC. UNHCR has a diverse national and international staff that provides protection and assistance to nearly 60 million refugees, returnees, internally displaced people, and stateless persons. UNHCR is led by the High Commissioner, Deputy High Commissioner, and Assistant High Commissioners who are responsible for implementing the agency’s mandate and obligations. The current High Commissioner, Filippo Grandi, was elected 1 January 2016 to serve a five-year term.

Mandate, Functions and Powers

The foundational framework and mandate of UNHCR can be found in GA resolution 428 (V), which is also known as the Statute of the Office of the United Nations High Commissioner for Refugees (1950). This founding document states that UNHCR will ensure “international protection, under the auspices of the United Nations, to refugees who fall within the scope of the present Statute and of seeking permanent solutions for the problem of refugees by assisting Governments and, subject to the approval of governments concerned, private organizations to facilitate the voluntary repatriation of such refugees, or their assimilation within new national communities.” The United Nations Convention Relating to the Status of Refugees (1951) is an essential document in determining UNHCR’s mandate as it defined the term “refugee” and created the legal framework for how refugees were to be protected. Furthermore, the 1967 Protocol Relating to the Status of Refugees removed all geographical and temporal restrictions from the convention. The Convention Relating to the Status of Stateless Persons (1954) defined and categorized stateless persons as those “not considered as a national by any State under the operation of its law” and included this group under protection by UNHCR. UNHCR was originally created with a limited three-year mandate and was to be disbanded after its mandate expired, but by 1954 its mandate was further extended until the end of the decade. In 2003, the GA extended its mandate “until the refugee problem is solved.”

UNHCR is mandated to lead an international response in assisting refugees worldwide by providing protection, emergency response, and durable solutions. UNHCR provides initial life-saving assistance to refugees, including access to clean water and sanitation, health care, and shelter items such as blankets and sleeping mats. Often the worst refugee situations are those involving environmental emergencies. To prepare for this, UNHCR has assembled teams of experts who are ready to deploy rapidly and who have access to emergency funds and stockpiles of humanitarian non-food items. After the emergency is over, UNHCR works with refugees to find durable solutions that may include repatriation, resettlement, or local integration. Another key function of UNHCR is fundraising, which is fundamental to the other services that UNHCR provides, such as refugee reintegration, emergency response, advocacy, and protection. UNHCR relies primarily on voluntary contributions from Member

17 UNHCR, Executive Committee, 2016.
18 Ibid.
19 Ibid.
21 UNHCR, Governance and Organization, 2016.
22 UNHCR, The High Commissioner, 2016.
23 Ibid.
25 Ibid., p. 6.
27 Ibid.
28 UNHCR, Stateless People, 2016.
29 UNHCR, Governance and Organization, 2016.
30 Ibid.
31 UNHCR, What We Do, 2016.
32 UNHCR, Assistance, 2016.
34 Ibid.
35 UNHCR, Durable Solutions, 2016.
States, non-governmental organizations (NGOs), private corporations, and citizens.85 Eighty-five percent of the funds raised by UNHCR are spent in the field providing basic needs, security, and protection to refugees.37

Recent Sessions and Current Priorities

UNHCR’s 66th session of the ExCom took place from 5 October to 9 October 2015.38 In particular, this session focused on organizational matters, a General Debate, and an update on the Afghan refugee situation, in addition to budgeting matters.39 UNHCR’s Global Strategic Priorities (GSPs) for 2016-2017 serve as targets for all UNHCR operations.40 These are meant to be utilized by both UNHCR and its partners in regards to all country-level operations.41 There are eight GSPs that cover a wide range of issues from protecting the environment to the processing and registration of legal documents.42 Each GSP is associated with key indicators of achievement.43 These GSPs also encompass a wide range of thematic issues including, but not limited to, responding to emergencies, encouraging self-reliance, ending statelessness, engaging IDPs and working in cooperation with partner organizations around the world.44

The number of individuals forced to flee their homes has continued to rise in 2016.45 Over two million persons have fled in Yemen alone, another half million in South Sudan, and hundreds of thousands in Burundi, Libya, and elsewhere around the world.46 Syrian refugees have become the largest refugee population under UNHCR’s mandate, with four million being hosted by neighboring countries and another 12.2 million requiring humanitarian aid.47 Additionally, those situated in proximity to Syria continue to face challenges as the conflict persists; this has pushed some to attempt to leave the region by dangerous means, including sea travel.48 As such, countless people have lost their lives crossing the Mediterranean Sea as they attempt to escape.49 In particular, April 2016 saw as many as 500 people perish as their ship capsized on its way to Europe from Libya.50 On 13 May 2016 another 1000 refugees and migrants were rescued off the coast of Italy, as the situation in the region continues to deteriorate.51

At the beginning of 2015, there were 16.8 million people deemed to be of concern to UNHCR in sub-Saharan Africa.52 As the year passed, that number increased by tens of thousands due to crisis situations in the Central African Republic, Nigeria, and South Sudan.53 In particular the situation in South Sudan is escalating as funding for relief to the region is reaching its end.54 Recent clashes between government forces and the opposition in Western Bahr al Ghazal state has forced over 96,000 people to be internally displaced, and all six neighboring countries have reported an influx in refugees.55 UNHCR’s strategic plan for addressing this region consists of organizing a response to emergency situations; investigating innovative means of addressing these crisis situations; and working with partner agencies and institutions in the region.56

36 UNHCR, Donors, 2016.
38 UNHCR, 2015 Executive Committee Meeting, 2016.
39 UNHCR, Executive Committee, 2015.
41 Ibid.
42 Ibid.
43 Ibid.
44 Ibid.
45 Ibid.
46 Ibid.
47 Ibid.
48 Ibid.
49 Ibid.
50 Ibid.
51 Splinder, Coastguard rescues some 1,000 refugees and migrants off Italy, 2016.
53 Ibid.
54 Dobbs, South Sudan refugee outflow grows as relief funds lag, 2016.
55 Ibid.
Conclusion

Forced displacement affects over 60 million people worldwide; a situation which has gained an increasing amount of attention from the international media this past year, and by consequence the international community. UNHCR’s work is more important than ever as crises like the conflicts in Syria and Iraq are displacing more people than the world has seen since the 1940s. UNHCR seeks to reduce situations that force displacement by working with Member States to peacefully resolve disputes and protect human rights. UNHCR will continue to work alongside Member States and global partners until it has achieved all aspects of its mandate by fully addressing the needs of the world’s refugees, IDPs, and stateless people.

Annotated Bibliography


This Website explains the basic responsibilities undertaken by UNHCR. Delegates will find this source useful because it gives a succinct overview of UNHCR’s mission and the actions it performs around the world. This source also notes the founding principles and goals of UNHCR. This will guide delegates in their research of UNHCR because it outlines ways in which it interacts with Member States, refugees, IDPs, and stateless people.


Using this source, delegates may delve into the history of the agency since its formation in 1950. This site explains not only the history of UNHCR but also shows how UNHCR has evolved to its work in present day conflicts. This source will also assist delegates with understanding what world events factored into the creation of UNHCR and why its mandate has been modified and extended past the original mandate.


This document represents a vital source for delegates to gain an understanding of UNHCR’s current priorities and strategies for the 2016-2017 year. It highlights key thematic areas of work, as well as gives an update on areas of concern for UNHCR. It allows delegates to gain a better understanding of the situations in Africa and the Middle East and the means by which it is being addressed by UNHCR and its partners, as well as more work that must be done to help those affected.

Bibliography


I. Exploring Alternatives to Refugee Camps

“At the UN refugee agency we believe that camps should be the exception and only a temporary measure in response to forced displacement.”

Introduction

When refugees, asylum-seekers, and internally displaced persons (IDPs) cannot return to their country or place of origin, the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol mandate that host countries and the international community establish permanent settlement for displaced individuals. This principle is known as non-refoulement, which means that “no one shall expel or return a refugee against his or her will, in any manner whatsoever, to a territory where he or she fears threats to life or freedom.” Refugee camps, defined as “any purpose-built, planned and managed location or spontaneous settlement where refugees are accommodated and receive assistance and services from government and humanitarian agencies,” provide one settlement option. However, camps can only have limited success as they cannot guarantee the rights protected under the Convention, including property, employment, permanent housing, and public education. Needs such as education, vocational training, legal aid, and social support are best met outside of camps through the existing institutions of host countries. This is why refugee camps are only meant to be a temporary measure used in desperate circumstances. Instead, the Office of the United Nations High Commissioner for Refugees (UNHCR) aims to provide alternatives such as rented land and housing, informal occupation, or private hosting arrangements. With nearly 60 million individuals displaced globally, UNHCR’s efforts to provide long-term alternatives to refugee camps are critical.

International and Regional Frameworks

The core document for UNHCR’s work is the UN Convention Relating to the Status of Refugees and its 1967 Protocol. Initially, the Convention defined refugees as those who fled Europe following World War II. The 1967 Protocol expanded the geographic and temporal definition of a refugee. Today, more than 13.7 million individuals qualify as refugees and are entitled to the rights outlined in this convention, including the right to housing and resettlement. UNHCR has created multiple strategies and policies to protect the rights of refugees. Most relevant to the issue of refugee camps and their alternatives are the Guiding Principles on Internal Displacement (1998), UNHCR Policy of Refugee Protection and Solutions in Urban Areas (2009), UNHCR Policy on Alternatives to Camps (2014), and UNHCR Global Strategy for Settlement and Shelter (2014-2018). Each document prioritizes long-term solutions, including the creation of long-term housing options and alternatives to refugee camps. The UNHCR-NGO Toolkit is another important resource and provides a repository of standards and best practices on successful UNHCR partnerships with non-governmental organizations (NGOs).

58 UNHCR, Alternatives to Camps, 2016.
60 Ibid.
61 UNHCR, Policy on Alternatives to Camps, 2016, p. 12.
63 UNDP, Migration, Refugees, and Displacement, 2016.
64 UNHCR, Policy on Alternatives to Camps, 2016, p. 3.
65 UNHCR, Alternatives to Camps, 2016.
68 Ibid., p. 2.
69 Ibid.
72 Ibid.
73 Ibid.
74 UNHCR, UNCHR-NGO Toolkit, 2015.
On the regional level, several foundational documents also provide for the rights of refugees. For example, the *Organization of the Africa Union Refugee Convention* (1969) is the core set of standards for the protection of refugees on the African continent.75 Likewise, the *Cartagena Declaration* (1984), *Mexico Declaration and Plan of Action* (2004), and *Brazil Declaration* (2014) expand on the rights of refugees in Latin America.76 The European Union follows the *Common European Asylum System*, which provides a streamlined framework for acceptance of refugees and asylum-seekers to the region.77 Beyond these broad frameworks, many Member States and regions adopt policy outlines for specific refugee crises. For example, with the recent influx of more than 4.7 million refugees to Europe from Syria, UNHCR coordinated the national efforts of Egypt, Iraq, Jordan, Lebanon, and Turkey to form the *Regional Refugee and Resilience Plan (3RP)* for 2016-2017.78 The plan streamlines national efforts to coordinate budgets, designate tasks, and create outcome targets and goals.79 With regard to settlement, the 3RP explains how 18,100 households within camps and 438,700 households outside of camps will receive assistance for shelter and shelter upgrades.80

**Role of the UN System**

Guided by these documents and frameworks, the UN system works primarily through UNHCR to provide resettlement opportunities for displaced individuals.81 The first main aspect of UNHCR’s work on this topic is policy analysis.82 UNHCR publications such as the annual *Global Appeal* are crucial in outlining key actions that policymakers can take and best practices that they can follow.83 In addition to the formulation of policy, UNHCR uses its resources and partners with national governments, NGOs, and the private sector to provide long-term housing solutions for refugees.84 For instance, the Nobody Left Outside campaign calls on the private sector to contribute resources to provide housing for the displaced.85 The UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) is another refugee-focused UN body that works with 5 million displaced Palestinians and manages 58 refugee camps spread through Jordan, Lebanon, the West Bank, Gaza Strip, and Syria.86 Like UNHCR, UNRWA seeks to improve infrastructure and refugee camps while also providing alternatives to camps.87 For example, UNRWA’s *Infrastructure and Camp Improvement Programme (ICIP)* rebuilds and rehabilitates homes as well as utilizes urban planning techniques to improve the conditions in camps.88

Many other organizations assist UNHCR in the humanitarian aspects of their work. The World Food Programme (WFP) and the Food and Agricultural Organization of the United Nations (FAO) provide refugees with food supplies and long-term employment opportunities in agriculture.89 Most recently, both organizations have responded to the Syrian refugee crisis by providing rations of food to malnourished children, pregnant women, and nursing mothers.90 The WFP and FAO have also partnered in stable areas to provide displaced families with opportunities to garden or work with poultry production as long-term employment opportunities.91 Additionally, the World Health Organization (WHO) provides healthcare to displaced individuals and works to integrate refugees into the healthcare

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79 Ibid.
87 Ibid.
88 Ibid.
91 Ibid.
systems of their destination countries, outside of camp boundaries.\textsuperscript{92} The United Nations Development Programme (UNDP) also works with the displaced to ensure that they find access to vocational training, education, and other resources that they need within their host countries.\textsuperscript{93} Other UN organizations that provide such support, both through their own efforts and through partnerships with NGOs, include the Office of the High Commissioner for Human Rights, the UN Children’s Emergency Fund (UNICEF), the UN Population Fund, and the UN Office for the Coordination of Humanitarian Affairs.\textsuperscript{94}

\textbf{Shortcomings of Refugee Camps}

Though refugee camps serve as a viable measure of short-term relief for displaced individuals in crisis, they cannot provide for the long-term needs of refugees, IDPs, and asylum-seekers.\textsuperscript{95} Refugee camps cannot provide the displaced with basic goods and services such as water, sanitation, and health care, to which refugees are entitled under international law.\textsuperscript{96} Even if camps have access to water and sanitation facilities, the haphazard construction of refugee camps means that it is often impossible to distribute these goods efficiently.\textsuperscript{97} As a result of water shortages and unsanitary conditions, which are common problems in refugee camps, refugees are more susceptible to disease and malnutrition.\textsuperscript{98} For instance, following the Rwandan genocide as many as 60,000 refugees to the Democratic Republic of the Congo died as a result of water shortage and cholera in refugee camps.\textsuperscript{99} In another example, the only water accessible to 40,000 Syrian refugees in the Shatila refugee camp near Beirut was so salty that it could decompose metal cutlery after only half an hour.\textsuperscript{100} These are only some of the problems that result from overcrowding and poor infrastructure in refugee camps.\textsuperscript{101} Many refugees live in a constant state of poverty.\textsuperscript{102} In Jordan, 84\% of Syrian refugees lived below the poverty line, while one in six families lived in abject poverty, surviving on less than $40 per month.\textsuperscript{103}

\textbf{Viable Alternatives to Camps}

UNHCR’s efforts to promote alternatives to camps fall into three major key action points that were released in 2015.\textsuperscript{104} These action points suggest guidance and best practices for Member States as they attempt to carry out the recommendations of UNHCR’s \textit{Policy on Alternatives to Camps}.\textsuperscript{105} The three actions are Settlement and Shelter Response, Contingency Planning and Preparedness, and Adapting Service Delivery.\textsuperscript{106}

\textit{Settlement and Shelter Response}

UNHCR’s \textit{Policy on Alternatives to Camps} provides several alternative settlement options.\textsuperscript{107} At the core of UNHCR’s recommendation is the need to link settlement with the unique culture and political context of each host

\textsuperscript{92} UN WHO, \textit{Refugee and Migrant Health}, 2016.

\textsuperscript{93} UNDP, \textit{Migration, Refugees, and Displacement}, 2016.

\textsuperscript{94} UN Global Issues, \textit{Refugees}, 2016.

\textsuperscript{95} UNHCR, \textit{Alternatives to Camps}, 2016.


\textsuperscript{97} UNRWA, \textit{What We Do: Infrastructure and Camp Improvement}, 2016.

\textsuperscript{98} Cronin, \textit{A Review of Water and Sanitation Provision in Refugee Camps}, 2008, p. 3.

\textsuperscript{99} Ibid., p. 2.

\textsuperscript{100} The Guardian, \textit{Syrian Refugees in Lebanon}, 2015.

\textsuperscript{101} Ibid.

\textsuperscript{102} UNHCR, \textit{UNHCR Study Shows Rapid Deterioration in Living Conditions of Syrian Refugees in Jordan}, 2015.

\textsuperscript{103} Ibid.

\textsuperscript{104} UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #1 Settlement and Shelter Response}, 2015; UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #2 Contingency Planning and Preparedness}, 2015; UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #3 Adapting Service Delivery}, 2015.

\textsuperscript{105} UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #1 Settlement and Shelter Response}, 2015, p. 1.

\textsuperscript{106} UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #1 Settlement and Shelter Response}, 2015; UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #2 Contingency Planning and Preparedness}, 2015; UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #3 Adapting Service Delivery}, 2015.

\textsuperscript{107} UNHCR, \textit{Alternatives to Camps: Making it Work, Key Action #1 Settlement and Shelter Response}, 2015, p. 1.
country. 108 UNHCR recommends that policymakers integrate resettlement plans into national and local legislation through consultation with local and national officials, reminding policymakers that the initial plans for settlement have long-term implications. 109 Whenever possible, UNCHR further recommends that refugees should have similar living standards as their hosts, while being as immersed in the local communities as possible, thus providing for long-term integration into host communities. 110

One successful case of resettlement under UNHCR’s policies can be seen in a refugee settlement in Niger named Intikane. 111 The 14,500 residents of Intikane fled Mali following violence at the hands of Al-Qaeda sympathizers. 112 Though many refugees and asylum-seekers were absorbed into Nigerien camps or cities, some nomadic refugees could not pursue this opportunity due to their dependence on their livestock. 113 In the nomadic culture, livestock carries as much importance as children, meaning that the nomads preferred to live in the relative danger at the Mali-Niger border rather than abandoning their lifestyle for a camp or urban life. 114 UNHCR recognized this unique need and worked with the Nigerien government to set up a vast expanse of land in the Tahoua region where the refugees could roam and set up villages with their livestock and families. 115 In exchange for the land, UNHCR agreed to rehabilitate a well and build a school in the area to provide for the remaining needs of the Malian refugees. 116

**Contingency Planning and Preparedness**

Another way to create successful alternatives to camps is to ensure that existing operations have a contingency plan in place that will allow them to respond effectively to the needs of increased refugee inflows. 117 Local and national governments could anticipate future influxes of refugees and use the strategies listed previously to ensure alternatives to camps before refugees even arrive. 118 Unfortunately, less than half of current operations have a contingency plan in place. 119 For this reason, UNHCR provides tips for action in their follow-up publication to the Policy on Alternatives to Camps. 120 At the center of these recommendations is risk management in line with the Preparedness Package for Refugee Emergencies. 121 By tracking international conflicts and trends, local and national governments can prepare themselves for the potential influx of refugees. 122 Thus another crucial suggestion is that international policymakers engage with government authorities in host communities, in order to determine what alternative housing arrangements could be possible. 123 UNHCR further recommends that any contingency plan set up a realistic time frame and establish standard operating procedures for the event of an emergency. 124

UNHCR cites the Tunisia Inter-Agency Contingency Plan as a best practice for a viable alternative to camps. 125 Recognizing in 2014 that Tunisia would likely experience an influx of Libyan refugees fleeing civil violence, the country set up a contingency plan through a partnership with UNHCR, the International Organization for Migration and the Red Cross – Red Crescent Movement. 126 The organizations worked closely with local and national Tunisian authorities to set up a worst case and probable scenario plan. 127 As an alternative to camps, the plan allowed refugees

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108 Ibid.
109 Ibid.
110 Ibid.
112 Ibid.
113 Ibid.
114 Ibid.
115 Ibid.
116 Ibid.
118 Ibid.
119 Ibid.
120 Ibid.
121 Ibid.
122 Ibid.
123 Ibid.
124 Ibid.
125 Ibid., p. 2.
127 Ibid.
to live in collective shelters or host communities, providing them with cash transfers for their basic necessities.\textsuperscript{128} As suggested in UNHCR policies, this plan took into account local contexts and capacities for refugees.\textsuperscript{129}

Adapting Service Delivery

Poor service delivery in camps has resulted in water shortages, disease, and malnutrition, and camps cannot provide all the long-term services displaced individuals need.\textsuperscript{130} UNHCR’s third key action point provides recommendations for stakeholders in four main categories: advocate, align, partner, and plan.\textsuperscript{131} First, UNHCR recommends that stakeholders advocate an integrated system to provide public goods and services that complies with the Sustainable Development Goals.\textsuperscript{132} Next, stakeholders are encouraged to act by aligning the strategies for refugees and the strategies for nationals such that both benefit equally.\textsuperscript{133} Throughout this process, international policymakers should partner with national and local policymakers such that all stakeholders are working towards the same goal.\textsuperscript{134} Finally, policymakers must plan carefully through expert assessment and multi-year programmatic changes such that policy reflects and integrated approach to both short and long-term goals.\textsuperscript{135}

Rwandan education reform represents a best case scenario for the provision of educational services to refugees.\textsuperscript{136} UNHCR, the Ministry of Education, the Ministry of Disaster Management and Refugee Affairs, UNICEF, and NGOs collaborated to create the Inclusive Refugee Education Management Programme to improve education for displaced individuals as well as members of communities hosting refugees and IDPs.\textsuperscript{137} The program invested in public schools to improve their capacity to host refugees as well as the quality of education by monitoring student progress, providing psychosocial services to students, training teachers, strengthening involvement of parents, and constructing additional infrastructure.\textsuperscript{138} These efforts resulted in improved quality of education for all students, while ensuring that displaced individuals could begin the process of integration into their local contexts.\textsuperscript{139}

Conclusion

It is evident that refugee camps do not provide individuals with the rights they are entitled under the 1951 Convention Relating to the Status of Refugees and the 1967 Protocol.\textsuperscript{140} Accordingly, UNHCR has advocated for the creation of alternatives.\textsuperscript{141} UNHCR recommendations call for policy changes, including the integration of national and international strategies for refugees, long-term contingency planning, and the provision of basic services to refugees through national institutions.\textsuperscript{142} As the number of displaced individuals continues to increase, these efforts only grow in importance to the international community.\textsuperscript{143}

Further Research

Delegates are first encouraged to look at particular best practices and successful alternatives to refugee camps. The best policy recommendations both in position papers and resolutions will not only be grounded in the policies and

\textsuperscript{128} Ibid.
\textsuperscript{129} Ibid.
\textsuperscript{130} UNHCR, UNHCR Study Shows Rapid Deterioration in Living Conditions of Syrian Refugees in Jordan, 2015.
\textsuperscript{131} UNHCR, Alternatives to Camps: Making it Work, Key Action #3 Adapting Service Delivery, 2015.
\textsuperscript{132} Ibid., p. 1.
\textsuperscript{133} Ibid.
\textsuperscript{134} Ibid.
\textsuperscript{135} Ibid.
\textsuperscript{136} Ibid., p. 2.
\textsuperscript{137} Ibid.
\textsuperscript{138} Ibid.
\textsuperscript{139} Ibid.
\textsuperscript{140} Ibid.
\textsuperscript{141} UNHCR, UNHCR Study Shows Rapid Deterioration in Living Conditions of Syrian Refugees in Jordan, 2015.
\textsuperscript{142} UNHCR, Policy on Alternatives to Camps, 2016.
\textsuperscript{143} UNHCR, Alternatives to Camps: Making it Work, Key Action #1 Settlement and Shelter Response, 2015; UNHCR, Alternatives to Camps: Making it Work, Key Action #2 Contingency Planning and Preparedness, 2015; UNHCR, Alternatives to Camps: Making it Work, Key Action #3 Adapting Service Delivery, 2015.
recommendations of UNHCR, but also the success stories of Member States’ responses to particular refugee crises. Delegates should ask: What are the patterns of best practices in the world today, and how could these be put into action on a larger scale? Other aspects that delegates could research are the policies and recommendations of other UN bodies besides UNHCR. A wide variety of humanitarian organizations work on issues such as sustainable housing, urban planning, disaster preparedness, and agricultural development, all of which could be incorporated into recommendations for this topic. Finally, delegates should consider ways that the Sustainable Development Goals could be incorporated into their work.
Annotated Bibliography


One of the organizations that works closely with UNHCR to provide long-term settlement options for refugees is UNDP. Based on its expertise in general development strategies, UNDP can provide delegates with policy ideas for innovative alternatives to refugee camps. Delegates should consider long-term strategies, solutions and recommendations in their position papers, and this webpage should provide them with a helpful starting point to do so.


A crucial aspect of a good policy proposal is that it falls clearly within the mandate of the committee. As with all UN committees, UNHCR has a clear set of tasks that are outlined in its mandate. This document provides detailed annotations for the different elements of UNHCR’s mandate, thus comprising a helpful framework that delegates may consult when writing their position papers and resolutions.


This strategy outline is closely related to the UNHCR Policy on Alternatives to Camps. Both documents prioritize long-term solutions to provide safety and dignity to refugees by improving their social, economic, and environmental quality of life. This strategy also prioritizes the provision of shelter, but only when long-term settlement is not possible. The strategy encourages policymakers to partner and coordinate with all stakeholders, build capacity of local communities, advocate for the long-term needs of refugees, and use measurement and innovation to ensure the best solutions. Delegates should consider these principles when crafting their own policy proposals.


This document represents the official stance of the UNHCR with regard to camps and alternatives to camps. In this policy, the UNCHR resolves to find alternatives to camps whenever possible, using refugee camps only as a last resort for refugees. After declaring this position, the document suggests means to phase out camps and create viable alternatives. Delegates should consult this guide to understand the official position of UNHCR on this matter; they should recognize that all policy recommendations must be grounded in this framework.


This report provides delegates with the most recent statistics and regional descriptions of groups of concern for UNHCR, including refugees, asylum-seekers, IDPs, and migrants. The report includes a global overview or recent trends, summaries of the situation of displaced individuals in each region, and thematic chapters on the various facets of UNHCR’s mandate. Most relevant to this topic, in the chapter “Ensuring Protection” delegates will find UNHCR’s policy targets for 2016 as well as the means to achieve these goals. Delegates may consult the Global Appeal for a general overview of the work of UNHCR as well as a description of the organization’s most recent policy objectives.
Bibliography


II. HIV and Reproductive Health Services for Displaced Persons

“Every day, all over the world, people make the most difficult decision of their lives; to leave their homes in search of a better life.”

Introduction

Globally, 36.9 million people are living with the incurable Human Immunodeficiency Virus (HIV), which attacks CD4 cells and weakens the immune system. Over time, HIV destroys so many cells that the body is unable to fight off infections, leading to premature death. This state of immune deficiency is known as Acquired Immune Deficiency Syndrome (AIDS). However, despite its incurable nature, HIV/AIDS can be effectively managed through adequate medical treatment and care. Antiretroviral therapy (ART) is utilized to treat HIV/AIDS and if utilized properly, can drastically prolong life and reduce the risk of disease transmission, enabling a healthy life.

The number of persons forcibly displaced has reached unprecedented levels, totaling roughly 60 million displaced individuals in 2015. Globally, 2015 saw the highest displacement level on record, resulting from discrimination, war, violence, and human rights violations. As conflict persists in many countries in North Africa and the Middle East the number of individuals fleeing persecution, conflict, and poverty is not expected to lessen. Those displaced primarily come from states experiencing conflict, including countries such as Syria, Afghanistan, and Somalia. Individuals living with HIV are increasingly vulnerable to displacement, and often their health and treatment regimens are negatively impacted. As of 2006, roughly two million people living with HIV were displaced. Given that displacement has increased by over 24% since 2006, it is likely that the number of those displaced living with HIV has correspondingly increased. HIV in emergency situations often requires a targeted response that integrates HIV-related concerns, which is a priority of the Office of the United Nations (UN) High Commissioner for Refugees (UNHCR).

The general health of refugees and other displaced persons is of the utmost importance to UNHCR. The UN Convention Relating to the Status of Refugees and its 1967 Protocol outlines this priority, stipulating that it should be ensured that refugees and displaced persons receive adequate health services and are guaranteed that right under international law. UNHCR asserts that “integrating reproductive health and HIV services could help maximize collective outcomes [for those displaced].” During crises, such as displacement, reproductive and health needs do not dissipate. Frequently, women who are displaced are confronted by unplanned and unwanted pregnancies as a result of inadequate access to contraceptives and family planning services. The World Health Organization (WHO) defines reproductive health “as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity - in all matters relating to the reproductive system and to its functions and

146 Ibid.
147 Ibid.
148 Ibid.
149 Ibid.
150 UNHCR, World at War, 2014.
151 Ibid.
153 Rafei, Record number of forcibly displaced people has reached 60 million worldwide, World Bank, 2015.
155 Ibid.
156 Ibid.
157 Ibid.
158 UNHCR, Reproductive Health, 2016.
159 Ibid.
160 UNHCR, HIV, 2016.
161 UNHCR, Reproductive Health, 2016.
Accessibility to adequate reproductive health services decreases the number of fatalities during or after childbirth, and improves the chances for children and mothers to survive and thrive. Focusing on the interplay between HIV, reproductive health services, and the displacement of populations is highly important, particularly as the number of displaced persons continues to rise.

**International and Regional Framework**

Numerous international and regional frameworks influence the global approach toward HIV and reproductive health services for displaced persons. Foundational documents include the *Universal Declaration of Human Rights* (UDHR) (1948), which outlines the right for persons seeking asylum from persecution. Drawing from Article 14 of the UDHR, the *1951 Refugee Convention* emerged and proves to be fundamental for the advancement and protections of refugee rights. Likewise, the *International Covenant on Economic, Social and Cultural Rights* (1966), the *International Covenant on Civil and Political Rights* (1966), and the *Convention on the Elimination of All Forms of Discrimination against Women* (1979) are equally important in outlining vital human rights principles that must be considered when approaching the issue and ensuring that the rights of displaced persons are upheld.

The *Declaration of Sexual Rights* (DSR) (1997) outlines 16 fundamental sexual and human rights, including principles such as equality and the right to the premier standard of sexual health. Likewise, the UN General Assembly’s adoption of the *Declaration of Commitment on HIV/AIDS* in 2001, 2006, and 2011 advances HIV treatment and reproductive health service accessibility. Collectively these documents serve as the basis for guiding the international community in framing policy and ensuring that a human rights-based approach is utilized to address the HIV epidemic. Moreover, following the 2001 *Declaration of Commitment on HIV/AIDS*, the *International Guidelines on HIV/AIDS and Human Rights* were adopted and are vitally important in the formation of global and national policy pertaining to HIV/AIDS. In 2008, the UN Population Fund (UNFPA) developed the framework “Making Reproductive Rights and Sexual and Reproductive Health a Reality for all” which comparatively discusses reproductive rights and sexual reproductive rights.

**Role of the International System**

UNHCR is the main organization advancing global refugee policy and is essential in centralizing the rights of refugees globally. UNHCR maintains that HIV treatment and accessibility to reproductive health services should be ensured for all individuals, especially those displaced. However, during crises, critical health regimens are often interrupted, greatly impacting those needing sustained medical treatment, such as those living with HIV.

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164 Ibid.
171 Ibid.
175 Ibid.
UNHCR strives to establish programs advancing global accessibility to HIV and reproductive health services.\(^{176}\) UNHCR is a co-sponsor of the Joint United Nations Programme on HIV/AIDS (UNAIDS) and is the primary entity responsible for addressing HIV in conflict areas.\(^{177}\) Moreover, UNHCR furthers the delivery of public information and services to raise awareness about reproductive health.\(^{178}\) Critical services such as obstetric and neonatal care can reduce the number of fatalities resulting from complications during pregnancy or labor.\(^{179}\)

In addition to UNHCR, other international organizations such as UNFPA also play an integral role in advancing the rights for women refugees, with a specific focus on pre-natal health.\(^{180}\) UNFPA has initiated gender-based health care guidelines and provided health services in areas with increased numbers of refugees.\(^{181}\) UNFPA also provides emergency reproductive health services globally and prioritizes reproductive health as an impetus to economic development.\(^{182}\) Furthermore, entities such as the UN Human Rights Council and the United Nations Children’s Fund also advocate for the rights of refugees, including rights related to sexual and reproductive health, and monitor the enforcement and implementation of existing human rights treaties.\(^{183}\) Non-governmental organizations (NGOs) also play a significant role in providing HIV and reproductive services to displaced populations. For instance, the Bill and Melinda Gates Foundation set the goal of reducing the occurrence of HIV and improving the quality of lives of those already living with HIV.\(^{184}\) The Foundation prioritizes the most impoverished countries in Sub-Saharan Africa and has pledged over US $2.5 billion in HIV grants globally.\(^{185}\)

### HIV and Reproductive Health Services in Emergency Situations

Frequently, emergency situations expose systemic weaknesses in health care systems.\(^{186}\) Populations displaced by emergencies are often increasingly vulnerable to HIV and other reproductive health problems due to the severe disruption of their daily routines.\(^{187}\) In 2015 over 100 million people were recipients of humanitarian aid, of which “26 million were women and girls of reproductive age.”\(^{188}\) In 2013 nearly five percent of people living with HIV were impacted by humanitarian crises; 81% of those impacted lived in sub-Saharan Africa.\(^{189}\) Thus, there is a pressing need to provide sexual and reproductive health services to those living in emergency situations.\(^{190}\) In particular, women and girls are disproportionately impacted by conflict and have diverse reproductive and healthcare needs.\(^{191}\) Over 50% of maternal deaths occur in humanitarian emergencies, when maternal mortality is reported at 1 in 54 compared to 1 in 4900 in developed countries.\(^{192}\)

HIV treatment requires antiretroviral therapy (ART) and a combination of medications.\(^{193}\) This medicine regimen must be taken daily and exactly as prescribed.\(^{194}\) Essentially, these medications prevent HIV from metastasizing, reducing the amount of HIV present in the body, enabling the immune system to fight off infections which increases life expectancy.\(^{195}\) Additionally, ART reduces the risk of transmitting the virus to others and is recommended for all

\(^{176}\) UNHCR, *HIV*, 2016.
\(^{177}\) Ibid.
\(^{178}\) Ibid.
\(^{179}\) Ibid.
\(^{181}\) Ibid.
\(^{185}\) Ibid.
\(^{187}\) Ibid.
\(^{188}\) Ibid.
\(^{191}\) Ibid.
\(^{192}\) Ibid.
individuals who have HIV. 196 There are six classes of HIV medications and 25 medications approved for the
treatment of HIV, with costs of up to thousands of dollars per month. 197 The specific method of treatment is
differentiated based on the needs of the individual, with factors such as additional diagnoses and cost considered. 198
If HIV goes untreated the virus will replicate and eventually become AIDS. 199  Because of the instability of
displacement, it is often difficult for persons with HIV to maintain their prescribed treatment regimen, negatively
impacting their health. 200

UNHCR has funded HIV prevention projects in countries like Nepal focusing on increasing awareness for
vulnerable populations, such as sex workers and intravenous drug users. 201  These projects established voluntary
counseling and HIV testing centers in an effort to bring preventive support to populations affected by conflict. 202
Likewise, UNHCR sponsored a groundbreaking capacity building project in the Republic of the Congo that
incorporated the local community into their preventative HIV/AIDS action plan. 203  This project showcased the
manner in which communities can be empowered to combat HIV/AIDS by engaging with their own community as
agents of change. 204  This project was enacted via community social groups that were organized as support systems to
promote behavior change. 205  The objective was to mobilize the community by including women, men, locals, and
those displaced in the conversation about HIV/AIDS transmission. 206  Over the course of three months, over 98 social
group conversations took place discussing socially disapproved topics and uncovering false assumptions pertaining
to HIV/AIDS. 207

Various projects have also been implemented by UNHCR to provide targeted reproductive health services to
vulnerable areas. For instance, in 2012, in the rural city of Chamkani, Pakistan, the government established a
reproductive health care unit. 208  Prior to the establishment of the health care unit 23,000 Pakistani and 7,000 Afghan
refugees were living with minimal accessibility to maternal health services and were forced to take long and
expensive trips to meet their healthcare needs. 209  This UNHCR project is one of seven health care units located in
the Peshawar district in the Refugee Affected and Hosting Area (RAHA). 210  The RAHA initiative was established in
2009 to bolster the efforts of government-sponsored health services. 211  Likewise, this program was initiated as a
result of Pakistan’s longstanding commitment to assisting refugees; Pakistan hosts one of the world’s largest refugee
populations, 1.6 million Afghans. 212  UNHCR, along with many development agencies, strives to aid communities
that host refugees by initiating projects that promote the general wellbeing of those displaced. 213  UNHCR is active
in over 41 remote districts across Pakistan and aiding an estimated 273,000 locals and Afghan refugees with this
particular project in the Peshawar area. 214

197 U.S. Department of Health & Human Services, Overview of HIV Treatment, 2015; U.S. Department of Health & Human
200 Ibid.
201 Ibid.
203 Ibid.
204 Ibid.
205 Ibid.
206 Ibid.
207 Ibid.
208 Khan & Redden, Project in Pakistan ensures health services for both refugees and locals, 2013.
209 Ibid.
210 Ibid.
211 Ibid.
212 Ibid.
213 Ibid.
214 Ibid.
Conclusion

Globally, addressing access to reproductive health services for displaced persons is of the utmost importance. In 2014, there were 19.5 million reported refugees, 38.2 internally displaced people and 1.8 million asylum-seekers. As conflict persists globally the number of individuals fleeing persecution and seeking better opportunities is not expected to cease. These displaced persons are at disproportionately high risk for sexual and reproductive health issues, including HIV infection and transmission. As such, the international community must unite and uphold international law and protect the rights of those displaced by preventing HIV transmission and providing reproductive and health services to refugees, IDPs, and asylum-seekers.

Further Research

As delegates continue their research on this issue, they should consider the following questions: How can the international community unite to meet the HIV and reproductive health needs of displaced persons? Likewise, how can care be extended to those living in conflict areas? How can global action on these issues by UN agencies, other international bodies, and NGOs be better coordinated? What expanded role might UNHCR play in ensuring access to health services for displaced persons? What successful state-level programs exist that can be implemented on a broader scale?

215 UNHCR, World at War, 2014.
Annotated Bibliography


The GAP report is particularly useful in breaking down the topic HIV, Reproductive Health Services for Displaced Persons. For instance, Chapter 1 discusses people living with HIV and the serious obstacles that they frequently face. Often people who have HIV are left behind as a result of social stigma and discrimination. Likewise, people also lack access to appropriate treatment, which negatively impacts their health and wellbeing. Moreover, Chapter 10 outlines the nuances of displaced persons providing a succinct overview of the causes of displacement and the global obstacles in redressing the issues. Delegates will find this report useful for understanding the topics more generally, and using this report as a basis to frame their countries’ position paper on the topic.


The UNAIDS 2016-2021 Strategy is particularly useful in guiding delegates understanding of the global call to action in terms of advancing the rights of those afflicted with HIV/AIDS and reducing virus transmission. This report is a call to action to establish the 90-90-90 treatment targets to eradicate the AIDS epidemic. Essentially, this call to action stipulates that 90% of all individuals living with HIV will know their status by 2020. Likewise, 90% of all those diagnosed with HIV will be recipients of antiretroviral treatment. And, finally, 90% of all individuals undergoing treatment will have suppressed their virus. This report should serve as a guide for delegates’ understanding of the current global agenda for redressing the HIV/AIDS epidemic.


UNHCR strives to uphold the rights of refugees and displaced populations. Particularly of importance to UNHCR, includes, the prevention, protection and treatment of HIV and providing refugees with vital health and reproductive services. UNHCR asserts that four areas are vital to ensuring that refugees, and other persons of concern, receive optimal care. For instance some areas include: general public health, HIV and reproductive health, food security, and water, sanitation and hygiene (WASH). This report is particularly important as it outlines UNHCR’s strategy and priorities for combating the spread of HIV and protecting those already afflicted. Delegates should refer to this source when framing their countries’ respective positions on providing HIV and reproductive health services to displaced persons and other persons of concern.


* Forced displacement is growing at an unprecedented rate. In fact, in 2014, this report indicates that 59.5 million people were forcibly displaced as a result of conflict, persecution and natural disasters. This document outlines the grave nature of the current displacement crisis reporting that this year has seen the highest number of displaced persons recorded to date. Moreover, this report showcases countries who are most impacted by the refugee crisis such as Afghanistan, which has the highest number of protracted refugee settlements globally. Likewise, Turkey, Pakistan and Lebanon are reported to host the most refugees globally. Delegates will find this report useful for understanding the dire nature of the displacement crisis and understanding the severity of the crisis cross-nationally.


* As of 2014, 38 million internally displaced persons were reported globally. Of those displaced, more than 80% have been displaced for five years or more. This report should be utilized as a guide to understand UNHCR’s efforts to meet the diverse needs of displaced populations.
Likewise, this report showcases UNHCR’s actions to ensure the rights of refugees and displaced populations are upheld and advanced. This report outlines the targeted areas of intervention for 2016 and strategic actions that the international community can take to realize these changes. Delegates should consider this Global Appeal, as a resource to understand the multifaceted and diverse needs of displaced populations and the paramount importance of ensuring that the rights of displaced persons are protected.

**Bibliography**


