



Practical Guide to the Systematic Use of
STANDARDS & INDICATORS
in UNHCR Operations



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Second Edition

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Foreword

It is with pleasure that I present the second edition of the *Practical Guide to the Systematic Use of Standards and Indicators in UNHCR Operations*. For the last fourteen months, UNHCR has undertaken consultations, both at Headquarters and in the Field, in order to produce an updated version of the Practical Guide which provides guidance on the definitions, rationale, concepts and sources of data for a range of standards and indicators, which will be used to gain a picture of the well-being of girls, boys, women and men of concern to UNHCR and who are being assisted under various types of operations.

The systematic gathering of information on people of concern to UNHCR, their needs, gaps in assistance and protection and resources is still required to bring programmes up to acceptable standards and forms therefore a key precondition for the effective design of operational strategies, programmes and projects, and advocacy for resource mobilization.

This second edition should be considered as “another step” in the work-in-progress towards consolidating UNHCR's long-term vision of establishing and systematically using a set of agreed standards and indicators for planning and measuring the impact of its operations.

The revision process included considerable efforts to come up with measurable indicators for different relevant areas and set the basis for further refinement. In addition to the camp-based refugee situations, the Guide now incorporates newly developed sets of standards and indicators for urban as well as for reintegration operations. It also provides chapters with newly adopted methodologies on age, gender and diversity mainstreaming, situation analysis and new reporting requirements.

As noted, performance indicators for the full range of UNHCR's activities are being progressively developed. This will be an integral facet of UNHCR's further adoption of Results-Based Management methodologies. As mentioned, for the second edition of this work (February 2006), priority was given to new indicators for urban programmes and returnee operations. It is planned that the subsequent edition will address issues related to other types of durable solutions enhancing protection (inter alia through advocacy and public information), and activities dealing with internally displaced persons (IDPs).

I believe that this second edition of the Guide will prove useful to all UNHCR operations and implementing partners by strengthening capacity to carrying out our mandatory responsibility to protect and assist our people of concern. Most important, it provides a sound basis for assessing our work and mapping the distance still to be travelled in order to ensure better quality in the protection and assistance that we provide.

Arnauld Akodjenou
Director, Division of Operational Services

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Introduction

Since the mid-1990s, humanitarian agencies have become increasingly aware of the importance of improving outcomes of programmatic activities through monitoring and enhancing institutional accountability. At a global level, various initiatives between humanitarian organizations, agencies and donors have resulted in much important work in developing performance standards and indicators relating to their respective contributions to humanitarian outcomes.¹ Among others, the Executive Committee for Humanitarian Affairs (ECHA)/Inter-Agency Standing Committee (IASC) recently launched an independent Humanitarian Response Review (HRR) of the global humanitarian system (UN, NGOs, Red Cross/Red Crescent Movement and International Organization for Migration [IOM]), to map the gaps, and to make recommendations to address them. The review recommends the establishment and application of different sets of benchmarks at the level of the organizations (management benchmarks for preparedness and planning) and of the system (process and impact benchmarks for CAP and other planning/appeal models).

UNHCR is committed to the delivery of quality protection and assistance activities and to the optimal use of limited resources; hence it has developed over the years a range of tools to enhance its programming and accountability. UNHCR has made great efforts in mainstreaming Standards and Indicators in the context of Results-Based Management within the organization. Most recently, UNHCR has invested the necessary resources in a range of consultations, both at Headquarters and in the Field, to produce this second edition of the *“Practical Guide to the Systematic Use of Standards and Indicators in UNHCR Operations”*. This Guide not only updates the previous edition and incorporates improvements to the **Standards and Indicators Initiative (S&I Initiative)** made in 2003 and 2004, but extends further the scope of activities covered.

Even with these improvements, the set of standards and indicators included in this Guide is not exhaustive. Nevertheless, it will provide enhanced quantifiable data for an increased number of situations, illustrating the well-being of the population of concern, and also allow global comparisons between UNHCR operations. Thus, through the use of indicators in this Guide, UNHCR has a monitoring tool covering UNHCR operations worldwide. The snapshot of the wellbeing of refugees and returnees which these quantitative indicators give will need to be complemented with additional information from qualitative indicators, project-level indicators, detailed sectoral data, and various narrative reports.

1. These include, among others, the Sphere Project, the Good Humanitarian Donorship, the Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP), and Humanitarian Accountability Project, SMART.

This Guide has been developed to serve as a practical manual and reference tool for UNHCR staff and managers in the Field, as well as for implementing and operational partners involved in needs, resource and programme assessment, planning, design, monitoring, management and evaluation. It may also prove useful for UNHCR staff and decision makers at various levels who review and coordinate operations. The Guide will also be of interest to donors and governments, members of UNHCR's Executive Committee and other parties within the humanitarian community that support and monitor the activities of UNHCR in carrying out its mandate.

This second edition should be considered as "another step" in a work-in-progress towards achieving UNHCR's long-term vision of establishing and integrating standards and indicators into all operations. As such, it will continue to be further refined and fine-tuned in the light of experience, especially from feedback from the users.

Structure of the Guide

The structure and the logic of this second edition of the *“Practical Guide to the Systematic Use of Standards and Indicators in UNHCR Operations”* were based on simple key concepts such as:

- **Flexibility:** it is structured in “stand alone” parts, with each part having its own rationale and objective. Readers thus may work through it either from the beginning to the end, or select a single part according to need.
- **Field-oriented:** it clearly identifies sections referring to different Field situations with useful notes on each set of standards and indicators.
- **Conceptually exhaustive:** it highlights the relevance of particular standards and indicators, and the linkages between
 - **Rights and standards**
 - **Mandate and standards**
 - **Cross-cutting issues and standards**
 - **Areas of reference and UNHCR situations**

The following table briefly explains the structure of the new edition.

PART A Conceptual Background	PART B Standards, Indicators and UNHCR’s Operations Management System	PART C Standard and Indicator Guidelines
Main Objective	Main Objective	Main Objective
<p>To explain the broader context in which the S&I Initiative has been developed and underline fundamental principles at the heart of UNHCR activities and mandate</p>	<p>To explain the broader context of the UNHCR planning system, the (Results-Based Management (RBM), and data collection and management</p>	<p>To develop a simple and clear guide on S&I through the development of indicator summary boxes and to provide the new version of the reporting forms (SIRs)</p>

A

/ Conceptual background

/ Part A

Introduction

The following chapter aims to set out the conceptual background to the Standards and Indicators Initiative in the broader context of Results-Based Management (RBM), adopted by UNHCR. Such a conceptual framework is seen as a necessary step for the meaningful integration and consolidation of the standards and indicators development within the organization. This chapter briefly addresses fundamental principles at the heart of UNHCR activities and mandate and explains some of the approaches adopted by the organization and linked to other initiatives in the broader United Nations system and humanitarian community.

UNHCR Standards and Indicators Background

UNHCR launched the **Standards and Indicators Initiative** in 2002 to ensure effective protection and quality assistance to refugees, persons of concern and the implementation of durable solutions in a consistent manner across the world, and as part of UNHCR's implementation of a Results-Based Management approach adopted in 1998. Through the S&I Initiative, UNHCR has defined different standards and indicators for protection and assistance in order to enhance the assessment, planning, reporting and monitoring capacity in a global and comprehensive manner. The main goal was to establish a global yardstick against which to assess and objectively compare the **wellbeing of the population of concern**.

A core set of "readily-quantifiable" standards and indicators was developed through consultation among different UNHCR sections, the Regional Bureaus and the Field Offices and was issued in October 2003 and a "Camp Indicator Report" (CIR) was introduced to capture and report data related to the core indicators. In January 2004, the first draft of the *"Practical Guide to the Systematic Use of Standards and Indicators in UNHCR Operations"* was published and circulated to all operations for use. It was recognized that the first edition of the Guide did not provide an exhaustive list of indicators to measure the well-being of refugees. Neither was it intended to provide a complete picture of the quality of protection and assistance activities worldwide. For this, the chosen quantitative indicators would need to be complemented with additional information from qualitative indicators, project-level indicators, detailed sectoral data, and various situation reports.

In order to further develop the **S&I Initiative** and cover other operations, UNHCR started consideration of non-camp based refugee situations, namely those related to urban and returnee areas. This reflection resulted in the production of an additional list of indicators, which, along with camp indicators, were sent to Field Offices as appendices to the Instructions for the 2004-2006 Programme in December 2004. Through the new Standards & Indicators Report (SIR), UNHCR was now able to collect information on 111 camp situations, 107 countries with urban refugees and 13 reintegration country operations.

In support of this further extension of the **S&I Initiative**, it was felt that it was necessary to bring together Field based staff for information sharing sessions on their respective experiences. In that regard, three workshops were held in Pretoria, (4-6 May 2005); in Dar es Salaam, (9-11 May 2005) and in Geneva, (25-26 May 2005) in order to get a better understanding of the problems encountered and challenges the Field faced while using S&I on the ground, provide feedback on the solutions adopted and come up with recommendations for a better use of S&I in UNHCR operations. The outcome of the three workshops paved the way for the preparation of this second edition of the Guide, which is meant to:

- Compile and incorporate all the comments received on the first edition from UNHCR staff, external partners and other actors;
- Incorporate the newly developed set of standards and indicators related to urban programme and returnee areas;
- Rewrite some of the chapters, especially the chapters dealing with data collection programmes and Geographic Information System (GIS);
- Update other chapters with new methodologies introduced in UNHCR, such as age, gender and diversity mainstreaming, situation analysis, the new format of the Country Operations Plan (COP) and the new SIR.

This second edition is thus a work-in-progress and should be considered as a “further step” towards achieving UNHCR’s long-term vision of developing and integrating standards and indicators into all operations. As noted above in the Foreword, further steps are already planned to develop in the course of 2006, more standards and indicators for other aspects of UNHCR’s activities.

Basic Principles

UNHCR's primary tasks are to provide international protection to refugees and to seek durable solutions for them. In addition, UNHCR has been given a mandate to reduce statelessness, as well as to collaborate with the UN system in addressing the plight of IDPs. The **S&Is** developed by UNHCR reflect the work of the Office with different categories of persons of concern in different situations, and seek to illustrate in a quantifiable manner what is being done to discharge UNHCR's protection mandate in an holistic manner.

International Human Rights, Refugee Law and UNHCR Mandate

The overriding priority in ensuring protection to refugees is respect for the principle of non-refoulement and treatment in accordance with basic human rights and refugee law standards. The rights of refugees to physical security and the enjoyment of other fundamental human rights, lie at the core of UNHCR's international protection mandate, which is summarized in the Preamble to the 1951 Convention: *"to assure refugees the widest possible exercise of ... fundamental rights and freedoms"* which are normally secured to for the individual by his or her government.

UNHCR's legal protection tools are the international and regional human rights and refugee law instruments² that define the basic standards for the treatment of refugees, as well as domestic law which transposes such standards to a national level. Non-legal protection tools include capacity building and training activities designed to assist governments in meeting their protection obligations and provide guidance on how to identify and effectively respond to protection gaps.

Another aspect of UNHCR's core Mandate is to seek durable solutions, including voluntary repatriation, local integration and resettlement. Self-reliance for refugees is an important step towards the achievement of **all three** durable solutions. As regards to voluntary repatriation, UNHCR's overriding priorities are to promote enabling conditions for voluntary repatriation, to ensure the exercise of a free and informed choice, and to mobilize support to underpin return. Local integration is the end result of a legal, economic, social and cultural process which requires preparedness on the part of refugees to adapt to the host society as well as receptiveness of the host society and ability of the public institutions to meet the needs of a diverse population. Tools used by UNHCR to promote durable solutions are similar to those described above for

2. The 1951 Convention, the 1967 Protocol and the OAU Convention and International Human Rights Law including but not limited to the Universal Declaration of Human Rights of 1948 and the 1966 International Covenant on Economic, Social and Cultural Rights, the 1966 International Covenant on Civil and Political Rights, the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, national conventions, domestic legislation and Executive Committee Conclusions.

its protection work. In addition, they include, among others, the creation and maintenance of training centers, income generating projects, micro-credit initiatives and the placement of refugees in local commercial enterprises. UNHCR also works with governments and International agencies in addressing the root causes of flight in order to create an environment where it is safe to return.

UNHCR has an holistic understanding of international protection, namely one which ensures not only that the rights contained within international refugee instruments are respected, but that the fundamental rights embodied in other international conventions are also observed. This includes, among others, the right to life and security of the person, the elimination of forms of discrimination against women, the right of children to education and of separated children to be reunified with their parents. This protection demands an integrated approach, recognizing the linkages between the provision of material assistance and the protection of the refugees from physical assaults and exploitation.

The Agenda for Protection was the outcome of the UNHCR-sponsored Global Consultations on International Protection. Its main aim was to engage states and other partners in a broad-ranging dialogue on refugee protection in order to explore how best to revitalize the existing international protection regime. The Agenda for Protection identifies seven inter-related goals:

- strengthening implementation of the 1951 Convention and its 1967 Protocol;
- protecting refugees within broader migration movements;
- sharing burdens and responsibilities more equitably;
- building capacity to receive and protect refugees;
- addressing security-related concerns more effectively;
- redoubling the search for durable solutions for refugees; and
- meeting protection needs of refugee women and children.

Framework for Durable Solutions

The Framework for Durable Solutions for Refugees and Persons of Concern (UNHCR, 2003e) is a key building block in support of the Agenda for Protection and the Convention Plus Initiative. The overall objective is to share burdens and responsibilities in a refugee situation more equitably, build capacity to receive and protect refugees and redouble the search for durable solutions to the plight of refugees. The Framework stipulates that the assistance component of UNHCR's mandate should shift gradually from assistance only, to self-reliance and empowerment, in order to enhance the quality of protection UNHCR provides to displaced persons. Through its activities for refugees and returnees, UNHCR promotes international efforts in prevention, conflict resolution, peace building, post-conflict recovery and reconstruction. Humanitarian actors such as UNHCR have an important role to ensure that solutions are sustainable. This, however, cannot be done effectively without an integrated effort by humanitarian and development actors.

An integral component of UNHCR's Framework for Durable Solutions is therefore the promotion of self-reliance as a tool for minimizing dependency and averting the negative associated outcomes which in the long run can be more costly. Self-reliance, as a programme approach, refers to developing and strengthening livelihoods of persons of concern, and reducing their vulnerability and long-term reliance on humanitarian/external assistance. This approach should be promoted throughout all stages of an operation taking into account local conditions, constraints and opportunities.

Three programmatic approaches are used to implement the Framework for Durable Solutions, namely:

- **Development Assistance for Refugees (DAR)** aims to place concerns for refugees and host communities in development agendas, mobilize additional development assistance and improve burden-sharing with countries hosting large refugee populations. It seeks to promote a better quality of life and self-reliance for refugees and prepare them for durable solutions, contributing to poverty eradication in refugee-hosting areas. The DAR approach is essentially one of broad-based partnerships between governments, humanitarian and multi- and bilateral development agencies. Enhancing productive capacities and promoting self-reliance are key pillars of DAR programmes. Promoting self-reliance must be based on a good understanding of how people cope and adapt to new situations, the understanding of the local social and economic context, and the livelihood strategies people pursue. Refugees' access to rights is central to any strategy to promote self-reliance. However, while access to rights is important, it is not always a sufficient condition for the attainment of self-reliance. A rights-based approach must therefore be accompanied by programmatic interventions to increase economic and employment opportunities.

- **Development through Local Integration (DLI)** is applied in protracted refugee situations where the hosting country opts to provide opportunities for the gradual integration of refugees. The key to achieving durable solutions is to support the ability of displaced people to care for themselves and their families, both during displacement and upon return or local integration. Assistance should include economic, social and cultural, as well as legal components - the overall purpose of which is to facilitate the smooth integration of refugees as productive members of communities in the country of asylum. Similar to DAR, the DLI programming approach envisions broad-based partnerships between governments, humanitarian and both multi- and bilateral development agencies. In this approach there are three main components:
 - *The economic component* focuses on aid dependency reduction and self-reliance initiatives. The process of local integration is greatly facilitated by refugees becoming self-reliant, since they become better able to interact with the local population economically and socially. Economically integrated refugees contribute to the economic development of the host country rather than merely constituting a "burden".

- *The social and cultural component* is based on interactions between refugees and local communities which enable refugees to live amongst the host population, without discrimination and as contributors to the development of their host communities;
 - The legal component focuses on a wider range of rights enjoyed by local citizens. These include freedom of movement, access to education and the labour market, access to public services and assistance, including health facilities, the possibility of acquiring and disposing of property, and the capacity to travel with valid travel and identity documents. Over time, the process should lead to permanent residence rights and perhaps, ultimately, the acquisition of citizenship in the country of asylum.
- **Repatriation, Reintegration, Rehabilitation and Reconstruction (4Rs)** refers to the related repatriation, reintegration, rehabilitation and reconstruction processes in a given operation and aims to ensure linkages between all four processes so as to promote durable solutions for refugees, ensure poverty reduction and help create good local governance. The concept provides a framework for institutional collaboration in the implementation of reintegration operations through an integrated approach addressing immediate, medium and longer-term development needs of returning displaced people in a comprehensive and integrated manner. The central element of the approach is the sustainability of the return and reintegration process through a systematic inclusion of the displaced population into the planning and programming of rehabilitation and reconstruction processes. This implies monitoring the restoration of national protection and the implementation of a reintegration process that helps to maintain sustainable livelihoods, access to basic services and full reintegration into communities of origin. An integrated and comprehensive 4Rs approach would also provide further opportunities for development agencies to advance the Millennium Development Goals (MDGs) in poverty reduction plans, thereby strengthening a sustainable reintegration of displaced populations in post-conflict societies.

A new element in this second edition of the Guide is the establishment of **S&Is** to support the consolidation of return and reintegration as an integral part of the 4Rs approach. Further work is required to develop measuring tools for the Development Assistance for Refugees (DAR) and the Development through Local Integration (DLI) programmatic approaches.

The introduction of **S&Is** in UNHCR reintegration operations attempts to provide a snapshot of the well-being of the population in areas of return, focusing on the application of national and sectoral standards, and with a focus on the situation of returnees. This implies monitoring the restoration of national protection and the implementation of a process that helps to maintain sustainable livelihoods, access to basic services and effective reintegration of returnees into communities of origin (UNHCR, 2004). Reintegration is also conceived as a socially transformative process that should result in the disappearance of differences in legal rights and duties between returnees and host communities, the equal access of returnees to services, productive assets and opportunities and the preservation of gains made in exile when refugees return.

The indicators developed for Returnee areas (RAs) are mainly focused on:

- Access to rights,
- Social integration and
- Economic security.

While developing indicators for reintegration programmes, it has to be acknowledged that reintegration is a collective responsibility and UNHCR involvement does not occur in a *vacuum* from the overall recovery process. Furthermore, **S&Is** cannot be unilaterally and globally determined by UNHCR. Reintegration standards must be elaborated in a flexible manner so that they must be agreed collaboratively at Field level and to some extent, be nationally “owned” by institutional and developmental actors. Under these circumstances, it is essential that UNHCR recognizes and informs other stakeholders of the limits of its engagement (in terms of the scope and timeframe), and builds links with partners for the actions it cannot undertake and that are critical in order to achieve a sustainable reintegration in a specific situation.

Moreover, the introduction of **S&Is** in UNHCR reintegration operations attempts to place concerns for refugees and host communities on development agendas, and needs to refer to the MDGs (see below).

MDGs are the most broadly supported, comprehensive, and specific poverty reduction targets the world has ever established, so their importance is manifold. For the international system, they are the fulcrum on which development policy should be based and they are the main reference for the development focus of UNHCR returnees’ assistance.

Relevant External Initiatives

During recent years, the international humanitarian and development communities have continued to wrestle with how best to demonstrate their impact and performance by placing increasing emphasis on improving outcomes through monitoring, and by enhancing institutional accountability. Both within and outside these communities, there exists a growing expectation that humanitarian and development actors are accountable to a range of stakeholders and that lessons from previous experiences should inform actions taken in future operations.

At a global level, various initiatives have led to the development of standards and indicators of relevance to the work of both the humanitarian and development actors. Among these, the MDGs and Sphere Project have become globally accepted as offering a range of relevant benchmarks that have been embraced by donors, developing countries, civil societies and major institutions alike.

The Millennium Development Goals (MDGs)

The MDGs³ were set out in the 1990s by international conferences and summits. They were later compiled as the International Development Goals. In September 2000, the UN Member States unanimously adopted the Millennium Declaration. Following consultations among international agencies, the General Assembly recognized the MDGs as part of the road map for implementing the Millennium Declaration.

In the Millennium Declaration, the UN Member States were confident that humanity could make measurable progress towards peace, security, disarmament, human rights, democracy and good governance. They called for a global partnership for development to achieve agreed goals by 2015. Hundreds of experts undertook the Millennium Project and drew up a plan of action to achieve the MDGs by 2015 (UN Millennium Project, 2005).

Since MDGs are meant to address vulnerable populations, it is the duty of UNHCR to ensure that refugees, internally displaced people and returnee concerns are included in the pursuit of the various goals. MDGs are targeting human development in its broader dimension; however, MDGs address many of the same needs as humanitarian relief agencies, including UNHCR, in sectors such as food, education, gender mainstreaming, children, reproductive health, HIV/AIDS and environment. Of the eight goals, the first seven are mutually reinforcing and directed at reducing poverty in all its forms. Moreover, in its own advocacy work, UNHCR has applied the objective of MDG 8 “to develop a global partnership for development” as the guiding

3. The Millennium Project did not explicitly acknowledge the critical role of nutrition for reaching the Millennium Development Goals. However, in light of persistent nutrition problems facing poor populations in developing countries, UNHCR has adopted as one of its Measurable Performance Targets for 2006, that in operations receiving food aid and recording high malnutrition rates, steps will be taken in collaboration with WFP to reduce the acute malnutrition rate to less than 10%.

principle and the preferred methodology to assist communities hosting refugees and other displaced populations in meeting the other MDGs. In some specific areas, UNHCR believes that refugees and other persons of concern can make significant contributions to the achievement of MDGs.

This S&I Initiative as a whole has clear linkages with the pursuit of the MDGs. These linkages, both direct and indirect, are briefly outlined below:

Box 2 - MDGs and UNHCR indicators link		
MDGs Goals and Targets		UNHCR Indicators
GOAL 1 Eradicate extreme poverty and hunger		
Target 1	Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	<ul style="list-style-type: none"> - Percentage of asylum-seekers/ refugees below poverty line - Percentage of food beneficiaries during latest food distribution - Number of refugees engaged in agricultural production - Percentage of asylum-seekers/ refugees (of working age) employed or engaged in income generating activities
Target 2	Halve, between 1990 and 2015, the proportion of people who suffer from hunger	
GOAL 2 Achieve universal primary education		
Target 3	Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	<ul style="list-style-type: none"> - Primary education is compulsory and available free to asylum-seekers and refugees - Percentage of refugee students enrolled in primary school - Percentage of refugees school aged population living within reasonable distance from primary school
GOAL 3 Promote gender equality and empower women		
Target 4	Eliminate gender disparity in primary and secondary education, preferably by 2005, and to all levels of education no later than 2015	<ul style="list-style-type: none"> - Percentage of adult refugees/asylum-seekers issued individual identity documentation - Percentage of needs met for sanitary materials - Percentage of female members in management committees - Percentage of refugee students enrolled in primary school - Percentage of refugee students enrolled in secondary school - Percentage of female members in food distribution committees
GOAL 4 Reduce child mortality		
Target 5	Reduce by two thirds, between 1990 and 2015, the under-five mortality	<ul style="list-style-type: none"> - Number of persons per functioning primary health care facility - Percentage of live births attended by skilled personnel - Measles vaccination coverage

GOAL 5 Improve maternal health		
Target 6	Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	<ul style="list-style-type: none"> - Do asylum-seekers / refugees have access to primary health care services? - Percentage of live births attended by skilled personnel
GOAL 6 Combat HIV/AIDS, malaria, and other diseases		
Target 7	Have halted by 2015 and begun to reverse the spread of HIV/AIDS	<ul style="list-style-type: none"> - Are there any specific interventions directed at refugees / foreseen in the HIV/AIDS national strategic plan? - Numbers of condoms distributed per person per month - Is antiretroviral therapy available in / for hosting community / refugees?
Target 8	Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	
GOAL 7 Ensure environmental sustainability		
Target 9	Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	<ul style="list-style-type: none"> - Environmental Action Plan created/reviewed - Average quantity of water available per person per day (liters) - Percentage of population living within 200 m from water point - Percentage of households with adequate buildings - Percentage of families with latrines.
Target 10	Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	
Target 11	By 2020, to have achieved a significant improvement in the lives of at least 100 million slum-dwellers	
GOAL 8 Develop a global partnership for development		
Target 12	Develop further an open, rule-based, predictable, non-discriminatory trading and financial system (includes a commitment to good governance, development and poverty reduction — both nationally and internationally)	<ul style="list-style-type: none"> - UNHCR contributes to this Goal by promoting the capacity of refugees to contribute to development and by promoting the targeting of a fair share of development assistance to refugees and refugee-hosting communities. The High Commissioner's "Convention Plus" Initiative is about enhancing burden sharing and sharpening the focus on achieving durable solutions for refugees through multilateral special agreements. - Percentage of 15-24 years enrolled in training (non-formal, vocational, skills, etc.).
Target 13	Address the special needs of the least developed countries (includes tariff- and quota-free access for least developed countries exports; enhanced programme of debt relief for heavily indebted poor countries and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction)	
Target 16	In cooperation with developing countries, develop and implement strategies for decent and productive work for youth	

The Sphere Project

The Sphere Project, launched in 1996, was one of the key policy initiatives in the humanitarian sector. It resulted in the publication of a *“Humanitarian Charter and Minimum Standards for Disaster Response”* in 2000. After being translated into many languages and disseminated all over the world, it was reissued in a revised version (Sphere, 2004). The decision to launch the Sphere Project was, essentially intended to strengthen the quality of work of humanitarian agencies, in particular non-governmental organizations (NGOs) and their accountability – especially their accountability to those affected by emergencies. From its inception, Sphere sought to be inclusive and to build on existing foundations: the initial rationale was to seek agreement on what existing texts could be used as universal standards, whether originally created by UNHCR, UNICEF, Oxfam or MSF. UNHCR has provided many significant feedbacks to the various versions of the Sphere Handbook and has been a key actor in the global consultation process. The central importance of a rights-based approach was present from the beginning of Sphere:

“To elaborate technical standards, which agencies should seek to implement, without reference in any way to the rights or aspirations of the assisted beneficiaries and claimants risks becoming a self-serving exercise concerned more with agencies’ accountability to donors, than the rights of people affected by disaster” (SCHR, 1997)

In this perspective, the Sphere Project can be seen as an attempt by a wide spectrum of agencies to articulate the minimum content of a **“right to life with dignity”** and define the related parameters for adequate and appropriate humanitarian assistance and to set minimum goals for such assistance (Darcy, 2004).

The Sphere Project combines three different but interrelated strands of thought:

- The Project sets out the minimum requirements for sustaining human life in dignity, which, in turn, are meant to meet basic human needs;
- Those basic human needs must be understood as a minimum requirement, if one is to give effect to universal human entitlements or rights;
- The standards concern humanitarian assistance and the quality of service delivery.

The Sphere Project defines standards that are qualitative in nature and are meant to be universal and applicable in any operating environment. The key indicators are measures or steps towards meeting the standards; they are the tools to measure the impact of processes used and programmes implemented (Sphere, 2004). The Sphere Project focuses on humanitarian interventions in complex emergencies and natural disasters with broad target beneficiaries, and is thus not limited only to refugees. In contrast, UNHCR operates both in emergencies and protracted situations, focusing on specific groups of persons such as refugees, asylum-seekers, and others of concern, in line with its core protection mandate.

Despite some differences in the Sphere definitions of what is meant by “standard” and “indicator” as compared to those used in this Guide, and on the definition of the target population, this Guide agrees with most of the Sphere standards. Moreover, it supports the main thrust of the Humanitarian Charter, which lies in the affirmation that standards are not arbitrary but flow from basic human rights commitments.

UNHCR Approaches and Internal Guidelines

Rights-Based Approach

UNHCR's S&Is are part of the effort promoted by the Agenda for Protection, to ensure that human dignity and human rights at the basis of refugee protection are duly reflected in the standards of care. Rather than focusing on available resources, the indicators will contribute to move towards a **Rights-Based Approach (RBA)**, validated by participatory assessment and planning. This human rights focus is founded in Article 55 of the UN Charter which commits the UN to promote *“universal respect for, and observance of, human rights and fundamental freedoms for all without distinction as to race, sex, language, or religion”*. While the primary responsibility for ensuring respect for human rights resides with states, the UN itself has come to be seen as having a key role in securing the implementation of human rights which touch almost all aspects of its own direct work (Kenny, 2000). The RBA brings together core elements of human rights, community development, and empowerment of asylum-seekers and refugees as holders of rights. When adapting a RBA to planning and implementation, the rights and standards need to be linked to participation and involvement of persons of concern, thereby leading to their empowerment. Rights determine the relationship between individuals and groups with valid claims (rights holders) and the State with correlative obligations (duty bearers). Thus persons of concern are no longer mere “beneficiaries”, but rights holders who can exercise their rights, including the right to participation.

A recent Overseas Development Institute (ODI) study on needs assessment considered the relationship between a needs-based and rights-based approach in the humanitarian agenda (Darcy, Hofmann, 2003). This study concludes that an unhelpful and misleading dichotomy has grown up between needs and rights. Statements about needs and statements about rights are quite different in kind – but the two are by no means incompatible. A statement about need may be essential to defining the “what” of programming, and is of itself value neutral (not a moral statement). In traditional humanitarian terms, it acquires moral force when the need is of a certain kind, by reference to the principle of humanity and the “humanitarian imperative”. A statement about rights involves a moral (and a legal) claim about entitlements, and is as significant for its identification of related responsibilities as for the rights claim itself. Moreover, the Sphere Project might be seen as an attempt to marry the two and to combine the moral/legal force of a “rights” statement with the specificity of a “needs” statement.

For the purposes of this Guide, a rights-based approach provides the conceptual framework that integrates the norms, standards and principles of the international human rights system into policies, programmes, and processes of humanitarian and development agencies. In a refugee context, UNHCR applies fundamental human rights to refugees and other persons of concern, as a basis for planning and implementation of protection and programme activities.

The rights-based approach brings together core elements of human rights and community development, and empowerment of asylum-seekers and refugees as holders of rights. In a rights-based approach issues such as accountability, participation, empowerment, equity and non-discrimination become central. The foundation for UNHCR's rights-based approach is established in the 1951 Convention⁴ relating to the Status of Refugees, and relevant international and regional human rights instruments. UNHCR implements a RBA, by virtue of its mandate, which is centered on the rights of persons of concern. Assistance is one aspect of international protection and a means of facilitating it. UNHCR clearly uses a RBA in its advocacy work in relation to civil and political rights, and only in recent years has the notion of a RBA begun to guide programme planning, especially in relation to social and economic rights. This has resulted in clearer appreciation of the following:

- A rights-based approach clarifies legal standards and obligations against which responsibilities can be measured.
- Rights determine the relationship between individuals and groups with valid claims (rights holders) and State and non-State actors with correlative obligations. Thus persons of concern are no longer mere “beneficiaries”, but “rights holders” that can exercise their rights, including the right to participation (UNHCR, 2003f).
- Real participation leads to empowerment. In a rights-based approach, a comprehensive situation analysis is central. Such situation analysis will include the mapping of the level of human rights violations and the active and informed participation of the rights holders. The participation of rights holders thus becomes relevant as a methodology and decision-making process.
- A RBA provides a framework in which actions are based explicitly on a set of standards clearly set out in the international legal framework against which progress can be measured.
- The rights-based approach would help better integrate Programme and Protection by putting protection objectives at the forefront of programme planning.
- RBM and a RBA are linked and allow UNHCR to set up objectives systematically formulated in terms of rights, with the results indicators also reflecting the degree of attainment of particular rights.

A rights-based approach is also founded on the principle of participation and of working with communities to promote change and respect for rights, both at the individual and community levels. Therefore, a RBA and a community-based approach are complementary and view the community's concerns and priorities as the starting point for mobilizing its members and engaging them in protection and programming.

4. It has been complemented by the progressive development of standards under international human rights law (Article 5 of the 1951 Convention; Executive Committee, Conclusions Nos. 50, 80, 81 and 95(k)).

Age, Gender and Diversity Mainstreaming

In 1997 ECOSOC called upon all UN agencies to develop an action plan for gender mainstreaming as a means towards gender equality. This call was based on the understanding that: *“Whilst there are instances where men are disadvantaged in comparison to women, generally women and girls have fewer opportunities, lower status and less power and influence than men and boys”* (DFID, 2002). For UNHCR to provide meaningful protection⁵ to all refugees and persons of concern, the position of women and girls in relation to men and boys needs to be fully understood and inequalities addressed. Moreover, as UNHCR operations involve working with refugees from different socio-economic, ethnic and cultural backgrounds, diversity is an important factor in promoting refugee rights and therefore developing appropriate responses.

Age, gender and diversity mainstreaming in UNHCR is a strategy to promote gender equality and respect for human rights, particularly women's and children's rights, and to enhance the protection of all refugees, regardless of their ethnic, social, or religious background. This strategy entails assessing the protection risks and the development of appropriate protection objectives and programming activities for women and men of different ages and backgrounds.⁶

Participation of all people of concern is promoted through the Agenda for Protection and UNHCR's Five Commitments to Refugee Women⁷ as well as the Five Priority Issues related to Refugee Children⁸ provide frameworks for strengthening their protection. The commitments reflect the need to promote gender equality and ensure equal participation and influence by refugee women in decision-making and leadership structures; to register and provide individual documentation; to formulate integrated country-level strategies to prevent and respond to sexual and gender-based violence, and to provide equal access to material assistance and services.

In 2004, UNHCR pilot tested a methodology for introducing age and gender mainstreaming into country operations in a more systematic manner with a view to incorporating it into UNHCR's Operations Management System (OMS). The initiative comprised three main elements:

- The establishment of **multi-functional teams** (protection/field, programme and community services staff under the leadership of the Country Representative) acting as catalysts for age and gender mainstreaming;
- **Participatory assessment** on the livelihoods, education and security of refugee women, girls, boys and men to be conducted by the multi-functional teams and implementing partners;

5. *Statute of the Office of High Commissioner for Refugees*, General Assembly Resolution 428(V) of 14 December, 1950.

6. Because of their age, children, adolescents, and older people may also be marginalized. Corrective action is therefore required to ensure the specific risks they face are taken into consideration. Proper participatory assessment involves women, children, and older people, as well as people of diverse backgrounds, in order to focus on ways in which age and gender combine with other social, economic, and political factors to marginalize and disadvantage certain sections of the population.

7. Memorandum of the High Commissioner to all Offices dated 12 December 2001.

8. IOM/40/97-FOM/47/97 of the High Commissioner of 15 July 1997 - The Machel Study on the Impact of Armed Conflict on Children.

- **Capacity building workshops** to reflect on community development, rights-based approach, children's rights and age and gender mainstreaming; to review the findings from the participatory assessment and consider their impact on annual protection objectives and the COP, as well as the role of the multi-functional teams.

An independent evaluation of the pilot methodology (Groves, 2005) shows the need to continue with the implementation of a UNHCR system-wide approach to mainstreaming age, gender and diversity, linked to the management cycle.

In addition to further strengthening interventions (in relation to the UNHCR's Five Commitments to Refugee Women and the Five Priority Issues related to Refugee Children), Offices were also invited to ensure that the project descriptions include measures taken to prevent and respond to SGBV, including sexual exploitation and abuse against refugee children.⁹ Moreover in the 33rd Standing Committee, UNHCR provided a compilation of country updates focusing on the implementation of the Five Commitments in UNHCR operations at the end of 2004, using standards and indicators reports.¹⁰ This exercise of using standards and indicators to analyze the implementation status of the Five Commitments has demonstrated their usefulness as a management tool for engaging with Field operations, as well as a means to enhance transparent reporting and accountability.

Participatory Assessment and Planning

Participation of refugee women and men, young and old, coming from diverse backgrounds, is an important element to assist and protect them. In order to gain a deeper understanding of the protection problems they face, it is essential to consult them directly and involve them in the definition of problems and the design of programmes. Their right to participate in decisions on matters that affect their life is an integral part of UNHCR policy and guidelines, in particular the Agenda for Protection. As noted above, Participatory Assessment,¹¹ which is one phase of a comprehensive situation analysis, can be conceived as a process of building partnerships with refugee women and men of all ages and backgrounds by promoting meaningful participation through structured dialogue.

Project Profile and Registration

In 2001, the Executive Committee of UNHCR issued its first Conclusion (No. 91) dedicated to registration and reiterated the importance of registration as a tool for protection. Project Profile established standards and tools for registration in a comprehensive system.

9. IOM/67/2004/FOM/69/2004.

10. EC/55/SC/CRP.17 - 13 June 2005.

11. Participatory assessment includes holding separate discussions with women, girls, boys, and men, including adolescents, in order to gather accurate information on the specific protection risks they face and the underlying causes, to understand their capacities and resources, and to hear their proposed solutions. This helps to mobilize the community to take collective action to enhance their own protection.

The initiative has identified a unified approach to registration which recognizes its importance as a core UNHCR protection activity, and encompasses data collection, documentation and information management. The three “cornerstones” of this approach are:

- Operational standards for registration, documentation and population data management activities;
- Standard data set to be gathered about individuals of concern as part of registration and data management activities;
- Standard generic process for undertaking registration and population data management activities.

In conjunction with the FICS (Field Information and Coordination Support Section), Project Profile finalized the UNHCR Handbook for Registration in September 2003. It has been distributed to all Field Offices, other UN agencies and NGO partners. The Handbook introduces 59 operational standards for registration and related activities, based on Executive Committee Conclusion 91 and other relevant guidelines. To ensure that the new standards are implemented in the Field registration activities, Project Profile is finalizing training materials and, together with PGDS, is conducting a series of regional and country specific workshops to prepare staff for the advent of the new registration database. Because the ability to provide identity documents is an important by-product of registration, the Project Profile team is also developing new guidance on standardizing documentation issuance and testing relevant technologies.

Urban Refugee Policy Development

UNHCR is developing a revised policy on asylum-seekers and refugees in urban areas which will replace the policy promulgated in December 1997 (IOM/90/97/FOM/95/97).

The new policy is taking into account recent and important UNHCR initiatives which have relation to, and implications for, refugees in urban areas, such as age, gender, and diversity mainstreaming, urban standards and indicators, procedural standards for refugee status determination under UNHCR's Mandate, and Project Profile.

Community Based Approach

UNHCR's community development policy highlights the fact that refugees should be "subjects" in the search for durable solutions and be considered as resourceful and active partners, rather than "objects" or passive recipients of assistance (UNHCR, 2001). This approach motivates women, girls, boys, and men in the community to participate in a process which allows them to express their needs and to decide their own future with a view to their empowerment, ownership, and sustainability. It also seeks to understand the community's concerns and priorities, mobilizing community members and engaging them in protection and programming. The focus is on helping refugees organize themselves to solve their own problems. The role of UNHCR is to build, rebuild, or strengthen the community's capacities to respond to protection risks and to make decisions over access to and use of resources. Planning must necessarily take account of the specific circumstances of a wide variety of refugee situations as camp based, non-camp based (urban) and reintegration areas.

The RBM and UNHCR's Operations Management System

Results-Based Management (RBM) is a management philosophy and approach that emphasizes the achievement of results - the impact to be achieved as the essential task of management. RBM helps ensure that all organizational processes support the achievement of the right results in as effective and efficient manner as possible. RBM involves, at a minimum, four key steps (UNHCR, 2005d):

- Defining strategic goals that provide a focus for action;
- Specifying the expected results that contribute to these goals and aligning programmes, processes, people and resources behind them;
- Engaging in ongoing monitoring and performance/ impact assessment based on systematic use of standards and indicators, and integrating lessons learned into future planning; and,
- Ensuring accountability of individuals, teams and partners based on continuous feedback to improve performance.

These principles have been incorporated into the UNHCR Operations Management System (OMS) in order to stress the organizational efforts to achieve and measure the results and quality of interventions. A LogFrame was incorporated into new formats for the Country Operations Plan (COP) and project and sub-project descriptions.

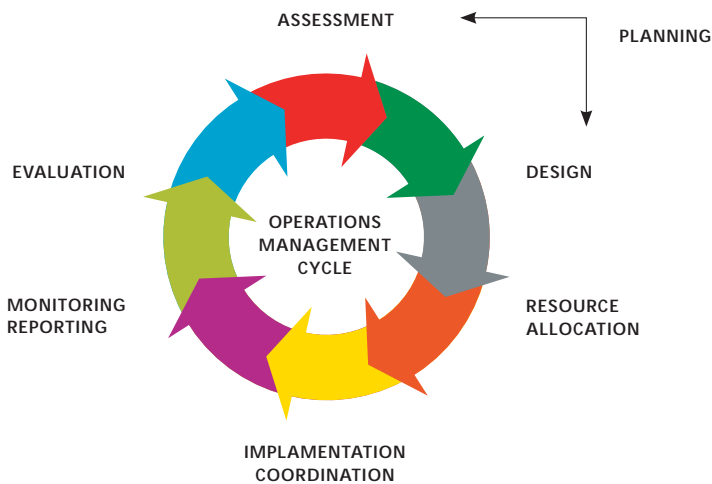
The core concept in RBM is the hierarchy of objectives in which all inputs and activities are directed toward the realization of well defined goals and objectives and which result in outputs contributory to the achievement of those objectives. The operations management cycle, defined in the UNHCR Manual, Chapter 4, encompasses the following main steps:

- **Planning (Assessment and Design)** – the systematic gathering of information on and with people of concern, operational problems and their underlying causes, needs, resources and gaps; analyzing and making use of findings to design operational strategies, programmes and projects.
- **Resource Allocation** – processes aiming to ensure that competing demands for human, financial and material resources are systematically assessed and aligned with projected income levels to ensure best use is made of resources in support of organizational priorities and strategies.
- **Implementation and Coordination** – the key stage of the OMS involving the delivery of protection and solutions by UNHCR and its partners. Activities are undertaken to integrate actions and build effective relationships between the various actors associated with operations, facilitate information management and exchange, build synergy and common

vision both internally and externally, whilst exploiting areas of mutual benefit with all organizations, groups and key individuals maintaining an active interest in UNHCR operations

- **Monitoring and Reporting** – the on-going review of operations to track whether protection and solutions interventions are having the desired impact and are proceeding according to plan, with benefits equitably distributed to targeted groups within agreed timeframes and costs.
- **Evaluation** – the analysis and assessment, as systematic and objective as possible, of policies, programmes or practices, focusing on their planning, implementation and impact.

Figure 1: UNHCR’s Operations Management Cycle



With the introduction of the updated version of *Project Planning in UNHCR: A Practical Guide on the Use of Objectives, Outputs and Indicators* (UNHCR, 2002d), a new terminology has been introduced to UNHCR programme management processes and some existing terms redefined. The OMS, which reflects the principles and processes of RBM, defines the basic terms of objective, output, and indicator as follows:

- **Objective:** A statement of desired result(s) and impact formulated at sector level, which contribute towards the achievement of each programme goal(s) in a country operation:

- **Output:** A specific result delivered by the activities needed to accomplish the objective. The delivery of an output must be under the control of UNHCR or an implementing partner which is held fully accountable.
- **Indicator:** A unit used to measure signs of change towards the achievement of results. UNHCR's OMS uses two types of indicators: *impact indicators and performance indicators*. *Indicators* should be disaggregated by sex and age as appropriate.
- **Impact indicator:** A sign of changes in the condition of people of concern and their welfare. Impact indicators are set for *objectives or goals*.
- **Performance indicator:** A measure of performance toward the achievement of planned outputs. Performance indicators can be quantified and graded in terms of quality and revisited in a planned time-frame. Performance indicators are set for *outputs*.

Refugee operations need to be planned on the basis of both impact and performance indicators, taking into account the local situation. The effectiveness of education, health, sanitation, and other services provided by UNHCR and its partners relates not only to performance on matters such as number of teachers trained, cases of malaria treated or number of latrines built, but the impact these issues have in bringing about positive changes in the lives of refugees and persons of concern.

The gap between the current situation (assessment) and accepted standards, broadly translates into the programme plan, determining the objectives and outputs. Monitoring assesses the progress towards attaining those objectives and reaching UNHCR's strategic goals.

Definitions: Standard and Indicator

The **S&I** Initiative aims to provide a tool to reinforce the RBM approach adopted by UNHCR. Through this initiative, UNHCR has defined different standards and indicators in order to enhance the assessment, planning, reporting and monitoring assessment, planning, monitoring, reporting and evaluation capacity in a global and comprehensive manner. The initiative can be described as an attempt to build **a coherent system to strengthen the Results-Based Management and ensure standard quality of UNHCR's protection and assistance delivery, based on readily quantifiable data, illustrating the wellbeing of the population of concern.**

Basic to an understanding of the **S&I Initiative**, is an understanding of what is meant by a “standard” and an “indicator”. As these two concepts are variously used and understood by humanitarian and development actors, it is important to state at the outset, how these two terms are being used in this Guide.

The term **standard** refers to an ultimate aim, which for UNHCR¹² normally has direct reference to its protection mandate, international law, human rights, MDGs or technical standards related to a specific sector of intervention. The setting of standards is aimed at the creation of acceptable conditions for persons of concern and/or acceptable levels of institutional performance.

It is important to make a distinction between standard (acceptable norms and conditions) and the related concept of objective. A standard is what UNHCR ultimately aims for. An objective is what UNHCR sets out to achieve in a specific time frame, after having done a gap analysis.

In regard to indicators, UNHCR understands these as measures of progress¹³ which make translating the planning tool into a monitoring tool easier, since it will show change over time.

The relationship of indicators to monitoring is explained well in a background paper on human rights indicators in the development process, prepared for the Canadian International Development Agency:

“An indicator is an instrument to tell us how a project/programme is proceeding. It is a yardstick to measure results, be they in the form of quantitative or qualitative change, success or failure. It allows managers, but also all the stakeholders involved in a programme, to monitor desired levels of performance in a stable and sustainable fashion” (Green, 2001).

12. The Sphere Project defines standards as a universal qualitative statement that can be applicable in any operating environment (Sphere, 2004) and key indicators, as measures towards the standards, are the tools to measure the impact of processes used and programmes implemented.

13. As used by the Sphere Project, an “Indicator” is more the target being aimed for.

By way of conclusion, it should be noted that in this Guide, the following definitions for “standard” and “indicators” are being used:

- **Standard:** A specific fixed point or range on the variable scale (indicator) that has to be reached or maintained to avoid occurrence of unacceptable conditions for refugees and persons of concern or unacceptable levels of performance.
- **Indicator:** A variable scale on which it is possible to objectively measure different points and that corresponds to, or correlates closely with, variations in the conditions of the refugees and persons of concern.

B

/ Standards, Indicators and UNHCR's Operations Management System

/ Part B

Introduction

The following chapter explains the UNHCR approach to operations planning and implementation and shows how “Standards and Indicators” are tools for the planning process. In order to do so, the planning process has been detailed further into phases: assessment, setting goals and objectives, defining outputs and activities, budgeting and work planning. Some discussion of the place of standards and indicators later in the operations cycle beyond planning (reporting and evaluation) is also included. Extensive reference has also been made to Chapter 4 of the UNHCR Manual. A specific space is devoted to data collection and management in order to give brief explanations of the underlying concepts and techniques.

Standards, Indicators and Planning

The purpose of planning in UNHCR operations is to allow managers and stakeholders to:

- **organize** their work around the needs and the rights of the persons of concern;
- **agree** on strategic and thematic priorities; and
- **ensure** that country operations resulting from this planning address priorities and reflect global and regional strategies.

Planning is conducted to take stock of and analyse the current operational situation (assessment), describe where one hopes to be at the end of a certain time period (setting of goals and objectives), agree on what must be done to attain objectives (defining outputs and activities), costing (budgeting) and establishing deliverables within an accountability framework with agreed timeframes (work planning).

UNHCR Operations Planning Cycle

As already mentioned, the operations management cycle, defined in the UNHCR Manual, Chapter 4, encompasses the following main steps:

- **Planning (Assessment and Design) – which include Situation Analysis and Gap Analysis;**
- **Resource Allocation**
- **Implementation and Coordination**
- **Monitoring and Reporting**
- **Evaluation.**

Standards and Indicators are of fundamental importance in all UNHCR operations at all stages of the programming process. Prior to the design of an operation, the first step is to assess the current operational situation or measure a baseline. The application of indicators in the assessment process provides the means to determine the core problems and the underlying causes that must be addressed as well as the gap between current and desired conditions. Gap analysis and problem identification help to set goals and objectives based on where the project aims to be at the end of a stated time period.

During the design phase, indicators are the means for establishing the appropriate level of quality to be achieved and thus are an integral part of the objective setting process. Indicators play a crucial role in the monitoring process as it is the monitoring of progress against standards which determines whether progress is being achieved in terms of quality, time and cost. Similarly, in the evaluation phase of an operation when the intervention is being assessed, the impact of an operation is identified and judged to be positive or negative in relation to the pre-defined standards or operational objectives set.

Moreover, experience has shown that the most effective and innovative plans are not drawn up by an organization in isolation, but are those in which key *stakeholders* (individuals, groups and agencies) contribute their own ideas, offer their analysis and help set operational priorities and objectives. UNHCR should involve key stakeholders— which include women and men representatives of refugees, other persons of concern, donors, implementing partners, operational partners, UN agencies and government counterparts — in setting operational priorities and objectives.

Assessment and data collection

Assessment is a crucial management planning process of relevance to all operations involving the systematic gathering and regular updating of information on and with people of concern, identifying operational problems and their underlying causes, needs, vulnerabilities, capacities and concerns. Analytical findings are then used to inform decision making and provide the foundation for the design of operational strategies, projects and sector objectives. Assessment reveals gaps between the current situation and UNHCR standards of protection and assistance, as well as identifying potential resources and solutions to these gaps.

Assessments should always include an analysis – conducted with the broad participation of refugees or returnees – of the different resources, skills, activities, concerns and needs of men, women, boys, girls, elderly, groups with specific needs and other distinct demographic groups, and of the impact of assistance and protection measures on these groups.

In relation to data, a distinction is typically made between two types of data: qualitative and quantitative. Quantitative data is in numerical form such as the quantity of water provided, number of students and teachers, while qualitative data relates to statements of judgment on the quality of beneficiaries, such as health status, etc.

Participatory Assessment

This is a methodology whereby structured discussions are organized with refugee women, girls, boys and men of various ages and backgrounds so as to provide them with an opportunity to explain the protection risks they face and to participate as partners in the design of programmatic responses to issues affecting their lives. This is a process of building partnerships with refugee women and men of all ages and backgrounds by promoting meaningful participation in order to gather accurate information on the specific protection risks they face and the underlying causes, to understand their capacities and resources, and to hear their proposed solutions.

The information collected and analysed through this comprehensive process will inform the content of key programme documents such as the Country Operations Plan (COP), the Country Report (CR), Annual Protection Report (APR), detailed project submissions, and budgets.

Standards, Indicators and Gap Analysis

Standards and Indicators are key components of the UNHCR Planning Framework. The intention of adopting a systematic approach to the use of standards and indicators is to reinforce a Results-Based Approach to the improvement of the welfare and protection of people of our concern.

Gaps are identified by comparing the actual situation (assessed and measured through data collection) with standards.

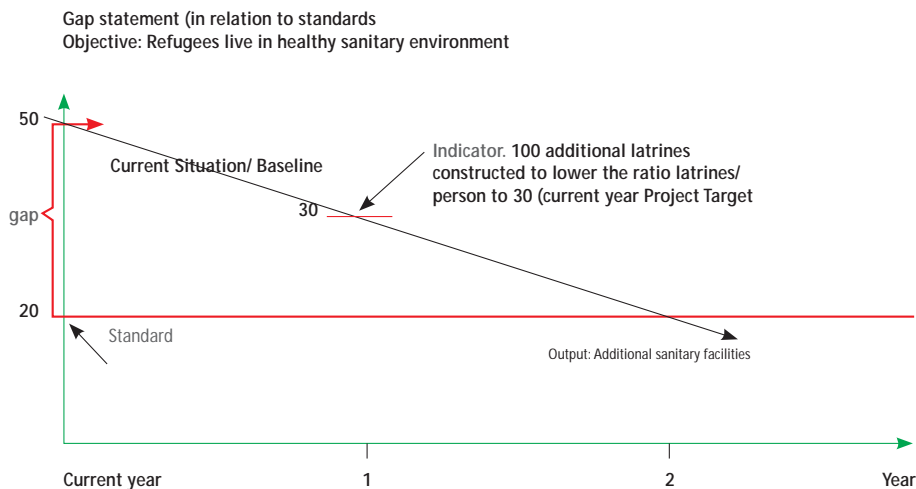
The local situation should be compared against applicable national and international legal¹⁴ and technical standards. Technical standards are to be found in various guidelines produced by the Division of Operational Services (DOS).

Indicators lead to the identification of gaps between the prevailing protection and welfare situation and acceptable norms and conditions that might be defined as standards. Where standards are not yet defined, data collection and the measurement of indicators are the starting point of a complex process of standards definition. The standard definition process is based on data relevance, impact on the lives of persons of concern, negotiation and agreement between different stakeholders. Gaps may differ in magnitude and impact for particular sub-groups in a refugee community, for example, the elderly, women, children, persons with disabilities or single-parent households.

In the specific case of reintegration situations, standards and indicators cannot be unilaterally and globally determined by the organization, but they must be agreed collaboratively at Field level and to some extent, be nationally “owned” with government and developmental actors. Standards in reintegration programmes must be elaborated taking into account existing national and technical standards for recovery and development in post-conflict situations. However, where such a standard does not exist, UNHCR can work closely with government and other actors to determine what an appropriate regional or national standard is. For the purpose of this Guide, standards of reintegration are conceived as “transitional” and should ensure that displaced populations, upon return, are integrated into the mainstream and enjoy national protection and services. Thus, national standards, not humanitarian standards, become the point of reference, in order not to risk isolating refugees and persons of concern into a sort of special group.

14. In terms of international legal standards, the first point of reference is UNHCR's mandate, key protection and human rights standards, and MDGs.

Figure 2: Graphical representation of Gap Analysis



The above box clearly indicates the elements which can determine the Gap: gaps are identified by comparing the actual situation (current situation) with the standards already defined according to available scale (indicator).

The Gap Analysis is a fundamental tool able to clearly show data collected and then turn that data into relevant information for:

- Evidence based planning;
- Informed decision making;
- Results-based management;
- Evidence based external advocacy.

The analytical process of Gap Analysis involves the identification of gaps between the current state and the future or desired state. It is the beginning point for operations planning. When the process of identifying gaps includes a deep analysis of the factors that have created the current state, the groundwork has been laid for addressing root causes of problems. The Gap Analysis can be used to ensure that the improvement process does not jump from identification of problem areas to proposed solutions without understanding the conditions that created the current state.

Country Operations Plan

The COP covers all aspects of a country operation, including protection, assistance, proposed durable solutions, and should link them with the resource requirements (project, administration and posts) for the coming year. It is formulated in light of the Office's priorities and links global strategic objectives and outputs with protection and assistance needs identified on the ground for the specific populations of concern.

The newly adopted version of the COP calls for a comprehensive needs assessment to be carried out by means of a Gap Analysis together with implementing and operational partners. A strengthened collaboration with partners will help to create a shared vision of the purpose and direction of the operation and optimize efforts and resources of all.

The main function of the COP is to set programme goals and objectives for the protection and durable solutions of refugees and to define major targets to achieve these goals and objectives. Indicator data from the previous year and the outcomes of participatory assessment with refugees are the basis for the COP, i.e. they provide the baseline to carry out the Gap Analysis and establish the comprehensive needs.

Project Submission and Sub-Project Agreement

The Project Submission is an updating and detailing of the COP. Baseline indicators should be updated with the latest available data. Objectives and targets established in the COP should be validated and amended in the light of recent developments. In the Project Description, the full logframe is completed through adding outputs and performance indicators for each sector. Furthermore, implementation arrangements are spelled out, i.e. who are the partners that will implement certain activities on behalf and in collaboration with UNHCR.

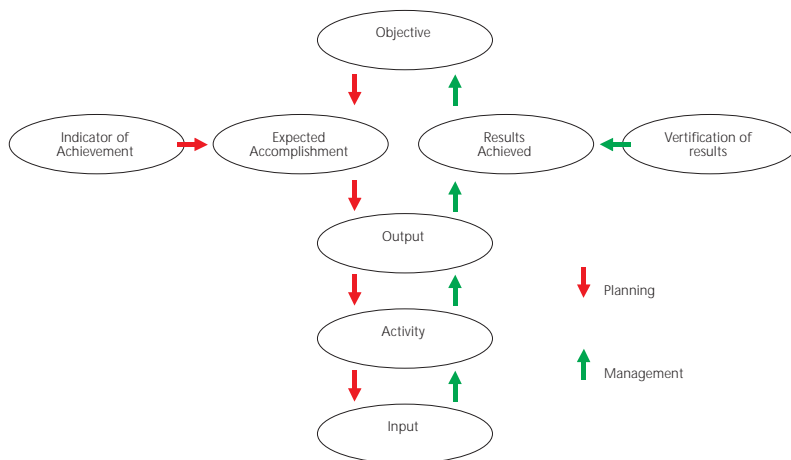
After issuance of a Letter of Instruction (LOI), which authorizes the Field Office to implement the project and allocate the resources made available for it, Sub-Project Agreements are signed with implementing partners. The sub-project description contains the same logframe as the project description to define objectives, outputs and indicators. It is important that at the time of signature, UNHCR and the partner agree on the set of indicators that will be used to measure impact and performance of the project activities. A copy of the full Standards and Indicators Report or parts thereof should be attached to the Sub-Project Agreement and included as standard reporting requirements under the Sub-Project Agreement. The establishment of a workplan for the sub-project is mandatory and ensures that the responsibility for the delivery of outputs is assigned to specific persons or entities, within specific timeframes.

Table 1: Example of Logical Framework for planning and monitoring educational activities

Current situation		Sector objectives	Impact indicators
<p>Out of 15,000 school aged children (5 -17 years) only 7,500 i.e. 50 % are enrolled in schools compared to the standard of 100%. 30% of those enrolled are girls (2,250). Successful completion rate is low 70% (of which 25% girls) compared to a standard of 90%.</p> <p>The current student to teacher ratio is high (75:1) compared to the standard (40:1). Out of 100 teachers in the school only 20 % (20) are qualified which is below even the emergency standard (50%).</p> <p>The problem is low enrolment rates, especially amongst girls; this is due to mainly cultural factors and that they have to take care of younger siblings while the parents are at work.</p>		<p>(1) More school aged children, in particular girls, are enrolled and complete school</p> <p>(2) The education is of adequate quality</p>	<p>(1) Increase enrolment rate from 50% to 70% with girls constituting 50% of those enrolled</p> <p>(2) Percentage of qualified teachers raised to 80%</p>
FMIS Sector Activity Code	Objective	Outputs	Performance Indicators
I.21	(1)	1. Parent Teachers Association formed and actively involved in the school management	1. PTA formed by end of February and monthly school management board meeting held
I.21	(1)	2. Awareness campaigns for girls enrolment conducted	2. Three awareness campaigns targeting parents undertaken by PTA to specifically promote girls enrolment and retention
I.21	(2)	3. Day care centre established	3. Day care centre for 50 children < 5 years established before the start of school year, managed by PTA
I.21	(2)	4. Educated teachers hired	4. Thirty female and 10 male qualified teachers hired
I.21	(2)	5. Teachers training conducted	5. 50 teachers trained within a year

As can be seen from the “UNHCR hierarchy of objectives”, the planning cycle is based on a logical set of steps that support planning. The concept behind these steps is the **Logical Framework**, the very basis of **Results-Based Management**, which in the planning stage works in a vertical top-down sequence, and in the implementation stage works in a bottom-up sequence, as illustrated below:

Figure 3: Example of the Planning and Management chain



Resource Allocation

UNHCR Headquarters bases resource allocation on the COP submitted by country operations. As such, one might expect that UNHCR would have a needs-based budget, but in reality, it has a resource-based budget, because it relies almost entirely on voluntary contributions from states, who, in turn, are also limited by their available budgets for humanitarian and development aid. In an eventual move to a needs-based budget, the use of Standards and Indicators will play a central role as they show the condition of refugees based on evidence, and set measurable targets for humanitarian interventions. The use of Standards and Indicators, nevertheless, helps the Organization to establish priorities and allocate resources accordingly.

Implementation and Coordination

Implementation is the key stage of the Operations Management Cycle involving the delivery of protection and solutions by UNHCR and its partners. UNHCR has a tradition of cooperation with implementing partners. Such cooperation covers a wide and constantly evolving spectrum of complementary and mutually supportive activities, and forms the basis for the successful implementation of UNHCR programmes. In this stage, coordination is fundamental in order to integrate actions and build effective relationships between the various actors associated with operations. Thus, Standard and Indicators can facilitate information management and exchange; build synergy and common vision, both internally and externally, whilst exploiting areas of mutual benefit with all organizations, groups and key individuals and maintaining an active interest in UNHCR operations.

Monitoring, Reporting and Evaluation

Monitoring

Monitoring is the on-going review of operations in order to track whether or not activities are having the desired impact and are proceeding according to plan, and whether or not benefits are being distributed equitably to persons of concern within agreed time frames and costs. Hence, monitoring, primarily serves as a performance management tool for UNHCR to provide feedback to decision-makers, identify problems, measure progress and impact, improve operational plans and allow for timely corrective measures.

Monitoring improves the quality of operations by providing dynamic information on change and documenting the reasons for variations from original plans and expected results. UNHCR's monitoring systems take account of potentially quite different needs and balance the natural inclination for the performance measurement framework to preferentially meet external reporting needs. In this way, it seeks to optimize programme quality.

Monitoring can only have satisfactory results if the following criteria are met:

- Objectives have been properly developed;
- Baseline data collection and other assessments have been done;
- Monitoring responsibilities, frequency of monitoring, and data sources are clearly specified;
- Core indicators have been formulated and systematically applied to measure impact and performance.

The **Sub-Project Monitoring Report (SPMR)** is the main tool to effect reporting on the Sub-Project Agreement. The SPMR consists of two parts: Financial Reporting (Part 1) and Performance Reporting (Part 2). The performance report has a similar structure to the sub-project description, i.e. it requires for the reporting on impact and performance indicators. The implementing partners should submit any other indicator data as agreed upon in the Sub-Project Agreement (see above).

Reporting

The main UNHCR reporting documents are the Situation Reports (Sitreps), the Annual Programme Interim Report and the Country Report.

- **Situation Report:** is designed primarily as a management tool for reporting on activities during the month under review. It measures progress in meeting the goals and objectives in the COP and explains reasons for delays or failure to meet objectives. This information allows the Field Office to revise objectives if needed and facilitates future planning. In

addition to its function as a management tool, Sitreps are used by Headquarters to prepare the Global Report on protection and assistance activities and other reports, including individual reports to donors.

- **Annual Programme Interim Report:** The Annual Programme Interim Report focuses on implementation rates and achievements at mid-year, and allows for revision of objectives and adjustments of resources required. An Annual Programme Interim Report consists of a narrative and a financial part. The narrative part of the report should show progress in implementation against objectives and expected outputs as described in the COP and project descriptions. This narrative part is for internal purposes only and replaces the former Mid-Year Progress Report. The financial part of the report will indicate the financial rate of implementation and should be analysed in light of the achievements reflected in the narrative part.
- **Country Report (CR):** The Country Report, together with the Annual Protection Report, are the main end-of-year reports produced by Country Offices. The CR serves three main purposes. Firstly, it is a management tool for reporting Offices to review programmes and monitor progress against the objectives in the previous year's COP, assesses the effectiveness of UNHCR's partnerships and identifies constraints and remaining gaps. Secondly, it provides country programme information to Headquarters units. Thirdly, it provides input for the Global Report issued annually to members and observers of UNHCR's ExCom. The CR should report on the objectives, outputs, and indicators in the year's COP and project descriptions and give an appraisal of demonstrable progress and any failure to produce the desired results. The Standards and Indicators Report (SIR) is an integral part of the Country Report.

Evaluation

UNHCR encourages the use of different evaluation methods, according to the nature of the issue or programme under review. High profile operations and controversial policy issues are best examined by means of independent evaluations, undertaken by teams of multi-disciplinary and multi-national teams of consultants who are selected by a process of competitive bidding. The distinguishing characteristic of such evaluations is that UNHCR exercises no editorial control over the content of the final report.

In emergency situations, real-time evaluations, undertaken in the early stages of a UNHCR operation, have a particular value. Normally conducted by UNHCR staff members, such evaluations provide findings and recommendations that can be put to immediate use by operations managers and Field staff.

Participatory or beneficiary-based evaluations provide an important means of developing a better understanding of how refugees and other people of concern perceive and assess UNHCR's programmes. To be effective, such evaluations should be carried out over an extended period of time by a person or team with social research skills.

Operations Data Collection and Management

Information and data are required for planning and assessment of the UNHCR operations. The systematic gathering of information on people of concern to UNHCR, needs, resources and gaps are important to design operational strategies, programmes and projects. Although this Guide is limited to the quantitative indicators, qualitative information should be systematically collected to obtain a true, comprehensive picture. While numerical data is a key tool for monitoring trends, in-depth qualitative analysis will contribute to understanding causes and consequences and provide the necessary contextual information to interpret these trends.

Accurate data should be collected to monitor indicators in relation to standards and is thus essential to conduct gap analysis and resource allocation. Although refugee operations have collected and used operational data for a long time, the increased use of this data for operations management implies that data quality becomes even more important. Although refugee and refugee-like situations are not always conducive to obtaining 100 per cent accurate data due to limited resources and rapid population changes, efforts should be made to ensure that data is as accurate as possible under the circumstances.

Definitions

Indicators can only be measured accurately if concepts are properly defined. Clear definitions will help ensure that outcomes will be comparable between different places and over time. For instance, in determining whether shelter is of an “adequate” nature, all camps should apply the same criteria for “adequacy” as provided in this Guide. In measuring the percentage of persons registered individually, all operations should have a clear understanding what “individual registration” entails. Is it sufficient to have someone’s name registered separately? In measuring the number of refugees per water tap, latrine or shower, are the facilities which are out of service excluded from the calculation? Meeting the needs of refugees is one of the key objectives of UNHCR operations, but how can we determine that their needs have indeed been met?

Clear concepts and definitions also refer to the time period during which the indicator is measured. For example, the analysis of mortality rates should take into account “normal” seasonable fluctuations where they exist. In this Guide, the date or period to which the indicators apply is clearly specified. As a result, indicators can be compared between operations or across time.

Data types and levels

Data collected, managed and used by UNHCR can be categorized in various ways, including level of aggregation (e.g. Field, Sub-Office, country, region), space (comparing data across operations at the same date) and time (comparing data in one operation across periods).

While staff often work with information at the individual level (name, sex, age, education level, ethnicity, legal status, origin, place of residence, etc.), individual information should be aggregated at a higher level (family, block, section, camp) for planning and monitoring purposes.

In addition to information on individuals (aggregated or not), there is information referring to infrastructure, including shelter, clinics, schools, water points, etc. As in the case of data on persons of concern to UNHCR, such information is generally aggregated and analyzed within a specific geographical context (camp, urban area, and district).

To facilitate comparison across time or space, indicators are often expressed in percentages or ratios. Some indicators in the SIR are expressed as ratios (e.g. number of persons per primary health clinic), whereas others are expressed as a percentage (the percentage of girls enrolled in school). Percentages divide a numerator (in our example the number of girls enrolled in school) by a denominator (the total number of girls).

In many indicators, the size of the population, or a sub-set thereof, is used in the denominator. As such, accurate population statistics are critical to the SIR.

Ratios and percentages should be interpreted with care when dealing with small populations. For instance, the mortality rate among 450 urban cases may be very low, not because of a favorable health situation, but due to the atypical demographic composition (young adult males). Using the mortality rate to measure the health situation in such a case may be of limited use and actually may lead to wrong conclusions and an unjustified shift in resource allocation.

In situations with rapidly changing populations or changes which are unevenly distributed during the reporting period, the reliability of indicators becomes greatly affected. For instance, the indicator "percentage of refugees, who expressed the willingness to repatriate and who repatriated" will be very low if many refugees signed the voluntary repatriation form only during the last month of the reporting year. This does not necessarily indicate an adverse performance, considering that arranging the actual return may take several weeks.

Population data either refers to a specific date (stock) or a period (flow). Examples of stocks are the total number of refugees on 31 December, or the number of pupils at the beginning of the school year. Examples of flows are the number of refugees who arrived during the last month or the number of refugees who repatriated during the last quarter. In the SIR, period data are indicated as "DP" (during period), while data figures are indicated as "EP" (end of period).

Data sources

Operational data is generated by a wide range of institutions. As data collection is both expensive and time consuming, new data should only be collected if it is not already available from another source. UNHCR relies on numerous external sources for its data needs. Making an inventory of available data sources is a fundamental step in designing a data strategy. Important data providers include UNHCR, implementing partners, host government authorities, UN agencies and NGOs.

When using data from non-UNHCR sources, it is particularly important to study the metadata (“data about the data”). It includes information about definitions of variables (what exactly is included), how, where and when the data was collected, etc. Understanding data is essential when more than one source is used. For instance, in studying access to water, the number of persons living in the area may be extracted from the registration database proGres by running a report showing the population by location at a certain date. The information about the water supply would normally come from an implementing partner. These two data sources should relate to the same location and the same time period. In situations with rapid population or infra-structural changes, data may become quickly outdated.

In most cases, UNHCR operations management depends on a variety of data sources. Given the problems of data collection in many refugee situations, it may be advisable to rely on more than one data source for the same indicator.

Data collection methods

The way in which data is collected is a key determinant of its quality. If data collection is superficial, biased, incomplete or outdated, indicators become unreliable. Therefore, efforts should be concentrated on developing sound data collection systems. For every type of data or indicator, it has to be decided whether data should be collected by:

- complete enumeration, by which the entire target population is included, or
- sampling, where information from a representative sample is extrapolated to the entire group.

A detailed description of the various tools for data collection is beyond the scope of this Guide. However, in the Glossary reference is made to other useful tools and guides. In general, the following data collection methods can be distinguished.

Administrative registers

Administrative registers include population registers, civil registration and many types of specialized registers. A register provides for the continuous recording of information pertaining to all members of the target group. Creating and operating a register generally require a legal basis. Examples of registers relevant to UNHCR operations include refugee registers maintained by the host government and/or UNHCR (**proGres**), student registers maintained by schools, beneficiary lists, etc.

Registers may be a useful source of data, bearing in mind their inherent limitations. While registers officially cover the entire target population, in practice not all persons entitled to registration may be included. Being tied to rights, entitlements or services, registers have a tendency to inflate the population figures as there is pressure to include too many persons. At the same time, the incentives to deregister are limited. Keeping a registration up-to-date is resource-intensive, particularly in situations of large population fluctuations. Apart from population movements (inflows, outflows) and demographic changes (births and deaths), refugee registers

need to take into account the legal definition of who is a refugee and when a person is no longer a refugee, except in cases of prima facie refugee status.

In camp situations, the most common source for the size and basic characteristics of refugees is the official camp registration.¹⁵ Camp-based organizations should work collectively to ensure that refugee registration is as accurate as possible and is being used to its fullest extent. If the registration is seriously deficient, joint efforts should be made to improve its accuracy. The use of different figures for the number of camp residents should generally be avoided. In the SIR, most of the demographic data will normally be derived from registration.

A simple example may illustrate the critical importance of accurate baseline population figures. If the registered population size is 20 per cent higher than the actual population size, all indicators using the camp refugee population as denominator will be seriously underestimated. This, in turn, may lead to inaccurate planning assumptions and unwarranted changes in refugee programmes.

Other administrative sources

Administrative data is created by many different entities. School registers or log books from health clinics are examples of administrative data. Clearly, this data only includes persons who actually have had contact with the school, clinic, etc. These sources are often essential for obtaining indicator numerators, such as the number of registered patients, students, etc.

Surveillance

Surveillance is defined as “ongoing” systematic collection, analysis and interpretation, often in the context of health programmes. Generally, the purpose of a surveillance system is the early detection of communicable diseases and to collect indicators on the general health of the population. As in the case of registers, surveillance systems collect data on a continuous basis for the entire target population.

Household surveys

Compared to registration, surveys are a cost-effective method to obtain planning information. However, because they cover only a small sample of the population, surveys do not allow for follow-up at the individual level. Unless routinely implemented, surveys do not allow for monitoring the situation over time. There are many types of surveys, ranging from sectoral surveys (nutrition, health, etc.) to multi-cluster surveys. It is recommended that all major operations carry out a multi-cluster household survey on a periodic basis to verify existing indicators and to collect information on indicators which are not available from other sources.

15. If an individual registration is not possible, a variety of techniques can be used to estimate the population size: simple counting of people or shelters; administrative records; community estimates; mapping – either manually or with the aid of the Global Positioning System (GPS); aerial photography; screening of children under five years old or extrapolation from vaccination surveys; household surveys; and, in refugee camps, registration or census. However, humanitarian agencies rarely use these techniques, though they may commission surveys based on them.

Accurate sampling, the key to a reliable survey, is often complex and challenging. It is recommended, therefore, that UNHCR Offices rely on outside expertise (specialized NGOs, academic institutions, and statistical offices, etc.) when planning and conducting surveys. The primary purpose of a sample survey is to collect quantitative information. To obtain a full picture of the situation, a sample survey should always be complemented by qualitative data collection (focus group discussions, interviews with key informants, qualitative questions in the survey questionnaire) to collect background information and ask “why” questions.

Census

A census is the process of obtaining information about every member of a population. It can be contrasted with sampling in which information is only obtained from a subset of a population. A census is an ad hoc form of data collection, but, as in the case of surveys, a census can be repeated to obtain information on changes over time. Unlike a register, a census provides only a “snapshot” of the population at one given date. Census data obtained from a rapidly changing population are thus becoming quickly out-of-date.

The various methods of data collection serve different purposes and allow for different analyses. For instance, in acute emergencies, a reasonably representative survey may be preferable to individual registration or census. A survey may be a temporary solution if other methods of data collection do not exist or are of too poor a quality to be used. Even when carried out correctly, surveys have their inherent limitations.

In combination, surveys, surveillance and data from administrative sources can provide a reasonably accurate picture of the condition of the population and programme effectiveness, as well as identify the needs for future intervention. Relying on one method of data collection may be undesirable, particularly when the quality of the data is questionable. For instance, as deaths are often underreported in the official register, a survey may be a more reliable method to determine the actual mortality rate.

Protection risks faced by groups of women, girls, boys, and men of different ages and backgrounds can be complex and are often not very visible. Using the appropriate method of enquiry in a given situation is therefore crucial to identifying and understanding the underlying protection risks. However, individual protection risks are unlikely to be identified in surveys but require confidential interviews. Protection and community services officers should be included in any issue where data is being collected that might have protection implications on persons of concern to the Office.

Reporting and presenting data

Presenting data for assessment, planning and decision making is an important aspect of data management. To make comparisons between various locations or over time, it is recommended to develop a set of standard ways of reporting and presentation of data. Standard formats help decision makers to understand and use trends, tabulations and maps.

The indicators in this Guide constitute a minimum set of requirements. UNHCR Field Offices collect a large amount of additional data and indicators for their own purposes. Most commonly, data is presented in Excel tables or charts. Maps are a powerful tool to display information, but are costly and time-consuming to produce.

In many operations, data and indicators are changing on a daily, weekly or monthly basis. If not properly managed and explained, data, statistics and indicators often lead to confusion and discrepancies. It is recommended that one focal point in the Office is responsible for managing and reporting operational data.

Data collection and management strategy

Too often, data is being collected without being properly analyzed or used. To ensure that data is properly collected, compiled and used, Offices are recommended to establish their own data management strategy. Proper data management is a precondition for a meaningful analysis, especially over time. Data must be comparable and therefore comply with certain standards. Elements of a data management strategy include:

- **Target population:** Define the target population (refugees, host communities, IDPs, etc.)
- **Geographical scope:** Define the location (area, camp, country, etc.) for which the data is collected.
- **Source:** Determine which partner(s) is (are) the appropriate source for the data.
- **Method:** What is (are) the most appropriate method(s) for data collection?
- **Frequency/time frame:** Establish dates and define periods for data collection. The frequency depends on the type of data collected. For instance, mortality rates are normally collected on a monthly basis, while the percentage of refugee teachers may be established once a year.
- **Definitions:** Ensure that all concepts are properly defined and that definitions are harmonized within the country, between the country and Headquarters as well as between partners.
- **Formats:** As data is likely to be collected by UNHCR and its various partners, forms and formats should be harmonized. The formats developed for in-country reporting should reflect, as a minimum, the official reporting instructions from Headquarters.
- **Filing (physical):** Units should ensure that the sources of data and indicators used for operations management and reporting to Headquarters are properly filed. By creating a “paper trail”, the transparency and accountability for operational indicators are ensured.
- **Data storage (electronic):** Data received from the Field and partners should be managed

electronically before they can be used for programme planning and reporting purposes. MS Excel is the primary data management tool, to be used in all operations.

- **Data validation:** To correct missing or wrong data, databases should be checked by running a set of standard and/or *ad hoc* queries. The queries can be used to identify errors such as wrongly coded nationalities, incorrect age, missing data (e.g. decisions without a prior application), duplicated names, or errors in dates (e.g. arrival date before date of birth), etc.
- **Data use/reporting:** For easy updating and comparison of data it is suggested to develop a set of standard reporting formats, which can include tabulations, charts and maps. Through continuous dialogue between operation managers and staff responsible for data processing, the outputs should be defined and updated.

Tools and capacity building

To compile and analyze data, it is essential that data is stored in electronic format. There are different tools to manage operational data. Available in all UNHCR Offices, MS Excel is a simple, but powerful tool to manage operational data. In addition to creating and updating tables, Excel has many database management and analytical functions, including data sorting, filtering, lookup functions and pivot-tables. Excel will generally be the main data management tool in the Office, except to manage very large amounts of data, including registration data (see below). It is recommended that all programme, protection and Field Officers are able to use MS Excel. UNHCR Field Offices may use their training budgets to ensure that staff receives training in Excel.

The standard UNHCR registration software is **proGres**. Through its reporting tool, aggregated registration data can be extracted and exported into Excel for further analysis, management or indicator calculation.

Geographic Information Systems (GIS) and mapping are an excellent way to plan, analyse and report on programmes in a geographical context. In a water supply project, for example, mapping can be used to plan the placement of wells and taps, taking into account the distance from the taps to the shelters. By analysing a combination of “layers” of information, GIS may highlight relationships between data elements. For instance, combining the location of security incidents and refugee ethnicity on one map may highlight the need to relocate certain populations. Similarly, the spatial analysis of rape incidents, single women and the location of water points may lead to the relocation of single women and/or the rearrangement of water points. GIS can also be used to identify data gaps. Through a map, missing data for certain parts of a camp or an unexpected age distribution in one area can be easily identified. By bringing together operational information within one region or area, GIS encourages partnerships between all stakeholders (host government, UNHCR, UN agencies, NGOs).



/ Standard and Indicator Guidelines

Introduction

The following chapters explain in detail the process UNHCR adopted to select the indicators and to develop a simple and clear guide for each of them. Detailed explanations are provided, through the development of Indicator Summary Boxes, in order to explain the rationale, the method of measurement, as well as comments on, and limitations of all the selected indicators.

Indicators: Selection and Rationale

In order to select indicators for measuring the well-being of refugees and persons of concern, UNHCR has engaged in a wide consultative process involving UNHCR staff both at Headquarters and at Field Offices, sister agencies and non-governmental organization partners. Technical officers provided invaluable contributions in revising the indicators' list, and policy units reviewed the indicators and modules to make sure that they addressed UNHCR strategic priorities and age, gender and diversity mainstreaming concerns.

The indicators were developed using different criteria according the following definitions:

- **Relevance:** Their pertinence to UNHCR's mandate, refugee protection and UNHCR operations worldwide, policy directives/priorities, commitments, and MDGs.
- **Measurability:** Their ability to be measured and expressed quantitatively, and large enough to be statistically significant.
- **Clarity:** There is no ambiguity about what is being measured and there is general agreement on interpretation of the results. Consequently, an indicator is one-dimensional which means that it measures only one phenomenon at a time, and is operationally precise so that there is no ambiguity as to what kind of data is to be collected for an indicator.
- **Practicality:** The data can be obtained in a timely way and at a reasonable cost. Managers require data that can be collected frequently enough to inform them of progress and influence decisions.
- **Reliability:** The data is of sufficiently reliable quality as to provide a basis for confident decision-making.

The working groups involved in the review and development of the indicators developed a matrix in order to assist in the validation of the indicators, with particular concern as to their measurability. The result is a Guide which includes a set of indicators judged fundamental to monitoring the well-being of refugees and persons of concern.¹⁶ These are the indicators UNHCR requires all operations to report on because of their relevance, measurability, practicality and reliability. Just as the indicator list is dynamic and will necessarily evolve in response to changing national and operational situations, so other indicators might be selected for the use in Field operations on a regular basis to monitor (in a specific sector or in a specific context) the well-being of refugees and persons of concern.

Given the fact that the **S&I Initiative** constitutes a complex work-in-progress, requiring continual feedback, periodic review, and further development and refinement, the following

16. The previous edition covered two types of indicators: the core set of indicators and supplementary indicators.

list of indicators is not meant to be exhaustive. The snapshot of the well-being of refugees which these indicators produce must be complemented with additional information from qualitative indicators, project-level indicators, detailed sectoral data, and various narrative reports.

Areas of Reference and UNHCR Situations

The main reason for expanding the coverage of the S&I Initiative from camp situations to other UNHCR operations, was mainly to obtain a fuller picture of UNHCR's global involvement and give Field operations a more refined tool for better monitoring the well-being of persons of concern and to design better programme interventions based firmly on evidence and gap analysis.

The SIR has been introduced in order to capture and report data related to indicators worldwide. The SIR, through its different pre-formatted questionnaires, covers two levels/areas of reference:

- **Country Level:** which includes a list of indicators applicable at the country/national level.
- **Operational Level:** which includes three different lists of indicators related to different key UNHCR operations, namely:
 - **Refugee Camp/Settlement:** which include a list of indicators applicable in UNHCR operations in refugee camps. For the SIR purposes, refugee camps are settlements which have been established for more than 6 months and have at least 2,500 individuals.
 - **Urban Programme:** which include a list of indicators applicable in UNHCR operations where refugee and/or asylum-seekers are settled in dispersed manner, in both urban and rural areas.
 - **Returnee Area:** which include a list of indicators applicable in UNHCR operations in areas geographically and administratively identifiable and in which at least 30% of the population are returnees. These operations are normally considered to last up to two years.

The SIR contains four questionnaires/forms:

- **Country Level:** For the purpose of this Guide, the majority of standards and indicators included in this form refers mainly to protection, registration, reduction of statelessness, durable solutions and the access to rights for refugees and asylum-seekers at the country level. The principal aim of this questionnaire is to measure the extent to which legal rights are being exercised or enjoyed in a given situation. The indicators are aimed at all UNHCR Offices in all countries hosting asylum-seekers and/or refugees. (In 2004 this list of indicators was incorporated in the form dealing with urban refugees).
- **Refugee Camp/Settlement:** For the purpose of this Guide, these operations cover both camps and settlements that benefit from planned, full assistance from UNHCR. Moreover, only camps and settlements with more than 2,500 refugees are required to participate in the **S&I Initiative** and submit the SIR. The selected standards and indicators presented

in this Guide go beyond the emergency indicators contained in the UNHCR Emergency Handbook and are also applicable to protracted situations.

- **Urban Programme:** Among the total persons of concern to UNHCR are asylum-seekers, refugees and other persons of concern to UNHCR residing in urban areas. This new edition of the Guide, taking into account the current revision of its Policy on Refugees in Urban Areas which was introduced in 1997¹⁷, seeks to obtain a picture of the well-being of the asylum-seekers/refugees in non-camp settings and establish an accurate picture of their number, characteristics and conditions.
- **Returnee Area:** The extension of the **S&I Initiative** to UNHCR reintegration operations attempts to provide a snap-shot of the well-being of the population in areas of return, focusing on the application of national and sectoral standards, and with a focus on the situation of returnees in accordance to UNHCR's Mandate. This includes monitoring of the restoration of national protection and the implementation of a process that helps to maintain sustainable livelihoods, to access basic services, thereby facilitating reintegration into communities of origins. Some indicators refer to returnees only, while most data apply to the returnee area, including both returnees and local populations. The definition of "Returnee Area" depends on the specific operation. Often, it will refer to the second administrative level in the country ("district").

17. As stated in UNHCR (2005), UNHCR's Policy on Asylum Seekers and Refugees in Urban Areas. EPAU (Draft, June 2005), the 1997 policy had proved difficult to implement in practice, with negative consequences for asylum-seekers and refugees in some instances. Moreover, it did not provide clear or adequate guidelines on assistance and solutions for asylum-seekers and refugees, or on the irregular secondary movement issue. So the purpose of the new policy is to take into consideration recent and important UNHCR initiatives which have relation to, and implications for, refugees in urban areas.

Standards and Indicators Report (SIR) Instructions

The new (2005) Standards and Indicators Report (SIR) updates and replaces the 2004 SIR. The new SIR format should be used in conjunction with this new edition of the *“Practical Guide to the Systematic Use of Standards in UNHCR Operations”*.

The data reported in the SIR provides a snapshot of the well-being of UNHCR persons of concern. The data that these indicators produce must be complemented with additional information available in different UNHCR narrative reports (CR, APR). A specific reference is needed to the Annual Protection Report. The APR provides a comprehensive and global picture of the protection of refugees and other persons of concern. It touches therefore upon most of the subjects included in the SIR and provides the narrative support that explains the reasons for gaps identified in the S&I Report.

The SIR should be consistent with other statistical reports and relevant UNHCR instructions (IOM/FOMs). At the Field level, all efforts should be made to ensure consistency between the set of indicators and the detailed sectoral reporting on issues such as health and nutrition. Periodic and *ad hoc* reports (situation reports, donor reports, etc.) should also refer as much as possible to the values collected in the core set of indicators. If some indicator values are collected more regularly in certain locations, these more up-to-date values may be used in reporting, provided that the reference date or period is clearly indicated.

UNHCR Offices should submit the required questionnaire(s) as follows:

Questionnaire SIR	Coverage/Target	Reporting Responsibility	Remarks
Country Level	Country level, focusing on rights of people of concern and duties of governments	UNHCR Country Office	One questionnaire per country
– Refugee Camp/ Settlement	Refugee Camps or Settlements existing for more than 6 months and have 2.500 individuals or more	UNHCR Field Office	One questionnaire per refugee camp
Urban Programme	All countries hosting refugees and/or asylum-seekers	UNHCR Country Office	One questionnaire per asylum country
Returnee Area	10 largest returnee areas in the country	UNHCR Country Office with returnee operation	One questionnaire per returnee area

The SIR starts with a general section on population data and then lists the various data needed to calculate the indicator. These are calculated automatically in the Excel file. These statistics are reported on a periodic basis to track progress in meeting standards of protection and assistance. Collecting, reporting and using indicators should take place within the context of other UNHCR reporting requirements to ensure consistency of both internal and external reporting. As noted above, it is important that the SIR be consistent with other statistical reports.

General data and demography

Each SIR includes some parts devoted to collecting general information and demographic data. This part coincides with the relevant parts of the Annual Statistical Report both for categories of persons of concern and population age breakdown.

Here, population age breakdown is consistent with the one provided in UNHCR global statistics (0-4, 5-17, 18-59, 60 and over), but in order to respect and implement policy suggestions and recommendations required for the age, gender and diversity mainstreaming, age specific denominators are introduced at the level of single indicator, where relevant or essential.

Themes and Sub-themes

The indicators are presented grouped in different **PARTS**, and further broken down into themes and sub-themes. The determination of themes and sub-themes was based on an overall desire to support decision-making needs, and on the need to focus and emphasize policy issues and themes related to the UNHCR's overall activities. The objective is to **ensure standard quality of UNHCR's protection and assistance delivery, based on readily quantifiable data, illustrating the well-being of the population of concern**. This is described in greater detail in tables below.

Country level		
Themes	Sub-themes	Indicators
Access of Asylum-seekers and Refugees to Rights without Discrimination	Access to the territory	<ul style="list-style-type: none"> • Have border authorities been clearly instructed to refer asylum-seekers to the competent authority? • Are there credible reports of refoulement?
	Freedom of movement	<ul style="list-style-type: none"> • Are there cases of unwarranted detention beyond ExCom Conclusion 44?
	Right to documentation	<ul style="list-style-type: none"> • Do all asylum-seekers / refugees have access to individual identity documentation?
	Right to public education	<ul style="list-style-type: none"> • Do asylum-seekers / refugees have access to [compulsory and] free primary education? • Are school diplomas / certificates obtained in the country of origin recognized in host country?
	Right to health care	<ul style="list-style-type: none"> • Do asylum-seekers / refugees have access to emergency and primary health care services?
	Access to gainful employment	<ul style="list-style-type: none"> • Do all asylum-seekers / refugees have a right to engage in gainful employment?
Refugee Status Determination	Statelessness	<ul style="list-style-type: none"> • Do states grant nationality to persons born in the territory of the state, if they would otherwise be stateless? • Are there reported cases of arbitrary deprivation of nationality leading to statelessness? • Do states allow renunciation of nationality only if the person concerned has acquired another nationality? • Are births of non-refugee stateless children properly registered?
	General	<ul style="list-style-type: none"> • Do all asylum-seekers have access to RSD procedures? • Do all asylum-seekers have access to information and counseling on RSD procedures? • Are reasons for rejection shared in writing with the applicant? • Are applicants permitted to remain in the country while an appeal is pending? • Are rejected asylum-seekers being deported/ repatriated? • Average processing time between submission of application and first instance decision (in days)
Durable Solutions	General	<ul style="list-style-type: none"> • Do refugees receive preferential treatment in naturalization procedures? • Do stateless persons receive preferential treatment in naturalization procedures? • Does the government permit the local integration of refugees? • Is any undue pressure exercised on refugees influencing their voluntary choice to repatriate? • Does the government allow access to land / agricultural production to refugees / asylum-seekers? • Does the government allow access to land / agricultural production to refugees / asylum-seekers?

Urban Programme		
Themes	Sub-themes	Indicators
Protection	Physical protection	<ul style="list-style-type: none"> • Number of refugees and asylum-seekers refouled? • Percentage of asylum-seekers in detention
	Legal status	<ul style="list-style-type: none"> • Percentage of adult refugees and asylum-seekers issued individual identity • Percentage of newborns issued a birth certificate
	Special protection needs	<ul style="list-style-type: none"> • Percentage of older persons with specific needs assisted • Percentage of persons >18 years old with disabilities with specific needs assisted • Percentage of persons <18 years old with disabilities with specific needs assisted • Percentage of ex-combatants >18 years old with specific needs assisted • Percentage of ex-combatants <18 years old assisted
	SGBV	<ul style="list-style-type: none"> • Does your Office have a Standard Operating Procedure (SOP) for SGBV? • Percentage of SGBV cases who received support • Percentage of SGBV cases <18 who received support • Percentage of asylum-seekers / refugees who participated in SGBV training • Percentage of UNHCR and partner staff who have completed SGBV training
	Children	<ul style="list-style-type: none"> • Percentage of UACs/SCs for whom a BID has been carried out • Percentage of UACs/SCs for whom tracing has been successfully completed • Are children below the age of 15 years involved in child labour? • Percentage of adolescents (12-17 years) reached through targeted programming

Urban Programme		
Themes	Sub-themes	Indicators
Self-reliance, Assistance and Community Services	General	<ul style="list-style-type: none"> • Has a Participatory Assessment been conducted at least once during the reporting year?
	Health	<ul style="list-style-type: none"> • Do refugees and asylum-seekers have access to emergency and primary health care services without discrimination?
	HIV and AIDS	<ul style="list-style-type: none"> • Do asylum-seekers / refugees have access to antiretroviral therapy from any source, if available in hosting community?
	Women	<ul style="list-style-type: none"> • Percentage of female members in asylum seeker / refugee representative bodies • Percentage of needs met for sanitary materials
	Self-reliance and income generation	<ul style="list-style-type: none"> • Percentage of asylum-seekers and refugees below the national poverty line • Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)
	Education	<ul style="list-style-type: none"> • Percentage of refugee students enrolled in Grades 1-6 • Percentage of refugee students enrolled in Grades 7-12 • Percentage of refugee students with specific needs enrolled in Grades 1-6 • Number of refugee enrolled in tertiary education • Number of 15-24 years olds enrolled in training (formal, non-formal, vocational, skills, etc.) • Literacy rate for refugees age 15-24
Durable solutions	Repatriation, resettlement and naturalization	<ul style="list-style-type: none"> • Percentage of refugees who repatriated • Percentage of refugees resettled • Average processing time for resettlement submissions (days) • Average processing time for resettlement departures (days)

Refugee Camp/Settlement		
Themes	Sub-themes	Indicators
Demography	Population events during period	<ul style="list-style-type: none"> • Crude Birth Rate (annual) • Infant Mortality Rate (<1 year) (annual) • Child Mortality Rate (< 5 years) (annual) • Crude Mortality Rate (annual)
Protection	Physical protection	<ul style="list-style-type: none"> • Number of refugees and asylum-seekers refouled? • Number of refugees and asylum-seekers killed • Can the population move freely in/out of location
	Legal status	<ul style="list-style-type: none"> • Percentage of refugees and asylum-seekers registered individually • Percentage of adult refugees and asylum-seekers issued individual identity documentation • Percentage of newborns issued a birth certificate
	Special protection needs	<ul style="list-style-type: none"> • Percentage of older persons with specific needs assisted • Percentage of persons >18 years old with disabilities with specific needs assisted • Percentage of persons >18 years old with disabilities with specific needs assisted • Percentage of ex-combatants <18 years old assisted
	SGBV	<ul style="list-style-type: none"> • Does your Office have a Standard Operating Procedure (SOP) for SGBV? • Percentage of SGBV cases who received support • Percentage of SGBV cases <18 who received support • Percentage of asylum-seekers/refugees who participated in SGBV training • Percentage of UNHCR and partner staff who have completed SGBV training
	Children	<ul style="list-style-type: none"> • Percentage of UACs/SCs for whom a BID has been carried out • Percentage of UACs/SCs for whom tracing has been successfully completed • Percentage of adolescents (12-17 years) reached through targeted programming • Have children been recruited for military purposes?
Community services/ Development	General	<ul style="list-style-type: none"> • Has a Participatory Assessment been conducted at least once during the reporting year?
	Camp management	<ul style="list-style-type: none"> • Percentage of female members in camp management committees
	Targeted community assistance	<ul style="list-style-type: none"> • Percentage of needs met for sanitary materials

Refugee Camp/Settlement		
Themes	Sub-themes	Indicators
Food, Nutrition, Health and HIV and AIDS	Food and nutrition	<ul style="list-style-type: none"> Percentage of food beneficiaries entitled to food who received food during latest food distribution Average number of kilocalories available per person per day Percentage of female members in food distribution committees Latest nutritional survey conducted
	Survey data	<ul style="list-style-type: none"> Rate of malnourished 6-59 months children (Global Acute Malnutrition)
	Health	<ul style="list-style-type: none"> Number of persons per primary health care facility Annual no. of consultations at primary health care facilities per person Percentage of live births attended by skilled personnel (excl. TBAs) Percentage of newborn children with low birth weight (< 2500 gr.) (weighed within 72 hrs)
	Survey data	Measles vaccination coverage rate
	HIV and AIDS	<ul style="list-style-type: none"> Number of condoms distributed per person per month Have stocks of condoms run out for more than a week? Is antiretroviral therapy available in/for hosting community/ refugees?
Water, Sanitation, Shelter and Environment	Water	<ul style="list-style-type: none"> Average quantity of water available per person per day Number of persons per usable water tap Number of persons per usable well/hand pump Percentage of pop. living within 200 m from water point Percentage of positive faecal coliform detected at distribution points per 100ml sample during the year Percentage of households with sufficient water storage capacity (i.e. > 10L/person)
	Sanitation	<ul style="list-style-type: none"> Percentage of families with latrines Number of persons per drop-hole in communal latrine Number of persons per communal shower head Number of persons per communal refuse pit Percentage of communal buildings with adequate water/ sanitation
	Shelter & physical planning	<ul style="list-style-type: none"> Average camp area per person (m2) Percentage of households with adequate dwellings Average dwelling floor size per person (m2)
	Environment	<ul style="list-style-type: none"> Environmental Action Plan created/reviewed

Refugee Camp/Settlement		
Themes	Sub-themes	Indicators
Education	Primary school (excluding local population)	<ul style="list-style-type: none"> Percentage of refugee students enrolled in Grades 1 - 6
	Secondary school (excluding local population)	<ul style="list-style-type: none"> Percentage of refugee students enrolled in Grades 7 - 12
	Tertiary education, vocational training and literacy rates	<ul style="list-style-type: none"> Percentage of 15-24 years enrolled in training (non-formal, vocational, skills, etc.)
	Teachers (including local population)	<ul style="list-style-type: none"> Number of students per teacher Percentage of refugee teachers Percentage of qualified or trained teachers
	Survey data	<ul style="list-style-type: none"> Literacy rate for refugees aged 15-24 years old
	Education	<ul style="list-style-type: none"> Is there a local education committee with IP/Government participation?
Economic security	Agricultural production and income generation	<ul style="list-style-type: none"> Number of refugees with access to land for agricultural purposes Number of refugees engaged in agricultural production Percentage of asylum-seekers and refugees (of working age) employed or engaged in income generating activities
Durable Solutions	Repatriation and resettlement	<ul style="list-style-type: none"> Percentage of refugees who repatriated Percentage of refugees resettled Average processing time for resettlement submissions (days) Average processing time for resettlement departures (days)

Returnee Area		
Themes	Sub-themes	Indicators
Demography	Returnees (returned during reporting year)	<ul style="list-style-type: none"> • Infant Mortality Rate (<1 year) (returnees and non-returnees) • Child Mortality Rate (< 5 years) (returnees and non-returnees) • Crude Mortality Rate (returnees and non-returnees)
Access to Rights/ Protection (Returnees only)	Protection	<ul style="list-style-type: none"> • Are there cases of arbitrary detention? • Do all returnees have access to individual identity documentation without discrimination? • Are all returnees allowed to vote? • Are birth certificates given in country of asylum recognized? • Are there reports of security incidents directed at returnees?
	SGBV	<ul style="list-style-type: none"> • Percentage of SGBV cases who received support • Percentage of UNHCR and partner staff who have completed SGBV training
Social Integration	General	<ul style="list-style-type: none"> • Has a Participatory Assessment been conducted at least once during the reporting year?
	Specific Gender Equity	<ul style="list-style-type: none"> • Percentage of female members in community representative bodies
	Health	<ul style="list-style-type: none"> • Do returnees have access to emergency and primary health care services without discrimination? • Measles vaccination coverage rate
	HIV and AIDS	<ul style="list-style-type: none"> • Is antiretroviral therapy available in / for hosting community / returnees? • Will there be a possibility for returnee to continue ART in returnee area?
	Water / sanitation	<ul style="list-style-type: none"> • Percentage of families with improved water supply at an adequate level of service • Percentage of returnee families with latrines
	Shelter	<ul style="list-style-type: none"> • Percentage of returnees living in adequate dwellings
	Education	<ul style="list-style-type: none"> • Percentage of Returnee Area school aged population living within reasonable distance from primary school • Are educational diplomas / certificates obtained in asylum country, recognized in country of origin? • Percentage of RA students enrolled in Grades 1-6 • Percentage of RA students enrolled in Grades 7-12 • Number of 15-24 years old students enrolled in tertiary education or training (formal, non-formal, vocational, skills, etc.) in RA
	Children	<ul style="list-style-type: none"> • Percentage of UACs/SCs for whom tracing has been successfully completed • Have children been recruited for military purposes?
Economic Security	Employment and economic wellbeing	<ul style="list-style-type: none"> • Percentage of returnees below poverty line • Percentage of returnees (of working age) employed or engaged in income generating activities • Number of returnees with access to land for agricultural purposes

The Indicator Summary Boxes

In order to explain each single indicator a **Summary Box** was developed.

Each Indicator Summary Box describes each core indicator in detail, including the following information:

- **Indicator heading** which shows some key information, such as the description of the selected indicator, the standard to which it is related, the need for sex/age desegregation, the reference area to which the indicator is related (protection, sector of assistance, etc.) and the reference number in the SIR. Below is found the general structure of a **Indicator Summary Box**.

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
			<input type="checkbox"/> Sex	Main Theme
			<input type="checkbox"/> Age	Specific Theme
RATIONALE				
METHODS OF MEASUREMENT				
DATA SOURCES				
FREQUENCY OF MEASUREMENT				
NOTES				
REFERENCES				

- **Rationale:** The reason for measuring the data specified in the indicator.
- **Methods of measurement:** Yes/No answers or quantitative/qualitative measurements. Quantitative measurements include figures (e.g. the number of refugees and asylum-seekers refouled), ratios (e.g. the number of students per teacher), or percentages (e.g. percentage of refugees and asylum-seekers registered individually). In many cases, administrative data may be sufficient to measure the indicator, but in others, the most accurate and representative sample will come from an annual random sample survey of the beneficiary population.
- **Frequency of measurement:** This is mainly related to when the data should be collected.
- **Data sources:** Where to find information needed to measure the indicator.
- **Notes:** Brief definitions, critical considerations, assumptions, or constraints.
- **References:** A list of key documents to refer to.

1 COUNTRY LEVEL



COUNTRY LEVEL			
PART I. GENERAL INFORMATION			
	IDENTIFICATION	INFORMATION	COMMENTS
	Country		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	UNHCR Office		
	Focal point		

PART II. POPULATION CATEGORIES OF CONCERN TO UNHCR (PLEASE REFER TO ANNUAL STATISTICAL REPORT, TABLE I)					
	POPULATION FIGURES AT END OF PERIOD	FEMALE	MALE	TOTAL	COMMENTS
	Refugees (1951 Convention)				
	Asylum-seekers (i.e. those without a final RSD decision)				
	Internally Displaced Persons (IDPs)				
	Returned refugees during year				
	Returned IDPs during year				
	Stateless (non-refugees)				
	Others of concern (describe under "Comments")				
	Total				

PART III. ACCESS OF ASYLUM-SEEKERS AND REFUGEES TO RIGHTS (WITHOUT DISCRIMINATION)								
	ACCESS TO THE TERRITORY		ASYLUM-SEEKERS		REFUGEES		STD.	COMMENTS
1	Have border authorities been clearly instructed to refer asylum-seekers to the competent authority?	?	Y/N				Yes	
2	Are there credible reports of refoulement?	?	Y/N		Y/N		No	
	Freedom of movement							
3	Are there cases of unwarranted detention beyond ExCom Conclusion 44?	?	Y/N		Y/N		No	
	Right to documentation							
4	Do all asylum-seekers / refugees have access to individual identity documentation?	?	Y/N		Y/N		Yes	

	ACCESS TO THE TERRITORY		ASYLUM-SEEKERS	REFUGEES	STD.	COMMENTS
	Right to public education					
5	Do asylum-seekers / refugees have access to [compulsory and] free primary education?	?	Y/N		Yes	
6	Are school diplomas / certificates obtained in the country of origin recognized in host country?	?	Y/N		Yes	
	Right to health care					
7	Do asylum-seekers / refugees have access to emergency and primary health care services?	?	Y/N		Yes	
	Access to gainful employment					
8	Do all asylum-seekers / refugees have a right to engage in gainful employment?	?	Y/N		Yes	

PART IV. REFUGEE STATUS DETERMINATION						
STATELESSNESS				VALUE	STD.	COMMENTS
9	Do states grant nationality to persons born in the territory of the state, if they would otherwise be stateless?	?	Y/N		Yes	
10	Are there reported cases of arbitrary deprivation of nationality leading to statelessness?	?	Y/N		No	
11	Do states allow renunciation of nationality only if the person concerned has acquired another nationality?	?	Y/N		Yes	
12	Are births of non-refugee stateless children properly registered?	?	Y/N		Yes	
GENERAL				VALUE	STD.	COMMENTS
13	Do all asylum-seekers have access to RSD procedures?	?	Y/N		Yes	
14	Do all asylum-seekers have access to information and counselling on RSD procedures?	?	Y/N		Yes	
15	Are reasons for rejection shared in writing with the applicant?	?	Y/N		Yes	
16	Are applicants permitted to remain in the country while an appeal is pending?	?	Y/N		Yes	
17	Are rejected asylum-seekers being deported/repatriated?	?	Y/N		No	
18	Average processing time between submission of application and first instance decision (in days)	?				
19	Average processing time between submission of application and final decision (in days)	?				

PART V. DURABLE SOLUTIONS						
GENERAL				VALUE	STD.	COMMENTS
20	Do refugees receive preferential treatment in naturalization procedures?	?	Y/N		Yes	
21	Do stateless persons receive preferential treatment in naturalisation procedures?	?	Y/N		Yes	
22	Does the government permit the local integration of refugees?	?	Y/N		Yes	
23	Is any undue pressure exercised on refugees influencing their voluntary choice to repatriate?	?	Y/N		No	
24	Does the government allow access to land / agricultural production to refugees / asylum-seekers?	?	Y/N		Yes	

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
1	Have border authorities been clearly instructed to refer asylum-seekers to the competent authority?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Access to the territory
RATIONALE Access to the territory as well as to asylum procedure is a crucial aspect of refugee protection. This indicator will serve to determine if authorities entrusted with control at borders have a legal obligation to forward asylum requests.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Government sources				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The indicator aims to measure the legal situation and not actual practice. • Instructions will be in written form, either in form of a legal act or as internal instructions of the relevant Ministry / state authority. Good state practice based on informal arrangements with UNHCR will not be considered sufficient under this indicator. 				
REFERENCES <ul style="list-style-type: none"> • International Customary Law. • 1951 Refugee Convention, Art. 33. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
2	Are there credible reports of refoulement?	NO	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Access to the territory
RATIONALE This indicator serves to measure the compliance by states with the fundamental principle of refugee protection, the principle of non-refoulement, particularly in situations in which UNHCR is not aware of specific cases, but is aware of problem areas.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR presence on the border and in the Field, governments, human rights agencies, implementing and operational partners, media, local communities, refugees and asylum seekers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The first over-riding priority in ensuring protection to refugees is non-refoulement and treatment in accordance with basic human rights and refugee law standards. The rights of refugees to physical security and the enjoyment of other fundamental human rights lie at the core of UNHCR's international protection mandate, which is summarized in the Preamble to the 1951 Convention: <i>"to assure refugees the widest possible exercise of ... fundamental rights and freedoms... which are normally secured to for the individual by his or her Government"</i>. • Direct as well as indirect refoulement will be considered. Reports may include refoulement of refugees or asylum-seekers in the country as well as non-admission of genuine asylum-seekers at the land border or airport. • Reports have to be considered credible by UNHCR. 				
REFERENCES <ul style="list-style-type: none"> • International Customary Law. • 1951 Refugee Convention, Art. 33. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
3	Are there cases of unwarranted detention beyond ExCom Conclusion 44?	NO	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Freedom of movement
RATIONALE This indicator serves to get a rough idea about the scale of detention problems faced by asylum seekers.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR presence in and visits to detention facilities, governments; human rights agencies, implementing and operational partners, media, local communities, refugees, and asylum seekers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Unwarranted detention will include any form of administrative or penal detention in violation of Article 31.1 of the 1951 Convention and ExCom Conclusion No. 44. • It will include cases of detention for breaching administrative and/or penal rules relating to lack of valid visa/travel documents, lack of residence permit, and/or lack of identity papers. Imprisonment for crimes unrelated to immigration and/or residence status will not be considered under this indicator. Short term arrest of asylum-seekers, for instance at border points, should not be considered, provided it does not exceed the duration of a few days. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 31. • International Covenant on Civil and Political Rights, Art. 9. • ExCom Conclusion No. 44. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
4	Do all asylum-seekers / refugees have access to individual identity documentation?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Right to documentation
RATIONALE Identity documents certify status and are thus a fundamental tool of protection				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Formal reports of government authorities or in case of UNHCR involvement in the issuance, UNHCR. UNHCR Offices should not report if no official government/UNHCR data are available.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Individual identity documents include primarily documents issued by the government. It also includes documents issued by UNHCR, when UNHCR has been given the authority by the host government to issue them through a legal or sub-legal act or when the UNHCR issued document bears the logo and signature of the competent state authority. • Refugee certificates and protection letters issued by UNHCR without such endorsement by the authorities are not to be considered as identity documents, even if in practice they are accepted by the authorities of the host country. • Related to asylum-seekers "For the purpose, <i>inter alia</i>, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application" (ExCom Conclusion No. 93). 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 27. • ExCom Conclusion No. 93 - para. (b)(v). • UNHCR, (2003) <i>UNHCR Handbook for Registration</i>. UNHCR, Geneva.. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
5	Do asylum-seekers / refugees have access to [compulsory and] free primary education?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Right to public education
RATIONALE This indicator serves to identify if there are legal gaps with regard to access to primary education.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES The question shall be replied in the affirmative if the following conditions are fulfilled: <ul style="list-style-type: none"> • Domestic law does not restrict access to primary education for asylum-seekers and/or refugees; • Primary education is compulsory according to domestic law; • There are no school fees and no fees for learning materials / textbooks; • In case indirect costs (e.g. transportation costs, school uniforms, etc.) negatively affect access to education, the response on the above question will remain affirmative, but the issue should be flagged in the comment box. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 28 (1) a. • 1951 Refugee Convention, Art. 22 (1). • International Covenant on Economic, Social and Cultural Rights, Art. 13. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
6	Are school diplomas / certificates obtained in the country of origin recognized in host country?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Right to public education
RATIONALE Skills and competencies obtained by refugees/returnees from home or host countries are key to rebuilding their lives, their communities and for their self-reliance. UNHCR, relevant UN agencies and government authorities should ensure that diplomas, certificates and degrees of refugees and returnees are recognized by authorities.				
METHODS OF MEASUREMENT " Yes " or " No " answer				
DATA SOURCES Refugees/returnee students, Ministry of Education, UNESCO, UNICEF, implementing partners and domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • When refugees students or teachers arrive or repatriate, UNHCR and its implementing partners should ensure that children and adolescents have immediate access to simple educational activities and that normal education programmes resume quickly without discrimination. • Placement and aptitude tests should be organized for refugee students arriving without proper documents. For those who have documents, they may need support in translating their documents to facilitate their recognition. Language courses, catch-up classes, or refresher courses will facilitate the integration into educational system. Information counseling should be made available to students whose courses were interrupted. • A tripartite agreement among the authorities in host country, country of origin and UNHCR has proven to be a good approach in addressing the issue of recognition, validation and certification. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • ExCom Conclusions No. 101 (LV), 2004. • UNESCO, (1960) <i>Convention against Discrimination in Education</i>. UNESCO, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
7	Do asylum-seekers / refugees have access to emergency and primary health care services?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Right to health care
RATIONALE This indicator serves to identify if there are legal gaps with regard to access to emergency and primary health care by refugees and asylum-seekers.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Government authorities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The health care service is considered accessible if access is provided to all without discrimination, if it is within physical reach and if it is affordable. • Emergency health care is defined as medical response to an acute severe medical condition which in the absence of immediate medical attention would seriously jeopardize the health of the individual, and shall include medical responses to obstetric complications, acute abdomen and injury. • Primary health care is defined as universally accessible, practical, scientifically sound and culturally appropriate, essential, promotive, preventive, curative and rehabilitative care, and includes: health education, nutrition, reproductive health (including family planning), child health, communicable disease control and immunization, management of common diseases and injuries and provision of essential drug and community engagement. It is the first point of contact with the health services and is linked to referral networks for more comprehensive care. • <u>For refugees</u>: In cases where domestic law provides access only to some categories of refugees (e.g. only those with a residence permit), Field Offices will assess whether such limitations impact only on a minority or on the majority of refugees and respond accordingly, adding a short description of the limitation in the comment box. • <u>For asylum-seekers</u>: In cases where domestic law provides access only to some categories of asylum-seekers (only those with a temporary residence permit, only those in the regular procedure, etc.) Field Offices will assess whether such limitations impact only on a minority or on the majority of refugees and respond accordingly, adding a short description of the limitation in the comment box. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Declaration of Alma-Ata, 1978, para. VII. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
8	Do all asylum-seekers / refugees have a right to engage in gainful employment?	YES	<input type="checkbox"/> Sex	Access of asylum-seekers/refugees to rights (without discrimination)
			<input type="checkbox"/> Age	Access to gainful employment
RATIONALE This indicator serves to determine if refugees are accorded the most favorable treatment accorded to other nationals of a foreign country in the same circumstances as regards the right to be engaged in gainful employment in the country of asylum.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Formal reports of government authorities, domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Pursuant to Article 18 of the 1951 Convention, refugees (including refugees whose status has not been formally determined yet, i.e. asylum-seekers) who are lawfully present in the country of asylum be accorded treatment as favorable as possible, and in any event not less favorable than that accorded to aliens generally in the same circumstances, as regards the right to engage in self-employed activities. According to Article 17, refugees lawfully staying in the territory (i.e. those refugees with an officially sanctioned, ongoing presence in the country of asylum whether or not there has been a formal declaration of refugee status, grant of the right to permanent residence or establishment of domicile there; e.g. refugees under temporary protection regimes should be considered as lawfully staying) should be accorded the most favorable treatment accorded to nationals of a foreign country in the same circumstances as regards the right to engage in wage-earning employment. Pursuant to Article 19, lawfully staying refugees who hold diplomas recognized by the competent authorities of the country of asylum should be accorded treatment as favorable as possible, and in any event not less favorable than that accorded to aliens generally in the same circumstances, as regards the right to practice a liberal profession. • Compliance with this indicator should thus be measured on the basis of the aforementioned standards of treatment of refugees vis-à-vis other foreign nationals prescribed by Articles 17, 18 and 19 in the 1951 Convention. • This indicator has been limited to lawfully staying refugees' legal right to engage in self-employed activities, in wage-earning employment and to practice a liberal profession even though asylum-seekers who are considered to be lawfully present in a country of asylum should have the right to engage in self-employed activities pursuant to Article 18 of the 1951 Convention. • In countries where refugees are, for example, only granted the legal right to engage in gainful employment some time after their stay has been regularized (made lawful), please reply "Yes" to this indicator and provide a brief explanation. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Convention Articles 17, 18 and 19. • The Covenant on Economic, Social and Cultural Rights, Art. 6. • ExCom Conclusion No. 50 and 64. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
9	Do states grant nationality to persons born in the territory of the state, if they would otherwise be stateless?	YES	<input type="checkbox"/> Sex	Refugee status determination
			<input type="checkbox"/> Age	Statelessness
RATIONALE Recognizing the right of everyone to a nationality, this indicator will serve to determine if adequate mechanisms exist to reduce statelessness at birth.				
METHODS OF MEASUREMENT “Yes” or “No” answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES This question shall be answered in the affirmative if nationality of a child born in the territory of the state who would otherwise be stateless is acquired either: a) at birth automatically by operation of law or b) upon application. In this second case, domestic law has to provide that no such application can be rejected. Domestic law can however make the grant of its nationality subject to one or more of the following conditions: <ul style="list-style-type: none"> • That the person concerned has habitually resided in the territory of the state for such period as may be fixed by the state, not exceeding five years immediately preceding the lodging of the application. • That the person concerned has neither been convicted of an offence against national security nor has been sentenced to imprisonment for a term of five years or more on a criminal charge. • That an application is lodged during a period, beginning not later than at the age of 18 years and not ending earlier than at the age of 21 years. This indicator does not cover the issue of the nationality of foundlings found in the territory of states, nor does it capture the fact that a higher protection exists for children born in wedlock whose mother has the nationality of the state (Art. 1.3 of the 1961 Convention).				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 7. • International Covenant on Civil and Political Rights, Art. 24. • 1961 Convention Relating to the Reduction of Statelessness, Art 1. • European Convention on Nationality, Art. 6. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
10	Are there reported cases of arbitrary deprivation of nationality leading to statelessness?	NO	<input type="checkbox"/> Sex	Refugee status determination
			<input type="checkbox"/> Age	Statelessness
RATIONALE This indicator will serve to investigate if discriminatory measures have been taken by states and to prevent new cases of statelessness.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> In situations of mass expulsion, deportation, refugee outflows or displacement, UNHCR is increasingly witnessing the deliberate deprivation of documentation establishing the identity of persons concerned. Arbitrary deprivation of nationality or citizenship is also of concern with incidents of fleeing persons being forced to sign forms saying they are voluntarily renouncing their citizenship, de-registering and leaving the country by choice. The legal implications for their future status relate not only to the right to return, but they also risk to create statelessness and further problems pertaining to civil status. The right to a nationality as well as the avoidance of statelessness are both well-established principles of international law. For persons who have no nationality, there are often challenges in determining which nationality they may have a claim to. For persons who do have a nationality and risk losing it, international legal principles are absolutely clear. States may not arbitrarily deprive their nationals of nationality. This is the case even if statelessness is not a result. Deprivation of nationality is considered arbitrary if the deprivation is clearly discriminatory (if, for example, an ethnic group is targeted), or is implemented without full procedural guarantees such as notice and the right to a hearing by an independent court or tribunal. 				
REFERENCES <ul style="list-style-type: none"> Convention on the Rights of the Child, Art. 7. International Covenant on Civil and Political Rights, Art. 24. 1961 Convention Relating to the Reduction of Statelessness. ExCom Conclusion No. 78. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
11	Do states allow renunciation of nationality only if the person concerned has acquired another nationality?	YES	<input type="checkbox"/> Sex	Refugee status determination
			<input type="checkbox"/> Age	Statelessness
RATIONALE This indicator will serve to determine if measures have been taken by states to prevent new cases of statelessness through renunciation of nationality by its citizens.				
METHODS OF MEASUREMENT “Yes” or “No” answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The definition of statelessness is enunciated in Article 1 of the 1954 Convention relating to the Status of Stateless Persons which stipulates that a stateless person “means a person who is not considered as a national by any State under the operation of its law”. • Some countries have legislation which allows individuals to renounce their “established legal bond” or “nationality” without a guarantee of acquiring an alternative nationality. • Field Offices will review the provisions of nationality and related laws and reply in the affirmative if there is no situation in which renunciation of nationality would lead to statelessness. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 7. • International Covenant on Civil and Political Rights, Art. 24. • 1961 Convention Relating to the Reduction of Statelessness. • ExCom Conclusion No. 78. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
12	Are births of non-refugee stateless children properly registered?	YES	<input type="checkbox"/> Sex	Refugee status determination
			<input type="checkbox"/> Age	Statelessness
RATIONALE Birth registration is the first official knowledge of a child's existence and constitutes an important step towards reduction of statelessness				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • All children, regardless of place of birth, should be registered immediately at birth, as stipulated by Article 24 of the International Covenant on Civil and Political Rights and by Article 7 of the Convention on the Rights of the Child. The ICCPR and the CRC both stipulate that all children will have the right to acquire a nationality. <i>Which</i> nationality – that will depend upon the laws of the state(s) concerned; however, in all cases, it has to be clarified where the child was born and to whom? A principle criterion in establishing identity and, therefore, the right to a nationality based on either place of birth or descent, is proof of birth. Failure or refusal of a state to ensure registration of births has led to the inability to establish identity and a consequent failure to acquire any nationality. • The question will only be replied in the affirmative if domestic law makes registration a compulsory duty both of the parents and of the relevant administrative authorities. • The registration has to be considered as "properly" if as a minimum it contains: the child's name at birth, the child's sex, the child's date of birth, where the child was born, the child's nationality, the parents' names and addresses, and the parents' nationality status. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 7. • International Covenant on Civil and Political Rights, Art. 24. • ExCom Conclusion No. 90, r. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
13	Do all asylum-seekers have access to RSD procedures?	YES	<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Asylum-seekers should receive information on the RSD process and procedures. They should also have opportunity to meet with a competent official for the RSD interview.				
METHODS OF MEASUREMENT “Yes” or “No” answer				
DATA SOURCES UNHCR offices and implementing agencies for Mandate RSD operations, national authorities for government RSD procedures				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Mandate RSD operations are normally conducted by UNHCR officers and/or implementing agencies. • RSD procedures are cleared with national authorities. • RSD decisions are made through the National Eligibility Committee, which is composed of national authorities dealing with asylum-seekers. UNHCR is normally attending the National Eligibility Committee sessions as observer. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>. UNHCR, Geneva. <i>Units 3.1.3 and 3.1.4</i> • Conclusion No. 8 (XXVIII), para. e (ii) of 1977 endorsed by the ExCom. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
14	Do all asylum-seekers have access to information and counselling on RSD procedures?	YES	<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Asylum-seekers should be provided with necessary information to permit them to understand and exercise their right to apply for refugee status, and they should have the opportunity to meet with a competent official before the RSD interview to receive information on the RSD process and procedures.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR offices and implementing agencies for Mandate RSD operations, national authorities for government RSD procedures; availability of information leaflets in various languages and of protection/legal and of community services staff devoted to counseling.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Access to information should be measured by taking into account its provision both orally and physically (leaflets, information boards &c), as well as its availability in different places (airports, ports, border entry points, UNHCR, government agencies, NGOs, etc). • Counseling is not to be considered legal aid or assistance, provided by lawyers or para-legal staff, but rather individualized advice regarding the RSD procedures. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>. UNHCR, Geneva. <i>Units 3.1.3 and 3.1.4</i> • Conclusion No. 8 (XXVIII), para. e (ii) of 1977 endorsed by the ExCom. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
15	Are reasons for rejection shared in writing with the applicant?	YES	<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Notification in writing of negative decisions should be the means to inform of refugee status rejection, so that asylum-seekers may exercise their right to appeal challenging the reasons for such first instance decisions.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR offices for Mandate RSD operations and national authorities for government RSD procedures				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Existence and use of Notification Letters which contain the reasons for rejection and which are filed in a central database as well as in the individual file. • The Notification of Negative RSD Decision letter should include sufficient details to permit the applicant to know (i) that evidence submitted by the applicant was considered to be insufficient or was not accepted by the decision-makers [a summary explanation of why evidence was rejected should be given]; (ii) the reasons why the accepted facts do not make the applicant eligible for refugee status. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>. UNHCR, Geneva. Unit 6 and Annex 6.1 • UNHCR, (2002) <i>Handbook on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees</i>. UNHCR, Geneva. HCR/IP/4/Eng/REV.1 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
16	Are applicants permitted to remain in the country while an appeal is pending?	YES	<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Applicants whose refugee claims have been rejected and who appeal that decision should be still considered asylum-seekers and be allowed to remain in the country enjoying all rights deriving from this status.				
METHODS OF MEASUREMENT Analysis of the legislation on refugee status determination and state practice				
DATA SOURCES Legislation on RSD and state practice				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Those countries that capture in their asylum legislation exceptions to the suspensive effect of appeals (e.g. re. manifestly unfounded claims, deportation to safe countries) should indicate in the comments what these exceptions are. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 33. • Conclusion No. 8 (XXVIII), para. e (vii) of 1977 endorsed by the ExCom. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
17	Are rejected asylum-seekers being deported/ repatriated?		<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE This indicator will serve to give an idea if the deportation/repatriation is happening.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR presence in and visits to detention facilities; governments, human rights agencies, implementing and operational partners, media, local communities, refugees and asylum seekers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Under this indicator, deportation is understood to refer to the return of foreign nationals to their country of origin against their will. It is distinct from voluntary return, in which individuals are encouraged – often through a combination of carrot and stick measures – to return to their countries of origin. It is also distinct from the broader category of removals: some "deportation" figures include individuals that arrived at the border but were never admitted to the country, a practice commonly referred to as "airport turnarounds". The case of asylum is, however, striking, not least because it involves individuals who have identified themselves to the state, in contrast with, for instance, undocumented migrants. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention UNHCR, (2002) <i>Handbook on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees</i>. UNHCR, Geneva. HCR/IP/4/Eng/REV.1 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
18	Average processing time between submission of application and first instance decision (in days)		<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Asylum-seekers enjoy a precarious legal status which does not enable the full enjoyment of human rights. Hence, every effort should be made to minimize uncertainty or inconvenience for the applicant.				
METHODS OF MEASUREMENT Report the average number of days it took during the reporting period between submission of an application for refugee status and the notification of the first instance decision.				
DATA SOURCES UNHCR offices for Mandate RSD operations and national authorities for government RSD procedures				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • According to the UNHCR <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>, the length of time between the date of registration and the scheduled RSD interview should not exceed six (06) months and decisions should be issued and notified within one (01) month following the RSD interview. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>. UNHCR, Geneva. Units 3.5.3 and 4.5 • UNHCR, (2002) <i>Handbook on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees</i>. UNHCR, Geneva. HCR/IP/4/Eng/REV.1 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
19	Average processing time between submission of application and final decision (in days)		<input type="checkbox"/> Sex	Refugee Status Determination
			<input type="checkbox"/> Age	General
RATIONALE Asylum-seekers enjoy a precarious legal status which does not enable the full enjoyment of human rights. Hence every effort should be made to minimize uncertainty or inconvenience for the applicant.				
METHODS OF MEASUREMENT The average number of days it took during the reporting period between submission of an application for refugee status and the notification of the final decision.				
DATA SOURCES UNHCR offices for Mandate RSD operations and national authorities for government RSD procedures				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> According to the UNHCR <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>, the length of time between the date of registration and the scheduled RSD interview should not exceed six (06) months; first instance decisions should be issued and notified within one (01) month following the RSD interview; the time-limit within which applicants must submit the Appeal Application Form should not be less than 30 days after the date on which the applicant has been notified of the RSD decision; and the timelines for issuance of appeal decisions should be established in the framework of a fair and prompt procedure. 				
REFERENCES <ul style="list-style-type: none"> UNHCR, (2003) <i>Procedural Standards for Refugee Status Determination under UNHCR's Mandate</i>. UNHCR, Geneva. Unit 3.5.3, 4.5, 7.2 and 7.5 UNHCR, (2002) <i>Handbook on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees</i>. UNHCR, Geneva. HCR/IP/4/Eng/REV.1 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
20	Do refugees receive preferential treatment in naturalization procedures?	YES	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	General
RATIONALE This indicator serves to identify if there is facilitated access to nationality of the country of asylum by refugees as compared to other aliens.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The question shall be replied in the affirmative if domestic law of the country of asylum provides for facilitated access to nationality for refugees or stateless persons as compared to other aliens, either through a simplified procedure, through reduced residency requirements, or otherwise. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 34. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
21	Do stateless persons receive preferential treatment in naturalization procedures?	YES	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	General
RATIONALE This indicator serves to identify if there is facilitated access to nationality by the country of asylum for stateless persons.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The question will be replied in the affirmative if domestic law of the country of asylum provides for facilitated access to nationality for refugees as compared to other aliens, either through a simplified procedure, through reduced residency requirements, or otherwise. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 34. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
22	Does the government permit the local integration of refugees?	YES	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	General
RATIONALE This indicator will provide an indication of whether a state allows refugees who have been accepted/ recognized by the national authorities on an individual or group basis, or by UNHCR, to locally integrate into the country (of first asylum).				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Domestic legal documents				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The question shall be replied in the affirmative if the state permits persons who have been recognized/ accepted as refugees in their territory, either by the national authorities or by UNHCR, to remain permanently and locally integrate in the country. • The question shall also be replied in the affirmative, with an explanation, if the state allows individuals or groups of refugees within the broader refugee population to locally integrate, for example as part of comprehensive durable solutions strategies. • If the state grants refugees a secure legal status and permanent residency, either immediately upon recognition or within a reasonable period of time, as well as gradual access to all rights enshrined in international human rights and refugee law instruments and national law (apart from those that can be reserved to citizens), this can serve as an indication of the state's willingness to allow refugees to integrate locally. • In countries of asylum where residence permits as such do not exist, the <u>security and certainty</u> of the status and right to remain permanently in the country of asylum, regardless if it is based on e.g. a decree, order or a declaration by a president, needs to be measured in light of the national administrative system and practice in place. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
23	Is any undue pressure exercised on refugees influencing their voluntary choice to repatriate?	NO	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	General
RATIONALE This indicator will serve to get an idea on voluntariness of repatriation which is the key prerequisite for protection against refoulement.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR, NGO's, human rights agencies				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Decisions to return home, especially after a long time in exile, are difficult and may be subject to different kinds of pressure, which could include both pressures to return, or pressure no to return. It can be exercised in the country of asylum, with attempts to make asylum less effective by reducing levels of assistance or jeopardizing the legal status. It could be generated by false information on the conditions in the country of origin. Political actors can exploit their political agendas preventing refugees from returning home. The Handbook on Voluntary Repatriation gives further guidance on what repatriation cannot be regarded as voluntary. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art 33. UNHCR, (1996) <i>Handbook on Voluntary Repatriation: International Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
24	Does the government allow access to land / agricultural production to refugees / asylum-seekers?	YES	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	General
RATIONALE To measure the accessibility of households to arable agricultural land. Arable land includes land under temporary crops, temporary meadows for mowing or pasture, land under market or kitchen gardens and land temporarily fallow.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES National land use reports, World Bank development Indicators, local agriculture authorities, NGO reports				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • FAO and the World Bank regularly undertake surveys of land use in developing countries. • Particular attention is needed to the amount of available arable land in a given area and population density. • In small areas of return, UNHCR can engage with FAO and other partners on specific surveys. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. • WB, (2002) <i>World Bank Development Indicators – Rural Environment and Land Use</i>. World Bank. • FAO, (1996) <i>Land Quality Indicators and Their Use in Sustainable Agriculture and Rural Development</i>. Roma • FAO, (2002) <i>Gender and Access to Land, FAO Land Tenure Studies</i>, Roma. 				

2 URBAN PROGRAMME



URBAN PROGRAMME			
PART I. GENERAL INFORMATION			
	IDENTIFICATION	INFORMATION	COMMENTS
	Country		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	UNHCR Country Office		
	Focal point		

PART II. DEMOGRAPHY (PLEASE REFER TO ASR, TABLE II AND III)							
REFUGEES AND ASYLUM-SEEKERS AT END OF PERIOD	ASYLUM-SEEKERS			REFUGEES			COMMENTS
	FEMALE	MALE	TOTAL	FEMALE	MALE	TOTAL	
Under 5 years							
5-17 years							
18-59 years							
60 years and over							
Total population							

PART III. PROTECTION							
PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
1	Number of refugees and asylum-seekers refouled	?				0	
2	Percentage of asylum-seekers in detention	?				0%	
	- Number of asylum-seekers in detention (EP)						
	- Total no. of asylum-seekers (i.e. those without a final RSD decision) (EP)						
LEGAL STATUS			FEMALE	MALE	TOTAL	STD.	COMMENTS
3	Percentage of refugees and asylum-seekers registered individually	?				100%	
	- Total number of refugees and asylum-seekers individually registered (EP)						
	- Total number of refugees and asylum-seekers (EP)						
4	Percentage of adult refugees and asylum-seekers issued individual identity documentation	?				100%	
	- Total number of refugees and asylum-seekers ≥18 years old issued individual identity documentation (EP)						
	- Total number of refugees and asylum-seekers ≥18 years old (EP)						

PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
5	Percentage of newborns issued a birth certificate	?				100%	
	- Total number of newborn refugees and asylum-seekers issued with individual birth certificates (DP)						
	- Total number of newborn refugees and asylum-seekers (DP)						
SPECIFIC PROTECTION NEEDS			FEMALE	MALE	TOTAL	STD.	COMMENTS
6	Percentage of older persons with specific needs assisted	?				100%	
	- Number of older persons with specific needs assisted (DP)						
	- Number of older persons with specific needs (EP)						
7	Percentage of disabled persons ≥18 years old with specific needs assisted	?				100%	
	- Number of disabled persons ≥18 years old with specific needs assisted (DP)						
	- Number of disabled persons ≥18 years old with specific needs (EP)						
8	Percentage of disabled persons <18 years old with specific needs assisted	?				100%	
	- Number of disabled persons <18 years old with specific needs assisted (DP)						
	- Number of disabled persons <18 years old with specific needs (EP)						
9	Percentage of ex-combatants ≥18 years old with specific needs assisted	?				100%	
	- Number of ex-combatants ≥18 years old with specific needs assisted (DP)						
	- Number of ex-combatants ≥18 years old with specific needs (EP)						
10	Percentage of ex-combatants <18 years old assisted	?				100%	
	- Number of ex-combatants <18 years old assisted (DP)						
	- Number of ex-combatants <18 years old (EP)						

Note: (EP) End of period; (DP) During period

PART III. PROTECTION (CONTINUED)							
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
11	Does your Office have a Standard Operating Procedure (SOP) for SGBV? (Y/N)	?				Yes	
			FEMALE	MALE	TOTAL	STD.	COMMENTS
12	Percentage of SGBV cases who received support	?				100%	
	- Number of SGBV cases who received support (DP)						
	- Number of SGBV cases reported (DP)						

SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
13	Percentage of SGBV cases <18 years old who received support	?				100%	
	- Number of SGBV cases <18 years old who received support (DP)						
	- Number of SGBV cases reported <18 years old (DP)						
14	Percentage of asylum-seekers / refugees who participated in SGBV training	?				10%	
	- Total number of participants in SGBV training (DP)						
	- Total number of asylum-seekers / refugees (EP)						
15	Percentage of UNHCR and partner staff who have completed SGBV training	?				10%	
	- Total number of UNHCR and partner staff who have completed SGBV training (DP)						
	- Total number of UNHCR and partner staff at end of year (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
16	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	?				100%	
	- Number of UACs/SCs for whom a BID has been carried out (EP)						
	- Number of UACs/SCs identified (EP)						
17	Percentage of UACs/SCs for whom tracing has been successfully completed	?				100%	
	- Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	- Number of UACs/SCs identified (EP)						
18	Are children <15 years old involved in child labour?	?	Y/N			No	
19	Percentage of adolescents (12-17 years old) reached through targeted programming	?				100%	
	- Number of adolescents reached through targeted programming (DP)						
	- Total refugee population 12-17 years old (EP)						

PART IV. SELF-RELIANCE, ASSISTANCE AND COMMUNITY SERVICES							
GENERAL			VALUE			STD.	COMMENTS
20	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N) (DP)	?	Y/N			Yes	
HEALTH			VALUE			STD.	COMMENTS
21	Do refugees and asylum-seekers have access to emergency and primary health care services without discrimination?	?	Y/N			Yes	
HIV AND AIDS			VALUE			STD.	COMMENTS
22	Do asylum seekers / refugees have access to antiretroviral therapy from any source, if available in hosting community?	?	Y/N			Yes	

WOMEN			VALUE			STD.	COMMENTS	
23	Percentage of female members in asylum seeker / refugee representative bodies	?				50%		
	- Number of female members in asylum-seeker / refugee representative bodies (EP)							
	- Total number of members in asylum-seeker / refugee representative bodies (EP)							
24	Percentage of needs met for sanitary materials	?				100%		
	- Cost of sanitary materials provided (US\$) (DP)							
	- Cost of providing adequate sanitary materials (US\$) (DP)							
SELF-RELIANCE AND INCOME GENERATION			FEMALE HEADED HOUSEHOLDS		MALE HEADED HOUSEHOLDS		STD.	COMMENTS
25	Percentage of asylum-seekers and refugees below the national poverty line	?					0%	
			FEMALE	MALE	TOTAL	STD.	COMMENTS	
26	Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)	?						
	- Number of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities) (EP)							
	- Number of working age asylum-seekers and refugees (EP)							

Note: (EP) End of period; (DP) During period

PART IV. SELF-RELIANCE, ASSISTANCE AND COMMUNITY SERVICES (CONTINUED)							
EDUCATION			FEMALE	MALE	TOTAL	STD.	COMMENTS
27	Percentage of refugee students enrolled in Grades 1-6	?				100%	
	- Total number of refugee students enrolled in Grades 1-6						
	- Total refugee population 6-11 years old						
28	Percentage of refugee students enrolled in Grades 7-12	?					
	- Total number of refugee students enrolled in Grades 7-12						
	- Total refugee population 12-17 years old						

EDUCATION			FEMALE	MALE	TOTAL	STD.	COMMENTS
29	Percentage of students with specific needs attending Grades 1-6	?				100%	
	- No. of students with specific needs attending Grades 1-6						
	- No. of students 6-11 years old with specific needs						
30	Number of refugees enrolled in tertiary education (EP)	?					
31	Number of 15-24 years old refugees enrolled in training (formal, non-formal, vocational, skills, etc.) (EP)	?					
32	Literacy rate for asylum-seekers / refugees aged 15-24 years old (EP)	?				100%	

PART V. DURABLE SOLUTIONS							
REPATRIATION UND RESETTLEMENT			VALUE			STD.	COMMENTS
33	Percentage of refugees who repatriated (DP)	?				100%	
	- Number of refugees who repatriated (DP)						
	- Number who expressed willingness to repatriate (signed VRF) (DP)						
34	Percentage of refugees resettled	?				100%	
	- Number of refugees resettled (DP)						
	- Number identified for resettlement (DP)						
35	Average processing time for resettlement submissions (days)	?					
36	Average processing time for resettlement departures (days)	?					

Note: (EP) End of period; (DP) During period

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
1	Number of refugees and asylum-seekers refouled	0	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Physical protection
RATIONALE This indicator serves to measure the compliance by states with the fundamental principle of non-refoulement.				
METHODS OF MEASUREMENT Report the total number of cases known to UNHCR				
DATA SOURCES UNHCR presence on the border and in the Field, governments; human rights agencies, implementing and operational partners, media, local communities, refugees and asylum-seekers				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated, but with continual monitoring, especially during an emergency or influx of refugees or asylum-seekers (also in Situation Report and Annual Protection Report)				
NOTES <ul style="list-style-type: none"> • Direct as well as indirect refoulement shall be considered. Reports may include refoulement of refugees or asylum-seekers in the country, as well as non-admission of genuine asylum-seekers at the land border or airport. • Only cases of refoulement of asylum-seekers (whether already registered as such or not) and refugees should be listed. Cases falling under the exceptions of Article 33(2) of the 1951 Convention as well as cases not in need of international protection in which return may solely violate other non-refoulement obligations in international law (<i>e.g. excluded cases entitled to protection under the Convention against Torture</i>) shall not be counted. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 33. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
2	Percentage of asylum-seekers in detention	0%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Physical protection
RATIONALE This indicator serves to get a rough idea about the scale of detention problems faced by asylum-seekers and refugees.				
METHODS OF MEASUREMENT Numerator: Number of asylum-seekers in detention at the end of reporting period Denominator: Total number of asylum-seekers (i.e. those without a final RSD decision) at the end of reporting period				$X 100 = \%$
DATA SOURCES UNHCR presence in and visits to detention facilities; governments, human rights agencies, implementing and operational partners, media, local communities, refugees and asylum-seekers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Unwarranted detention shall include any form of administrative or penal detention in violation of Article 31.1 of the 1951 Convention and ExCom Conclusion No. 44. • It shall include cases of detention for breaching administrative and/or penal rules relating to lack of valid visa/travel documents, lack of residence permit, and/or lack of identity papers. Imprisonment for crimes unrelated to immigration and/or residence status shall not be considered under this indicator. Short term arrest of asylum-seekers, for instance at border points, should not be considered, provided it does not exceed the duration of a few days. • This indicator shall be replied separately for asylum-seekers (regardless of whether they have been formally registered as such or not) and refugees. • The majority of governments do not collect separate statistics of foreigners detained for breach of immigration regulations according to whether they have applied for asylum or not. Thus, Field Offices who reply to this indicator will mostly rely on estimates based on NGO data or on information collected through visits/presence in detention facilities. This may considerably affect the correctness of data reported and more specific guidance needs to be provided on data sources in the notes. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention. • ExCom Conclusion No. 44. • International Covenant on Civil and Political Rights, Art. 9 and Art. 31. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
3	Percentage of refugees and asylum-seekers registered individually	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE Registration is an important tool of protection, including protection against refoulement and forcible recruitment. Registration facilitates also the access to basic rights, family reunification and the identification of those in need of special assistance. It is a tool to quantify and assess needs and to implement appropriate durable solutions.				
METHODS OF MEASUREMENT Numerator: Total number of refugees and asylum-seekers individually registered at the end of reporting period Denominator: Total number of refugees and asylum-seekers at the end of reporting period				X 100 = %
DATA SOURCES Official government statistics, UNHCR data				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The threshold of "Individually registered" is only met if, for each person including a child, the following minimum data is recorded: name, date of birth, country of origin, sex, and marital status. Both registrations by states as well as by UNHCR have to be counted. In case of situations of parallel registration by UNHCR and by states at least one registration has to fulfill the criteria set out above. ExCom Conclusion No. 93 states <i>"For the purpose, inter alia, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application"</i>. 				
REFERENCES <ul style="list-style-type: none"> ExCom Conclusion No. 91. ExCom Conclusion No. 93: para. (b)(v). UNHCR, (2003) <i>Handbook for registration. Procedures and Standards for Registration, Population Data Management and Documentation</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
4	Percentage of adult refugees and asylum-seekers issued individual identity documentation	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE Identity documents certify status and are thus a fundamental tool of protection.				
METHODS OF MEASUREMENT Numerator: Total number of refugees and asylum-seekers ≥ 18 years old issued individual documentation at the end of reporting period Denominator: Total number of refugees and asylum-seekers ≥ 18 years old at the end of reporting period				X 100 = %
DATA SOURCES Formal reports of government authorities or, in case of UNHCR involvement in the issuance, UNHCR. UNHCR Offices should not report if no official government statistics/UNHCR data are available.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Individual identity documents include primarily documents issued by the government. They also include documents issued by UNHCR, when UNHCR has been given the authority by the host government to issue them through a legal or sub-legal act or when the UNHCR issued document bears the logo and signature of the competent authority of the state. Refugee certificates and protection letters issued by UNHCR without such endorsement by the authorities are not to be considered as identity documents, even if in practice they are recognized by the authorities of the host country. ExCom Conclusion No. 93 states <i>“For the purpose, inter alia, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application”</i>. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 27. ExCom Conclusion No. 93: para. (b)(v). UNHCR, (2003) <i>UNHCR Handbook for Registration</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
5	Percentage of newborns issued a birth certificate	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE To confirm nationality and status; prevent statelessness; ensure legal status, rights, and obligations; and safeguard the legal and physical protection of refugees and asylum-seekers and their access to services.				
METHODS OF MEASUREMENT Numerator: Total number of newborn refugees and asylum-seekers issued with individual birth certificates during reporting period Denominator: Total number of newborn refugees and asylum-seekers during reporting period				X 100 = %
DATA SOURCES Formal reports of government authorities or, in case of UNHCR involvement in the issuance, UNHCR. UNHCR Offices should not report if no official government statistics/UNHCR data are available.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Birth certificates include documents issued by the government. They also include documents issued by UNHCR or other organizations, when these have been given the authority by the host government to issue them through a legal or sub-legal act or when the UNHCR issued document bears the logo and signature of the competent authority of the state. • Hospital records and records from midwives or traditional birth attendants shall not be considered as birth certificates. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 7. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
6	Percentage of older persons with specific needs assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of older persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of older persons with specific needs assisted during the reporting period Denominator: Number of older persons with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). • Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. • Older persons: The definition of older persons in UNHCR policy are persons who are 60 years and above. But this definition can be qualified with the following statement to allow flexibility for implementation depending on the situation: <i>“However, the application of this policy will respect factors such as life expectancy and cultural norms that differ from region to region”.</i> • “Older persons with specific needs” are persons who fall into the above category of persons and require specific assistance to cover their needs. These include older persons without family support and/or source of income, chronically ill, and persons with disabilities who need additional support in terms of shelter construction/repair, food/diet, clothing, mobility equipments, medical and psychosocial care. They can be identified through registration activities and by community members, case workers, community health and social out reach workers. The objectives of the assistance to be delivered to this group of persons as indicated in UNHCR Policy on Older Persons are: a) to observe their human rights to live in dignity and security by providing support and care and, b) to avail the opportunity to contribute to their communities in what ever way they can for their psychosocial well-being. In other words, <i>“...to live their latter years of life in dignity and security, contributing actively to their families and communities for as long as possible for them to do so, and [being] offered care and support if they are physically or mentally frail”</i> (UNHCR, 2000). The purpose of the policy is to address the needs of older persons who are abandoned, separated from family members and isolated because of the breakdown of family and community structure and the changing social and economic situations during flight and displacement. The policy aims at identification and care of older persons with specific needs in emergency, the protection of older persons at risk from neglect and abandonment, consistent incorporation of gender and age-sensitive protection and assistance criteria for assessing, monitoring and addressing the needs and vulnerabilities of older persons. The strategy of UNHCR is to mainstream age and gender issues through a community-based approach and hence the integration of older persons in the community is one of the goals. Rehabilitation and integration of older persons can be facilitated through counseling, availing access to education, vocational/life skills trainings, micro-finance and credit facilities as well as utilizing and updating their skills (to be congruent with human rights issues) in conflict resolution and peace building. 				
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17, 2003. UNHCR, Geneva. • UN, (1996) <i>Human Rights and Older Persons, The Economic, Social and Cultural Rights of Older Persons</i>. Internal Comment No. 6, continued in Document E/1996/22, Annex IV. • UNHCR, (2000) <i>Policy on Older Persons endorsed at the 17th Meeting of UNHCR Standing Committee</i> (29 February – 2 March 2000) • UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. • Help Age International (1999) <i>The Ageing World and Humanitarian Crisis: Guidelines for Best Practices</i>. • Conclusions on the International Protection of Refugees, adopted by the Executive Committee of the UNHCR Programme, Published by the Office of the United Nations High Commissioner for Refugees. UNHCR Geneva, 1991. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
7	Percentage of disabled persons ≥18 years old with specific needs assisted	100%	<input type="checkbox"/> Sex ✓	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with disabilities specific needs who require additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of disabled persons ≥18 years old with specific needs assisted during the reporting period Denominator: Number of disabled persons ≥18 years old with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The term “disabled persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. The term “disabled persons” include persons with mental and physical disability/impairments. Impairments can be defined as “any loss or abnormality of psychological or anatomical structure or function” (WHO, 1980); Disability can be defined as “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (WHO, 1980); Handicap can be defined as “a disadvantage for a given individual, resulting from an impairment or disability that limits or prevents the fulfilment of a role that is normal depending on sex, social and cultural factors for that individual” (UNHCR, 1996). UNHCR is committed to the principles which underlie the Standard Rules on the Equalization of Opportunities for Persons with Disabilities, issued in 1993 which also states that “jointly with other agencies, UN organizations, non-governmental agencies and the refugees with disabilities themselves, UNHCR seeks to promote community-based rehabilitation which aims to integrate persons into society rather than creating special facilities and services”. In conclusion, the former HC said that as part of the overall UN efforts, UNHCR will continue to draw special attention to the plight of refugees with disability and promote community-based rehabilitation efforts in both countries of asylum and return. Participation of disabled persons in all activities that they are capable to carry out will lead to their rehabilitation. Access to education or special education, vocational and life skills trainings and employment opportunities will help them to be active and contributive members of their communities Disabled persons with disabilities/impairments with specific needs are persons without family support or source of income who need specific support in terms of availing mobility equipments (crutches, wheel chairs, etc), visual and hearing aids, medical treatment, psycho-social services etc. Persons who need such assistance can be identified through registration activities and by community members, case workers, community health and social outreach workers. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • WHO, (1980) <i>International Classification of Impairments, Disabilities and Handicaps</i>. WHO, Geneva. • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17, 2003. UNHCR, Geneva. • UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Sexual and Gender Based-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
8	Percentage of disabled persons <18 years old with specific needs assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE				
To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT				X 100 = %
Numerator: Number of disabled persons <18 years old with specific needs assisted during the reporting period Denominator: Number of disabled persons <18 years old with specific needs at the end of the reporting period				
DATA SOURCES				
UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT				
Annually				
NOTES				
<ul style="list-style-type: none"> The term “disabled persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. The term “disabled persons” includes persons with mental and physical disability/impairments. Impairments can be defined as “any loss or abnormality of psychological or anatomical structure or function” (WHO, 1980); Disability can be defined as “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (WHO, 1980); Handicap can be defined as “a disadvantage for a given individual, resulting from an impairment or disability that limits or prevents the fulfilment of a role that is normal depending on sex, social and cultural factors for that individual” (UNHCR, 1996). UNHCR is committed to the principles which underlie the Standard Rules on the Equalization of Opportunities for Persons with Disabilities, issued in 1993 which also states that “jointly with other agencies, UN organizations, non-governmental agencies and the refugees with disabilities themselves, UNHCR seeks to promote community-based rehabilitation which aims to integrate persons into society rather than creating special facilities and services”. In conclusion, the former HC said that as part of the overall UN efforts, UNHCR will continue to draw special attention to the plight of refugees with disability and promote community-based rehabilitation efforts in both countries of asylum and return. Participation of persons with disabilities in all activities that they are capable to carry out will lead to their rehabilitation. Access to education or special education, vocational and life skills trainings and employment opportunities will help them to be active and contributive members of their communities Persons with disabilities/impairments with specific needs are persons without family support or source of income who need specific support in terms of availing mobility equipments (crutches, wheel chairs, etc), visual and hearing aids, medical treatment, psycho-social services etc. Persons who need such assistance can be identified through registration activities and by community members, case workers, community health and social outreach workers. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • WHO, (1980) <i>International Classification of Impairments, Disabilities and Handicaps</i>. WHO, Geneva. • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17, 2003. UNHCR, Geneva. • UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Sexual and Gender Based-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
9	Percentage of ex-combatants ≥ 18 years old with specific needs assisted	100%	☑ Sex	Protection
			☑ Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of ex-combatants ≥ 18 with specific needs assisted during the reporting period Denominator: Number of ex-combatants ≥ 18 with specific needs at the end of the reporting period				$X 100 = \%$
DATA SOURCES UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Ex-combatants are persons who have proven that they have “genuinely and permanently renounced military activities” and who may need specific additional assistance to cope in their new life and to integrate into the community. (This definition is based on ExCom Conclusion No. 94 (LIII) – 2002, which states that “ex-combatants can be considered as civilians, but not until the authorities have established, within a reasonable timeframe, that they have genuinely and permanently renounced military activities”). Ex-combatants can be identified through registration activities and by community members, case workers, community health and social outreach workers. Ex-combatants should be helped to adapt to their new life and play their role as active and contributive members of their communities. Rehabilitation of ex-combatants can be facilitated through counseling, access to education, including vocational and life skills training, micro-finance activities and credit facilities that will help them attain self reliance. 				
REFERENCES <ul style="list-style-type: none"> UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17 2003. UNHCR, Geneva. UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. <i>Conclusions on the International Protection of Refugees</i>, adopted by the Executive Committee of the UNHCR Programme, Published by the Office of the United Nations High Commissioner for Refugees. UNHCR, Geneva, 1991. UNHCR, (2003) <i>Sexual and Gender Based-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
10	Percentage of ex-combatants <18 years old assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of ex-combatants < 18 assisted during the reporting period Denominator: Number of ex-combatants < 18 at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Ex-combatants: are persons who have proven that they have “genuinely and permanently renounced military activities” and who need specific additional assistance to cope in their new life and to integrate into the community. (This definition is based on ExCom Conclusion No. 94 (LIII) – 2002, which states that “ex-combatants can be considered as civilians, but not until the authorities have established, within a reasonable timeframe, that they have genuinely and permanently renounced military activities”). Former child soldiers, also known as children formerly associated with fighting forces should benefit from special protection and assistance measures, in particular as regards their demobilization and rehabilitation. (child soldiers are defined as “...any person under 18 years of age who is part of any kind of regular or irregular armed force or armed group in any capacity, including but not limited to cooks, porters, messengers, and those accompanying such groups, other than purely as family members. It includes girls recruited for sexual purposes and forced marriage. It does not, therefore, only refer to a child who is carrying or has carried arms” (Cape Town Principles, 1997)). Ex-combatants/former child soldiers can be identified through registration activities and by community members, case workers, community health and social outreach workers. While recognizing that girls and boys may have different needs, they should benefit in an equitable manner from assistance provided to them. The recovery and social reintegration programmes could consist of counseling/ psycho-social support, education, including vocational and life skills training, and in particular for older children micro-finance activities and credit facilities that will help them attain self-reliance. This should take place “in an environment which fosters health, self-respect and dignity of the child” (art. 39, CRC) Programmes for children released from armed groups and forces are more effective when addressed in the framework of tracing, reunification and reintegration rather than in the framework of a professional discharge from formal functions, as for adults. Security Council Resolution 1612 requests the Secretary-General to implement a monitoring and reporting mechanism on children and armed conflict, which includes the recruitment and use of children in armed conflict. Addressing the topic of military recruitment of girls and boys is one of UNHCR’s five priority issues related to refugee children. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art.38 and 39. • Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict. • 1977 Additional Protocols to the Geneva Conventions. • ILO Convention on the Worst Forms of Child Labour, No. 182. • Statute of the International Criminal Court. • UN Security Council Resolution S/RES/1612 (2005). • UNHCR (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (2005) <i>Summary Note on UNHCR's Strategy and Activities for Children of Concern to UNHCR</i>. UNHCR, Geneva. • UNHCR, (2002) <i>Action for the Rights of Children, Child Soldiers. Save the Children</i>, UNHCR, UNICEF, UNOHCHR, Geneva. • ExComm. Conclusion No. 94 (LIII) – 2002. • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17 2003. UNHCR, Geneva. • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
11	Does your office have a Standard Operating Procedure (SOP) for SGBV?	YES	<input type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE This indicator serves to measure if effective SGBV prevention and response strategies are established.				
METHODS OF MEASUREMENT “Yes” or “No” answer				
DATA SOURCES Annual Protection Report, Sitrep, Country Reports and Monthly SGBV Reports from every Office				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • All UNHCR operations that provide direct protection to persons of concern must have a Standard Operating Procedure in place. The SOP must be based on the UNHCR Guidelines for prevention and response to SGBV. • The SOP will also assist in fixing responsibilities among the various partners on SGBV prevention and response activities. It will also enable the operational managers to identify gaps and allocate resources both human and financial. • SGBV SOPs are to be prepared by UNHCR in collaboration with all the partners including operational partners (NGOs, UN agencies, host government departments, refugee groups and community and host community members). An SOP is a document that must contain the following elements: <ul style="list-style-type: none"> • Definition of SGBV • Guiding Principles: Program Principles/Individual Principles • Roles and Responsibilities in terms of Prevention and Response activities in accordance with the “four pillars” and the community as described in the <i>Guidelines for Prevention and Response</i> • An agreed upon reporting and referral mechanism • Co-ordination, monitoring and evaluation mechanisms • Definition of Key Concepts and Categories of SGBV • List of Participating Agencies • Signature page for stakeholders • It enhances coordination between partners by delineating, and bringing clarity to, the roles and responsibilities of each sector and agency. • It ensures the survivor a timely and quality response. • All key stakeholders have a common and agreed understanding of what needs to be done and how it should be done. It is a document that once drafted, will provide a foundation for communicating on how response can be strengthened. • The SOPs are also intended to guide activities initiated by refugee community themselves to undertake specific activities to prevent and address SGBV problems. • SOPs have to be reviewed regularly/periodically so as to reflect the Field realities and partner agreements. But if the SOP has not been signed by all partners/stakeholders and subsequently distributed to the community at large, the Office cannot claim to have an SOP. • Modifications to the SOP should be reported in the APR and/or Sitrep. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for Prevention and Response</i>. UNHCR, Geneva. • UN Security Council Resolution S/RES/1325, October 2005. • UNHCR, (2003) <i>Gender Training Kit on Refugee Protection and Resource Handbook</i>. UNHCR, Geneva. • IASC, (2005) <i>Guidelines for Gender-Based Violence Interventions in Humanitarian Settings</i>. • UN, (2000) <i>Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women</i>. United Nations, New York. • UN, (1993) <i>Declaration on the Elimination of Violence against Women, A/RES/48/104</i>. • Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages. • Convention on the Rights of Children, Art. 19 and 24. • UNHCR, (1997) <i>Policy on Harmful Traditional practices</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
12	Percentage of SGBV cases who received support	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To provide refugees and asylum-seekers (particularly women) who have experienced sexual and gender-based violence (SGBV) with appropriate support.				
METHODS OF MEASUREMENT Numerator: Total number of cases of SGBV who received support during the reporting period Denominator: Total number of cases of SGBV reported during the reporting period				$\times 100 = \%$
DATA SOURCES Formal and informal reports and service and clinic records of UNHCR; government authorities; implementing and operational partners; refugee communities and individual refugees; surveys				
FREQUENCY OF MEASUREMENT Annually (also in Sitrep and APR)				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>NOTES</p> <ul style="list-style-type: none"> • Preventing and responding to incidents of SGBV is one of UNHCR’s most important protection concerns. In order to effectively monitor and evaluate SGBV prevention and response initiatives, UNHCR must be able to measure the extent to which SGBV is reported among the population. Given the general reluctance of survivors of rape to report the crime, the general “family matter and within the household” attitude many populations attach to complaints of domestic violence, and the challenges associated with efforts to influence changes in community traditional practices regarded as “harmful,” an increase from year to year in the number of reports received in these types of SGBV can serve as a proxy indicator for the effectiveness of awareness raising and response initiatives. • Domestic violence is presumed to be the most prevalent forms of SGBV and both domestic violence and rape are the most underreported form of SGBVs. An increase in the number of cases reported implies that the community is more cognizant of the necessity of reporting these incidents. Because of the psychological and medical complications associated with rape in particular– such as unwanted pregnancy, sexually transmitted infections – it is imperative that survivors receive treatment as soon as possible. While an increase in the number of rape cases implies that awareness raising initiatives are having an impact, an increase in the number of rape cases seen at a health centre within 72 hours of occurrence can serve as a proxy measurement that the community/survivors understand the necessity of reporting and seeking attention as soon as possible. • Whether a traditional practice is harmful should be determined by reference to the physical and mental harm caused to the individual and in light of international human rights instruments. As UNHCR staff has an obligation to uphold rights and freedoms enshrined in international human rights instruments, a harmful traditional practice which violates the individual rights of refugees will normally require the intervention of UNHCR. • If possible, please comment on whether the particular types of SGBV occur in a particular location in your camp or urban setting. For example, in some camp settings rape is more common outside the camp as per refugee women and girls leaving the camp to collect firewood. Please also comment if the survivor victim is proceeding with legal redress or seeks other support, for example psycho-social and medical support. • After an incident of SGBV, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. He/she may adopt strong defense mechanisms, such as forgetting, denial and deep repression of the traumatic event survived. Family members may also experience a variety of emotions and need to receive support during this traumatic period. Community-based activities are most effective in helping to relieve trauma. • It is imperative to establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner. • Post-rape cases who received timely care should be mentioned in the comments column. The word “timely” means “within the following 72 hours”. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
13	Percentage of SGBV cases <18 who received support	100%	☑ Sex	Protection
			☑ Age	SGBV
RATIONALE To provide refugees and asylum-seekers (particularly women and children) who have experienced sexual and gender-based violence (SGBV) with appropriate support.				
METHODS OF MEASUREMENT Numerator: Total number of SGBV cases <18 who received support during the reporting period Denominator: Total number of SGBV cases <18 years old reported during the reporting period				$\times 100 = \%$
DATA SOURCES Formal and informal reports and service and clinic records of UNHCR; government authorities; implementing and operational partners; refugee communities and individual refugees; surveys				
FREQUENCY OF MEASUREMENT Annually (also in Sitrep and APR)				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • Preventing and responding to incidents of SGBV is one of UNHCR’s most important protection concerns. In order to effectively monitor and evaluate SGBV prevention and response initiatives, UNHCR must be able to measure the extent to which SGBV is reported among the population (total number of cases). Given the general reluctance of survivors of rape to report the crime, the general “family matter and within the household” attitude many populations attach to complaints of domestic violence, and the challenges associated with efforts to influence changes in community traditional practices regarded as “harmful,” an increase from year to year in the number of reports received in these types of SGBV can serve as a proxy indicator for the effectiveness of awareness raising and response initiatives. • Domestic violence is presumed to be the most prevalent forms of SGBV and both domestic violence and rape are the most underreported form of SGBVs. An increase in the number of cases reported implies that the community is more cognizant of the necessity of reporting these incidents. Because of the psychological and medical complications associated with rape in particular– such as unwanted pregnancy, sexually transmitted infections – it is imperative that survivors receive treatment as soon as possible. While an increase in the number of rape cases implies that awareness raising initiatives are having an impact, an increase in the number of rape cases seen at a health centre within 72 hours of occurrence can serve as a proxy measurement that the community/survivors understand the necessity of reporting and seeking attention as soon as possible. • Whether a traditional practice is harmful should be determined by reference to the physical and mental harm caused to the individual and in light of international human rights instruments. As UNHCR staff has an obligation to uphold rights and freedoms enshrined in international human rights instruments, a harmful traditional practice which violates the individual rights of refugees will normally require the intervention of UNHCR. • If possible, please comment on whether the particular types of SGBV occur in a particular location in your camp or urban setting. For example, in some camp settings rape is more common outside the camp as per refugee women and girls leaving the camp to collect firewood. Please also comment if the survivor victim is proceeding with legal redress or seeks other support for example psycho-social and medical support. • After an incident of SGBV, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. He/she may adopt strong defense mechanisms, such as forgetting, denial and deep repression of the traumatic event survived. Family members may also experience a variety of emotions and need to receive support during this traumatic period. Community-based activities are most effective in helping to relieve trauma. • It is imperative to establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner. • Post-rape cases who received timely care should be mentioned in the comments column. The word “timely” means “within the following 72 hours”. 				
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender Based Violence against Refugees, Returnees and Internally Displaced Persons</i>. UNHCR, Geneva. • UN Security Council Resolution S/RES/1325, October 2005. • UNHCR, (2003) <i>Gender Training Kit on Refugee Protection and Resource Handbook</i>. UNHCR, Geneva. • IASC, (2005) <i>IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings</i>. • Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women. • UN, (1993) <i>Declaration on the Elimination of Violence against Women</i>. A/RES/48/104. • Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages. • Convention on the Rights of Children, Art. 19 and 24. • UNHCR (1997) <i>Policy on Harmful Traditional Practices</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
14	Percentage of asylum-seekers / refugees who participated in SGBV training	10%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To raise awareness of gender equity issues and SGBV among refugee men and women, particularly refugees who represent the community in formal committees or the traditional justice system.				
METHODS OF MEASUREMENT Numerator: Total number of participants in SGBV training during the reporting period Denominator: Total number of asylum-seekers/refugees at the end of reporting period				$\times 100 = \%$
DATA SOURCES Implementing and operational partners, refugees, community (camp management committees), records of participation in training and sensitization meetings				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated (also in APR)				
NOTES <ul style="list-style-type: none"> • Training and sensitization include training courses for refugee groups on SGBV and meetings. Posters, rallies and billboards do not qualify as training or sensitization. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for the Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
15	Percentage of UNHCR and partner staff who have completed SGBV training	10%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To raise awareness of gender equity issues and SGBV among UNHCR and partner staff.				
METHODS OF MEASUREMENT Numerator: Total number of UNHCR and partner staff having completed SGBV training during the reporting period Denominator: Total number of UNHCR and partner staff at the end of reporting period				$\times 100 = \%$
DATA SOURCES UNHCR and partner workshop/training and other reports, participants lists				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated (also in Sitrep and APR)				
NOTES <ul style="list-style-type: none"> • SGBV training can include sensitization and meetings, as well as more formal training. • For all UNHCR staff basic SGBV awareness training should take place in all phases including emergency; more detailed training based on the SGBV Guidelines should be organized in stable situations. Participants should reflect a gender and multi-sectoral balance. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for the Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
16	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	100%	☑ Sex	Protection
			☑ Age	Children
RATIONALE To preserve the safety and well-being of unaccompanied and separated children in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT Numerator: Total number of unaccompanied and separated children for whom a Best Interests Determination (BID) has been carried out at the end of reporting period Denominator: Total number of unaccompanied and separated children out at the end of reporting period				X 100 = %
DATA SOURCES UNHCR, implementing and operational partners (especially the International Committee of the Red Cross, UNICEF, child protection NGOs), refugee community (camp management committees)				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Particular attention should be paid to the common registration form for unaccompanied and separated children. • Special care should be arranged for children while Best Interests Determinations (BID) are made and should continue until reunification with parents and relatives. • Durable solutions are defined as follows: Solutions to refugee situations which are lasting, including voluntary repatriation (to country of origin), local settlement or integration (into country of asylum) and resettlement (to a third country). 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 3 and 22. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (1997) <i>Guidelines on Policies and Procedures in Dealing with Unaccompanied Children Seeking Asylum</i>. UNHCR, Geneva. • ICRC, IRC, SCUK, UNICEF, UNHCR, WVI, (2004) <i>Inter-agency Guiding Principles on Unaccompanied and Separated Children</i>. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
17	Percentage of UACs/SCs for whom tracing has been successfully completed	100%	<input type="checkbox"/> Sex ✓	Protection
			<input checked="" type="checkbox"/> Age	Children
RATIONALE To preserve the safety and well-being of unaccompanied and separated children in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT Numerator: Total number of unaccompanied and separated children for whom tracing has been successfully completed at the end of reporting period Denominator: Total number of unaccompanied and separated children identified at the end of reporting period				$X 100 = \%$
DATA SOURCES UNHCR, implementing and operational partners (especially the International Committee of the Red Cross, UNICEF, child protection NGOs), refugee community (camp management committees)				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Particular attention should be paid to the common registration form for unaccompanied and separated children. The objective of tracing is reunification with parents or other close relatives. Tracing must be carried out for all UACs/SCs at the earliest possible time. Even if immediate family reunification is not possible, tracing is important for restoring links with their families. 				
REFERENCES <ul style="list-style-type: none"> Convention on the Rights of the Child, Art. 3 and 22. UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. UNHCR, (1997) <i>Guidelines on Policies and Procedures in Dealing with Unaccompanied Children Seeking Asylum</i>. UNHCR, Geneva. ICRC, IRC, SCUk, UNICEF, UNHCR, WVI, (2004) <i>Inter-agency Guiding Principles on Unaccompanied and Separated Children</i>. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
18	Are children < 15 years involved in child labour?	NO	<input type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Children
RATIONALE To protect children below the age of 15 years from exploitation.				
METHODS OF MEASUREMENT “Yes” or “No” answer				
DATA SOURCES Formal and informal reports of UNHCR; government authorities, implementing and operational partners; refugee communities and individual refugees; Participatory Assessment				
FREQUENCY OF MEASUREMENT Annually, but with continual monitoring				
NOTES <ul style="list-style-type: none"> • Children have a right to be protection from work that threatens their health, education or development (article 32 CRC). • States will have to set a minimum age for admission to any type of employment which shall not be less than 15 years (art. 38 CRC and ILO Convention No. 138). However: • The minimum age for admission to any type of employment or work which by its nature or the circumstances in which it is carried out is likely to jeopardize the health, safety or morals of young persons shall not be less than 18 years (ILO Convention 138). • A Member whose economy and educational facilities are insufficiently developed may, after consultation with the organizations of employers and workers concerned, where such exist, initially specify a minimum age of 14 years (ILO Convention 138). • Please, indicate in comments column the minimum age of employment in the country. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 32. • Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography. • ILO Minimum Age Convention, No. 138. • ILO Convention on the Worst Forms of Child Labour, No. 182. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
19	Percentage of adolescents (12-17 years) reached through targeted programming	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Children
RATIONALE Adolescents in this age group are more exposed to protection risks as there are often no sufficient educational or employment opportunities for them. Therefore programmes will need to be specifically targeted to this group.				
METHODS OF MEASUREMENT Numerator: Total number of adolescents reached through targeted programming during the reporting period Denominator: Total refugee population 12-17 years old at the end of reporting period				$X 100 = \%$
DATA SOURCES Formal and informal reports of UNHCR; government authorities, implementing and operational partners; refugee communities and individual refugees; Participatory Assessment				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> In refugee and return situations, younger children are often being cared for while their communities and organizations tend to overlook the specific needs of adolescent girls and boys, who may also be heading households. Adolescent girls and boys often cannot access education, either because they have economic and family responsibilities that prevent them from attending, or because there are no appropriate schooling possibilities for their age group. Targeted programming can shield them from exploitative activities and abuse, such as military recruitment, forced labour, sexual exploitation, abuse and violence. Targeted programming could, for example, be skills training, recreational activities, and non-formal education. The specific needs of adolescents are one of UNHCR's five priority issues related to refugee children. 				
REFERENCES <ul style="list-style-type: none"> Convention on the Rights of the Child. UNHCR (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. UNHCR, <i>Summary Note on UNHCR's Strategy and Activities for Girls and Boys of Concern to UNHCR</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
20	Has a Participatory Assessment been conducted at least once during the reporting year?	YES	<input type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	General
RATIONALE Mainstreaming age, gender and diversity means that the meaningful participation of refugee women, men, girls and boys of all ages and backgrounds is integral to the design, implementation, monitoring and evaluation of all UNHCR policies and operations. Participatory assessment ensures the participation of refugees in the annual assessment.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Systematization form for each subgroup discussion, and Participatory Assessment Prioritization Report Form, COP, APR, reports of findings				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Systematic Participatory Assessment with refugee women, men, girls and boys of all ages from all backgrounds will be conducted from mid-September to end October each year in preparation for project submissions in November, the Annual Protection and Country Reports and the country operations planning exercise the following year, together with the comprehensive needs assessment. • The Participatory Assessment will build on existing practices and establish a system wide approach to Participatory Assessment with refugees, internally displaced persons and returnees to support age, gender and diversity mainstreaming, as well as promoting Participatory Assessment as a regular working methodology. • Country multi-functional teams, including partners, together with refugees will systematize the information gathered and analyse it at the annual participatory planning workshops. The operational response will be built on an analysis of the protection needs of refugee women, men, girls and boys and inequalities based on differences. Programmes will build on the priorities, capacities and solutions proposed by refugees themselves in response to the identified protection risks. • The information will be used to substantiate the project submissions, Annual Protection Reports and Country Operation plans. It will also support the standard comprehensive needs assessment presented in Country Operation Plans with a view to highlighting unmet needs. • The UNHCR Tool for Participatory Assessment in Operations will assist in guiding the process. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 12. • Standing Committee 20th Meeting, <i>Reinforcing a community development approach</i> (EC/51/SC/CRP.6, 15 February 2001). • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR Geneva. • UNHCR, (2001) <i>UNHCR's Five Commitments to Refugee Women Memorandum of the High Commissioner to all Offices</i> dated 12 December 2001. UNHCR, Geneva. • UNHCR, (1997) <i>Five Priority Issues related to Refugee Children IOM/40/97-FOM/47/97</i> of the High Commissioner of 15 July 1997. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
21	Do refugees and asylum-seekers have access to emergency and primary health care services without discrimination?	YES	<input type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	Health
RATIONALE This indicator serves to identify if there are legal gaps with regard to access to emergency and primary health care by refugees and asylum-seekers.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Government sources				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The health care service is considered accessible if access is provided to all without discrimination, if it is within physical reach and if it is affordable. • Emergency health care is defined as medical response to an acute severe medical condition which in the absence of immediate medical attention would seriously jeopardize the health of the individual, and shall include medical response to obstetric complications, acute abdomen, and injury. • Primary health care is defined as universally accessible, practical, scientifically sound and culturally appropriate essential promotive, preventive, curative and rehabilitative care, and shall include: health education, nutrition, reproductive health (including family planning), child health, communicable diseases control and immunization, management of common diseases and injuries, and provision of essential drug and community engagement. It is the first point of contact with the health services, and is linked into referral networks for more comprehensive care. • In cases where domestic law provides access only to some categories of refugees (e.g. only those with a residence permit), Field Offices shall assess whether such limitations impact only on a minority or on the majority of refugees and respond accordingly, adding a short description of the limitation in the comment box. • In cases where domestic law provides access only to some categories of asylum-seekers (only those with a temporary residence permit, only those in the regular procedure, etc.) Field Offices shall assess whether such limitations impact only on a minority or on the majority of refugees and respond accordingly, adding a short description of the limitation in the comment box. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Declaration of Alma-Ata, 1978, para. VII. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
22	Do asylum-seekers / refugees have access to antiretroviral therapy from any source, if available in hosting community?	YES	<input type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE Antiretroviral therapy (ART) is a life saving and essential intervention. Most populations living in urban areas now have access to free or low cost ART. Refugees should have equivalent access.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Implementing or operational partners and Government National AIDS Control Programmes				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • As with all public health interventions, refugees should receive similar services as those available to surrounding host communities, while ensuring that minimum essential services are provided. • Low cost refers to a co-payment as opposed to non-subsidized ART. 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines HIV/AIDS Interventions in Emergency Settings and Refugees</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005 – 2007</i>. Standing Committee 32nd Meeting. EC/55/SC/CRP.8, 16 February 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
23	Percentage of female members in asylum-seeker / refugee representative bodies	50%	<input type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	Women
RATIONALE The indicator is crucial in measuring the empowerment of refugee women and their participation in leadership. It is also one of the UNHCR policy priorities on refugee women and one of the UNHCR's Five Commitments to Refugee Women.				
METHODS OF MEASUREMENT Numerator: Number of female members in asylum-seekers / refugee representative bodies at the end of reporting period Denominator: Total number of members in asylum-seekers / refugee representative bodies at the end of reporting period				$\times 100 = \%$
DATA SOURCES Implementing partners; and UNHCR staff				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Representative bodies can be formal or informal associations of persons of concerns. • Many refugee / asylum-seekers women lack practice expressing themselves in public because public speaking is perceived as a male prerogative. • Women's participation means not only physical presence at meetings but also voicing their concerns and opinions. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2002) <i>UNHCR's Participatory Planning in UNHCR: a Practical Guide</i>. UNHCR, Geneva. • UNHCR, (2003) <i>UNHCR Response to the Three Evaluations/Assessment of Refugee Women, Children and the Community Services Function</i>. UNHCR, Geneva. • UNHCR's Five Commitments to Refugee Women. Memorandum of the High Commissioner to all Offices dated 12 December 2001. • UNHCR, (2001) <i>Reinforcing a Community Development Approach</i>, UNHCR Policy Document, Standing Committee, 20th Meeting, 15 February 2001. • UNHCR, (2005) Report on the High Commissioner's Five Commitments to Refugee Women. Standing Committee 33rd Meeting. EC/55/SC/CRP.17, 3 June 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA																																					
24	Percentage of needs met for sanitary materials	100%	<input type="checkbox"/> Sex	Self-reliance, assistance and community services																																					
			<input type="checkbox"/> Age	Women																																					
RATIONALE To meet the basic and protection needs of refugee women and girls to uphold their dignity and self-esteem: one of the UNHCR's Five Commitments to Refugee Women.																																									
METHODS OF MEASUREMENT Numerator: Cost of sanitary materials provided (US\$) during the reporting period Denominator: Cost of providing adequate sanitary materials (US\$) during the reporting period				X 100 = %																																					
For example, for a total female population of 48,000 (48% of the total population of 100,000), calculate the total number of women of menstruating or reproductive age (13-49). In this sample case, population statistics show this population as 28,000. The first figure to find is the value of what was actually distributed to the women during the year. The second figure will be calculated on the basis of what each woman should have received. Using the example in the table below, the value of the sanitary kit actually distributed compared to the kit that should have been distributed to reach the standard is $98,200/189,000 = 0.5196 \times 100 = 52\%$.																																									
<table border="1"> <thead> <tr> <th>Item</th> <th>Std.</th> <th>Price per unit</th> <th>Actual distribution</th> <th>Value</th> <th>Std. distribution</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Absorbent cotton</td> <td>2 square meters per person per 6 months</td> <td>US\$ 0.75 per square meter</td> <td>98,000 square meters</td> <td>US\$ 73,000</td> <td>112,000 square meters</td> <td>US\$ 84,000</td> </tr> <tr> <td>Under-pants</td> <td>6 per person per year</td> <td>US\$ 0.40 per pair</td> <td>0 pairs</td> <td>0</td> <td>168,000 pairs</td> <td>US\$ 67,200</td> </tr> <tr> <td>Soap</td> <td>250 g per person per month</td> <td>US\$ 0.45 per kg</td> <td>56,000 kg</td> <td>US\$ 25,200</td> <td>84,000 kg</td> <td>US\$ 37,800</td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> <td>US\$ 98,200</td> <td></td> <td>US\$ 89,000</td> </tr> </tbody> </table>							Item	Std.	Price per unit	Actual distribution	Value	Std. distribution	Value	Absorbent cotton	2 square meters per person per 6 months	US\$ 0.75 per square meter	98,000 square meters	US\$ 73,000	112,000 square meters	US\$ 84,000	Under-pants	6 per person per year	US\$ 0.40 per pair	0 pairs	0	168,000 pairs	US\$ 67,200	Soap	250 g per person per month	US\$ 0.45 per kg	56,000 kg	US\$ 25,200	84,000 kg	US\$ 37,800	Total				US\$ 98,200		US\$ 89,000
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DATA SOURCES Registration, clinic, and distribution reports; purchase order logs; committee reports on women's issues; refugee women; implementing partners; and UNHCR staff																																									
FREQUENCY OF MEASUREMENT Annually																																									

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>NOTES</p> <ul style="list-style-type: none"> • This group includes girls and women 13-49 years old and does not correspond to the reproductive age group and UNHCR age groupings. • The sanitary material kit includes either disposable napkins (12 per person per month) or reusable, absorbent cotton material (2 meters long per person per 6 months, 6 underpants per person per year, and a 2.5-gramme bar of soap per person per month (in addition to soap provided to the whole population). • Costs for transport and logistics should not be incorporated in the calculations. The indicator gives relative value of the kit, however does not yield specific information on which items were not distributed from the kit, or the value of importance of the items to the beneficiaries. Local market values of items may differ from other locations where items were purchased. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR's Five Commitments to Refugee Women. Memorandum of the High Commissioner to all Offices dated 12 December 2001. • UNHCR, (2005) Report on the High Commissioner's Five Commitments to Refugee Women. Standing Committee 33rd Meeting. EC/55/SC/CRP.17, 3 June 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
25	Percentage of asylum-seekers/refugees below national poverty line	0%	<input checked="" type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	Self-reliance, and income generation
RATIONALE To measure the minimum level considered sufficient to sustain a family in terms of food, housing, clothing, medical needs, and education. This indicator is linked to the Millennium Development Goal 1: "Eradicate extreme poverty and hunger".				
METHODS OF MEASUREMENT Survey				
DATA SOURCES National Statistics; MDG Reports; The World Bank Indicators estimates use unit record household data whenever possible while PovcalNet uses grouped distribution. Use the WB Poverty Gap Ratio.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • This indicator provides a traditional measure of the general level of poverty in a given area. It indicates the relative number of people in poverty which constitute the major part of disadvantaged groups. Obtaining information on these groups helps designing and targeting economic development to specific groups and geographical areas. • According to UN official documents, the poverty line is defined as an "income level that is considered minimumly sufficient to sustain a family in terms of food, housing, clothing, medical needs, and so on". • For monitoring country poverty trends, indicators based on national poverty lines should be used, where available. • Efforts should be made to promote mainstreaming of refugees/returnees into existing national indicators. • Other related indicators include Household consumption expenditure: Expenditure incurred by resident households on consumption goods or services, excluding expenditure on fixed assets in the form of dwellings or on valuables. When dwellings are occupied by owners, the imputed value of the housing services enters into both the output and final consumption expenditure of the owners. Valuables are expensive durable consumption goods that do not deteriorate over time, are not used up in consumption or production, and are acquired primarily as stores of value. They consist mainly of works of art, precious stones and metals and jewelry fashioned out of such stones and metals. • The indicator is disaggregated in Female headed households and in Male headed households. 				
REFERENCES <ul style="list-style-type: none"> • World Bank Development Indicators. • Jae K. Shim, Joel G. Siegel, (1995) <i>Dictionary of Economics. Business Dictionary Series</i>. John Wiley & Sons, New York. • UN, (2000) <i>United Nations Millennium Declaration. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2)</i>. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
26	Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)		<input checked="" type="checkbox"/> Sex	Self-reliance, assistance and community services
			<input type="checkbox"/> Age	Self-reliance, and income generation
RATIONALE To measure percentage of refugees or asylum-seekers who have access to income to meet basic individual/household needs, and are on the path towards self-reliance.				
METHODS OF MEASUREMENT Numerator: Number of asylum-seekers and refugees (of working age) employed or engaged in income generating activities Denominator: Number of working age asylum-seekers and refugees				$\times 100 = \%$
Survey: Individual/household surveys				
DATA SOURCES Refugees; IPs implementing income generating activity (IGA) or microfinance projects; reports from other organizations (e.g. ILO) when assessments have been carried out; macroeconomic data: unemployment rate, etc.				
FREQUENCY OF MEASUREMENT Bi-annual				
NOTES <ul style="list-style-type: none"> • It is important to get income information from each income earner, since errors can occur when respondents report for others. • It is important to capture all sources of income since much revenue is generated by episodic activities, such as part-time or seasonal labour, or sales of assets. • When gathering information for this indicator, it would be important to note what livelihood strategies refugees/ asylum-seekers are developing, and whether these strategies/activities have contributed to self-reliance and sustainable livelihoods. • Employment should generate income sufficient to achieve and adequate standard of living. • Household income in relation to basic food basket is a key access indicator that measures the amount of family economic resources available to satisfy basic food needs. However, this is one of the most difficult and complicated indicators to collect of any of the indicators relating to economic security. However, economic status is a fundamental window into livelihood security. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2005) <i>Handbook for Self-reliance</i>. UNHCR, Geneva. • UNHCR, (2004b) <i>Handbook for Repatriation and Reintegration Activities</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
27	Percentage of refugee students enrolled in Grades 1-6	100%	☑ Sex	Self-reliance, assistance and community services
			☑ Age	Education
RATIONALE To ensure that all primary school-age children are enrolled in primary school. This indicator is in line with Goal 2 (Target 3) of the Millennium Development Goals (MDGs).				
METHODS OF MEASUREMENT Numerator: Total number of refugee students enrolled in Grades 1–6 measured in October/November of reporting year Denominator: Total refugee population 6–11 years old measured in October/November of reporting year				$\times 100 = \%$
DATA SOURCES Government school admission books, head teachers, partners, coordinating agency and refugees				
FREQUENCY OF MEASUREMENT Annually, measured in October/November of reporting year				
NOTES <ul style="list-style-type: none"> • Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). • The 6–11 age group is a sub-group of a standard UNHCR population age category (5-17). This age cut-off is critical to identifying the youth and adolescents who are not in school or in any educational programmes. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address, and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. • The comments column in the indicator report should mention: Gender parity achieved. • Report the number of children older than 11 who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. • If the registration does not include year of birth and age, get the community to estimate the numbers of children ages 6–11 through Participatory Assessment. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 2 and 28. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
28	Percentage of refugee students enrolled in Grades 7-12		☑ Sex	Self-reliance, assistance and community services
			☑ Age	Education
RATIONALE To ensure that as many primary school-age children who completed Grade 6 are enrolled in secondary school.				
METHODS OF MEASUREMENT Numerator: Total number of refugee students enrolled in Grades 7-12 Denominator: Total refugee population 12-17 years old				X 100 = %
DATA SOURCES Government school admission books, teachers, partners, coordinating agency and refugees				
FREQUENCY OF MEASUREMENT Annually, measured in October/November of reporting year				
NOTES <ul style="list-style-type: none"> • Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). For monitoring retention rate, the NER is preferred; hence, the enrolment by grade and the information on over-age students will be useful. • The 12–17 age is a sub-group of a standard UNHCR population age category (5-17). This age cut-off is critical to identifying the youth and adolescents who are not in school or in any educational programmes. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address, and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. • Report the number of children older than 17 who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. If the registration does not include year of birth and age, get the community to estimate the numbers of children ages 12–17 through Participatory Assessment. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 2 and 28. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
29	Percentage of refugee students with specific needs enrolled in Grades 1-6	100%	☑ Sex	Protection
			☑ Age	Special Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Total number of refugee students with specific needs enrolled in Grades 1-6 at the end of the reporting period Denominator: Total refugee population 6-11 years old with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR, relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). • With regard to education for children with specific needs, it refers to children with disabilities, children formerly associated with fighting forces, unaccompanied and separated children and other children-at-risk, such as children and adolescents involved with drugs, prostitution, exploitative labour or street children. • Children with specific needs can be identified through registration activities and by community members, case workers, community health and social outreach workers. • The Education sector in conjunction with Community Services should ensure that steps are taken for the protection and physical and mental health of children with specific needs, and to support their integration into education programmes. • In many cases, children with disabilities can attend normal school or youth activities, especially if teachers arrange for student helpers to meet their specific needs. Special provision must be made for materials such as hearing aids and spectacles. If necessary, community awareness, as well as specialized teacher training, should be provided. • In the community-based approach to education, the community in general and Parent-Teacher Associations in particular should raise awareness on the importance of education for children with specific needs and develop measures to overcome obstacles for them to attend school. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2, 23 and 28. • Convention on the Elimination of All Forms of Discrimination against Women, Art. 10. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
30	Number of refugee enrolled in tertiary education		☑ Sex	Self-reliance, assistance and community services
			☑ Age	Education
RATIONALE To ensure that as many secondary school graduates are enrolled in tertiary education in order to promote self-reliance of refugees.				
METHODS OF MEASUREMENT Record the total number of individuals enrolled in tertiary education at the end of reporting period.				
DATA SOURCES Universities, government tertiary education records, teachers, partners, coordinating agency and refugees				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The primary objective of the tertiary education is to promote self-reliance of refugees by providing them with a professional qualification geared towards future employment. Tertiary education particularly for women is critical as it does not only provide positive role models to the younger generation, but it empowers and prepares them for leadership and more responsible roles in their own communities. • While the number of scholarships under DAFI (Albert Einstein German Academic Refugee Initiative Fund) is limited, this can be complemented by other university scholarships which can be made available through concerted efforts by country operations and negotiating with local academic institutions. 				
REFERENCES <ul style="list-style-type: none"> • Committee on the Elimination of Discrimination against Women, Art. 10. • Policy and Guidelines for DAFI Scholarship Projects, March 2002. • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • Universal Declaration of Human Rights, Art. 26. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
31	Number of 15-24 years old refugees enrolled in training (non-formal, vocational, skills, etc.)		☑ Sex	Self-reliance, assistance and community services
			☑ Age	Education
RATIONALE				
This indicator is focused on measuring the promotion of self-reliance by providing refugees with professional qualifications geared towards future employment.				
METHODS OF MEASUREMENT				
Record the number of individuals enrolled at the end of the reporting period.				
DATA SOURCES				
Government, partners and institutions responsible for the programme; refugee youth and their community can provide the information as well				
FREQUENCY OF MEASUREMENT				
Annually				
NOTES				
<ul style="list-style-type: none"> • Youth and adolescents themselves can be mobilized and trained to collect information on this particular indicator. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address, and last school attended. 				
REFERENCES				
<ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • Universal Declaration of Human Rights, Art. 26. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
32	Literacy rate for 15-24 years old refugees	100%	☑ Sex	Self- reliance, assistance and community services
			☑ Age	Education
RATIONALE Measuring the literacy rate of the population of concern would ensure that literacy programmes are well-targeted to those who are in need and that they are relevant and useful to their day to day existence and survival.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Institutions and partners that are responsible for managing literacy programmes; Ministry of Education, government				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Many refugees did not have the chance to go to school or got interrupted in their studies when they fled. Completing 6 years of basic education does not also guarantee that they are functionally literate, particularly with the quality of education in refugee camps or in remote locations where most refugees are hosted or return to. • In locations where information is not available, the Community Education Committees or Parents Teachers Associations, women's or youth associations can be mobilized and trained to do literacy surveys. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • Universal Declaration of Human Rights, Art. 26. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
33	Percentage of refugees who repatriated	100%	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
RATIONALE To obtain an indication of the degree of success of voluntary repatriation.				
METHODS OF MEASUREMENT Numerator: Number of refugees who repatriated during the reporting period Denominator: Number of refugees who express the willingness to repatriate during the reporting period				$X 100 = \%$
DATA SOURCES UNHCR, government				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The right of refugees to return to their country of origin is fully recognized in international law. The Universal Declaration of Human Rights (1948) established in Article 13 (2) that: <i>"Everyone has the right to leave any country, including his own, and to return to his country"</i>. • Especially after several years of displacement, a decision to return may not be an easy one. In order to ensure this decision is made out of a free choice, it is crucial refugees have access to accurate information which must be reliable, objective and up-to-date. This information can be provided through information campaigns, but also through go-and-see visits by refugees of their places of origin, or come-and-talk visits. • Spontaneous return also occurs in some situations. This should not be included in the measurement of the indicator. • Expression of the willingness to return is defined and measured by a refugee filling out the Voluntary Repatriation Form (VRFs); receiving information from registration interviews; receiving protection monitoring in the camp; and making contact with UNHCR. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. • Universal Declaration of Human Rights, Art. 13 (2). • UNHCR, (1996) <i>Handbook on Voluntary Repatriation</i>. International Protection. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
34	Percentage of refugees resettled	100%	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
RATIONALE To provide access to resettlement for refugees in vulnerable categories for whom this is a suitable option and expedite resettlement for the safety, health, or other reasons for refugees who meet special conditions of vulnerability.				
METHODS OF MEASUREMENT Numerator: Number of refugees submitted for resettlement during the reporting period Denominator: Number of refugees identified for resettlement during the reporting period				$X 100 = \%$
DATA SOURCES UNHCR, implementing partners, resettlement countries, refugees				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Refugees may be denied basic human rights in a country of refuge. Their lives and freedom may be threatened in the country of asylum, or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective, and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the specific needs of refugees under the Office's mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there is no prospect for another durable solution. Resettlement is not an automatic solution for all refugees belonging to vulnerable categories. Resettlement criteria include: unaccompanied and separated children with special protection needs for whom resettlement is suitable following Best Interests Determination (BIDs) assessment, medical cases, survivors of violence or torture, women at risk, elderly, and persons with legal or physical protection needs, family reunification cases and refugees without local integration prospects. There should be an assessment of suitability of resettlement in such cases. 				
REFERENCES <ul style="list-style-type: none"> UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. UNHCR, (2004) <i>Resettlement Handbook</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
35	Average processing time for resettlement submissions (days)		<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
<p>RATIONALE Timely processing of resettlement submissions is in the interest of refugees, UNHCR and resettlement countries. This indicator seeks to measure the efficiency of resettlement processing within the UNHCR Office, counting from the date the refugee was recognized to the date the refugee case was first submitted to a resettlement country.</p>				
<p>METHODS OF MEASUREMENT The average processing time for resettlement submissions is calculated by counting the number of days from the day refugee status was granted to the day the case was first submitted to a resettlement country. The average processing time should be determined for all resettlement cases submitted during the period. The number of days should be added up for all cases submitted and then divided by the number of cases submitted.</p> <p>Note: In case exact data cannot be derived from the registration system or manually, the Standards and Indicators form contains an “Average Processing Time” sheet which is a tool to estimate the average processing time.</p>				
<p>DATA SOURCES UNHCR registration system; <i>proGres</i>.</p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES</p> <ul style="list-style-type: none"> Refugees may be denied basic human rights in a country of refuge. Their lives and freedom may be threatened in the country of asylum, or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective, and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the needs of refugees under the Office’s mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there is no prospect for another durable solution. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. UNHCR, (2004) <i>Resettlement Handbook</i>. Department of International Protection. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
36	Average processing time for resettlement departures (days)		<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
RATIONALE Timely processing of resettlement submissions is in the interest of refugees, UNHCR and resettlement countries. This indicator seeks to measure the efficiency of resettlement processing by the resettlement country (-ies), counting from the date the refugee case was first submitted to a resettlement country to the date the refugee case departed to the country of resettlement.				
METHODS OF MEASUREMENT The average processing time for resettlement departures is calculated by counting the number of days from the day the refugee case was first submitted to a resettlement country to the day the refugee case departed to the country of resettlement. The average processing time should be determined for all resettlement cases which departed during the period. To this end, the number of days should be added up for all departed cases and then divided by the number of cases who departed. Note: In case exact data cannot be derived from the registration system or manually, the Standards and Indicators Form contains an "Average Processing Time" sheet which is a tool to estimate the average processing time.				
DATA SOURCES UNHCR registration system; <i>ProGres</i> .				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Refugees may be denied basic human rights in a country of asylum; their lives and freedom may also be threatened, or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective, and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the special specific needs of refugees under the Office's Mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there is no prospect for another durable solution. 				
REFERENCES <ul style="list-style-type: none"> UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. UNHCR, (2004) <i>Resettlement Handbook</i>. Department of International Protection. UNHCR, Geneva. 				

3 REFUGEE CAMP/SETTLEMENT



REFUGEE CAMP / SETTLEMENT			
PART I. CAMP/SETTLEMENT INFORMATION			
IDENTIFICATION		INFORMATION	COMMENTS
	Location		
	Type of location (camp or settlement)		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	Date established (dd/mm/yy)		
	UNHCR Office		
	Focal point		
	First administrative level ("province")		
	Second administrative level ("district")		
	Total number of days in reporting period		
GEOGRAPHICAL INFORMATION		INFORMATION	COMMENTS
	Total surface area (m2)		
	Distance from border by road (km)		
	Geographical latitude (N/S)		
	Geographical longitude (W/E)		

PART II. DEMOGRAPHY								
POPULATION		BEGINNING OF PERIOD			END OF PERIOD			COMMENTS
		FEMALE	MALE	TOTAL	FEMALE	MALE	TOTAL	
	Under 5 years							
	5-17 years							
	18-59 years							
	60 years and over							
	Total population							
	Females 15-49 years							
POPULATION MOVEMENTS DURING PERIOD					FEMALE	MALE	TOTAL	
	Total arrivals (DP)							
	Total departures (DP)							

POPULATION EVENTS DURING PERIOD			ADMINISTRATIVE RECORD			COMMENTS	
			FEMALE	MALE	TOTAL		
1	Crude Birth Rate (annual)	?					
	- No of live births						
2	Infant Mortality Rate (<1 year old) (annual)	?					
	- Number of deaths <1 year old						
3	Child Mortality Rate (< 5 years old) (annual)	?					
	- Number of deaths <5 year						
4	Crude Mortality Rate (annual)	?					
	- Number of deaths (Total)						
DEMOGRAPHIC SURVEY DATA (IF AVAILABLE)		SURVEY DATA (IF AVAILABLE)		RATE / 1,000 / YEAR			COMMENTS
		BY	DATE	FEMALE	MALE	TOTAL	
	Crude Birth Rate (annual)						
	Infant Mortality Rate (annual)						
	Child Mortality Rate (annual)						
	Crude Mortality Rate (annual)						

PART III. PROTECTION							
PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
5	Number of refugees and asylum-seekers refouled (DP)	?				0	
6	Number of refugees and asylum-seekers killed (DP)	?				0	
7	Can the population move freely in/out of location (Y/N)	?				Yes	
LEGAL STATUS			FEMALE	MALE	TOTAL		
8	Percentage of refugees and asylum-seekers registered individually	?				100%	
	- Total number of refugees and asylum-seekers individually registered (EP)						
	- Total number of refugees and asylum-seekers (EP)						
9	Percentage of adult refugees and asylum-seekers issued individual identity documentation	?				100%	
	- Total number of refugees and asylum-seekers ≥18 years old issued individual identity documentation (EP)						
	- Total number of refugees and asylum-seekers ≥18 (EP)						

Note: (EP) End of period; (DP) During period

PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
PART III. PROTECTION (CONTINUED)							
LEGAL STATUS (CONTINUED)			FEMALE	MALE	TOTAL		
10	Percentage of newborns issued a birth certificate	?				100%	
	- Total number of newborn refugees and asylum-seekers issued with individual birth certificates (DP)						
	- Total number of newborn refugees and asylum-seekers (DP)						
SPECIFIC PROTECTION NEEDS			FEMALE	MALE	TOTAL	STD.	COMMENTS
11	Percentage of older persons with specific needs assisted	?				100%	
	- Number of older persons with specific needs assisted (DP)						
	- Number of older persons with specific needs (EP)						
12	Percentage of disabled persons ≥18 years old with specific needs assisted	?				100%	
	- Number of disabled persons ≥18 years old with specific needs assisted (DP)						
	- Number of disabled persons ≥18 years old with specific needs (EP)						
13	Percentage of disabled persons <18 years with specific needs assisted	?				100%	
	- Number of disabled persons <18 years old with specific needs assisted (DP)						
	- Number of disabled persons <18 years old with specific needs (EP)						
14	Percentage of ex-combatants ≥18 years old with specific needs assisted	?				100%	
	- No. of ex-combatants ≥18 years old with specific needs assisted (DP)						
	- Number of ex-combatants ≥18 years old with specific needs (EP)						
15	Percentage of ex-combatants <18 years old assisted	?				100%	
	- Number of ex-combatants <18 years old assisted (DP)						
	- Number of ex-combatants <18 years old (EP)						
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
16	Does your Office have a Standard Operating Procedure (SOP) for SGBV? (Y/N)	?				Yes	
			FEMALE	MALE	TOTAL	STD.	COMMENTS
17	Percentage of SGBV cases who received support (DP)	?				100%	
	- Number of SGBV cases who received support (DP)						
	- Number of SGBV cases reported (DP)						

		FEMALE	MALE	TOTAL	STD.	COMMENTS	
18	Percentage of SGBV cases <18 years old who received support (DP)	?			100%		
	- Number of SGBV cases <18 years old who received support (DP)						
	- Number of SGBV cases reported <18 years old (DP)						
19	Percentage of asylum-seekers / refugees who participated in SGBV training	?			10%		
	- Total number of participants in SGBV training (DP)						
	- Total number of asylum-seekers / refugees (EP)						
20	Percentage of UNHCR and partner staff who have completed SGBV training	?			10%		
	- Total number of UNHCR and partner staff who have completed SGBV training (DP)						
	- Total number of UNHCR and partner staff at end of year (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
21	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	?			100%		
	- Number of UACs/SCs for whom a BID has been carried out (EP)						
	- Number of UACs/SCs identified (EP)						
22	Percentage of UACs/SCs for whom tracing has been successfully completed	?			100%		
	- Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	- Number of UACs/SCs identified (EP)						
23	Percentage of adolescents (12-17 years old) reached through targeted programming	?			100%		
	- Number of adolescents reached through targeted programming (DP)						
	- Total refugee population 12-17 years old (EP)						
24	Have children been recruited for military purposes? (Y/N) (DP)	?			No		

Note: (EP) End of period; (DP) During period

PART IV. COMMUNITY SERVICES / DEVELOPMENT						
GENERAL			VALUE		STD.	
25	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N) (DP)	?			Yes	

GENERAL			VALUE			STD.	
CAMP MANAGEMENT			VALUE / DATE			STD.	COMMENTS
26	Percentage of female members in camp management committees	?				50%	
	- Number of female members in camp management committees (EP)						
	- Total number of members in camp management committees (EP)						
TARGETED COMMUNITY ASSISTANCE			FEMALE	MALE	TOTAL		
27	Percentage of needs met for sanitary materials	?				100%	
	- Cost of sanitary materials provided (US\$) (DP)						
	- Cost of providing adequate sanitary materials (US\$) (DP)						

PART V. FOOD, NUTRITION, HEALTH AND HIV AND AIDS								
FOOD AND NUTRITION			FEMALE	MALE	TOTAL	STD.	COMMENTS	
28	Percentage of food beneficiaries entitled to food who received food during latest food distribution	?				100%		
	- Number of food beneficiaries entitled to food assistance and who received food during latest distribution							
	- Number of beneficiaries entitled to food assistance during latest food distribution							
29	Average number of kilocalories available per person per day	?				≥ 2,100		
	- Total number of kilocalories distributed per day							
	- Total population (EP)							
30	Percentage of female members in food distribution committees	?				50%		
	- Number of female members in food distribution committees (EP)							
	- Total number of members in food distribution committees (EP)							
31	Latest nutritional survey conducted (mm/yy)	?				Annual		
SURVEY DATA (IF AVAILABLE)		BY	DATE	FEMALE	MALE	TOTAL	STD.	COMMENTS
32	Rate of malnourished 6-59 mths children (Global Acute Malnutrition) measured by Z-score						< 5%	
HEALTH				FEMALE	MALE	TOTAL	STD.	COMMENTS
33	Number of persons per primary health care facility	?					< 10,000	
	- Total population served by primary health care facility (EP)							
	- Number of primary health care facilities (EP)							

HEALTH		FEMALE	MALE	TOTAL	STD.	COMMENTS
34	Annual number of consultations at primary health care facilities per person	?			1-4	
	- Number of consultations at primary health care facilities (DP)					
	- Total population served by primary health care facility (EP)					
35	Percentage of live births attended by skilled personnel (excl. TBAs)	?			≥ 50%	
	- Number of live births attended by skilled personnel (excl. TBAs) (DP)					
	- Number of live births (DP)					
36	Percentage of newborn children with low birth weight (< 2500 gs) (weighed within 72 hrs)	?			< 15%	
	- Newborn children < 2500 gs (weighed within 72 hrs) (DP)					
	- Total number of newborns weighed within 72 hours of birth (DP)					
SURVEY DATA (IF AVAILABLE)		BY	DATE	TOTAL	STD.	COMMENTS
37	Measles vaccination coverage	?			≥ 90%	
HIV / AIDS			TOTAL		STD.	COMMENTS
38	Number of condoms distributed per person per month (DP)	?			≥ 1	
	- Number of condoms distributed per month					
39	Have stocks of condoms run out for more than a week? (Y/N) DP	?			NO	
		COMMUNITY		REFUGEES	STD.	COMMENTS
40	Is antiretroviral therapy available in / for hosting community / refugees? (indicate in appropriate cell)	Y/N		Y/N	see guide	

Note: (EP) End of period; (DP) During period

PART VI. WATER, SANITATION, SHELTER & ENVIRONMENT						
WATER		INFORMATION				
41	Average quantity of water available per person per day (litres)	?			≥ 20	
	- Available water during one month (m3) (DP)					
	- Total population consuming water during one month (EP)					
42	Number of persons per usable water tap	?			< 80	
	- Population using water taps (EP)					
	- Number of usable water taps (EP)					
43	Number of persons per usable well/hand pump	?			< 200	
	- Population using wells/hand pumps (EP)					
	- Number of usable wells/hand pumps (EP)					

WATER			INFORMATION		
44	Percentage of pop. living within 200 m from water point	?		100%	
45	Percentage of positive faecal coliform detected at distribution points per 100ml sample during the year	?		0%	
46	Percentage of households with sufficient daily water storage capacity	?		100%	
SANITATION			INFORMATION	STD.	COMMENTS
47	Percentage of families with latrines	?		100%	
	- Number of family latrines in use (EP)				
	- Total number of households/families (EP)				
48	Number of persons per drop-hole in communal latrine	?		≤ 20	
	- Population using communal latrines (EP)				
	- Number of drop-holes used in communal latrines (EP)				
49	Number of persons per communal shower head	?		≤ 50	
	- Population using communal showers (EP)				
	- Number of communal shower heads in use (EP)				
50	Number of persons per communal refuse pit	?		≤ 500	
	- Population using communal refuse pits (EP)				
	- Number of communal refuse pits (EP)				
51	Percentage of communal buildings with adequate water/sanitation	?		100%	
	- Communal buildings with adequate water/sanitation (EP)				
	- Number of communal buildings (EP)				
SHELTER & PHYSICAL PLANNING			INFORMATION	STD.	COMMENTS
52	Average camp area per person (m ²)	?		> 45M ²	
	- Total surface area (m ²) (EP)				
	- Total population (EP)				
53	Percentage of households with adequate dwellings	?		100%	
	- Number of adequate dwellings (EP)				
	- Total number of dwellings (EP)				
54	Average dwelling floor size per person (m ²) (EP)	?		≥ 3.5	
ENVIRONMENT			INFORMATION	STD.	COMMENTS
55	Environmental Action Plan created/reviewed (mm/yy)	?			

Note: (EP) End of period; (DP) During period

PART VII. EDUCATION						
PRIMARY SCHOOL (EXCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
56	Percentage of refugee students enrolled in Grades 1-6	?			100%	
	- Total number of refugee students enrolled in Grades 1-6					
	- Total refugee population 6-11 years old (EP)					
	- Number of refugee students enrolled in Grade 1					
	- Number of refugee students enrolled in Grade 2					
	- Number of refugee students enrolled in Grade 3					
	- Number of refugee students enrolled in Grade 4					
	- Number of refugee students enrolled in Grade 5					
	- Number of refugee students enrolled in Grade 6					
57	Percentage of refugee students with specific needs enrolled in Grades 1-6	?			100%	
	- Total number of refugee students with specific needs enrolled in Grades 1-6					
	- Total refugee population 6-11 years old with specific needs (EP)					
SECONDARY SCHOOL (EXCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
58	Percentage of refugee students enrolled in Grades 7-12	?				
	- Total number of refugee students enrolled in Grades 7-12					
	- Total refugee population 12-17 years old (EP)					
TERTIARY EDUCATION, VOCATIONAL TRAINING AND LITERACY RATES						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
59	Percentage of 15-24 years old enrolled in training (non-formal, vocational, skills, etc.)	?				
	- Number of refugees 15-24 years old enrolled in training programmes (DP)					
	- Total number of refugees aged 15 to 24 years old (EP)					
TEACHERS (INCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
60	Number of students per teacher	?			≤ 40	
	- Number of refugee and local students enrolled in Grades 1-12 (EP)					
	- Total number of teachers (EP)					

TEACHERS (INCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)				FEMALE	MALE	TOTAL	STD.	COMMENTS
61	Percentage of refugee teachers			?			100%	
	- Total number of refugee teachers (EP)							
	- Total number of teachers (EP)							
62	Percentage of qualified or trained teachers			?			≥ 80%	
	- Number of qualified or trained teachers (EP)							
	- Total number of teachers (EP)							
SURVEY DATA (IF AVAILABLE)		BY	DATE	FEMALE	MALE	TOTAL	STD.	COMMENTS
63	Literacy rate for refugees 15-24 years old						100%	
EDUCATION				VALUE			STD.	COMMENTS
64	Is there a local education committee with IP/ government participation? (Y/N)			?			Yes	

PART VIII. ECONOMIC SECURITY								
AGRICULTURAL PRODUCTION AND INCOME GENERATION				FEMALE HEADED HOUSEHOLDS	MALE HEADED HOUSEHOLDS		STD.	COMMENTS
65	Number of refugees with access to land for agricultural purposes (DP)			?				
66	Number of refugees engaged in agricultural production (DP)			?				
				FEMALE	MALE	TOTAL	STD.	COMMENTS
67	Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)			?				
	- Number of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities) (EP)							
	- Number of working age asylum-seekers and refugees (EP)							
PART IX. DURABLE SOLUTIONS								
REPATRIATION AND RESETTLEMENT				VALUE			STD.	COMMENTS
68	Percentage of refugees who repatriated (DP)			?			100%	
	- Number of refugees who repatriated (DP)							
	- Number of refugees who expressed willingness to repatriate (signed VRF) (DP)							
69	Percentage of refugees resettled			?			100%	
	- Number of refugees resettled (DP)							
	- Number of refugees identified for resettlement (DP)							
70	Average processing time for resettlement submissions (days)			?				
71	Average processing time for resettlement departures (days)			?				

Note: (EP) End of period; (DP) During period

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
1	Crude Birth Rate (annual)	10-40 /1000 population / year	<input checked="" type="checkbox"/> Sex	Demography
			<input type="checkbox"/> Age	Population event during period
<p>RATIONALE To estimate population fertility, track changes over time which may reflect changes in population stressors and access and utilization of health and nutrition services.</p>				
<p>METHODS OF MEASUREMENT In order to obtain a more accurate annual indicator, data needs to be measured on a monthly basis. MONTHLY DATA: Numerator: Number of births x 1,000 during reporting month Denominator: Mid-point population during reporting month Annual average: Sum of 12 monthly birth rates</p>				
<p>DATA SOURCES Partner Health Information System data</p>				
<p>FREQUENCY OF MEASUREMENT Monthly</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • Crude Birth Rate may change according to acute population stress and access and utilization of health services. It should therefore be tracked over time. • Because there is a tendency to under-report births and over-report population, special care should be taken to obtain results that are as accurate as possible. • The Crude Birth Rate is influenced by the age and sex structure of the population. It will be higher in a population with more women in the childbearing age (15-49 years) or in a population in which women outnumber men. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
2	Infant Mortality Rate (<1 year) (annual)	< 60 deaths (children < 1) per 1,000 live births per year	<input type="checkbox"/> Sex ✓	Demography
			<input type="checkbox"/> Age	Population event during period
RATIONALE To measure child survival and the social and environmental conditions in which children live, including health care. The reduction of infant mortality rate is one of the Millennium Development Goals.				
METHODS OF MEASUREMENT Numerator: Total number of deaths of children under 1 year-old in 1 year x 1,000 during reporting period Denominator: Total number of births during reporting period				
DATA SOURCES Health implementing partner; Health Information System				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered live-born. • Obtaining accurate records about the Infant Mortality Rate is difficult and depends on an accurate recording system. • The number of deaths in each camp is usually small; so reviewing data by month or disaggregated by sex can be misleading. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
3	Child Mortality Rate (< 5 years old) (annual)	< 3 deaths per 1,000 per month	<input checked="" type="checkbox"/> Sex	Demography
			<input type="checkbox"/> Age	Population event during period
RATIONALE To measure child survival. The reduction in deaths of children < 5 years old is one of the Millennium Development Goals.				
METHODS OF MEASUREMENT In order to obtain the annual indicator data needs to be measured on a monthly basis. MONTHLY DATA: Numerator: Total number of deaths among children < 5 years old during reporting month x 1,000 Denominator: Mid-point population of children < 5 years old during reporting month Annual average: Sum of all monthly data				
DATA SOURCES Data should be verified through multiple data sources, usually health partner records, records of community services partner, camp management partner or refugee committee. Health partners should engage community health workers or grave watchers specifically to collect mortality data to augment hospital and health centre data. Other partners should have records such as number of burial shrouds provided.				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • Because there is a tendency to under-report deaths and over-report population, special care should be taken to obtain results that are as accurate as possible. • The denominator should include only the population of children under 5. • The standard used should be mortality rate in the host population, and should be compared to previous years' mortality rate in the refugee population. The standard given is based on average mortality expected in the developing world and should be used where host population mortality is not known. • Routine mortality data should be supplemented by intermittent survey data where indicated, particularly where routine data is suspected to be unreliable. Mortality surveys are often combined with nutrition surveys. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • Checchi, F., Roberts, L., (2005) <i>Interpreting and using mortality data in humanitarian emergencies</i>. Humanitarian Practice Network, Network Paper n. 52, September 2005. ODI, London. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
4	Crude Mortality Rate (annual)	< 1.5 deaths per 1,000 per month	<input type="checkbox"/> Sex ✓	Demography
			<input type="checkbox"/> Age	Population event during period
RATIONALE The Crude Mortality Rate is an indicator of total population health and physical well-being, and reflects many factors such as access to food, water, sanitation, shelter as well as health and nutrition care.				
METHODS OF MEASUREMENT In order to obtain the annual indicator data needs to be measured on a monthly basis. MONTHLY DATA: Numerator: Total number of deaths from all causes among all ages per month x 1,000 Denominator: Mid-point population in the same month Annual average: Sum of all monthly data				
DATA SOURCES Data should be verified through multiple data sources, usually health partner records, records of community services partner, camp management partner or refugee committee. Health partners should engage community health workers or grave watchers specifically to collect mortality data to augment hospital and health centre data. Other partners should have records such as number of burial shrouds provided.				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • Because there is a tendency to under-report deaths and over-report population, special care should be taken to obtain accurate results. • The standard used should be mortality rate in the host population and should be compared to previous years' mortality rate in the refugee population. When the host population mortality is unknown, the average mortality expected in the developing world should be the standard. • Routine mortality data should be supplemented by intermittent survey data where indicated, particularly where routine data is suspected to be unreliable. Mortality surveys are often combined with nutrition surveys. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • Checchi, F., Roberts, L., (2005) <i>Interpreting and using mortality data in humanitarian emergencies</i>. Humanitarian Practice Network, Network Paper n. 52, September 2005. ODI, London. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
5	Number of refugees and asylum-seekers refouled	0	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Physical protection
<p>RATIONALE This indicator serves to measure the compliance by states with the fundamental principle of non-refoulement.</p>				
<p>METHODS OF MEASUREMENT Report the total number of cases known to UNHCR during the reporting period</p>				
<p>DATA SOURCES UNHCR presence on the border and in the Field, governments; human rights agencies, implementing and operational partners, media, local communities, refugees, and asylum seekers</p>				
<p>FREQUENCY OF MEASUREMENT Annually unless otherwise stated, but with continual monitoring, especially during an emergency or influx of refugees or asylum-seekers (also in Situation Report and Annual Protection Report)</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • Direct as well as indirect refoulement will be considered. Reports may include refoulement of refugees or asylum seekers in the country as well as non-admission of genuine asylum-seekers at the land border or airport. • Only cases of refoulement of asylum-seekers (whether already registered as such or not) and refugees should be listed. Cases falling under the exceptions of Article 33(2) of the 1951 Convention as well as cases not in need of international protection in which return may solely violate other non-refoulement obligations in international law (e.g. excluded cases entitled to protection under the Convention against Torture) will not be counted. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 33. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
6	Number of refugees and asylum-seekers killed	0	<input type="checkbox"/> Sex ✓	Protection
			<input type="checkbox"/> Age	Physical protection
RATIONALE This indicator will contribute to measure the security situation in the camp.				
METHODS OF MEASUREMENT Report the total number of cases known to UNHCR during the reporting period				
DATA SOURCES UNHCR presence in the camp; governments, human rights agencies, implementing and operational partners, media, local communities, refugees, and asylum-seekers				
FREQUENCY OF MEASUREMENT Record the numbers of refugees and asylum-seekers killed at the end of reporting period				
NOTES <ul style="list-style-type: none"> • The term “killing” refers to death for other than natural causes, namely killings conducted by agents of the country of origin, by officials of the country of asylum (e.g. by border guards misperceiving asylum-seekers as intruders) or by criminals; death caused by effects of war/civil war, no matter whether intended or of collateral nature. Death of natural causes, even if it results from specific risks related to the displacement, such as lack of clean water, shelter, sufficient food, etc. should not be considered under this indicator. • Death penalty should also not be considered under this heading. • Cases of individuals <18 years old should be reported in the “Comments” column (including sex breakdown). 				
REFERENCES <ul style="list-style-type: none"> • International Covenant on Civil and Political Rights, Art. 6. • Convention on the Rights of the Child, Art. 6. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
7	Can the population move freely in/out of location?	YES	<input type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Physical protection
RATIONALE To measure if refugees are allowed to move freely within and outside of camps for work or personal reasons.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Formal and informal reports of government authorities, implementing and operational partners, local communities, and refugees; UNHCR contact with local authorities and monitoring presence				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Under the 1951 Convention, refugees who are legally in a country should in principle be free to choose where they live and to move freely within their country of asylum. The Convention allows restrictions to this provision which are limited to regulations that apply to aliens in general. On this basis, restrictions to the right to move freely in the territory, e.g. into or out of certain areas or camps, should be imposed only when this is clearly in the interest of refugee security or overall national security. • The questions will be answered in the affirmative if no restrictions to leave the camp area exist in domestic law, camp rules, or administrative practice (e.g. by local police stations). • Rules established by the camp administration for the purpose of managing security and maintaining public order or protect the rights and freedoms of others, such as limitations to move in and out at night or the need to announce the departure at the gate, are acceptable, unless they are disproportional with respect to their purpose. • The question should be answered with "no" in cases where refugees are only allowed to move to a specific location (e.g. to a hospital, to the court, or within a certain distance from the camp only). 				
REFERENCES <ul style="list-style-type: none"> • International Covenant on Civil and Political Rights, Art. 12. • International Convention on the Elimination of All Forms of Racial Discrimination, Art. 5. • 1951 Refugee Convention, Art. 26. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
8	Percentage of refugees and asylum-seekers registered individually	100%	<input type="checkbox"/> Sex ✓	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE Registration is an important tool of protection, including protection against refoulement, forcible recruitment; access to basic rights, family reunification; identification of those in need of special assistance. It is a tool to quantify and assess needs and to implement appropriate durable solutions.				
METHODS OF MEASUREMENT Numerator: Total number of refugees and asylum-seekers individually registered at the end of reporting period Denominator: Total number of refugees and asylum-seekers at the end of reporting period				X 100 = %
DATA SOURCES Official government statistics or UNHCR data				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • A person, including a child, can be considered as “individually registered” only if the following minimum data is recorded: name, date of birth, country of origin, sex, and marital status. Both registrations by states as well as by UNHCR have to be counted. In cases of parallel registration by UNHCR and by states, at least one registration has to fulfill the criteria set out above. • ExCom Conclusion No. 93 states “For the purpose, <i>inter alia</i>, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application”. 				
REFERENCES <ul style="list-style-type: none"> • ExCom Conclusion No. 91. • ExCom Conclusion No. 93: para. (b)(v). • UNHCR, (2003) <i>Handbook for Registration. Procedures and Standards for Registration, Population Data Management and Documentation</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
9	Percentage of adult refugees and asylum-seekers issued individual identity documentation	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE Identity documents certify status and are thus a fundamental tool of protection.				
METHODS OF MEASUREMENT Numerator: Total number of refugees and asylum-seekers ≥ 18 years old issued individual documentation at the end of reporting period Denominator: Total number of refugees and asylum-seekers ≥ 18 years old at the end of reporting period				$X 100 = \%$
DATA SOURCES Formal reports of government authorities or, in case of UNHCR involvement in the issuance, UNHCR. UNHCR Offices should not report if no official government statistics/ UNHCR data are available.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Individual identity documents include primarily documents issued by the government. They also include documents issued by UNHCR, when UNHCR has been given the authority by the host government to issue them through a legal or sub-legal act or when the UNHCR issued document bears the logo and signature of the competent authority of the state. Refugee certificates and protection letters issued by UNHCR without such endorsement by the authorities are not to be considered as identity documents, even if in practice they are recognized by the authorities of the host country. ExCom Conclusion No. 93 states <i>“For the purpose, inter alia, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application”.</i> 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 27. ExCom Conclusion No. 93: para. (b)(v). UNHCR, (2003) <i>UNHCR Handbook for Registration</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
10	Percentage of newborns issued a birth certificate	100%	<input type="checkbox"/> Sex ✓	Protection
			<input type="checkbox"/> Age	Legal status
RATIONALE To confirm nationality and status; prevent statelessness; ensure legal status, rights, and obligations; and safeguard the legal and physical protection of refugees and asylum-seekers and their access to services.				
METHODS OF MEASUREMENT Numerator: Total number of newborn refugees and asylum- seekers issued with individual birth certificates during reporting period Denominator: Total number of newborn refugees and asylum- seekers during reporting period				X 100 = %
DATA SOURCES Formal reports of government authorities or, in case of UNHCR involvement in the issuance, UNHCR. UNHCR Offices should not report if no official government statistics/UNHCR data are available				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Birth certificates include documents issued by the government. They also include documents issued by UNHCR or other organizations, when these have been given the authority by the host government to issue them through a legal or sub-legal act or when the UNHCR issued document bears the logo and signature of the competent authority of the state. • Hospital records and records from midwives or traditional birth attendants will not be considered as birth certificates. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 7. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
11	Percentage of older persons with specific needs assisted	100%	☑ Sex	Protection
			☑ Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of older persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of older persons with specific needs assisted during the reporting period Denominator: Number of older persons with specific needs at the end of the reporting period				$\times 100 = \%$
DATA SOURCES UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). • Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. • Older persons: The definition of older persons in UNHCR policy are persons who are 60 years and above. But flexibility is allowed as indicates the following statement: “However, the application of this policy will respect factors such as life expectancy and cultural norms that differ from region to region” . • “Older persons with specific needs” are persons who fall into the above category of persons and who require specific assistance to meet their needs. They include older persons without family support and/or source of income, chronically ill, and disabled persons who need additional support in terms of shelter construction/repair, food/diet, clothing, mobility equipments, medical and psychosocial care. They can be identified through registration activities and by community members, case workers, community health and social outreach workers. The objectives of the assistance to be delivered to this group of persons are, as indicated in UNHCR Policy on Older Persons: a) to assure their human rights to live in dignity and security by providing support and care and, b) to avail the opportunity to contribute to their communities in whatever way they can for their psychosocial well-being. In other words, “...to live their latter years of life in dignity and security, contributing actively to their families and communities for as long as possible for them to do so, and [being] offered care and support if they are physically or mentally frail” (UNHCR, 2000). The purpose of the policy is to address the needs of older persons who are abandoned, separated from family members and isolated because of the breakdown of family and community structure and the changing social and economic situations during flight and displacement. The policy aims at identification and care of older persons with specific needs in emergency, the protection of older persons at risk from neglect and abandonment, consistent incorporation of gender and age-sensitive protection and assistance criteria for assessing, monitoring and addressing the needs and vulnerabilities of older persons. The strategy of UNHCR is to mainstream age and gender issues through a community-based approach and hence the integration of older persons in the community is one of the goals. Rehabilitation and integration of older persons can be facilitated through counseling, availing access to education, vocational/life skills trainings, micro-finance and credit facilities as well as utilizing and updating their skills (to be congruent with human rights issues) in conflict resolution and peace building. 				
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17 2003. UNHCR, Geneva. • UN, (1996) <i>Human Rights and Older Persons, The Economic, Social and Cultural Rights of Older Persons</i>. Internal Comment No. 6 continued in Document E/1996/22, Annex IV. • UNHCR <i>Policy on Older Persons</i>, endorsed at the 17th Meeting of UNHCR Standing Committee (29 February - 2 March 2000) • UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. • Help Age International (1999) <i>the Ageing World and Humanitarian Crisis: Guidelines for Best Practices</i>. • Conclusions on the International Protection of Refugees, adopted by the Executive Committee of the UNHCR Programme, Published by the Office of the United Nations High Commissioner for Refugees. UNHCR, Geneva, 1991. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
12	Percentage of disabled persons ≥18 years old with specific needs assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of disabled persons with specific needs who require additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of disabled persons ≥18 years old with specific needs assisted during the reporting period Denominator: Number of disabled persons ≥18 years old with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>NOTES</p> <ul style="list-style-type: none"> • The term “disabled persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). • Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. • The term “disabled persons” refers to persons with mental and physical disabilities/impairments. • Impairment can be defined as “any loss or abnormality of psychological or anatomical structure or function” (WHO, 1980); Disability can be defined as “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (WHO, 1980); Handicap can be defined as “a disadvantage for a given individual, resulting from an impairment or disability that limits or prevents the fulfilment of a role that is normal depending on sex, social and cultural factors for that individual” (UNHCR, 1996). UNHCR is committed to the principles which underlie the <i>Standard Rules on the Equalization of Opportunities for Persons with Disabilities</i>, issued in 1993, which also states that “jointly with other agencies, UN organizations, non-governmental agencies and the refugees with disabilities themselves, UNHCR seeks to promote community-based rehabilitation which aims to integrate persons into society rather than creating special facilities and services”. In conclusion, the former High Commissioner said that as part of the overall United Nations efforts, UNHCR will continue to draw special attention to the plight of refugees with disabilities and promote community-based rehabilitation efforts in both countries of asylum and return. • Participation of disabled persons in all activities that they are capable of carrying out will lead to their rehabilitation. Access to education or special education, vocational and life skills training and employment opportunities will help them to be active and contributive members of their communities. • Disabled Persons with specific needs are persons without family support or source of income who need specific support in terms of availing mobility equipment (crutches, wheel chairs, etc.), visual and hearing aids, medical treatment, psycho-social services, etc. Persons who need such assistance can be identified through registration activities and by community members, case workers, community health and social outreach workers. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 2 and 23. • WHO, (1980) <i>International Classification of Impairments, Disabilities and Handicaps</i>. WHO, Geneva. • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17 2003. UNHCR, Geneva. • UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Sexual and Gender Based-Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
13	Percentage of disabled persons <18 years old with specific needs assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of disabled persons with specific needs who require additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of disabled persons <18 years old with specific needs assisted during the reporting period Denominator: Number of disabled persons <18 years old with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The term “disabled persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Groups with specific needs include older persons, separated children, the chronically ill, persons with mental and physical disabilities, ex-combatants, single heads of households, survivors of violence, and others, depending on the specific situation. The term “disabled persons” includes persons with mental and physical disabilities/impairments. Impairment can be defined as “any loss or abnormality of psychological or anatomical structure or function” (WHO, 1980); Disability can be defined as “any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being” (WHO, 1980); Handicap can be defined as “a disadvantage for a given individual, resulting from an impairment or disability that limits or prevents the fulfilment of a role that is normal depending on sex, social and cultural factors for that individual” (UNHCR, 1996). UNHCR is committed to the principles which underlie the Standard Rules on the Equalization of Opportunities for Persons with Disabilities, issued in 1993, which also states that “jointly with other agencies, UN organizations, non-governmental agencies and the refugees with disabilities themselves, UNHCR seeks to promote community-based rehabilitation which aims to integrate persons into society rather than creating special facilities and services”. In conclusion, the former High Commissioner said that as part of the overall United Nations efforts, UNHCR will continue to draw special attention to the plight of refugees with disabilities and promote community-based rehabilitation efforts in both countries of asylum and return. Participation of disabled persons in all activities that they are capable of carrying out will lead to their rehabilitation. Access to education or special education, vocational and life skills training and employment opportunities will help them to be active and contributive members of their communities. Disabled Persons with specific needs are persons without family support or source of income who need specific support in terms of availing mobility equipment (crutches, wheel chairs, etc.), visual and hearing aids, medical treatment, psycho-social services, etc. Persons who need such assistance can be identified through registration activities and by community members, case workers, community health and social outreach workers. 				

REFERENCES

- International Covenant on Economic, Social and Cultural Rights, Art. 12.
- Convention on the Rights of the Child, Art. 2 and 23.
- WHO, (1980) *International Classification of Impairments, Disabilities and Handicaps*. WHO, Geneva.
- UNHCR, (2003) *Summary of the discussion on the Workshop on Community Services Manuals*. October 16-17 2003. UNHCR, Geneva.
- UNHCR, (1996) *Community Service in UNHCR. An Introduction*. UNHCR, Geneva.
- UNHCR, (2003) *Sexual and Gender Based-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response*. UNHCR, Geneva.

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
14	Percentage of ex-combatants ≥18 years old with specific needs assisted	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of ex-combatants ≥ 18 with specific needs assisted during the reporting period Denominator: Number of ex-combatants ≥ 18 with specific needs at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). Ex-combatants are persons who have proven that they have “genuinely and permanently renounced military activities” and who may need specific additional assistance to cope in their new life and to integrate into the community. (This definition is based on ExCom Conclusion No. 94 (LIII) – 2002, which states that “ex-combatants can be considered as civilians, but not until the authorities have established, within a reasonable timeframe, that they have genuinely and permanently renounced military activities”). Ex-combatants can be identified through registration activities and by community members, case workers, community health and social outreach workers. Ex-combatants should be helped to adapt to their new life and play their role as active and contributive members of their communities. Rehabilitation of ex-combatants can be facilitated through counseling, access to education, including vocational and life skills training, micro-finance activities and credit facilities that will help them attain self-reliance. 				
REFERENCES <ul style="list-style-type: none"> UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals</i>. October 16-17 2003. UNHCR, Geneva. UNHCR, (1996) <i>Community Service in UNHCR. An Introduction</i>. UNHCR, Geneva. Conclusions on the International Protection of Refugees, adopted by the Executive Committee of the UNHCR Programme, Published by the Office of the United Nations High Commissioner for Refugees. UNHCR, Geneva, 1991. UNHCR, (2003) <i>Sexual and Gender Based-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
15	Percentage of ex-combatants <18 years old assisted	100%	<input type="checkbox"/> Sex ✓	Protection
			<input checked="" type="checkbox"/> Age	Specific Protection Needs
RATIONALE To measure the extent to which community and implementing partners are meeting the needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT Numerator: Number of ex-combatants < 18 assisted during the reporting period Denominator: Number of ex-combatants < 18 at the end of the reporting period				X 100 = %
DATA SOURCES UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The term “persons with specific needs” refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). • Ex-combatants: are persons who have proven that they have “genuinely and permanently renounced military activities” and who need specific additional assistance to cope in their new life and to integrate into the community. (This definition is based on ExCom Conclusion No. 94 (LIII) – 2002, which states that “ex-combatants can be considered as civilians, but not until the authorities have established, within a reasonable timeframe, that they have genuinely and permanently renounced military activities”). • Former child soldiers, also known as children formerly associated with fighting forces should benefit from special protection and assistance measures, in particular as regards their demobilization and rehabilitation. Child soldiers are defined as “... any person under 18 years of age who is part of any kind of regular or irregular armed force or armed group in any capacity, including but not limited to cooks, porters, messengers, and those accompanying such groups, other than purely as family members. It includes girls recruited for sexual purposes and forced marriage. It does not, therefore, only refer to a child who is carrying or has carried arms” (Cape Town Principles, 1997). • Ex-combatants/former child soldiers can be identified through registration activities and by community members, case workers, community health and social outreach workers. • While recognizing that girls and boys may have different needs, they should benefit in an equitable manner from assistance provided to them. The recovery and social reintegration programmes could consist of counseling/ psycho-social support, education, including vocational and life skills training, and, in particular for older children, micro-finance activities and credit facilities that will help them attain self-reliance. This should take place ‘in an environment which fosters health, self-respect and dignity of the child’ (art. 39; CRC) • Programmes for children released from armed groups and forces are more effective when addressed in the framework of tracing, reunification and reintegration rather than in the framework of a professional discharge from formal functions as for adults. • Security Council Resolution No. 1612 requests the Secretary-General to implement a monitoring and reporting mechanism on children and armed conflict, which includes the recruitment and use of children in armed conflict. • Addressing the topic of military recruitment of girls and boys is one of UNHCR’s five priority issues related to refugee children. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
REFERENCES				
<ul style="list-style-type: none"> • Convention on the Rights of the Child, Art.38 and 39. • Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict. • 1977 Additional Protocols to the Geneva Conventions. • ILO Convention on the Worst Forms of Child Labour, No. 182. • Statute of the International Criminal Court. • UN Security Council Resolution S/RES/1612 (2005). • UNHCR (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (2005) <i>Summary Note on UNHCR's Strategy and Activities for Children of Concern to UNHCR</i>. UNHCR, Geneva. • UNHCR, (2002) <i>Action for the Rights of Children, Child Soldiers. Save the Children</i>, UNHCR, UNICEF, UNOHCHR, Geneva. • ExComm. Conclusion No. 94 (LIII) – 2002. • UNHCR, (2003) <i>Summary of the discussion on the Workshop on Community Services Manuals. October 16-17 2003</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons, Guidelines for Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
16	Does your office have a Standard Operating Procedure (SOP) for SGBV?	YES	<input type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE This indicator serves to measure if effective SGBV prevention and response strategies are established.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Annual Protection Report, Sitrep, Country Reports and Monthly SGBV Reports from every office				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • All UNHCR operations that provide direct protection to persons of concern must have a Standard Operating Procedure in place. The SOP must be based on the UNHCR <i>Guidelines for Prevention and Response to SGBV</i>. • The SOP will also assist in fixing responsibilities among the various partners on SGBV prevention and response activities. It will also enable the operational managers to identify gaps and allocate resources both human and financial. • SGBV SOPs are to be prepared by UNHCR in collaboration with all the partners including operational partners (NGOs, UN agencies, host government departments, refugee groups and community and host community members). An SOP is a document that must have the following elements: <ul style="list-style-type: none"> • Definition of SGBV • Guiding Principles: Program Principles/Individual Principles • Roles and Responsibilities in terms of Prevention and Response activities in accordance with the "four pillars" and the community as described in the <i>Guidelines for Prevention and Response</i> • An agreed upon reporting and referral mechanism • Co-ordination, monitoring and evaluation mechanisms • Definition of Key Concepts and Categories of SGBV • List of Participating Agencies • Signature page for stakeholders • It enhances coordination between partners by delineating, and bringing clarity to, the roles and responsibilities of each sector and agency. • It ensures the survivor a timely and quality response. • All key stakeholders have a common and agreed understanding of what needs to be done and how it should be done. It is a document that once drafted, will provide a foundation for communicating on how response can be strengthened. • The SOPs are also intended to guide activities initiated by refugee community themselves to undertake specific activities to prevent and address SGBV problems. • SOPs have to be reviewed regularly/periodically so as to reflect the Field realities and partner agreements. But if the SOP has not been signed by all partners/stakeholders and subsequently distributed to the community at large, the office cannot claim to have an SOP. • Modifications to the SOP should be reported in the APR and/or Sitrep. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons</i>. UNHCR, Geneva. • UN Security Council Resolution S/RES/1325, October 2005 • UNHCR, (2003) <i>Gender Training Kit on Refugee Protection and Resource Handbook</i>. UNHCR, Geneva • IASC (2005) <i>Guidelines for Gender-Based Violence Interventions in Humanitarian Settings</i>. • UN, (2000) <i>Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women</i>. United Nations, New York. • UN, (1993) <i>Declaration on the Elimination of Violence against Women</i>, A/RES/48/104. • Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages. • Convention on the Rights of Children, Art. 19 and 24. • UNHCR (1997) <i>Policy on Harmful Traditional practices</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
17	Percentage of SGBV cases who received support	100%	<input type="checkbox"/> Sex ✓	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To provide refugees and asylum-seekers (particularly women) who have experienced sexual and gender-based violence (SGBV) with appropriate support.				
METHODS OF MEASUREMENT Numerator: Total number of cases of SGBV who received support during the reporting period Denominator: Total number cases of SGBV reported during the reporting period				X 100 = %
DATA SOURCES Formal and informal reports and service and clinic records of UNHCR; government authorities; implementing and operational partners; refugee communities and individual refugees; surveys				
FREQUENCY OF MEASUREMENT Annually (also in Sitrep and APR)				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • Preventing and responding to incidents of SGBV is one of UNHCR's most important protection concerns. In order to effectively monitor and evaluate SGBV prevention and response initiatives, UNHCR must be able to measure the extent to which SGBV is reported among the population. Given the general reluctance of survivors of rape to report the crime, the general <i>"family matter and within the household"</i> attitude many populations attach to complaints of domestic violence, and the challenges associated with efforts to influence changes in community traditional practices regarded as <i>"harmful"</i> an increase from year to year in the number of reports received in these types of SGBV can serve as a proxy indicator for the effectiveness of awareness raising and response initiatives. • For definitions of "rape", "domestic violence" and "harmful traditional practices", please see Chapter 1 of UNHCR's <i>May 2003 Guidelines for Prevention and Response: Sexual and Gender-Based Violence against Refugees, Returnees, and Internally Displaced Persons</i>. These definitions should also be contained in the glossary of the SOP. • Domestic violence is presumed to be the most prevalent form of SGBV and both domestic violence and rape are the most underreported forms of SGBVs. The rise in the number of cases reported implies that the community is increasingly aware of the necessity of reporting these incidents. Because of the psychological and medical complications associated with rape in particular – such as unwanted pregnancy, sexually transmitted infections – it is imperative that survivors receive treatment as soon as possible. While an increase in the number of rape cases reported implies that awareness raising initiatives are having an impact, an increase in the number of rape cases seen at a health centre within 72 hours after occurrence can serve as a proxy measurement that the community/survivors understand the necessity of reporting and seeking attention as soon as possible. • Whether a traditional practice is harmful should be determined by reference to the physical and mental harm caused to the individual and with the aid of international human rights instruments. As UNHCR staff has an obligation to uphold rights and freedoms enshrined in international human rights instruments, a harmful traditional practice which violates the individual rights of refugees will normally require the intervention of UNHCR. • If possible, please comment on whether the particular types of SGBV occur in a particular location in your camp or urban setting. For example, in some camp settings, rape is more common outside the camp as refugee women and girls may have to leave the camp in order to collect firewood. Please also comment if the survivor victim is proceeding with legal redress or seeks other support for example psycho-social and medical support. • After an incident of SGBV, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. He/she may adopt strong defense mechanisms, such as forgetting, denial and deep repression of the traumatic event. Family members may also experience a variety of emotions and need to receive support during this traumatic period. Community-based activities are most effective in helping to relieve such a trauma. • It is imperative to establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner. • Post-rape cases who received timely care should be mentioned in the comments column. The word "timely" means "within the 72 hours following the incident". 				

REFERENCES

- UNHCR, (2003) *Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons*. UNHCR, Geneva.
- UN Security Council Resolution S/RES/1325, October 2005
- UNHCR, (2003) *Gender Training Kit on Refugee Protection and Resource Handbook*. UNHCR, Geneva.
- IASC, (2005) *IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings*.
- Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women.
- UN, (1993) *Declaration on the Elimination of Violence against Women*. A/RES/48/104.
- Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages.
- Convention on the Rights of Children, Art. 19 and 24.
- UNHCR (1997) *Policy on Harmful Traditional Practices*. UNHCR, Geneva.
- UNHCR, (1994) *Refugee Children. Guidelines on Protection and Care*. UNHCR, Geneva.

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
18	Percentage of SGBV cases <18 who received support	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	SGBV
RATIONALE To provide refugees and asylum-seekers, particularly women and children, who have experienced sexual and gender-based violence (SGBV) appropriate support.				
METHODS OF MEASUREMENT Numerator: Total number of SGBV cases <18 who received support during the reporting period Denominator: Total number of SGBV cases reported <18 years old during the reporting period				X 100 = %
DATA SOURCES Formal and informal reports, and service and clinic records of UNHCR; government authorities; implementing and operational partners; refugee communities and individual refugees; surveys				
FREQUENCY OF MEASUREMENT Annually (also in Sitrep and APR)				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • Preventing and responding to incidences of SGBV is one of UNHCR's most important protection concerns. In order to effectively monitor and evaluate SGBV prevention and response initiatives, UNHCR must be able to measure the extent to which SGBV is reported among the population (total number of cases). Given the general reluctance of survivors of rape to report the crime, the general "family matter and within the household" attitude many populations attach to complaints of domestic violence, and the challenges associated with efforts to influence changes in community traditional practices regarded as "harmful," an increase from year to year in the number of reports received in these types of SGBV can serve as a proxy indicator for the effectiveness of awareness raising and response initiatives. • For definitions of "rape", "domestic violence" and "harmful traditional practices", please see Chapter 1 of UNHCR's <i>May 2003 Guidelines for Prevention and Response: Sexual and Gender-Based Violence against Refugees, Returnees, and Internally Displaced Persons</i>. These definitions should be contained in the Glossary of the SOP. • Domestic violence is presumed to be the most prevalent form of SGBV and both domestic violence and rape are the most underreported forms of SGBVs. The rise in the number of cases reported implies that the community is increasingly aware of the necessity of reporting these incidents. Because of the psychological and medical complications associated with rape in particular – such as unwanted pregnancy, sexually transmitted infections – it is imperative that survivors receive treatment as soon as possible. While an increase in the number of rape cases implies that awareness raising initiatives are having an impact, an increase in the number of rape cases seen at a health centre within 72 hours after occurrence can serve as a proxy measurement that the community/survivors understand the necessity of reporting and seeking attention as soon as possible. • Whether a traditional practice is harmful should be determined by reference to the physical and mental harm caused to the individual and with the aide of international human rights instruments. As UNHCR staff has an obligation to uphold rights and freedoms enshrined in international human rights instruments, a harmful traditional practice which violates the individual rights of refugees will normally require the intervention of UNHCR. • If possible, please comment on whether the particular types of SGBV occur in a particular location in your camp or urban setting. For example, in some camp settings rape is more common outside the camp as refugee women and girls may have to leave the camp in order to collect firewood. Please also comment if the survivor victim is proceeding with legal redress or seeks other support for example psycho-social and medical support. • After an incident of SGBV, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. He/she may adopt strong defense mechanisms, such as forgetting, denial and deep repression of the traumatic event. Family members may also experience a variety of emotions and need to receive support during this traumatic period. Community-based activities are most effective in helping to relieve such a trauma. • It is imperative to establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner. • Post-rape cases who received timely care should be mentioned in the comments column. The word "timely" means "within the following 72 hours". 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons</i>. UNHCR, Geneva. • UN Security Council Resolution S/RES/1325, October 2005. • UNHCR, (2003) <i>Gender Training Kit on Refugee Protection and Resource Handbook</i>. UNHCR, Geneva. • IASC, (2005) <i>IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings</i>. • Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women. • UN, (1993) <i>Declaration on the Elimination of Violence against Women. A/RES/48/104</i>. • Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages. • Convention on the Rights of Children, Art. 19 and 24. • UNHCR (1997) <i>Policy on Harmful Traditional Practices</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
19	Percentage of asylum-seekers / refugees who participated in SGBV training	10%	<input type="checkbox"/> Sex ✓	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To raise awareness of gender equity issues and SGBV among refugee men and women, particularly refugees who represent the community in formal committees or the traditional justice system.				
METHODS OF MEASUREMENT Numerator: Total number of participants in SGBV training at the end of reporting period Denominator: Total number of asylum-seekers/refugees at the end of reporting period				$\times 100 = \%$
DATA SOURCES Implementing and operational partners, refugees, community (camp management committees), records of participation in training and sensitization meetings				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated (also in APR)				
NOTES <ul style="list-style-type: none"> • Training and sensitization include training courses for refugee groups on SGBV and meetings. Posters, rallies and billboards do not qualify as training or sensitization. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for the Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
20	Percentage of UNHCR and partner staff who have completed SGBV training	10%	<input checked="" type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To raise awareness of gender equity issues and SGBV among UNHCR and partner staff.				
METHODS OF MEASUREMENT Numerator: Total number of UNHCR and partner staff who completed SGBV training at the end of reporting period Denominator: Total number of UNHCR and partner staff at the end of the reporting period				$\times 100 = \%$
DATA SOURCES UNHCR and partner workshop/training and other reports, participants lists				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated (also in Sitrep and APR)				
NOTES <ul style="list-style-type: none"> • SGBV training can include sensitization and meetings, as well as more formal training. • For all UNHCR staff basic SGBV awareness training should take place in all phases including emergency; more detailed training based on the SGBV Guidelines should be organized in stable situations. Participants should reflect a gender and multi-sectoral balance. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for the Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
21	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	100%	<input checked="" type="checkbox"/> Sex	Protection
			<input checked="" type="checkbox"/> Age	Children
RATIONALE To preserve the safety and well-being of unaccompanied and separated children in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT Numerator: Total number of unaccompanied and separated children for whom a Best Interests Determination (BID) has been carried out at the end of reporting period Denominator: Total number of unaccompanied and separated children identified at the end of reporting period				$\times 100 = \%$
DATA SOURCES UNHCR, implementing and operational partners (especially the International Committee of the Red Cross, UNICEF, child protection NGOs), refugee community (camp management committees), BID recommendations				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Particular attention should be paid to the common registration form for unaccompanied and separated children. • A BID has to be carried out when identifying durable solutions for unaccompanied and separated children. • Since this concerns decisions taken under UNHCR's own competence, the primary responsibility to undertake a BID lies with UNHCR, but all efforts should be made to involve, to the extent possible, competent national authorities in this process. • It is essential that suitably qualified personnel are involved in preparing the recommendations and determining the best interests of the child. • The separation of children from their families and primary caregivers is one of UNHCR's five priority issues related to refugee children. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 3 and 22 • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (1997) <i>Guidelines on Policies and Procedures in Dealing with Unaccompanied Children Seeking Asylum</i>. UNHCR, Geneva. • ICRC, IRC, SCUK, UNICEF, UNHCR, WVI, (2004) <i>Inter-agency Guiding Principles on Unaccompanied and Separated Children</i>. • <i>Summary Note on UNHCR's Strategy and Activities for Girls and Boys of Concern to UNHCR</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
22	Percentage of UACs/SCs for whom tracing has been successfully completed	100%	☑ Sex	Protection
			☑ Age	Children
RATIONALE To preserve the safety and well-being of unaccompanied and separated children in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT Numerator: Total number of unaccompanied and separated children for whom tracing has been successfully completed at the end of reporting period Denominator: Total number of unaccompanied and separated children identified at the end of reporting period				$\times 100 = \%$
DATA SOURCES UNHCR, implementing and operational partners (especially the International Committee of the Red Cross, UNICEF, child protection NGOs), refugee community (camp management committees)				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Separation of children from their families or caregivers should be prevented. For those girls and boys who have been separated, it is important to identify, register and document them in order to provide protection and undertake tracing of parents or primary caregivers. Family reunification should occur if it is in the best interests of the child. • Particular attention should be paid to the common registration form for unaccompanied and separated children. • The objective of tracing is reunification with parents or other close relatives. • Tracing must be carried out for all UACs/SCs at the earliest possible time. Even if immediate family reunification is not possible, tracing is important for restoring links within families. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 3 and 22. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (1997) <i>Guidelines on Policies and Procedures in Dealing with Unaccompanied Children Seeking Asylum</i>. UNHCR, Geneva. • ICRC, IRC, SCUUK, UNICEF, UNHCR, WVI, (2004) <i>Inter-agency Guiding Principles on Unaccompanied and Separated Children</i>. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
23	Percentage of adolescents (12-17 years) reached through targeted programming	100%	<input type="checkbox"/> Sex ✓	Protection
			<input checked="" type="checkbox"/> Age	Children
RATIONALE Adolescents in this age group are more exposed to protection risks as there is often no sufficient educational or employment opportunities for them. Therefore programmes will need to be specifically targeted to this group.				
METHODS OF MEASUREMENT Numerator: Total number of adolescents (12-17 years old) reached through targeted programming during the reporting period Denominator: Total refugee population 12-17 years old				X 100 = %
DATA SOURCES Formal and informal reports of UNHCR; government authorities, implementing and operational partners; refugee communities and individual refugees; Participatory Assessment				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • In refugee and return situations, younger children are often being cared for while their communities and organizations tend to overlook the specific needs of adolescent girls and boys, who may also be heading households. • Adolescent girls and boys often cannot access education, either because they have economic and family responsibilities that prevent them from attending, or because there are no appropriate schooling possibilities for their age group. • Targeted programming can shield them from exploitative activities and abuse, such as military recruitment, forced labour, sexual exploitation, abuse and violence. • Targeted programming could, for example, be skills training, recreational activities and non-formal education. • The specific needs of adolescents are one of UNHCR's five priority issues related to refugee children. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, <i>Summary Note on UNHCR's Strategy and Activities for Girls and Boys of Concern to UNHCR</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
24	Have children been recruited for military purposes?	NO	<input type="checkbox"/> Sex	Protection
			<input type="checkbox"/> Age	Children
RATIONALE To preserve the safety and well-being of children associated with fighting forces in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Formal and informal reports of UNHCR (e.g. proGres); government authorities, implementing and operational partners; refugee communities and individual refugees; participatory assessment				
FREQUENCY OF MEASUREMENT Annually, but with continual monitoring, especially during an emergency or influx of refugees or asylum-seekers (also in APR)				
NOTES <ul style="list-style-type: none"> • Children who have been recruited for military purposes are known as children associated with fighting forces (also called "child soldiers"). A child associated with fighting forces is defined as "...any person under 18 years of age who is part of any kind of regular or irregular armed force or armed group in any capacity, including but not limited to cooks, porters, messengers, and those accompanying such groups, other than purely as family members. It includes girls recruited for sexual purposes and forced marriage. It does not, therefore, only refer to a child who is carrying or has carried arms" (Cape Town Principles, 1997). • Pending reunification with their families, measures for their protection, especially from re-recruitment, and care are essential, in particular for girls who have given birth or who have become pregnant. • While recognizing that girls and boys may have different needs, they should benefit in an equitable manner from disarmament, demobilization and reintegration programmes. • Programmes for children released from armed groups and forces are more effective when addressed in the framework of tracing, reunification and reintegration rather than in the framework of a professional discharge from formal functions as for adults. • Security Council Resolution No. 1612 requests the Secretary-General to implement a monitoring and reporting mechanism on children and armed conflict, which includes the recruitment and use of children in armed conflict. • The military recruitment of girls and boys is one of UNHCR's five priority issues related to refugee children. • If the answer is yes, please indicate under "Comments" the number of children. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art.38 and 39. • Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict. • 1977 Additional Protocols to the Geneva Conventions. • ILO Convention on the Worst Forms of Child Labour, No. 182. • Statute of the International Criminal Court. • UN Security Council Resolution S/RES/1612 (2005). • UNHCR (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, <i>Summary Note on UNHCR's Strategy and Activities for Girls and Boys of Concern to UNHCR</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
25	Has a Participatory Assessment been conducted at least once during the reporting year?	YES	<input type="checkbox"/> Sex	Community services/ Development
			<input type="checkbox"/> Age	General
RATIONALE Mainstreaming age, gender and diversity means that the meaningful participation of refugee women, men, girls and boys of all ages and backgrounds is integral to the design, implementation, monitoring and evaluation of all UNHCR policies and operations. Participatory Assessment ensures the participation of refugees in the annual assessment				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Systematization form for each subgroup discussion; Participatory Assessment Prioritization Report form, COP, APR, reports of findings				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Systematic Participatory Assessment with refugee women, men, girls and boys of all ages from all backgrounds will be conducted from mid-September to end October each year in preparation for project submissions in November, the annual protection and country reports and the country operations planning exercise the following year together with the comprehensive needs assessment. • The Participatory Assessment will build on existing practices and establish a system-wide approach to Participatory Assessment with refugees, internally displaced persons and returnees to support age, gender and diversity mainstreaming, as well as promoting Participatory Assessment as a regular working methodology. • Country multi-functional teams, including partners, together with refugees will systematize the information gathered and analyze it at the annual participatory planning workshops. The operational response will be built on an analysis of the protection needs of refugee women, men, girls and boys and inequalities based on differences. Programmes will build on the priorities, capacities and solutions proposed by the refugees themselves in response to the identified protection risks. • The information will be used to substantiate the project submissions, annual protection reports and Country Operations Plans. It will also support the standard comprehensive needs assessment presented in Country Operations Plans with a view to highlighting unmet needs. • The UNHCR Tool for Participatory Assessment in Operations will assist in guiding the process. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 12. • Standing Committee 20th Meeting, <i>Reinforcing a Community Development Approach</i>. (EC/51/SC/CRP.6, 15 February 2001). • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (2001) <i>UNHCR's Five Commitments to Refugee Women Memorandum of the High Commissioner to All Offices</i> dated 12 December 2001. UNHCR, Geneva. • UNHCR, (1997) <i>Five Priority Issues related to Refugee Children IOM/40/97-FOM/47/97</i> of the High Commissioner of 15 July 1997. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
26	Percentage of female members in camp management committees	50%	<input type="checkbox"/> Sex	Community services/ development
			<input type="checkbox"/> Age	Camp management
RATIONALE This indicator serves to measure the empowerment of refugee women and their participation in leadership.				
METHODS OF MEASUREMENT Numerator: Total number of refugee women in camp management committees at the end of reporting period Denominator: Total number of refugee representatives in camp management committees at the end of reporting period				X 100 = %
DATA SOURCES Lists of camp management committees or other equivalent refugee leadership bodies, lists of camp representatives and camp managers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • It is also one of the UNHCR policy priorities on refugee women and one of the High Commissioner's Five Commitments to Refugee Women. • These committees may include Administration, Food, Health, Shelter, Water and Sanitation (WATSAN), Gender Equity, Youth, Education, Persons with Special Needs, and Security. • Women members of camp management committees should receive leadership training. Many refugee women lack practice expressing themselves in public because public speaking is often perceived as a male prerogative. • Women's participation means not only physical presence at meetings but also voicing their concerns and opinions. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2002) <i>UNHCR's Participatory Planning in UNHCR. A Practical Guide</i>. UNHCR, Geneva. • UNHCR, (2003) <i>UNHCR Response to the three Evaluations/ Assessment of Refugee Women, Children and the Community Services Function</i>. UNHCR, Geneva. • UNHCR's Five Commitments to Refugee Women Memorandum of the High Commissioner to all Offices dated 12 December 2001. • UNHCR, (2001) <i>Reinforcing a Community Development Approach</i>, UNHCR Policy Document, Standing Committee, 20th Meeting, 15 February 2001. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA																																					
27	Percentage of needs met for sanitary materials	100%	<input type="checkbox"/> Sex ✓	Community Services/development																																					
			<input type="checkbox"/> Age	Targeted Community Assistance																																					
RATIONALE To meet the basic and protection needs of refugee women and girls to uphold their dignity and self-esteem, one of the UNHCR's Five Commitments to Refugee Women.																																									
METHODS OF MEASUREMENT Numerator: Cost of sanitary materials provided (US\$) during the reporting period Denominator: Cost of providing adequate sanitary materials (US\$) during the reporting period				X 100 = %																																					
For example, for a total female population of 48,000 (48% of the total population of 100,000), calculate the total number of women of menstruating or reproductive age (13-49). In this sample case, population statistics show this population as 28,000. The first figure to find is the value of what was actually distributed to the women during the year. The second figure will be calculated on the basis of what each woman should have received. Using the example in the table below, the value of the sanitary kit actually distributed compared to the kit that should have been distributed to reach the standard is $98,200/189,000 = 0.5196 \times 100 = 52\%$.																																									
<table border="1"> <thead> <tr> <th>Item</th> <th>Std.</th> <th>Price per unit</th> <th>Actual distribution</th> <th>Value</th> <th>Std. distribution</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Absorbent cotton</td> <td>2 square meters per person per 6 months</td> <td>US\$ 0.75 per square meter</td> <td>98,000 square meters</td> <td>US\$ 73,000</td> <td>112,000 square meters</td> <td>US\$ 84,000</td> </tr> <tr> <td>Under-pants</td> <td>6 per person per year</td> <td>US\$ 0.40 per pair</td> <td>0 pairs</td> <td>0</td> <td>168,000 pairs</td> <td>US\$ 67,200</td> </tr> <tr> <td>Soap</td> <td>250 g per person per month</td> <td>US\$ 0.45 per kg</td> <td>56,000 kg</td> <td>US\$ 25,200</td> <td>84,000 kg</td> <td>US\$ 37,800</td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td></td> <td>US\$ 98,200</td> <td></td> <td>US\$ 189,000</td> </tr> </tbody> </table>							Item	Std.	Price per unit	Actual distribution	Value	Std. distribution	Value	Absorbent cotton	2 square meters per person per 6 months	US\$ 0.75 per square meter	98,000 square meters	US\$ 73,000	112,000 square meters	US\$ 84,000	Under-pants	6 per person per year	US\$ 0.40 per pair	0 pairs	0	168,000 pairs	US\$ 67,200	Soap	250 g per person per month	US\$ 0.45 per kg	56,000 kg	US\$ 25,200	84,000 kg	US\$ 37,800	Total				US\$ 98,200		US\$ 189,000
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DATA SOURCES Registration, clinic, and distribution reports; purchase order logs; committee reports on women's issues; refugee women; implementing partners; and UNHCR staff																																									
FREQUENCY OF MEASUREMENT Annually																																									

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>NOTES</p> <ul style="list-style-type: none"> • This group includes girls and women ages 13-49 years old and does not correspond to the reproductive age group and UNHCR age groupings. • The sanitary material kit includes either disposable napkins (12 per person per month) or reusable, absorbent cotton material (2 meters long per person per 6 months), 6 underpants per person per year, and a 2.5 g bar of soap per person per month (in addition to soap provided to the whole population). • This indicator is linked to core indicator no. 5 (Schools with structured retention initiatives (girls) (%)) in the Education module. • Costs for transport and logistics should not be incorporated in the calculations. The indicator gives relative value of the kit, however does not yield specific information on which items were not distributed from the kit, or the value of importance of the items to the beneficiaries. Local market values of items may differ from other locations where items were purchased. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR's Five Commitments to Refugee Women Memorandum of the High Commissioner to all Offices dated 12 December 2001 • UNHCR, (2005) Report on the High Commissioner's Five Commitments to Refugee Women. Standing Committee 33rd Meeting. EC/55/SC/CRP.17, 3 June 2005 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
28	Percentage of food beneficiaries entitled to food who received food during latest food distribution	100%	<input type="checkbox"/> Sex ✓	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Food and Nutrition
RATIONALE This indicator is intended to indicate coverage of food assistance to those beneficiaries identified as entitled to this service.				
METHODS OF MEASUREMENT Numerator: Number of food beneficiaries entitled to food assistance who received food during latest food distribution Denominator: Number of beneficiaries entitled to food assistance during latest food distribution				$\times 100 = \%$
DATA SOURCES Food basket monitoring				
FREQUENCY OF MEASUREMENT Every food distribution cycle (e.g. monthly)				
NOTES <ul style="list-style-type: none"> This indicator reflects <i>"entitlement of receiving food"</i>: number of beneficiaries entitled to food assistance who received food through means of ration card. It is expressed as total number of beneficiaries received food assistance out of those who are entitled to food assistance. This can show gaps in protecting refugees in relation to food provision for those identified as being in need of food assistance. For example, newborn babies are entitled to food distribution even though they do not yet eat solid food. However, they are not always included on the food beneficiary list. Therefore this indicator will point to gaps between entitlement and actual coverage. 				
REFERENCES <ul style="list-style-type: none"> International Covenant on Economic, Social and Cultural Rights, Art. 11. Universal Declaration of Human Rights, Art. 25. Voluntary Guidelines Rome, 2003. Rome Declaration on World Food Security (World Food Summit, 1996). 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
29	Average numbers of kilocalories per person per day	≥ 2,100	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Food and Nutrition
<p>RATIONALE To ensure access to adequate quality and quantity of food to support life and preserve dignity of people afflicted by conflict or adversity. In some operations, the planning figure of 2,100 kilocalories is adjusted downwards or upwards depending on refugee access to other sources of food and on other factors.</p>				
<p>METHODS OF MEASUREMENT Gross estimate Numerator: Total number of kilocalories distributed per day Denominator: Total population at the end of reporting period Monitoring estimate For food basket monitoring, see WFP/UNHCR methodology for weighing food ration items from randomly sampled households after direct distribution. Survey approximately 10% of the population leaving distribution sites (all of which are surveyed regularly) or monitor post-food distribution (WFP methodology). UNHCR Commodity Distribution, 1997 highlights various monitoring and surveys related to food distribution. Survey measure Food consumption surveys are the most precise measure of actual food intake but are expensive and complex.</p>				
<p>DATA SOURCES WFP/UNHCR joint assessments, other implementing and operational partners. To monitor nutrition value of general food ration, use NutVAL software developed by UNHCR and WFP.</p>				
<p>FREQUENCY OF MEASUREMENT After each distribution cycle</p>				
<p>NOTES</p> <ul style="list-style-type: none"> In both emergency and stable situations, the average 2,100 kilocalories per person per day should be adapted to the population's level of activity, climate, health and nutrition status and demographic distribution (e.g., the percentage of elderly and young children). Pregnant women require an average of 285 extra kilocalories per day, and lactating women require an average of 500 extra kilocalories per day, as well as daily folic acid and iron supplementation. The quantity of the general food ration alone is not enough and quality of food is of great importance in order to ensure provision of adequate food ration in both macro nutrients and vitamins and minerals. e.g. inclusion of fortified blended food item as part of the general ration or ensure access to a fresh vegetable source in order to meet daily requirements of these nutrients. For those operations where a general food ration scale is adjusted to a higher or less than 2,100 figures based on a joint UNHCR-WFP assessment mission (JAM) result, the agreed figure should be stated as well. This does not mean temporary change in the figure of 2,100 Kcal due to food pipeline interruptions. The average number of Kcal distributed per person per day reflects the actual Kcal amount distributed and not the planned Kcal amount. The joint UNHCR-WFP NutVal Software version 2004 is available for this purpose and can be used for planning or analyzing general food ration information collected from food basket monitoring. Every effort should be made by both UNHCR and WFP staff to jointly implement post food distribution monitoring (PDM) at household level to understand better how food aid is used and if other food sources are available to the household. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • International Covenant on Economic, Social and Cultural Rights, Art. 11. • Universal Declaration of Human Rights, Art. 25. Voluntary Guidelines Rome, 2003. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • UNHCR (2001) <i>Health, Food and Nutrition Toolkit</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
30	Percentage of female members in food distribution committees	50%	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Food and Nutrition
RATIONALE This indicator is crucial in measuring the empowerment of refugee women and their participation in leadership. It is also one of the UNHCR's policy priorities on refugee women and one of the UNHCR's Five Commitments to Refugee Women.				
METHODS OF MEASUREMENT Numerator: Total number of refugee women in food distribution management committees at the end of the reporting period Denominator: Total number of refugee representatives in food distribution management committees at the end of reporting period				$\times 100 = \%$
DATA SOURCES Lists of camp management committees or other equivalent refugee leadership bodies, lists of camp representatives and camp managers				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> According to UNHCR's Five Commitments to Refugee Women: "UNHCR will encourage the active participation of women in all refugee committees in urban, rural and camp settings and return areas. The final aim is to ensure that 50% of representatives are women". The aim of this commitment is to ensure that protection concerns and views of refugee women are heard and that they participate equally with men in decision-making processes within management structures. 				
REFERENCES <ul style="list-style-type: none"> UNHCR's Five Commitments to Refugee Women. Memorandum of the High Commissioner to all Offices dated 12 December 2001. UNHCR, (2005) <i>Report on the High Commissioner's Five Commitments to refugee Women. Standing Committee 33rd Meeting</i>. EC/55/SC/CRP.17, 3 June 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
31	Latest nutritional survey conducted (mm/yy)	Annual	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Food and Nutrition
RATIONALE To ensure baseline information and monitoring system is established and to be able to adjust the nutrition programme based on the results of the nutrition survey conducted.				
METHODS OF MEASUREMENT Record the date when nutritional survey was conducted				
DATA SOURCES UNHCR, WFP and NGOs				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Key quantitative indicators in a standard nutrition survey include anthropometric measurements, morbidity, mortality, vaccination coverage, anaemia status and other micronutrients. Qualitative aspects include infant feeding practices, causes of malnutrition, food security and related factors. • Malnutrition including micronutrient deficiency is associated with increased risk of mortality and morbidity for affected individuals. Therefore, when rates of malnutrition are high, it is important to ensure corrective as well as preventive measures. 				
REFERENCES <ul style="list-style-type: none"> • WHO, (2000) <i>Management of Nutrition in Major Emergencies</i>. WHO, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • MSF (1995) <i>Nutrition Guidelines</i>. MSF. • Save the Children, (2004) <i>Emergency Nutrition Assessment. Guidelines for Field Workers</i>. Save the Children, London. • UNHCR (2001) <i>Health, Food and Nutrition Toolkit</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
32	Rate of malnourished 6-59 mths children (Global Acute Malnutrition) measured by Z-score	< 5%	☑ Sex	Food, Nutrition and Health and HIV/AIDS
			☑ Age	Survey data (if available)
RATIONALE To assess the nutrition status in children 6-59 months as a proxy for refugee populations, an impact indicator that reflects delivery of other social and service commodities including health, food, and water. This includes both moderate and severe malnutrition (weight for height).				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Nutrition survey reports, government, UNHCR and World Food Programme (WFP), implementing partners				
FREQUENCY OF MEASUREMENT Annually. However, surveillance through nutrition screening could be done on a monthly basis.				
NOTES <ul style="list-style-type: none"> • It is recommended that the nutrition surveys include mortality, vaccination status and infant feeding practices using a different sampling frame. In addition, it is important that the report describes the probable causes of malnutrition. Immediate causes of malnutrition include diseases and inadequate food intake. Other malnutrition indicators on micronutrients status are gradually collected during the nutrition-mortality survey. They include anaemia, vitamin A and iodine deficiency prevalence. In some nutrition surveys, other rare micronutrient deficiencies (Pellagra, vitamin C deficiency, etc.) are assessed. • Preferred measure of global acute malnutrition among children 6–59 months old: weight for height with <–2 SD Z scores below National Center for Health Statistics (NCHS) and Center for Disease Control (CDC)-normalized reference or nutritional oedema. Severe malnutrition is defined as <–3 SD Z scores below NCHS/CDC-normalized reference or oedema. • Monitoring and surveillance: ongoing measurement of current malnutrition (weight for height) and underweight (weight for age). MUAC is the best index to use in community screening followed by weight for height measurement for those who need admission in the feeding programme. • Training and functioning anthropometric equipment are important for obtaining accurate information on nutritional status. • Prevalence of global acute malnutrition = prevalence of severe acute malnutrition plus the prevalence of moderate acute malnutrition. • Prevalence of severe acute malnutrition = number of severely malnourished children divided by total number of children measured multiplied by 100. • Prevalence of moderate acute malnutrition = Number of moderately malnourished children divided by the total number of children measured multiplied by 100. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child Art. 25. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • MSF, (1995) <i>Nutrition Guidelines</i>. MSF. • Save the Children (2004) <i>Emergency Nutrition Assessment. Guidelines for Field Workers</i>. Save the Children, London. • UNHCR (2001) <i>Health, Food and Nutrition Toolkit</i>. UNHCR, Geneva. • WHO, (2000) <i>Management of Nutrition in Major Emergencies</i>. WHO, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
33	Number of persons per primary health care facility	< 10,000	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Health
RATIONALE To measure a refugee population's access to quality primary health care to minimize avoidable morbidity and mortality.				
METHODS OF MEASUREMENT Numerator: Total population served by primary health care facility at the end of reporting period Denominator: Number of functioning primary health care facilities at the end of reporting period				
DATA SOURCES Health facility records, implementing partner records for health staff, camp administration				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> A functioning primary health centre is defined as an outpatient facility that provides essential community promotive, preventive, curative and rehabilitative care for the most common causes of illness and death; conducts communicable disease control, reproductive health care (including sexually transmitted infections, family planning, and safe motherhood), immunization, mental health, and treatment of chronic diseases; and should have a functioning health information system, essential drug supply and management system. Water, latrines, shaded waiting area and incinerators and other essential supplies and equipment for universal precautions against HIV transmission must all be available. Treatment should be based on standard protocols established by the lead health agency. There should be at least two full-time qualified health staff working in the clinic (doctors, nurses or physicians assistants) and the clinic should be open at least 5 days a week, with provisions for out-of-hour services and emergency referrals. A service that does not meet these criteria should not be considered as a functioning primary health care facility. An outpatient service of a hospital can be considered a primary health centre if it provides first point of call services and meets the above criteria. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 23. International Covenant on Economic, Social and Cultural Rights, Art. 12. Convention on the Rights of the Child Art. 24. Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
34	Annual number of consultations at primary health care facilities per person	1-4	<input type="checkbox"/> Sex ✓	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Health
RATIONALE To measure primary health care service accessibility through service utilization rates in order to minimize avoidable morbidity and mortality.				
METHODS OF MEASUREMENT Numerator: Number of consultations to primary health care facilities during reporting period Denominator: Total population served by primary health care facilities at end of reporting period				
DATA SOURCES Partner Health Information System				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • This indicator gives an idea of both under-utilization and over-utilization of health care facilities. • Data should be reviewed disaggregated by sex at the Field level and any differential in utilization rate by sex investigated as this may indicate different access to services on the basis of gender. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
35	Percentage of live births attended by skilled personnel excluding TBAs	≥ 50%	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Health
RATIONALE To minimize maternal mortality by ensuring that births are attended by trained health personnel who can diagnose and refer complications. An increase in the proportion of births attended by trained health personnel is a Millennium Development Goal.				
METHODS OF MEASUREMENT Numerator: Number of live births attended by skilled personnel (excl. TBAs) during reporting period Denominator: Number of live births during reporting period				X 100 = %
DATA SOURCES Health service data from UNHCR, government, and implementing partners. Use health centre reports for birth records or collect data through household surveys.				
FREQUENCY OF MEASUREMENT Quarterly				
NOTES <ul style="list-style-type: none"> • Maternal mortality data is difficult to collect. In small populations, maternal mortality is rare and can fluctuate widely from year to year, making data difficult to interpret. • Skilled health personnel are people with midwifery skills (doctors, midwives, or nurses) who have been trained to proficiency in skills necessary to manage normal deliveries and to diagnose or refer obstetric complications. Traditional birth attendants (trained or not) are excluded. • It is estimated that 25% of the refugees are women in reproductive health and that 20% of them are pregnant at any given time. • The 52% of births attended by trained health personnel in developing countries recorded in UNICEF's State of the World's Children (2001) represents the baseline in the stable phase and should increase incrementally each year by at least 5%. • The Minimum Initial Services Package should be implemented in the emergency phase (see UNHCR 1999). This package includes promoting and distributing clean delivery kits. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • UNHCR, (1999) <i>Reproductive Health in Refugee Situations, an Inter-Agency Field Manual</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
36	Percentage of newborn children with low birth weight (< 2,500 g) (weighed within 72 hrs)	< 15%	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Health
RATIONALE To reduce incidence of low birth weight and improve survival of infants through better nutrition and health services.				
METHODS OF MEASUREMENT Numerator: Total number of newborns < 2.500 g during reporting period Denominator: Total number of newborns weighed within 72 hours during reporting period				X 100 = %
Survey: MCH statistics for all newborns over 1 year for the total number of newborns weighing less than 2.5 kg.				
DATA SOURCES Monthly maternal and child health (MCH) statistics, records of traditional birth attendants (TBAS) and midwives				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> Infants who weigh less than 2500 g at birth are categorized as low birth weight babies. Since many infants are not weighed at birth and those who are weighed may be a biased sample of all births, reported birth weight cannot, normally, be used to estimate the prevalence of low birth weight among all children. Birth weight is a powerful predictor of infant growth and survival. Low-birth weight infants begin life disadvantaged and have poor survival rates. Infants may have low birth weight because of inadequate intrauterine growth or nutrition or premature birth. Risk factors include decreased maternal height (stunting), below-normal pre-pregnancy weight, low energy intake, and low pregnancy weight gain. Proper preventive maternal care and nutrition may reduce incidence of low birth weight. Access to adequate food, micronutrients, and antenatal care, along with other socioeconomic, cultural, and behavioral characteristics of mothers, affects this indicator. A system should be established to capture the weight of newborns within the first 24 hours post-partum, especially where home births are the norm. Scales used to measure birth weight should be recalibrated regularly and the quality of measurements monitored. Incentives for mothers such as birth certificates and kitchen utensils may increase coverage of the total number of newborns weighed. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>REFERENCES</p> <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004a) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
37	Measles vaccination coverage	≥ 90%	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	Survey data (if available)
RATIONALE To assess measles immunization coverage.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Survey using Standard Expanded Programme of Immunization (EPI) cluster survey or Lot Quality Assurance Survey (LQAS)				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • As measles has a high potential of outbreaks and mortality, mass vaccination of children against this disease is a high priority for UNHCR populations of concern. Risk of outbreak is higher in crowded emergency settings, in large population displacement and in cases of high malnutrition levels. • In some settings, older children may have escaped immunization campaigns and measles disease. This is the reason why immunization of all children below the age of 15 years is recommended. However, when mass vaccination is impossible, priority should be given to immunization of children aged 6-59 months. • Measles is one of the 5 main causes of death of children under the age of five years, and this danger may be further aggravated in refugee situations. • Children should be immunized before the age of 1 year in order to reduce the mortality and the risk of an epidemic. • Immunization against measles cannot be given before the age of six months due to mother antibodies in the infant blood, which make the vaccination ineffective. • Different vaccination schemes are implemented according to the situation and the national policy. However, each child should receive a first dose of measles vaccine between the age of six and nine months, and in any case before the age of 12 months. 				
REFERENCES <ul style="list-style-type: none"> • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
38	Numbers of condoms distributed per person per month	≥ 1 per person per month	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE To measure the effectiveness of condom distribution systems.				
METHODS OF MEASUREMENT Numerator: Number of condoms distributed per month Denominator: Total population at the end reporting period				
DATA SOURCES Health and community service partners records				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • The conventional formula for calculating condom requirements is based on the assumption that about 20% of the population are sexually active males, of these, 20% use 12 condoms per month, plus 20% wastage and loss. The corresponding quantity is provided in the Emergency Reproductive Health Sub-kit No. 1: (condoms)/10,000/ 3 months (UNFPA, 2003). • List of potential outlets should include health facilities, community centers, youth centers, bars, market places, food distribution sites and outreach workers. 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines for HIV/AIDS Interventions in Emergency Settings</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005- 2007</i>. Standing Committee 32nd Meeting. EC/55/SC/CRP.8, 16 February 2005. • UNFPA, (2003) <i>The Reproductive Health Kits for Crisis Situations</i>. Second edition. UNFPA, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
39	Have stocks of condoms run out for more than a week?	NO	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE This indicator measures distribution of condoms at designated points at any one point in time. It reflects the success of attempts to broaden the distribution of condoms so that they are more widely available to people likely to need them and at locations and times when people are likely to need them.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Health and community service partners records				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • List of potential outlets should include health facilities, community centers, youth centers, bars, market places, food distribution sites and outreach workers. • Outlet types may be analyzed by the target populations themselves. This provides an idea of the adequacy of efforts to meet the needs of people with potentially high-risk behavior, such as young people or those in mobile occupations. • A limitation of the measure is that it provides only a "snapshot" of availability at a single point in time. Where distribution is relatively regular, this poses no major problems. However, when there are serious disruptions in condom supply at the central level, the repercussions may be felt simultaneously at a large majority of venues. If a survey is carried out at this time, it will appear as though the peripheral distribution system is inadequate whereas in fact the problem lies at the central level. In countries where quarterly retail surveys are undertaken, it may be possible to obtain an annual average that reflects better the consistency of supply. 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines for HIV/AIDS interventions in Emergency Settings</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005 – 2007</i>. Standing Committee 32nd Meeting. EC/55/SC/CRP.8, 16 February 2005. • UNFPA, (2003) <i>The Reproductive Health Kits for Crisis Situations</i>. Second edition. UNFPA, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
40	Is antiretroviral therapy available in / for hosting community / refugees?	See notes	<input type="checkbox"/> Sex	Food, Nutrition and Health and HIV/AIDS
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE Antiretroviral therapy (ART) is a life saving and essential intervention. Refugees should have equivalent access to HIV interventions as those of surrounding host populations.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Implementing or operational partners				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • As with all public health interventions, refugees should receive similar services as those available to surrounding host communities while ensuring that minimum essential services are provided. • Low cost refers to a co-payment as opposed to non-subsidized ART. 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines for HIV/AIDS Interventions in Emergency Settings</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005-2007</i>. Standing Committee 32nd Meeting. EC/55/SC/CRP.8, 16 February 2005. • UNFPA, (2003) <i>The Reproductive Health Kits for Crisis Situations</i>. Second edition. UNFPA, New York. • UNHCR, (2005) <i>Draft Antiretroviral Therapy (ART) Concept Paper for Refugees</i> United Nations High Commissioner for Refugees. Draft, 24 August 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
41	Average quantity of water available per person per day (liters)	≥ 20 liters	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
RATIONALE To measure the amount of safe water distributed for camp inhabitants.				
METHODS OF MEASUREMENT Numerator: Total volume of water distributed during 1 month minus water used in communal infrastructure minus 10% for spillage and waste (# of liters of water available per day) at the end of reporting period Denominator: Number of days in the month x number of beneficiaries in camp at the end of reporting period The following describes how one can estimate quantities of daily water collected from non-metered sources: Springs Quantity of water collected in the container in 1 minute x 720 = daily water available based on a collection period of 12 hours Wells 1. Based on the number of containers filled, estimate over 1 hour the quantity of water taken by users, excluding wastage. 2. Repeat the measure later 3 or 4 times the same day and calculate the average water collected per hour. 3. Derive how many hours a day the water source is in use. 4. Calculate water availability per day = average hourly yield times x daily hours of operation. If only a sample of wells is measured, include wells from all over the camp and especially from the highest and lowest points. Hand pumps - Repeat as for wells Rainwater harvested for drinking (unrealistic in most refugee camps) Either evaluate the surface covered with roofs and multiply by 75% of the average annual rainfall or evaluate the quantity of rainwater harvested through a household survey. Tap stands Estimate the volume of water collected, excluding wastage, in each distribution cycle of the day. This can be done by visiting various tap stands throughout the camp for the total duration of the distribution cycle. Extrapolate result by the numbers of taps in the camp to estimate the water supply. Include taps from all over the camp and especially from the nearest and furthest points from the storage tank. This can be compared with the pumping volumes measured. It is very important that, regardless of the type of the water source, any inequalities in water distribution between different areas or different communities or individuals within the camp can be identified. For instance, if 50% of the camp are getting 30L per day and the other 50% are getting 10L per day, the overall camp average amounts to 20L per person per day, while the actual distribution pattern can not be considered as satisfactory. Household surveys represent a particularly viable method of identifying such inequalities in distribution.				
DATA SOURCES Implementing partners, camp layout maps, Global Information System (GIS), registration data, government (meteorological institute), household surveys				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
FREQUENCY OF MEASUREMENT				
Accounting for seasonal differences in availability, and averaging the two figures (however, seasonal needs should be considered for planning purposes). Field: More frequently to show seasonal variations.				
NOTES				
<ul style="list-style-type: none"> • 7L per person per day is the minimum needed for survival (drinking and cooking). When other uses of water are included (i.e. domestic and personal hygiene) this figure rises to a minimum of 20L/person/day. Studies show that any increases in water supply go towards bathing and washing. Therefore, the positive public health consequences of adequate quantities of water cannot be over-emphasized. Epidemiological studies show consistently the importance of adequate water and proper sanitation as the primary preventative mechanisms for water-borne and water-related disease prevention. • The standard of 20 liters per person per day covers only domestic and individual needs. If agricultural activities are planned, potential competition between livestock or plant needs and human needs must be considered. • Seasonality affects water availability. More water is usually available in the rainy season and less in dry seasons, and water needs increase with higher air temperature and increased physical activity. • Supplementary and therapeutic feeding programs, hospitals, clinics, and schools need sufficient water for food preparation and basic hygiene in addition to the daily supply calculated above. 10% is regarded as a minimum for leakage; in established city settings, this value lies usually at 20% or higher, so any checks on leakage values will lead to an increase in the accuracy of per capita delivery estimation. 				
REFERENCES				
<ul style="list-style-type: none"> • UNHCR, (1992) <i>Water Manual for Refugee Situations, Programme and Technical Support Section</i>. UNHCR, Geneva. • UNHCR, (2000) <i>Handbook for Emergencies</i>, 2nd Edition 2000. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
42	Number of persons per usable water tap	< 80	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
<p>RATIONALE It is important that not too many people rely on a limited number of taps in order</p> <ul style="list-style-type: none"> • To reduce pollution around taps due to litter and stagnant water; • To reduce tap stand damage (the larger the population served per tap the higher the maintenance demands); • To reduce queuing time and, hence, conflicts resulting from too many people using a single source or outlet of water; • To improve water collection and lessen the burden on the beneficiaries. 				
<p>METHODS OF MEASUREMENT Numerator: Total population using water taps at the end of reporting period Denominator: Total number of functional taps available to refugees excluding water points in communal infrastructure such as schools and hospitals at the end of reporting period</p>				
<p>DATA SOURCES Implementing partners, camp layout maps, GIS, observation, surveys</p>				
<p>FREQUENCY OF MEASUREMENT Initially once when a new site is established; subsequently on a semi-annual basis.</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • There might be some cases when one tap stand has several taps or faucets. • When different types of water sources are used in the camp (e.g. taps AND wells), appropriate distinction should be made to see how many primarily rely on either source. The subset of the population that is reliant on taps should be calculated as follows: Numerator: Total number of people reliant on taps at the end of reporting period Denominator: Total number of taps at the end of reporting period • If people have access to both water taps and wells then it may be that the apparent population with access to water points appears to be higher than the total number of people (as they are using more than one source of water). Both figures for tap coverage and well coverage should be reported as standards for taps; and wells and hand pumps are not the same. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (1992) <i>Water Manual for Refugee Situations</i>, Programme and Technical Support Section. UNHCR, Geneva. • UNHCR, (2000) <i>Handbook for Emergencies</i>, 2nd Edition. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
43	Number of persons per usable well/hand pump	< 200	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
<p>RATIONALE</p> <p>It is important that not too many people rely on a limited number of wells or hand pumps in order:</p> <ul style="list-style-type: none"> • to reduce pollution around the water points due to litter and stagnant water; • to reduce wellhead damage (the larger the population served per water point the higher the maintenance demands); • to reduce queuing time and, hence, conflicts resulting from too many people using a single source or outlet of water; • to improve water collection and lessen the burden on beneficiaries. 				
<p>METHODS OF MEASUREMENT</p> <p>Numerator: Total population using wells/hand pumps at the end of reporting period Denominator: Total number of functional wells and hand pumps available to refugees excluding those used only for communal infrastructure such as schools and hospitals at the end of reporting period</p>				
<p>DATA SOURCES</p> <p>Implementing partners, camp layout maps, GIS, observation, surveys</p>				
<p>FREQUENCY OF MEASUREMENT</p> <p>Initially once, when a new site is established; subsequently on a semi-annual basis</p>				
<p>NOTES</p> <p>In the case of several different types of water sources being used in the camp (e.g. wells AND taps) then appropriate distinction should be made to see how many primarily rely on either source. If there are several sources of water in the camp, then the subset of the population that is reliant on wells or hand pumps should be calculated.</p> <p>Numerator: Total number of people reliant on wells or hand pumps at the end of reporting period Denominator: Total number of well and hand pumps at the end of reporting period</p> <p>If people have access to both water taps and wells then it may be that the apparent population with access to water points appears higher than the total number of people as they are using more than one source of water. Both figures for tap coverage and well coverage should be reported as standards for taps; and wells and hand pumps are not the same.</p> <p>Any problems with seasonality of water being supplied by hand pumps or wells should be noted.</p>				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (1992) <i>Water Manual for Refugee Situations</i>. Programme and Technical Support Section. UNHCR, Geneva. • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd edition. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
44	Percentage of population living within 200 m from water point	100%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
RATIONALE To mitigate the social burden of water collection by having distribution points at a reasonable distance from dwellings; to ensure that people collect adequate quantities and do not resort to nearby unsafe water sources; and to ensure people are not at risk of attack when required to walk long distances to fetch water.				
METHODS OF MEASUREMENT Numerator: Total number of households within 200 meters of water points x average number of people per household Denominator: Total population				$X 100 = \%$
DATA SOURCES Camp layout maps, GIS, surveys, registration data				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • It is very important to stress that reasonable distance between dwellings and water points that are located in secure locations in the camp greatly enhances access to safe water and reduces the risk of SGBV during water collection. • Carrying water over longer distances can also use up substantial proportions of the energy supplied by the daily ration. • The most effective way to assess the number of houses within 200 meters of the water point is to use either a reasonable camp layout map or GIS mapping procedures, if these exist. Use a scaled camp map with the functioning water points plotted to calculate the number of households within 200 meters of water points. If the camp is mapped with GIS, this information can be automated. The precise number of houses can be easily retrieved. If no camp map exists then a household survey exercise is necessary – forms and methodology are available from Technical Support Section/DOS (contact HQT501@unhcr.ch). 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (1992) <i>Water Manual for Refugee Situations</i>. Programme and Technical Support Section. UNHCR, Geneva. • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
45	Percentage of positive faecal coliform detected at distribution points per 100 ml sample during the year	0%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
RATIONALE This indicator aims to ensure a safe level of bacteriological content in water for human consumption in order to reduce transmission of faecal-oral diseases such as the outbreak of cholera in emergency situations.				
METHODS OF MEASUREMENT Numerator: Total number of faecal coliform results that were in excess of 0 colony forming units/100 ml per year Denominator: Total number of faecal coliform tests undertaken per year				X 100 = %
DATA SOURCES Water test surveys				
FREQUENCY OF MEASUREMENT In emergencies, weekly monitoring should be undertaken. A more frequent routine will be required in case of a cholera epidemic or similar outbreak situation. In a stable situation, monitoring should be carried out at least once every 2 weeks during the wet season, and monthly in the dry season.				
NOTES <ul style="list-style-type: none"> • Good quality water is especially important for infants, so maintaining good quality water can help reduce infant mortality. • As a general rule of thumb, one water quality analysis per 5000 beneficiaries per month should be undertaken – the WHO drinking water guidelines elaborate further on this. In field conditions, only basic bacteriological analyses are made, mainly for Total Coliforms (TC) and Faecal Coliforms (FC). TC indicates the general level of contamination/effectiveness of treatment of the water in piped systems. It is undertaken after incubation of the sample grown on nutrient at 37°C. FC indicates the level of faecal contamination of the water and can be undertaken after incubation of samples grown on nutrients at 44°C. Faecal coliform testing is the <u>preferred</u> test, especially for all sources of water and for non-piped water. • The quality of drinking water is controlled through a combination of protecting water sources, controlling treatment processes, managing water distribution and handling, as well as hygiene promotion. To ensure adequate bacteriological quality, all these complementary activities must be implemented. It is important that every time a water quality analysis is undertaken, a sanitary risk evaluation is also carried out – this quantifies risk levels at water sources and at household level and also raises awareness among the beneficiaries on how to best protect water quality at their water point. • New water sources should be tested invariably for physical, chemical, bacteriological and other impurities. • The water quality testing protocol should be based on and designed in accordance with the level of perceived health risk which can be inferred from the health statistics of the population and other local environmental and social factors. • Sufficient water testing kits are a necessary input to measure this indicator. It is important that a trained person undertake this work with the correct consumables. Water testing kits must be properly maintained to function properly. • Chlorine residuals must be monitored as well; their concentration should lie in the range of 0.2 to 0.5 ppm. Even when water quality is monitored regularly, in case of doubt or of higher incidents of water-borne diseases, verify immediately the levels of chlorine residuals in water. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
REFERENCES <ul style="list-style-type: none">• WHO, (2004) <i>Drinking Water Guidelines</i>. 3rd edition, Vol. 1. Geneva, Switzerland.				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
46	Percentage of households with sufficient daily water storage capacity	100%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Water
<p>RATIONALE</p> <p>It is important to have sufficient water storage at the household level so as:</p> <ul style="list-style-type: none"> • to reduce the risks of water contamination by minimization of the use of the same vessels for water collection and storage; • to enhance water quality as the increased storage time for water allows for extra settling and increased die-off of microbes; • to prevent households from resorting to unprotected sources if lack of storage means water is needed outside supply times; • to reduce the burden on women and children as sufficient storage means they do not have to collect water outside the designated distribution times or from unprotected/distant sources (and so sufficient household storage indirectly reduces the opportunities for violent attack). 				
<p>METHODS OF MEASUREMENT</p> <p>Numerator: Number of families/households with 10L per person per day storage capacity</p> <p>Denominator: Total number of families/household</p>				X 100 = %
<p>DATA SOURCES</p> <p>Implementing partners, observation, surveys. Random sampling can establish how sufficient household water storage is in the camp.</p>				
<p>FREQUENCY OF MEASUREMENT</p> <p>Initially once, when a new site is established and distribution of jerrycans has been undertaken; subsequently on a semi-annual basis.</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • These recommendations are based on a household capacity of at least 50% of the daily water needed. For a household of 5 persons 35L of storage are needed in an emergency and this should rise to 50L in a stable situation. • The breakdown of this 50L storage for such a family would ideally be as 1 x 20L container, 2 x 10L container and 2 x 5L container. This assumes 2 distribution cycles per day. If there is only 1 distribution cycle then the storage capacity should be increased to 20L/person. • The best type of water storage containers are narrow neck water bottles or jerrycans and these should have a lid. Water pollution is much more difficult from such containers than saucepans etc. as the hands of children etc. can not enter and contaminate the water. • Hygiene promotion should encourage regular water container cleaning sessions. • For water collection, 20L jerrycans ideally should not be used to ensure that excessive loads are not being carried by women and children who are often tasked with water collection and transport. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • WHO, (2004) <i>Drinking Water Guidelines</i>. 3rd Edition, Vol. 1. Geneva, Switzerland. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
47	Percentage of families with latrines	100%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Sanitation
RATIONALE Experience shows that household latrines are better maintained than communal latrines in refugee camps. One latrine per family is the ideal target to decrease the spread of communicable diseases among the refugee population. However, in many refugee situations, one latrine slab per 2 families was found to be an acceptable solution.				
METHODS OF MEASUREMENT Numerator: Total number of households with family latrines at the end of reporting period Denominator: Total number of households at the end of reporting period				X 100 = %
DATA SOURCES Observation, administrative data, implementing partner records – random surveys can confirm latrine coverage on the ground. It is recommended to physically count household latrines in use twice a year, to add monthly new household latrines and to subtract full or collapsed latrines				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • A latrine is only part of the excreta disposal solution – it is necessary to complement this with appropriate hygiene promotion. • Gender disaggregation is unnecessary for family latrines. • Regular cleaning, care, and maintenance are indicators of usable latrines. • Generally, the base of the pit of the latrine should be at least 1.5m above the wet season water table to prevent contamination of the groundwater and should be sited between 6 and 50m from the house. • Latrines should not be uphill and not less than 30 m from the following: wells, surface water, water storage facilities, food storage, food preparation areas. • If people have access to both communal and family latrines then it may be that the apparent population with access to latrines appears higher than the total number of people as they are using more than one latrine type. Both figures – for family and for communal latrine coverage – should be reported. • It is important to note that in certain situations solutions such as families having a designated though shared latrine may be appropriate. For example in Nepal, all families have a <u>designated</u> latrine that is shared with one other family, and this has provided adequate sanitation coverage. Any such solutions which may be appropriate at Field level (though different to the standard of 1 latrine per family outlined here) should be commented on in the response. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
48	Number of persons per drop-hole in communal latrine	≤ 20	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Sanitation
RATIONALE To avoid congestion in latrine use; poor latrine coverage leads to open defecation that will increase the spread of transmissible diseases among the refugee population. A latrine is only part of the excreta disposal solution; it is necessary to complement this with appropriate hygiene promotion.				
METHODS OF MEASUREMENT Numerator: Total population using communal latrines drop holes at the end of reporting period Denominator: Number of communal latrine drop-holes at the end of reporting period				
DATA SOURCES Observation, administrative data, implementing partner records – random surveys can confirm latrine coverage on the ground. It is recommended to physically count twice a year communal latrines in use, to add monthly new communal latrines and to subtract full or collapsed latrines.				
FREQUENCY OF MEASUREMENT Semi-annually				
NOTES <ul style="list-style-type: none"> • The term ‘drop-hole’ indicates the enclosed squatting area in which a person may defecate. Often, a single communal latrine structure may have several drop-holes separated by internal walls. Hence, in this case the number of drop-holes should be used as the denominator, not the number of buildings in the camp. • A latrine is only part of the excreta disposal solution – it is necessary to complement this with appropriate hygiene promotion. • If latrines are separate for women and men, 1) divide the total number of women by the total number of latrine holes (cubicles) for women (= # of women per latrine hole) and 2) divide the total number of men by the total number of latrine holes (cubicles) for men (= # of men per latrine hole). This will give an indication if there are gender imbalance problems in latrine provision. • Regular cleaning, care and maintenance are indicators of usable latrines. • For protection and security against SGBV, lighting is recommended along paths and around latrine facilities, particularly those for women. • Generally the base of the pit of the latrine should be at least 1.5 m above the wet season water table to prevent contamination of the groundwater and should be sited between 6 and 50 m from the house. • Latrines should not be uphill and not less than 30 m from the following: wells, surface water, water storage facilities, and food storage and food preparation areas. • Adequate water must be available for cleaning – this is usually regarded as 1 to 2 L/user/day for hand washing and 2 to 8 L/cubicle/day for cleaning. • Communal latrines are used in the early stages of camp development or if the circumstances do not allow family latrine construction. • If people have access to both communal and family latrines then it may be that the apparent population with access to latrines appears higher than the total number of people as they are using more than one latrine type. Both figures – for family and for communal latrine coverage – should be reported. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd edition. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
49	Number of persons per communal shower head	≤ 50	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Sanitation
RATIONALE To promote personal hygiene in order to reduce the risk and spread of infectious diseases arising from crowded living conditions.				
METHODS OF MEASUREMENT Numerator: Total population using communal showers at the end of reporting period Denominator: Total number of functioning shower heads at the end of reporting period				
DATA SOURCES Partners, surveys, filed observations				
FREQUENCY OF MEASUREMENT Twice a year, physically count shower-heads in use, then monthly add new showers and subtract broken showers				
NOTES <ul style="list-style-type: none"> • If showers are not physically separate from latrines then they should not be counted as showers. • For protection and security against SGBV, lighting is recommended along the paths to and from and around shower facilities for women. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
50	Number of persons per communal refuse pit	≤ 500	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Sanitation
RATIONALE To facilitate safe disposal of garbage in order to reduce vector-borne diseases transmitted by flies and rodents that breed in refuse lying around the camp. Adequate refuse collection and disposal is central to maintaining good community public health.				
METHODS OF MEASUREMENT Count the number of refuse pits in use, even if they are partially filled. Do not count full pits or pits being dug (that are therefore no more or not yet in use). Numerator: Total population using communal refuse pits at the end of reporting period Denominator: Total number of communal refuse pits at the end of reporting period				
DATA SOURCES Implementing partners, Field monitors, surveys, etc.				
FREQUENCY OF MEASUREMENT Semi-annually				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
<p>NOTES</p> <ul style="list-style-type: none"> • Biodegradable wastes are sources of odors and breeding grounds for vector-borne diseases. Also, improper disposal will lead to scavenging by rodents which facilitates disease spread and also scavenging by other animals such as goats, etc. which leads to faecal contamination in the proximity of dwellings. Hence proper disposal is essential. • Refuse pits should be constructed as far from water points as possible, at a minimum distance of 50 m. Depth to water table should also be taken into account when digging refuse pits – shallow water tables (whether all year round or just on a seasonal basis) will flood the pit and will lead to groundwater contamination. • The size of the communal refuse pit for long-term management of solid waste in a camp largely depends on the types of waste generated. However, as a guiding value, it is recommended to allocate 60 cubic meters per 500 people. As these pits are normally operated with the concept of land-fill, the pit is dug gradually (in batches) and the waste collected is periodically covered with a thin layer of back-fill. As such, it is recommended to allocate 50 square meters (assuming 1.2 m deep trench) of land exclusively for communal waste pit per 500 persons. The pit should be well protected by a fence and managed according to the concept of land-fill. • Pits should be fenced off to prevent children from falling in and should be at least at a distance of 100 m from dwellings. • Children can cut themselves with objects from the metal waste; the resulting wounds can easily become infected. • If waste is collected for incineration and not for burial, this should take place at a considerable distance downwind from dwellings. Smoke and fire hazards should be considered. The ashes and unburnt waste should be covered with soil, as for land fill • Wrapping garbage waste in plastic sheeting is dangerous because the plastic may be eaten by animals and may not be biodegradable, contributing to an environmental danger. • Medical wastes must be kept separate from general waste and be properly disposed off. Sharp objects (e.g. needles, scalpels, etc.) should be contained in a separate container that may be put in a special pit or incinerated (>1000°C). Pathological and infectious wastes such as lab cultures, blood, body parts, bodily fluids, etc. should be incinerated or burnt. Other wastes such as paper, kitchen waste, etc. should be buried or burnt. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
51	Percentage of communal buildings with adequate water/ sanitation	100%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Sanitation
RATIONALE To ensure adequate access to communal water and sanitation facilities, especially in schools and health facilities.				
METHODS OF MEASUREMENT Numerator: Total number of communal buildings with adequate water and sanitation at the end of reporting period Denominator: Total number of communal (school and health) buildings at the end of reporting period				X 100 = %
DATA SOURCES Implementing partners, Field monitors, surveys				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • In communal facilities, cleaning latrine slabs and regular maintenance should be entrusted to the administration of the facilities. • The water standard for hand washing in schools is 1 tap per 200 children or 1 well/handpump per 400 children. The quantity of 2 to 3 L water should be available per pupil and per day. • The sanitation standard for schools is at least 1 latrine per 50 children. Ideally, this would mean > 1 latrine per 30 girls and >1 latrine per 60 boys. • The minimum water standard for health facilities is 1 separated water point per facility. There should be 5 L available per out-patient per day and 50 L per in-patient per day. • The sanitation standard for health facilities is 1 latrine per 20 males and 1 latrine per 20 females. • Temporary installations are acceptable in emergency situations but, in general, water points and latrines must be permanent in stable situations. • Water points should have proper drainage, latrines should be built with permanent material, and a maintenance scheme should be in place. • Hygiene promotion should be taught in the school, so the children know about the importance of hand washing, etc. after using the latrines in the school – a practices that can be promoted in the family setting as well. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
52	Average camp area per person (m ²)	≥ 45 m ²	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Shelter and physical planning
RATIONALE It is necessary to ensure there is sufficient overall camp space per person. This includes having sufficient space to include all services while providing enough space for dignified living.				
METHODS OF MEASUREMENT Numerator: Total camp area (m ²) Denominator: Total number of population				
DATA SOURCES Collected data by implementing partners, Field monitors, surveys, etc.				
FREQUENCY OF MEASUREMENT Annually or when the number of dwellings changes substantially such as after an influx of new arrivals to the camp or after phased repatriation or resettlement				
NOTES <ul style="list-style-type: none"> • The figure of 45 m² includes a small area for kitchen gardening to be undertaken. • In a camp situation, it may be a disadvantage to have areas greatly in excess of 45m² per person available as this will mean increased distances to services such as water, hospital, education, etc. • In the case of repatriation, consolidation of the camp or camps should be considered. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies. 2nd Edition</i>. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • Corsellis, Vitale, (2005) <i>Transitional Settlement: Displaced Populations</i>. University of Cambridge, Oxfam, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
53	Percentage of households with adequate dwellings	100%	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Shelter and physical planning
RATIONALE To assess if all families have shelters of an adequate nature so that they are protected against the elements, can live in a dignified manner and are subject to reduced rates of communicable disease spread.				
METHODS OF MEASUREMENT Numerator: Number of adequate dwellings at the end of reporting period Denominator: Total number of dwellings at the end of reporting period				X 100 = %
DATA SOURCES Collected data by Implementing partners, Field monitors, surveys, etc.				
FREQUENCY OF MEASUREMENT Annually or when the number of families changes substantially such as after an influx of new arrivals to the camp or after phased repatriation or resettlement				
NOTES <ul style="list-style-type: none"> • Temporary shelter includes plastic sheeting, tents, huts, and/or incomplete buildings that have not been fully constructed or repaired. This should not be regarded as adequate after the emergency phase. • Because of variations in climate, local building customs and cultural values or concerns, universally-adequate shelters are difficult to define. Adequacy may be assessed by bearing in mind the following factors. The ideal shelter should: <ul style="list-style-type: none"> • provide a covered area that provides dignified living space with a degree of privacy; • have sufficient thermal comfort with ventilation for air circulation; • provide protection from the elements and natural hazards; • ensure that inhabitants, especially women or groups with special needs are not disadvantaged due to poor accommodation design. Physical safety should be a prime concern during the planning and construction. • Assess a number of dwellings through random sampling throughout the camp and evaluate whether each family shelter is of adequate nature or not. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • Corsellis, Vitale, (2005) <i>Transitional Settlement: Displaced Populations</i>. University of Cambridge, Oxfam. UK. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
54	Average dwelling floor size per person (m ²)	≥ 3.5	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Shelter and physical planning
RATIONALE In addition to the provision of physical protection against the elements, it is also necessary to provide sufficient floor space per person for dignified living which aims to reduce social tensions and the spread of communicable diseases				
METHODS OF MEASUREMENT Standard Design Calculation: Numerator: Total number of houses based on a standard design x average area of each house at the end of reporting period Denominator: Total number of persons at the end of reporting period				
DATA SOURCES Collected data by Implementing partners, Field monitors, surveys, etc.				
FREQUENCY OF MEASUREMENT Annually or when the number of dwellings changes substantially such as after an influx of new arrivals to the camp or after phased repatriation or resettlement				
NOTES <ul style="list-style-type: none"> • This measurement is valid if all dwellings are based on a standard plan that provides a minimum space requirement per person with variation in the number of persons living in each dwelling. • If the above approach is not possible, for example when a non standard design is provided, a random sample survey can be carried out in the camp to assess the average shelter area per person by noting the total shelter area of all dwellings assessed and dividing this by the total number of occupants living in these dwellings. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • Corsellis, Vitale, (2005) <i>Transitional Settlement: Displaced Populations</i>. University of Cambridge. Oxfam, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
55	Environmental Action Plan developed / reviewed (mm/yy)	Annual	<input type="checkbox"/> Sex	Water, sanitation, shelter and environment
			<input type="checkbox"/> Age	Environment
RATIONALE To identify to what extent environmental planning has been considered in refugee operations to help the community identify and prioritize significant environmental issues and to develop a community environmental action plan that addresses these priority issues through realistic projects.				
METHODS OF MEASUREMENT Record the date when Environmental Action Plan was developed or reviewed				
DATA SOURCES Local and national ministries and other government agencies responsible for environment; implementing partners, non-governmental organizations (NGOs); surveys; Field monitors; environmental mapping units and databases; refugee and host community groups (e.g. environmental working/management groups)				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Determine whether an environmental action plan has been prepared in a participatory manner, understood and endorsed by the community environmental management group, the camp administration, implementing partners, refugee and host communities. The information in the plan of action is translated into actions the community wishes to see carried out, implemented, monitored and the progress towards an improved environment reviewed. • Environmental considerations are important and should be incorporated into all phases of planning for refugee assistance – from the earliest possible in the emergency phase, throughout care-and-maintenance, and into durable solutions phase. • Establishing Environmental Action Plans is seen as an important contribution towards enhanced environmental management, particularly as this has proven to be an effective and appropriate level at which to address issues with displaced and local communities, as well as the fact that such people often show greater commitment to caring for the environment if they are given the opportunity to manage this for their own benefit. • Environmental Action Plans should cover management and use of natural resources including water, forests, animals, soil, etc. Plan details will depend largely on the environment of the relief operation. • Detailed information could be obtained from UNHCR's Environmental Guidelines. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (1996) <i>Environmental Guidelines</i>. UNHCR, Geneva. • UNHCR, (1998) <i>Refugee Operations and Environmental Management - Key Principles for Decision-Making</i>. UNHCR, Geneva. • UNHCR, (2002) <i>Livelihood Options in Refugee Situations: Promoting Sound Agricultural Practices</i>. UNHCR, Geneva. • UNHCR, (2005) <i>Forest Management in Refugee Situations</i>. UNHCR, Geneva. • UNHCR, (2002) <i>Refugee Operations and Environmental Management. Selected Lessons Learned from the Field</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
56	Percentage of refugee students enrolled in Grades 1-6	100%	<input type="checkbox"/> Sex ✓	Education
			<input checked="" type="checkbox"/> Age	Primary School (excluding local population) (measured in October/November of reporting year)
RATIONALE				
To ensure that all primary school-age children are enrolled in primary school. This indicator is in line with Goal 2, Target 3, of Millennium Development Goals				
METHODS OF MEASUREMENT				X 100 = %
Numerator: Total number of refugee students enrolled in Grades 1- 6 measured in October/November of reporting year Denominator: Total refugee population 6-11 years old October/November of reporting year				
DATA SOURCES				
Government school admission books, head teachers, partners, coordinating agency and refugees				
FREQUENCY OF MEASUREMENT				
Annually, measured in October/November of reporting year				
NOTES				
<ul style="list-style-type: none"> Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). The 6–11 age group is a sub-group of a standard UNHCR population age category (5-17). This age cut-off is critical to identifying the youth and adolescents that are not in school or in any educational programmes. The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address, and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. The comments column in the indicator report should mention: Gender parity achieved – Y/N. Report the number of children older than 11 who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. If the registration does not include year of birth and age, get the community to estimate the numbers of children ages 6–11 through participatory assessment. 				
REFERENCES				
<ul style="list-style-type: none"> Convention on the Rights of the Child, Art. 2 and 28. The Dakar Framework Education for All. UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
57	Percentage of refugee students with specific needs enrolled in Grades 1-6	100%	<input checked="" type="checkbox"/> Sex	Education
			<input checked="" type="checkbox"/> Age	Primary School (excluding local population) (measured in October/November of reporting year)
RATIONALE				
To measure the extent to which community and implementing partners are meeting the educational needs of persons with specific needs who need additional assistance.				
METHODS OF MEASUREMENT				X 100 = %
Numerator: Total number of refugee students with specific needs enrolled in Grades 1-6 at the end of the reporting period Denominator: Total refugee population 6-11 years old with specific needs at the end of the reporting period				
DATA SOURCES				
UNHCR and relevant implementing and operational partners and communities				
FREQUENCY OF MEASUREMENT				
Annually				
NOTES				
<ul style="list-style-type: none"> The term "persons with specific needs" refers to individuals, families or groups requiring a particular response to ensure that they are enabled to overcome the challenges they face and to ensure equal access and equitable impact (UNHCR, 2003). With regard to education for children with specific needs, it refers to children with disabilities, children formerly associated with fighting forces, unaccompanied and separated children and other children-at-risk such as children and adolescents involved with drugs, prostitution, exploitative labour or street children. Children with specific needs can be identified through registration activities and by community members, case workers, community health and social outreach workers. The Education sector in conjunction with Community Services should ensure that steps are taken for the protection and physical and mental health of children with specific needs, and support their integration into education programmes. In many cases, children with disabilities can attend normal school or youth activities, especially if teachers arrange for student helpers to meet their specific needs. Special provisions must be made for materials such as hearing aids and spectacles. If necessary, community awareness as well as specialized teacher training should be provided. In the community-based approach to education, the community in general and parents'/teachers' associations in particular should raise awareness on the importance of education for children with specific needs and develop measures to overcome obstacles for them to attend school. 				
REFERENCES				
<ul style="list-style-type: none"> 1951 Refugee Convention, Art. 22. Convention on the Rights of the Child, Art. 2, 23 and 28. Convention on the Elimination of All Forms of Discrimination against Women, Art. 10. UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
58	Percentage of refugee students enrolled in Grades 7-12	10-40/1000 Population / year	<input type="checkbox"/> Sex ✓	Education
			<input checked="" type="checkbox"/> Age	Secondary School (excluding local population) (measured in October/November of reporting year)
RATIONALE To ensure that as many primary school-age children who completed Grade 6 are enrolled in secondary school.				
METHODS OF MEASUREMENT Numerator: Total number of refugee students enrolled in Grades 7-12 Denominator: Total refugee population 12-17 years old				X 100 = %
DATA SOURCES Government school admission books, teachers, partners, coordinating agency, and refugees				
FREQUENCY OF MEASUREMENT Annually, measured in October/November of reporting year				
NOTES <ul style="list-style-type: none"> • Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). • The 12-17 years olds are a sub-group of a standard UNHCR population age category (5-17 years). This age cut-off is critical to identifying the youth and adolescents that are not in school or in any educational programmes. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. • Report the number of children older than 17 years who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. If the registration does not include the year of birth and age, get the community to estimate the numbers of children aged 12-17 years through Participatory Assessment. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 2 and 28. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
59	Percentage of 15-24 yr enrolled in training (non-formal, vocational, skills, etc.)		<input checked="" type="checkbox"/> Sex	Education
			<input type="checkbox"/> Age	Tertiary education, vocational training and literacy rates
RATIONALE This indicator is focused on measuring the promotion of self-reliance and the provision of professional qualifications to refugees				
METHODS OF MEASUREMENT Numerator: Total number of refugees 15-24 years old enrolled in training programmes during the reporting period Denominator: Total number of refugees aged 15-24 years at the end of reporting period				X 100 = %
DATA SOURCES The school enrolment record (admission book); government, partners and institutions responsible for the programme; refugee youth and their community can provide the information as well				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> Youth and adolescents in this age group are more exposed to protection risks as there are often not enough educational or employment opportunities for them. Youth and adolescents can be mobilized and trained to collect information on this particular indicator. 				
REFERENCES <ul style="list-style-type: none"> 1951 Refugee Convention, Art. 22. Convention on the Rights of the Child, Art. 2 and 28. Universal Declaration of Human Rights, Art. 26. UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. The Dakar Framework Education for All. UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
60	Number of students per teacher	≤ 40	<input type="checkbox"/> Sex ✓	Education
			<input type="checkbox"/> Age	Teachers (including local population) (measured in October/November of reporting year)
RATIONALE To measure the average number of students per teacher, a key indicator of the quality of refugee education.				
METHODS OF MEASUREMENT Numerator: Number of refugee and local students enrolled in Grades 1-12 at the end of reporting period Denominator: Total number of teachers at the end of reporting period				
DATA SOURCES School or class attendance records (students); government, partner, coordinating agency, refugee employer records (teachers)				
FREQUENCY OF MEASUREMENT Annually, except in refugee influx				
NOTES <ul style="list-style-type: none"> • Through observation, reporting, and monitoring, compare the average number of students attending primary and secondary education with the number of employed teachers plus non-teaching staff. • Volunteer teachers should not be included in the calculation of this indicator. Where teachers are assigned by subject rather than class, the 40:1 student per teacher ratio will not be adequate for effective teaching. Another 25% will need to be added to yield the number of teachers required for the school plus non-teaching staff. • To help inexperienced teachers, class sizes should be manageable and training provided. • In developing countries the average student per teacher ratio is 40:1. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
61	Percentage of refugee teachers	100%	<input checked="" type="checkbox"/> Sex	Education
			<input type="checkbox"/> Age	Teachers (including local population) (measured in October/November of reporting year)
RATIONALE In line with a community-based approach and to empower the refugee community, this indicator tries to measure how many refugees themselves should actively participate in education activities.				
METHODS OF MEASUREMENT Numerator: Total number of refugees teachers at the end of reporting period Denominator: Total number of teachers (national and refugees) at the end of reporting period				X 100 = %
DATA SOURCES School administrative and financial records, principals, teachers, partners, government				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • There are refugees who are professional that can be mobilized to assist in the planning, implementation and monitoring of education activities. • Refugee and local population should have equal access to teaching opportunities and neither of them should be favoured or discriminated. Refugee teachers are good models for refugees in terms of demonstrating how one can actively support the community. • Integration is facilitated where refugees/returnees/local population has the opportunity to work together and socially interact. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
62	Percentage of qualified or trained teachers	≥ 80%	<input type="checkbox"/> Sex ✓	Education
			<input type="checkbox"/> Age	Teachers (including local population) (measured in October/November of reporting year)
RATIONALE To measure the level of teacher qualification, progress towards gender parity in recruitment and training, and funding spent on training				
METHODS OF MEASUREMENT Numerator: Number of qualified or trained teachers at the end of reporting period Denominator: Total number of teachers at the end of reporting period				$\times 100 = \%$
DATA SOURCES Government, partner, coordinating agency, refugee employer records and teacher certification				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Governments, UNHCR, or implementing partners should ensure a minimum of 10 days per year of in-service training for each teacher who is not fully qualified. • Efforts must be made to recruit and train female teachers if parity is not yet achieved. • Sustained pre-service training is impossible in most emergencies, but orientation should ensure that teachers understand their role and function and have basic content competencies and the willingness to learn. • “The training should be designed so that it meets the needs of the students [and] cumulatively leads to a recognized qualification in the country of origin and/or asylum.” (UNHCR, 2003) 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
63	Literacy rate for refugees aged 15-24 years old	100%	☑ Sex	Education
			☑ Age	Survey data (if available)
<p>RATIONALE Measuring the literacy rate of the population of concern would ensure that literacy programmes are well-targeted to those who are in need of them and that they are relevant and useful to their day to day existence and survival.</p>				
<p>METHODS OF MEASUREMENT Survey</p>				
<p>DATA SOURCES Partner Health Information System data</p>				
<p>FREQUENCY OF MEASUREMENT Monthly</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • Many refugees did not have the chance to go to school or got interrupted in their studies when they fled. Also, completing 6 years of basic education does not guarantee that they are functionally literate, particularly when considering the quality of education in refugee camps or in remote locations where most refugees are hosted or return to. • In locations where information is not available, the community education committees or parents' and teachers' associations, women's or youth associations can be mobilized and trained to do literacy surveys. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • Universal Declaration of Human Rights, Art. 26. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
64	Is there a local education committee with IP/government participation?	YES	<input type="checkbox"/> Sex	Education
			<input type="checkbox"/> Age	Education
RATIONALE The involvement and active partnership with government is key to sustainable implementation of standards on quality education.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Ministry of Education, UNHCR and partners, local authorities, parents' and teachers' associations, community education committees				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • In some situations, the government may have the political will and the intention to extend its support to refugee education but may not have enough resources to do so. • The government assumes active role in dealing with education issues affecting refugees by forming or supporting community education committees or education task forces. • Partnership with other UN agencies and other international organizations maybe useful to augment the resource base. • Government authorities should be actively engaged in planning, implementation, monitoring and reporting on refugee education from the very beginning to ensure their support. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • The Dakar Framework Education for All • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
65	Number of refugees with access to land for agricultural purposes		<input checked="" type="checkbox"/> Sex	Economic security
			<input type="checkbox"/> Age	Agricultural production and income generation
RATIONALE To measure the accessibility of households to arable agricultural land				
METHODS OF MEASUREMENT Record the number of refugees with access to land for agricultural purposes during the reporting period				
DATA SOURCES National land use reports; World Bank Development Indicators; local agriculture authorities; NGO reports				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Arable land includes land under temporary crops, temporary meadows for mowing or pasture, land under market or kitchen gardens and land temporarily fallow. • Particular attention is needed to the ration between available arable land in a given area and population density. • FAO and the World Bank regularly undertake surveys of land use in developing countries. • The indicator is disaggregated in female-headed households and in male-headed households. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. • WB, (2002) <i>World Bank Development Indicators – Rural Environment and Land Use</i>. World Bank. • FAO, (1996) <i>Land Quality Indicators and Their Use in Sustainable Agriculture and Rural Development</i>. FAO, Rome. • FAO, (2002) <i>Gender and Access to Land, FAO Land Tenure Studies, Rome UNHCR (2002) Livelihood Options in Refugee Situations. Promoting Sound Agricultural Practices</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
66	Number of refugees engaged in agricultural production		<input type="checkbox"/> Sex	Economic security
			<input type="checkbox"/> Age	Agricultural production and income generation
RATIONALE To measure the number of refugee able to produce food for self-consumption or to complement family income through small scale agricultural production.				
METHODS OF MEASUREMENT Record the number of refugees engaged in agricultural production during the reporting period				
DATA SOURCES Refugees; IPs/community based organizations; local authorities				
FREQUENCY OF MEASUREMENT Annual				
NOTES <ul style="list-style-type: none"> • This indicator is an attempt to measure the needs and rights of refugees, returnees and the communities among whom they are living, to produce food, ensure adequate nutrition and develop or contribute to their livelihoods. • This indicator needs to be analyzed in conjunction with other related indicators such as households below poverty line, and access to income generation activities. • This indicator is also linked with Indicator no. 54 because it is important to minimize environmental problems frequently associated with agricultural activities in refugee settings: while crop production can improve food and livelihood security in a refugee setting, it has, at the same time, the potential to increase environmental risks. • The indicator is disaggregated in female-headed households and in male-headed households. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • UNHCR, (2002) <i>Livelihood Options in Refugee Situations. Promoting Sound Agricultural Practices</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
67	Percentage of refugees and asylum-seekers (of working age) employed or engaged in income generating activities		<input checked="" type="checkbox"/> Sex	Economic security
			<input type="checkbox"/> Age	Agricultural production and income generation
RATIONALE				
To measure percentage of refugees or asylum-seekers who have access to income to meet basic individual/household needs, and are on the path towards self-reliance.				
METHODS OF MEASUREMENT				X 100 = %
Numerator: Number of asylum-seekers and refugees (of working age) employed or engaged in income generating activities at the end of reporting period Denominator: Number of working age asylum-seekers and refugees at the end of reporting period Survey: individual households survey				
DATA SOURCES				
Refugees; IPs implementing IGA or microfinance projects				
FREQUENCY OF MEASUREMENT				
Bi-annual				
NOTES				
<ul style="list-style-type: none"> • It is important to get income information from each income earner directly, as errors can occur when respondents report for others. • It is important to capture all sources of income as an important part of the revenue is generated by episodic activities, such as part-time or seasonal labour, or sales of assets. • When gathering information for this indicator, it is important to note what livelihood strategies refugees/asylum-seekers are developing, and whether these strategies/activities have contributed to self-reliance and sustainable livelihoods. • Employment should generate income sufficient to achieve an adequate standard of living. • Household income in relation to basic food basket is a key access indicator that measures the amount of family economic resources available to satisfy basic food needs. However, this is one of the most difficult and complicated economic security indicators about which to collect information. Although difficult to ascertain, this indicator is important because economic status is a fundamental window into livelihood security. 				
REFERENCES				
<ul style="list-style-type: none"> • World Bank, (2002) <i>World Bank Development Indicators – Rural Environment and Land Use</i>. World Bank. • FAO, (1996) <i>Land Quality Indicators and Their Use in Sustainable Agriculture and Rural Development</i>. FAO, Rome. • UNHCR, (2000) <i>Handbook for Emergencies</i>. 2nd Edition. UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
68	Percentage of refugees who repatriated	100%	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation, resettlement and naturalisation
RATIONALE To obtain an indication of the degree of success of voluntary repatriation.				
METHODS OF MEASUREMENT Numerator: Number of refugees who repatriated during the reporting period Denominator: Number of refugees who express the will to repatriate (signed VRF) during the reporting period				X 100 = %
DATA SOURCES UNHCR, government				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The right of refugees to return to their country of origin is fully recognized in International Law. The Universal Declaration of Human Rights (1948) established in Article 13 (2) that: “Everyone has the right to leave any country, including his own, and to return to his country”. • Especially after several years of displacement, a decision to return may not be an easy one. In order to ensure that this decision is made out of a free choice, it is crucial that refugees have access to accurate information which must be reliable, objective and up-to-date. This information can be provided through information campaigns, but also through go-and-see visits by refugees to their places of origin, or come-and-talk visits. • Spontaneous return also occurs in some situations. This should not be included in the measurement of the indicator. • Expression of the will to return is defined and measured by a refugee filling out the Voluntary Repatriation Form (VRFs); receiving information from registration interviews; receiving protection monitoring in the camp and making contact with UNHCR. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. • Universal Declaration of Human Rights, Art. 13 (2). • UNHCR, (1996) <i>Handbook Voluntary Repatriation: International Protection</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
69	Percentage of refugees resettled	100%	<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
RATIONALE To provide access to resettlement for refugees in vulnerable categories for whom this is a suitable option and expedite resettlement for the safety, health, or other reasons for refugees who meet special conditions of vulnerability.				
METHODS OF MEASUREMENT Numerator: Number of refugees submitted for resettlement during the reporting period Denominator: Number of refugees identified for resettlement during the reporting period				$X 100 = \%$
DATA SOURCES UNHCR, implementing partners, resettlement countries, refugees				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Refugees may be denied basic human rights in a country of asylum; their lives and freedom may also be threatened or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the special needs of refugees under the Office's Mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there are no prospects for another durable solution. • Resettlement is not an automatic solution for all refugees belonging to vulnerable categories. Resettlement criteria include: unaccompanied and separated children with special protection needs for whom resettlement is suitable following Best Interests Determination (BIDs), medical cases, survivors of violence or torture, women at risk, elderly, and persons with legal or physical protection needs, family reunification cases and refugees without local integration prospects. There should be an assessment of suitability of resettlement in such cases. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (2004) <i>Resettlement Handbook</i>. Department of International Protection. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
70	Average processing time for resettlement submissions (days)		<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation and resettlement
<p>RATIONALE Timely processing of resettlement submissions is in the interest of refugees, UNHCR and resettlement countries. This indicator seeks to measure the efficiency of resettlement processing within the UNHCR Office, counting from the date the refugee was recognized to the date the refugee case was first submitted to a resettlement country</p>				
<p>METHODS OF MEASUREMENT The average processing time for resettlement submissions is calculated by counting the number of days from the day refugee status was granted to the day the case was first submitted to a resettlement country. The average processing time should be determined for all resettlement cases submitted during the period. The number of days should be added up for all cases submitted and then divided by the number of cases submitted.</p> <p>Note: In case exact data cannot be derived from the registration system or manually, the Standards and Indicators form contains an “Average Processing Time” sheet which is a tool to estimate the average processing time.</p>				
<p>DATA SOURCES UNHCR registration system; <i>ProGres</i></p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES</p> <ul style="list-style-type: none"> Refugees may be denied basic human rights in a country of refuge; their lives and freedom may also be threatened, or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective, and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the needs of refugees under the Office's Mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there is no prospect for another durable solution. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. UNHCR, (2004) <i>Resettlement Handbook</i>. Department of International Protection. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
71	Average processing time for resettlement departures (days)		<input type="checkbox"/> Sex	Durable solutions
			<input type="checkbox"/> Age	Repatriation, resettlement and naturalisation
<p>RATIONALE Timely processing of resettlement submissions is in the interest of refugees, UNHCR and resettlement countries. This indicator seeks to measure the efficiency of resettlement processing by the resettlement country (-ies), counting from the date the refugee case was first submitted to a resettlement country to the date the refugee case departed to the country of resettlement.</p>				
<p>METHODS OF MEASUREMENT The average processing time for resettlement departures is calculated by counting the number of days from the day the refugee case was first submitted to a resettlement country to the day the refugee case departed to the country of resettlement. The average processing time should be determined for all resettlement cases which departed during the period. The number of days should be added up for all departed cases and then divided by the number of cases who departed.</p> <p>Note: In case exact data cannot be derived from the registration system or manually, the Standards and Indicators Form contains an “Average Processing Time” sheet which is a tool to estimate the average processing time.</p>				
<p>DATA SOURCES UNHCR registration system; <i>proGres</i></p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES Refugees may be denied basic human rights in a country of asylum; their lives and freedom may also be threatened, or they may have vulnerabilities or special needs which render their asylum untenable. The authorities in the country of refuge may be unable or unwilling to provide effective protection or address special needs. In such circumstances, timely resettlement becomes a principal objective, and an important means of protecting refugees. Consequently, resettlement under UNHCR auspices is geared primarily to the special specific needs of refugees under the Office’s Mandate whose life, liberty, safety, health or other fundamental human rights are at risk in the country where they sought refuge or for whom there is no prospect for another durable solution.</p>				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (2004) <i>Resettlement Handbook. Department of International Protection</i>. UNHCR, Geneva. 				

4 RETURNEE AREA



RETURNEE AREA			
PART I. GENERAL INFORMATION			
IDENTIFICATION		INFORMATION	COMMENTS
	Country		
	Returnee area (RA) name		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	First administrative level ("province")		
	Second administrative level ("district")		
	UNHCR office		
	Focal point		
	Is RA included in the National Development Plan? (Y/N)		

PART II. DEMOGRAPHY (PLEASE REFER TO ASR, TABLE II AND III)					
RETURNEES (RETURNED DURING REPORTING YEAR)		END OF PERIOD			COMMENTS
		FEMALE	MALE	TOTAL	
	Under 5 years				
	5-17 years				
	18-59 years				
	60 and > years				
	Total				
	Total number of returnees since start of returns				
	Total number of returned IDPs during year				
	Total number of returned IDPs since start of returns				
	Total population in RA (EP) (Returnees and non-returnees)				
	Number of returnee households				
1	Infant Mortality Rate (<1 year) (returnees and non-returnees)				
2	Child Mortality Rate (< 5 years) (returnees and non-returnees)				
3	Crude Mortality Rate (returnees and non-returnees)				

PART III. ACCESS TO RIGHTS (RETURNEES ONLY) / PROTECTION				
PROTECTION		VALUE	STD.	COMMENTS
4	Are there cases of arbitrary detention? (Y/N)		No	
5	Do all returnees have access to individual identity documentation without discrimination? (Y/N)		Yes	

PROTECTION				VALUE	STD.	COMMENTS
6	Are all returnees allowed to vote? (Y/N)				Yes	
7	Are birth certificates given in country of asylum recognized? (Y/N)				Yes	
8	Are there reports of security incidents directed at returnees? (Y/N)				No	
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)				FEMALE	MALE	TOTAL
9	Percentage of SGBV cases who received support					100%
	-Number of SGBV cases who received support (DP)					
	-Number of SGBV cases reported (DP)					
10	Percentage of UNHCR and partner staff who have completed SGBV training					10%
	-Total number of UNHCR and partner staff who have completed SGBV training (DP)					
	-Total number of UNHCR and partner staff at end of year (EP)					

PART IV. SOCIAL INTEGRATION						
GENERAL				VALUE	STD.	COMMENTS
11	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N)				Yes	
SPECIFIC GENDER EQUITY				VALUE	STD.	COMMENTS
12	Percentage of female members in community representative bodies				50%	
	- Number of female members in representative bodies (EP)					
	- Total number of members in representative bodies (EP)					
HIV / AIDS			COMM.	RETURN.	STD.	COMMENTS
13	Is antiretroviral therapy available in / for hosting community / returnees? (indicate in appropriate cell)		Y/N	Y/N	see guide	
14	Will there be a possibility for returnee to continue ART in returnee area? (Y/N)				Yes	
WATER / SANITATION				VALUE	STD.	COMMENTS
15	Percentage of families with improved water supply at an adequate level of service				100%	
16	Percentage of returnee families with latrines				100%	
SHELTER				VALUE	STD.	COMMENTS
17	Percentage of returnees living in adequate dwellings? (survey)				100%	
HEALTH				VALUE	STD.	COMMENTS
18	Do returnees have access to emergency and primary health care services without discrimination (Y/N)				Yes	
19	Measles vaccination coverage				≥ 90%	

Note: (EP) End of period; (DP) During period

PART IV. SOCIAL INTEGRATION (CONTINUED)						
EDUCATION				VALUE	STD.	COMMENTS
20	Percentage of school aged population in returnee area (RA) living within reasonable distance from primary school (as per national standard or less than 5 km) (survey)				100%	
21	Are educational diplomas / certificates obtained in asylum country, recognized in country of origin? (Y/N)				Yes	

EDUCATION			VALUE	STD.	COMMENTS		
		FEMALE	MALE	TOTAL	STD.	COMMENTS	
22	Percentage of RA students enrolled in Grades 1-6				100%		
	-Total number of RA students enrolled in Grades 1-6						
	-Total RA population 6-11 years old						
23	Percentage of RA students enrolled in Grades 7-12						
	-Total number of RA students enrolled in Grades 7-12						
	-Total RA population 12-17 years old						
24	Number of 15-24 years old students enrolled in tertiary education or training (formal, non-formal, vocational, skills, etc.) in RA (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
25	Percentage of UACs/SCs for whom tracing has been successfully completed				100%		
	-Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	-Number of UACs/SCs identified (EP)						
		VALUE			STD.	COMMENTS	
26	Have children been recruited for military purposes? (Y/N) (DP)				No		

PART V. ECONOMIC SECURITY							
	EMPLOYMENT AND ECONOMIC WELLBEING	FEMALE HEADED HOUSEHOLDS		MALE HEADED HOUSEHOLDS		STD.	COMMENTS
27	Percentage of returnees below poverty line (EP)					0%	
28	Number of returnees with access to land for agricultural purposes (DP)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS	
29	Percentage of returnees (of working age) employed or engaged in income generating activities (DP)						

Note: (EP) End of period; (DP) During period

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
1	Infant Mortality Rate (<1 year) (returnees and non-returnees)	< 60 deaths (children < 1) per 1,000 live births per year	<input checked="" type="checkbox"/> Sex	Demography (please refer to ASR, Table II and III)
			<input type="checkbox"/> Age	Returnees (returned during reporting year)
RATIONALE To measure child survival and the social and environmental conditions in which children live, including health care. The reduction in the infant mortality rate is a Millennium Development Goal.				
METHODS OF MEASUREMENT Numerator: Total number of deaths of children under 1 year-old x 1,000 during reporting period Denominator: Total number of births during reporting period				
DATA SOURCES Health implementing partner, Health Information System.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered live-born. • Obtaining accurate records of infant mortality is difficult and depends on an accurate recording system. • The number of deaths in each areas of return is usually few so reviewing data by month or disaggregated by sex can be misleading. • Where registration data is not available survey data may be use instead. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
2	Child Mortality Rate (< 5 years) (returnees and non-returnees)	< 3 deaths per 1,000 per month	<input checked="" type="checkbox"/> Sex	Demography (please refer to ASR, Table II and III)
			<input type="checkbox"/> Age	Returnees (returned during reporting year)
RATIONALE To measure child survival. The reduction in deaths of children under 5 is a Millennium Development Goal.				
METHODS OF MEASUREMENT In order to obtain the average annual indicator, data needs to be measured on a monthly basis.				
Numerator: Total number of deaths < 5 years from all causes among all ages per month Denominator: Mid-point population in the same month x 1,000				
DATA SOURCES Data should be verified through multiple data sources, usually health partner records and community records.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Because there is a tendency to under-report deaths and over-report population, special care should be taken to obtain as accurate results as possible. • The denominator should include only the population of children < 5 years. • The standard used should be the mortality rate in the host population prior to return progress. However, the average mortality expected in the developing world should be used as the standard when host population mortality is not known. • Routine mortality data should be supplemented by intermittent survey data where indicated, particularly where routine data is suspected to be unreliable. Mortality surveys are often combined with nutrition surveys. • Where registration data is not available survey data may be use instead. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations. New York. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
3	Crude Mortality Rate (returnees and non-returnees)	< 1.5 deaths per 1,000 per month	<input checked="" type="checkbox"/> Sex	Demography (please refer to ASR, Table II and III)
			<input type="checkbox"/> Age	Returnees (returned during reporting year)
RATIONALE Crude mortality is an indicator of total population health and physical well-being, and reflects many factors such as access to food, water, sanitation, shelter as well as health care and nutrition care.				
METHODS OF MEASUREMENT In order to obtain the average annual indicator, data needs to be measured on a monthly basis.				
MONTHLY DATA: Numerator: Total number of deaths from all causes among all ages per month Denominator: Mid-point population in the same month x 1,000 Annual average: Sum of all monthly data divided by 12				
DATA SOURCES Data should be verified through multiple data sources, usually health partner records, and community records data.				
FREQUENCY OF MEASUREMENT Monthly				
NOTES <ul style="list-style-type: none"> • Because there is a tendency to under-report deaths and over-report population, special care should be taken to obtain accurate results. • The standard used should be the mortality rate in the host population prior to return progress. However, the average mortality expected in the developing world should be used as the standard when host population mortality is not known. • Routine mortality data should be supplemented by intermittent survey data where indicated, particularly where routine data is suspected to be unreliable. Mortality surveys are often combined with nutrition surveys. • Where registration data is not available survey data may be use instead. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Committee on the Elimination of Discrimination against Women, Art. 11 (1) f. • UNHCR, (2004) <i>UNHCR Manual, Chapter 4. Operational Management</i>. UNHCR, Geneva. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
4	Are there cases of arbitrary detention?	NO	<input type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	Protection
RATIONALE This indicator measures continued forms of persecution against persons having returned from refuge.				
METHODS OF MEASUREMENT Record the number of returnees detained arbitrarily, based on credible reports available to UNHCR.				
DATA SOURCES UNHCR, human rights agencies.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> The Working Group on Arbitrary Detention, set up by the Commission on Human Rights, established three categories when detention can be considered arbitrary: 1) when it is impossible to invoke any legal basis for the deprivation of liberty; 2) when the deprivation of liberty results from the exercise of a number of specific rights from the UDHR and the ICCPR; 3) when non-observance of international norms relating to the right to a fair trial is of such gravity as to give the deprivation of liberty an arbitrary character. 				
REFERENCES <ul style="list-style-type: none"> Universal Declaration of Human Rights, Art. 9. International Covenant of Civil and Political Rights, Art. 9. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
5	Do all returnees have access to individual identity documentation without discrimination?	YES	<input type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	Protection
RATIONALE				
This indicator measures treatment on the same level as the local population with respect to access to identity documentation.				
METHODS OF MEASUREMENT				
"Yes" or "No" answer				
DATA SOURCES				
Official government statistics or UNHCR data.				
FREQUENCY OF MEASUREMENT				
Annually				
NOTES				
<ul style="list-style-type: none"> Registration is an important tool of protection, access to basic rights and identification of those in need of special assistance. This indicator measures treatment on the same level as the local population with respect to access to identity documentation. Individual identity documents include primarily documents issued by the government. ExCom Conclusion No. 93 states <i>"For the purpose, inter alia, of protection against refoulement, as well as access to reception arrangements, both male and female asylum-seekers should be registered and be issued appropriate documentation reflecting their status as asylum-seeker, which should remain valid until the final decision is taken on the asylum application"</i>. 				
REFERENCES				
<ul style="list-style-type: none"> International Covenant of Civil and Political Rights, Art. 16. ExCom Conclusion 91. ExCom Conclusion No. 93: para. (b)(v). ExCom Conclusion 101 (LV) para (I). UNHCR, (2003) <i>Handbook for Registration. Procedures and Standards for Registration, Population Data Management and Documentation</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
6	Are all returnees allowed to vote?	YES	<input type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	Protection
RATIONALE This indicator shall serve to measure the level of access for returnees to participating in the democratic process.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES UNHCR, legal NGOs.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Democratic elections are important milestones for a society in transition. Participation in the election by all citizens enhances its democratic value and credibility. • Participation in elections by returnees is an important element to measure re-integration. 				
REFERENCES <ul style="list-style-type: none"> • International Covenant of Civil and Political Rights, Art. 25. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
7	Are birth certificates given in country of asylum recognized?	YES	<input type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	Protection
<p>RATIONALE To confirm nationality and status; prevent statelessness; ensure legal status, rights, and obligations; and safeguard the legal and physical protection of refugees and asylum-seekers and their access to services.</p>				
<p>METHODS OF MEASUREMENT "Yes" or "No" answer</p>				
<p>DATA SOURCES UNHCR, human rights agencies, legal NGOs</p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • According to the International Covenant on Civil and Political Rights and to the Convention on the Rights of the Child, every child should be registered immediately after birth and has the right to acquire nationality. Birth registration is essential to allow date and place of birth to be conclusively established, in order to activate certain rights, including those rights which are dependent upon nationality and personal status. • For refugee children born in a country of asylum, registration of birth details may be a prerequisite for obtaining a nationality, enrolling in a school or protecting their property and inheritance rights after repatriation to their parents' home country. Moving children without proper documentation of their social history can result in the loss of nationality. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • International Covenant of Civil and Political Rights, Art. 14, 15 and 16. • Convention on the Rights of the Child, Art. 7. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
8	Are there reported security incidents that are directed at returnees?	NO	<input type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	Protection
<p>RATIONALE This indicator measures the level of security in the return areas for both returnees and local population as part of an assessment of conditions conducive to re-integration.</p>				
<p>METHODS OF MEASUREMENT "Yes" or "No" Answer</p>				
<p>DATA SOURCES UNHCR, national law enforcement agents, NGOs, press reports</p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES</p> <ul style="list-style-type: none"> Although it may be hard to make a clear distinction whether a security incident was directed against returnees or not, such an assessment should be part of returnee monitoring. Examples may include the burning of returnee houses, cutting orchard trees or laying of new mines. Petty crime should be excluded. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> International Covenant on Civil and Political Rights, Art. 6 and 7. UNHCR, (1996) <i>Handbook Voluntary Repatriation: International Protection</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
9	Percentage of SGBV cases who received support	100%	<input checked="" type="checkbox"/> Sex	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	SGBV
<p>RATIONALE To provide refugees and asylum-seekers, particularly women who have experienced sexual and gender-based violence (SGBV) appropriate support.</p>				
<p>METHODS OF MEASUREMENT Numerator: Total number of cases of SGBV who received support during the reporting period Denominator: Total number cases of SGBV reported during the reporting period</p>				<p>X 100 = %</p>
<p>DATA SOURCES Formal and informal reports and service and clinic records of UNHCR; government authorities, implementing and operational partners, refugee communities and individual refugees, surveys.</p>				
<p>FREQUENCY OF MEASUREMENT Annually (also in Sitrep and APR)</p>				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
NOTES				
<ul style="list-style-type: none"> • Preventing and responding to incidents of SGBV is one of UNHCR's most important protection concerns. In order to effectively monitor and evaluate SGBV prevention and response initiatives, UNHCR must be able to measure the extent to which SGBV is reported among the population. Given the general reluctance of survivors of rape to report the crime, the general <i>"family matter and within the household"</i> attitude many populations attach to complaints of domestic violence, and the challenges associated with efforts to influence changes in community traditional practices regarded as <i>"harmful"</i> an increase from year to year in the number of reports received in these types of SGBV can serve as a proxy indicator for the effectiveness of awareness raising and response initiatives. • For definitions of "rape", "domestic violence" and "harmful traditional practices", please see Chapter 1 of UNHCR's <i>May 2003 Guidelines for Prevention and Response: Sexual and Gender-Based Violence against Refugees, Returnees, and Internally Displaced Persons</i>. These definitions should also be contained in the glossary of the SOP. • Domestic violence is presumed to be the most prevalent form of SGBV and both domestic violence and rape are the most underreported forms of SGBVs. The rise in the number of cases reported implies that the community is increasingly aware of the necessity of reporting these incidents. Because of the psychological and medical complications associated with rape in particular – such as unwanted pregnancy, sexually transmitted infections – it is imperative that survivors receive treatment as soon as possible. While an increase in the number of rape cases reported implies that awareness raising initiatives are having an impact, an increase in the number of rape cases seen at a health centre within 72 hours after occurrence can serve as a proxy measurement that the community/survivors understand the necessity of reporting and seeking attention as soon as possible. • Whether a traditional practice is harmful should be determined by reference to the physical and mental harm caused to the individual and with the aid of international human rights instruments. As UNHCR staff has an obligation to uphold rights and freedoms enshrined in international human rights instruments, a harmful traditional practice which violates the individual rights of refugees will normally require the intervention of UNHCR. • If possible, please comment on whether the particular types of SGBV occur in a particular location in your camp or urban setting. For example, in some camp settings, rape is more common outside the camp as refugee women and girls may have to leave the camp in order to collect firewood. Please also comment if the survivor victim is proceeding with legal redress or seeks other support for example psycho-social and medical support. • After an incident of SGBV, the victim/survivor may experience many different emotional and psychological responses, including fear, shame, guilt, depression and anger. He/she may adopt strong defense mechanisms, such as forgetting, denial and deep repression of the traumatic event. Family members may also experience a variety of emotions and need to receive support during this traumatic period. Community-based activities are most effective in helping to relieve such a trauma. • It is imperative to establish a system with local authorities so that those victims/survivors who wish to seek legal redress for the crimes committed against them can do so in a timely manner. • Post-rape cases who received timely care should be mentioned in the comments column. The word "timely" means "within the 72 hours following the incident". 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
REFERENCES				
<ul style="list-style-type: none"> <li data-bbox="135 197 1030 248">• UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons</i>. UNHCR, Geneva. <li data-bbox="135 248 1030 272">• UN Security Council Resolution S/RES/1325, October 2005 <li data-bbox="135 272 1030 296">• UNHCR, (2003) <i>Gender Training Kit on Refugee Protection and Resource Handbook</i>. UNHCR, Geneva. <li data-bbox="135 296 1030 320">• IASC, (2005) <i>Draft IASC Guidelines for Gender-Based Violence Interventions in Humanitarian Settings</i>. <li data-bbox="135 320 1030 344">• Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women. <li data-bbox="135 344 1030 368">• UN, (1993) <i>Declaration on the Elimination of Violence against Women</i>. A/RES/48/104. <li data-bbox="135 368 1030 392">• Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages. <li data-bbox="135 392 1030 416">• Convention on the Rights of Children, Art. 19 and 24. <li data-bbox="135 416 1030 440">• UNHCR (1997) <i>Policy on Harmful Traditional Practices</i>. UNHCR, Geneva. <li data-bbox="135 440 1030 464">• UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
10	Percentage of UNHCR and partner staff who have completed SGBV training	10%	<input type="checkbox"/> Sex ✓	Access to rights (returnees only)/ Protection
			<input type="checkbox"/> Age	SGBV
RATIONALE To raise awareness of gender equity issues and SGBV among UNHCR and partner staff.				
METHODS OF MEASUREMENT Numerator: Total number of UNHCR and partner staff who completed SGBV training at the end of reporting period Denominator: Total number of UNHCR and partner staff at the end of the reporting period				$X 100 = \%$
DATA SOURCES UNHCR and partner workshop/training and other reports, participants lists.				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated (also in Sitrep and APR).				
NOTES <ul style="list-style-type: none"> • SGBV training can include sensitization and meetings, as well as more formal training. • For all UNHCR staff, basic SGBV awareness training should take place in all phases including emergency; more detailed training based on the SGBV Guidelines should be organized in stable situations. Participants should reflect a gender and multi-sectoral balance. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2003) <i>Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons. Guidelines for the Prevention and Response</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
11	Has a Participatory Assessment been conducted at least once during the reporting year?	YES	<input type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	General
RATIONALE Mainstreaming age, gender and diversity means that the meaningful participation of returnee women, men, girls and boys of all ages and backgrounds is integral to the design, implementation, monitoring and evaluation of all UNHCR policies and operations. Participatory Assessment ensures the participation of returnees in the annual assessment.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Systematization form for each subgroup discussion, Participatory Assessment Prioritization Report Form, COP, APR, reports of findings.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Systematic participatory assessment with refugee women, men, girls and boys of all ages from all backgrounds will be conducted from mid-September to end October each year in preparation for project submissions in November, the annual protection and country reports and the country operations planning exercise the following year together with the comprehensive needs assessment. • The Participatory Assessment will build on existing practices and establish a system wide approach to Participatory Assessment with refugees, internally displaced persons and returnees to support age, gender and diversity mainstreaming, as well as promoting Participatory Assessment as a regular working methodology. • Country multi-functional teams, including partners, together with returnees will systematize the information gathered and analyse it at the annual participatory planning workshops. The operational response will be built on an analysis of the protection needs of refugee women, men, girls and boys and inequalities based on differences. Programmes will build on the priorities, capacities and solutions proposed by refugees themselves in response to the identified protection risks. • The information will be used to substantiate the project submissions, annual protection reports and Country Operations Plans. It will also support the standard comprehensive needs assessment presented in Country Operations Plans with a view to highlighting unmet needs. • The UNHCR Tool for Participatory Assessment in Operations will assist in guiding the process. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 12. • Standing Committee 20th Meeting, Reinforcing a Community Development Approach (EC/51/SC/CRP.6, 15 February 2001). • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (2001) UNHCR's Five Commitments to Refugee Women Memorandum of the High Commissioner to all Offices dated 12 December 2001. UNHCR, Geneva. • UNHCR, (1997) <i>Five Priority Issues related to Refugee Children</i> IOM/40/97-FOM/47/97 of the High Commissioner of 15 July 1997. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
12	Percentage of female members in community representative bodies in returnee areas	50%	<input type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	Specific Gender Equity
RATIONALE The indicator is crucial in measuring the empowerment of returnee women and their participation in leadership. It is also one of the UNHCR policy priorities on returnee women and one of the High Commissioner's Five Commitments to Refugee Women.				
METHODS OF MEASUREMENT Numerator: Number of returnee female members in representative bodies at the end of reporting period Denominator: Total number of members in representative bodies at the end of reporting period				X 100 = %
DATA SOURCES Implementing partners, UNHCR staff.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Representative bodies can be formal or informal associations of persons of concerns. • Many refugee/asylum-seekers women lack practice expressing themselves in public because public speaking is perceived as a male prerogative. • Women's participation means not only physical presence at meetings but also voicing their concerns and opinions. 				
REFERENCES <ul style="list-style-type: none"> • UNHCR, (2002) <i>UNHCR's Participatory Planning in UNHCR: a Practical Guide</i>. UNHCR, Geneva. • UNHCR, (2003) <i>UNHCR Response to the three Evaluations/Assessment of Refugee Women, Children and the Community Services Function</i>. UNHCR, Geneva. • UNHCR's Five Commitments to Refugee Women. Memorandum of the High Commissioner to all Offices dated 12 December 2001. • UNHCR, (2001) <i>Reinforcing a Community Development Approach</i>, UNHCR Policy Document, Standing Committee, 20th Meeting, 15 February 2001. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
13	Is antiretroviral therapy available in / for hosting community / returnees?	See notes	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE Antiretroviral therapy (ART) is a life saving and essential intervention. Returnees should have equivalent access to HIV interventions as those of surrounding host populations.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Implementing or operational partners: Government National AIDS Control Programmes.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • As with all public health interventions, returnees should receive similar services as those available to surrounding host communities while ensuring that minimum essential services are provided. • Low cost refers to a co-payment as opposed to non-subsidized ART. 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines for HIV/AIDS Interventions in Emergency Settings</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005 – 2007</i>. • UNHCR, (2005) Draft Antiretroviral Therapy (ART) Concept Paper for Refugees. Draft, 24 August 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
14	Will there be a possibility for returnees to continue ART in returnee area?	YES	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	HIV/AIDS
RATIONALE Antiretroviral therapy (ART) is a life saving and essential intervention. Returnees should have the opportunity to continue ART in area/district of country of origin.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Implementing or operational partners; Government National AIDS Control Programmes.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • Is there an NGO present in area that can provide ART? Are the treatment protocols compatible? • Will ART be available relatively soon and can the persons be provided with sufficient ART to fill the gap? • Can persons and families return to another area/district either temporarily or permanently where ART exists? 				
REFERENCES <ul style="list-style-type: none"> • IASC, (2003) <i>Guidelines for HIV/AIDS Interventions in Emergency Settings</i>. IASC, Geneva. • UNHCR, (2005) <i>UNHCR's Strategic Plan on HIV and AIDS for 2005 – 2007</i>. • UNHCR, (2005) <i>Draft Antiretroviral Therapy (ART) Concept Paper for Refugees</i>. Draft, 24 August 2005. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
15	Percentage of families with improved water supply at an adequate level of service	100%	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	Water/sanitation
RATIONALE These goals aim, in the water and sanitation sector, to halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation. Such improvements in water and sanitation will speed the achievement of all eight MDGs.				
METHODS OF MEASUREMENT Numerator: Number of returnee families with adequate level of water service Denominator: Total number of returnee families				X 100 = %
DATA SOURCES Local authorities, administrative data, implementing partner records. Observation – random surveys can confirm the level of access on the ground.				
FREQUENCY OF MEASUREMENT Once per year				
NOTES <ul style="list-style-type: none"> • Returnees have equal rights, alongside host communities, to achieving improved level of water and sanitation services, as aimed for by the Millennium Development Goals. To assess how far such improvements have been achieved, all returnees should have access to an adequate level of water provision service. • An adequate level of access is defined as: <ul style="list-style-type: none"> • At least one water point (tap stand/well) per returnee block or community (i.e. approx. 100 people). • A minimum of 20L of water available per person per day though 50L is the target level • This definition is between the basic and intermediate levels of access, as defined by WHO. This level of service ensures that hygiene promotion work is not compromised by insufficient water and that laundry can take place near the plot. 				
REFERENCES <ul style="list-style-type: none"> • Howard, G., Bartram, J., (2003) <i>Domestic water quantity: service level and health</i>. World Health Organization, Geneva. • WHO (2004) <i>Guidelines for Drinking-Water Quality</i>, 3rd ed., Vol. 1. Recommendations. World Health Organization, Geneva. • WHO (2005) <i>Water for Life</i>, World Health Organization. World Health Organization, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
16	Percentage of returnee families with latrines	100%	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	Water/sanitation
RATIONALE Proper human excreta disposal is the single-most important parameter in the interruption of the faecal-oral transmission of sewage-derived pathogens. One latrine per family is the ideal target to decrease the spread of communicable diseases among the returnee population.				
METHODS OF MEASUREMENT Numerator: Total number of returnee households with family latrines Denominator: Total number of returnee households.				X 100 = %
DATA SOURCES Local authorities, administrative data, implementing partner records. Observation – random surveys can confirm latrine coverage on the ground.				
FREQUENCY OF MEASUREMENT It is recommended that it is necessary to randomly verify the number of household latrines in use once a year. This survey can be carried in conjunction with other surveys being undertaken in returnee areas.				
NOTES <ul style="list-style-type: none"> • A latrine is only part of the excreta disposal solution – it is necessary to complement this with appropriate hygiene promotion. • Regular cleaning, care, and maintenance are indicators of usable latrines. • Generally, the base of the pit of the latrine should be at least 1.5 m above the wet season water table to prevent contamination of the groundwater and should be sited between 6 and 50 m from the house. • Latrines should not be uphill and not less than 30 m from the following: wells, surface water, water storage facilities, food storage, food preparation areas. 				
REFERENCES <ul style="list-style-type: none"> • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
17	Percentage of returnees living in adequate dwellings	100%	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	Shelter
<p>RATIONALE To assess if all families have shelters of an adequate nature so that they are protected against the elements, can live in a dignified manner and are subject to reduced rates of communicable disease spread.</p>				
<p>METHODS OF MEASUREMENT Survey</p>				
<p>DATA SOURCES Data collected by implementing partners, Field monitors, surveys, etc.</p>				
<p>FREQUENCY OF MEASUREMENT Annually</p>				
<p>NOTES</p> <ul style="list-style-type: none"> • Because of variations in climate, local building customs and cultural values or concerns, universally-adequate shelters are difficult to define. Adequacy may be assessed by bearing in mind the following factors. The ideal shelter should <ul style="list-style-type: none"> • Provide a covered area that provides dignified living space with a degree of privacy, • Have sufficient thermal comfort with ventilation for air circulation, • Provide protection from the elements and natural hazards, • Ensures that inhabitants, especially women or groups with special needs are not disadvantaged due to poor accommodation design. Physical safety should be a prime concern during the planning and construction. • Assess a number of dwellings through random sampling throughout the returnee area and evaluate whether each family shelter is of adequate nature or not. 				
<p>REFERENCES</p> <ul style="list-style-type: none"> • UNHCR, (2000) <i>Handbook for Emergencies</i>, 2nd Edition 2000. UNHCR, Geneva. • Coresllis, Vitale, (2005) <i>Transitional Settlement: Displaced Populations</i>. University of Cambridge. Oxfam, UK. • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
18	Do returnees have access to emergency and primary health care services without discrimination?	YES	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	Health
RATIONALE This indicator serves to identify if there are legal gaps with regard to access to emergency and primary health care by returnees.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Government sources.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The health care service is considered accessible if access is provided to all without discrimination, if it is within physical reach and if it is affordable. • Emergency health care is defined as medical response to an acute severe medical condition which in the absence of immediate medical attention would seriously jeopardize the health of the individual, and includes medical response to obstetric complications, acute abdomen, and injury. • Primary health care is defined as universally accessible, practical, scientifically sound and culturally appropriate, essential, promotive, preventive, curative and rehabilitative care, and shall include: health education, nutrition, reproductive health (including family planning), child health, communicable diseases control and immunization, management of common diseases and injuries, and provision of essential drug and community engagement. It is the first point of contact with the health services, and is linked to referral networks for more comprehensive care. • In cases where domestic law provides access only to some categories of returnees (e.g. only those with a residence permit), Field Offices shall assess whether such limitations impact only on a minority or on the majority of returnees and respond accordingly, adding a short description of the limitation in the comment box. • In cases where domestic law provides access only to some categories of returnees, Field Offices shall assess whether such limitations impact only on a minority or on the majority of returnees and respond accordingly, adding a short description of the limitation in the comment box. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 23. • International Covenant on Economic, Social and Cultural Rights, Art. 12. • Convention on the Rights of the Child, Art. 24. • Declaration of Alma-Ata, 1978, para. VII. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
19	Measles vaccination coverage	≥90%	<input type="checkbox"/> Sex	Social integration
			<input type="checkbox"/> Age	Health
RATIONALE To assess measles immunization coverage.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Survey using Standard Expanded Programme of Immunization (EPI) cluster survey or Lot Quality Assurance Survey (LQAS).				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • As measles has a high potential of outbreaks and mortality, mass vaccination of children against this disease is a high priority for UNHCR populations of concern. Risk of outbreak is higher in crowded emergency settings, in large population displacement and in case of high malnutrition levels. • In some settings older children may have escaped immunization campaigns and measles disease. This is the reason why immunization of all children below the age of 15 years is recommended. However, when mass vaccination is impossible, priority should be given to immunization of children aged 6-59 months. • Measles is one of the 5 main cause of death of children under the age of five years and that may increase in returnee situation. • Children should be immunized before the age of 1 year in order to reduce the mortality and the risk of epidemic. • Immunization against measles can not be given before the age of six months due to the mother antibodies in the infant blood, making the vaccination ineffective. • Different vaccination scheme are implemented according to the situation and the national policy. However each child should receive a first dose of measles vaccine between the age of six and nine months, and in any case before the age of 12 months. 				
REFERENCES <ul style="list-style-type: none"> • Sphere Project, (2004) <i>Humanitarian Charter and Minimum Standards for Disaster Response</i>. Revised edition. Oxfam, Oxford, UK. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
20	Percentage of Returnee Area school aged population living within reasonable distance from primary school (survey)	National Standard Or less than 10 km	<input type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	Education
RATIONALE This indicator is focused on measuring accessibility (in safety and security) of primary education structures.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES Ministry of Education, local authorities, physical planning experts.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • The enrolment and retention rate is influenced by the proximity of schools to locations where returnees live. In a number of returnee situations, schools have not been constructed in areas of return or are located at a far distance, and hence, affecting the sustainability of return. Families separate as they tend to leave their school-age children behind in order for them to continue their education. This practice exposes the children to protection risks when adult care is not available. • Accessibility means that children can go and return from school in safety and security or within one hour walk when local transport is not available. • Young children and those who have physical disabilities or visual impairment will need specific attention and support to commute to and from school. • In some locations, appropriate clothing will be needed during winter and rainy seasons. • The community should be involved when planning and making decisions on school locations. • The parents' and teachers' association should be engaged into discussions in defining a safe distance for children and for the mobility of those with physical challenges. 				
REFERENCES <ul style="list-style-type: none"> • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • <i>The Dakar Framework Education for All</i>. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • INEE, (2004) <i>Minimum Standards for Education in Emergencies, Chronic Crises and Early Reconstruction</i>. Inter-Agency Network for Education in Emergencies, Paris. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
21	Are educational diplomas / certificates obtained in asylum country, recognized in country of origin?	YES	<input type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	Education
RATIONALE Skills and competencies obtained by refugees/returnees from home or host countries are key to rebuilding their lives, their communities and for their self reliance. UNHCR, relevant UN Agencies and government authorities should ensure that diplomas, certificates and degrees of refugees and returnees are recognized by authorities.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Refugees/returnee students, Ministry of Education, UNESCO, UNICEF, implementing partners; tripartite agreement between UNHCR, host country, country of origin; existence of domestic laws; mechanism of recognition and equivalency of academic, professional, vocational diplomas, certificates and degrees				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • When refugees students or teachers arrive or repatriate, UNHCR and its implementing partners should ensure that children and adolescents have immediate access to simple educational activities and that normal education programmes resume quickly without discrimination. • Placement and aptitude tests should be organized for returnee students arriving without proper documents. For those who have documents, they may need support in translating their documents to facilitate their registration. Language courses, catch-up classes, or refresher courses will facilitate the integration into educational system. Information counseling should be made available to students whose courses were interrupted. • A tripartite agreement among the authorities in host country, country of origin and UNHCR has proven to be a good approach in addressing the issue of recognition, validation and certification. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention. • Convention against Discrimination in Education. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • ExCom. Conclusions No. 101 (LV), 2004. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
22	Percentage of RA students enrolled in Grades 1-6	100%	☑ Sex	Education
			☑ Age	Primary School (excluding local population) (measured in October/November of reporting year)
RATIONALE To ensure that all primary school-age children are enrolled in primary school. This indicator is in line with Goal 2, Target 3, of the Millennium Development Goals.				
METHODS OF MEASUREMENT Numerator: Total number of RA students enrolled in Grades 1-6 measured in October/November of reporting year Denominator: Total RA population 6-11 years old measured in October/November of reporting year				X 100 = %
DATA SOURCES Government school admission books, head teachers, partners, coordinating agency and refugees.				
FREQUENCY OF MEASUREMENT Annually, measured in October/November of reporting year.				
NOTES <ul style="list-style-type: none"> • Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). • The 6-11 age group is a sub-group of a standard UNHCR population age category (5-17 years). This age cut-off is critical to identifying the youth and adolescents that are not in school or in any educational programmes. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. • The comments column in the indicator report should mention: Gender parity achieved. • Report the number of children older than 11 years who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. • If the registration does not include year of birth and age, get the community to estimate the numbers of children aged 6–11 through Participatory Assessment. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 2 and 28. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
23	Percentage of RA students enrolled in Grades 7-12		☑ Sex	Education
			☑ Age	Secondary School (excluding local population) (measured in October/November of reporting year)
RATIONALE To ensure that as many primary school-age children who completed Grade 6 are enrolled in secondary school.				
METHODS OF MEASUREMENT Numerator: Total number of RA students enrolled in Grades 7-12 measured in October/November of reporting year Denominator: Total RA population 12-17 years old measured in October/November of reporting year				X 100 = %
DATA SOURCES Government school admission books, teachers, partners, coordinating agency and refugees.				
FREQUENCY OF MEASUREMENT Annually, measured in October/November of reporting year.				
NOTES <ul style="list-style-type: none"> • Because it is not feasible to know the ages of all students in many large camp populations, over-age students are often included in enrolment figures, yielding the gross enrolment ratio (GER). For monitoring retention rate, the NER is preferred; hence, the enrolment by grade and the information on over-age students will be useful. • The 12-17 age is a sub-group of a standard UNHCR population age category (5-17 years). This age cut-off is critical to identifying the youth and adolescents that are not in school or in any educational programmes. • The school enrolment record (admission book) may contain the following information: admission number, date of admission, class, and date of birth, sex, name, parent name, address, and last school attended. This can be cross-checked with the record on the number of students who passed the grade to determine the completion rate after the end of the school year. • Report the number of children older than 17 years who are enrolled. In the absence of camp or returnee registration, use the best available population estimate. If the registration does not include year of birth and age, get the community to estimate the numbers of children ages 12-17 through participatory assessment. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 2 and 28. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
24	Number of 15-24 years old students enrolled in tertiary education or training (formal, non-formal, vocational, skills, etc.) in RA		<input type="checkbox"/> Sex ✓	Social Integration
			<input checked="" type="checkbox"/> Age	Education
RATIONALE This indicator is focused on measuring the promotion of self-reliance by providing them with a professional qualifications geared towards future employment.				
METHODS OF MEASUREMENT Record the 15-24 years old students enrolled in tertiary education or training at the end of the reporting period.				
DATA SOURCES Universities, government tertiary education records, teachers, partners, coordinating agency and refugees.				
FREQUENCY OF MEASUREMENT Annually, one month after the start of the school year.				
NOTES <ul style="list-style-type: none"> • Youth and adolescents in this age group are more exposed to protection risks as there is often not enough educational or employment opportunities for them. • To ensure that as many secondary school graduates are enrolled in tertiary education or in training activities. The primary objective of the tertiary education and training is to promote self-reliance of returnees by providing them with a professional qualifications geared towards future employment. Tertiary education and training particularly for women is critical as it does not only provide positive role models to younger generation but it empowers and prepares them for leadership and more responsible roles in their own communities. • While the number of scholarships under DAFI (Albert Einstein German Academic Refugee Initiative Fund) is limited, this can be complemented by other university scholarships which can be made available through rigorous efforts by country operations and negotiating with local academic institutions. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 22. • Convention on the Rights of the Child, Art. 2 and 28. • Universal Declaration of Human Rights, Art. 26. • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. • The Dakar Framework Education for All. • UNHCR, (2003) <i>Education Field Guidelines</i>. UNHCR, Geneva. • UNHCR, (2003) <i>Agenda for Protection</i>. UNHCR, Geneva. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
25	Percentage of returnee UACs/SCs for whom tracing has been successfully completed	100%	<input checked="" type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	Children
RATIONALE To preserve the safety and well-being of unaccompanied and separated children (UACs/SCs) in returnee situations. Tracing is important for restoring links with their families.				
METHODS OF MEASUREMENT Numerator: Total number of returnee unaccompanied and separated children for whom tracing has been successfully completed at the end of reporting period Denominator: Total number of returnee unaccompanied and separated children identified at the end of reporting period				$X 100 = \%$
DATA SOURCES UNHCR, implementing and operational partners (especially the International Committee of the Red Cross, UNICEF, child protection NGOs), government (child/social welfare departments), returnee community.				
FREQUENCY OF MEASUREMENT Annually unless otherwise stated, but with continual monitoring.				
NOTES <ul style="list-style-type: none"> • Particular attention should be paid to the Voluntary Repatriation Form which registers unaccompanied and separated children. • Unaccompanied and separated children may be repatriated with their foster parents. Since fostering is usually understood to be a temporary arrangement until a more durable arrangement has been found, family reunification remains the first priority. Therefore tracing needs to be continued or to be initiated upon return in the country of origin. • Separation may also occur during voluntary repatriation.. Therefore tracing needs to be initiated for those children separated during repatriation. • The objective of tracing is reunification with parents or other close relatives. • Tracing must be carried out for all UACs/SCs at the earliest possible time upon return in the country of origin. Even if immediate family reunification is not possible, tracing is important for restoring links with their families. • The separation of children from their families and primary caregivers is one of UNHCR's five priority issues related to refugee children. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art. 22. • UNHCR, (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, (1997) <i>Guidelines on Policies and Procedures in Dealing with Unaccompanied Children Seeking Asylum</i>. UNHCR, Geneva. • ICRC, IRC, SCUUK, UNICEF, UNHCR, WVI, (2004) <i>Inter-agency Guiding Principles on Unaccompanied and Separated Children</i>. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
26	Have children been recruited for military purposes?	NO	<input type="checkbox"/> Sex	Social Integration
			<input type="checkbox"/> Age	Children
RATIONALE To preserve the safety and well-being of children associated with fighting forces in emergencies and protracted refugee situations.				
METHODS OF MEASUREMENT "Yes" or "No" answer				
DATA SOURCES Formal and informal reports of UNHCR (e.g. proGres): government authorities, implementing and operational partners, refugee communities and individual refugees, Participatory Assessment.				
FREQUENCY OF MEASUREMENT Annually, but with continual monitoring, especially during an emergency or influx of refugees or asylum-seekers (also in APR).				
NOTES <ul style="list-style-type: none"> • <i>Children who have been recruited for military purposes are known as children associated with fighting forces (also called child soldiers). A child associated with fighting forces is defined as "... any person under 18 years of age who is part of any kind of regular or irregular armed force or armed group in any capacity, including but not limited to cooks, porters, messengers, and those accompanying such groups, other than purely as family members. It includes girls recruited for sexual purposes and forced marriage. It does not, therefore, only refer to a child who is carrying or has carried arms" (Cape Town Principles, 1997).</i> • Pending reunification with their families, measures for their protection, especially from re-recruitment and care are essential, in particular for girls who have given birth or who have become pregnant. • While recognizing that girls and boys may have different needs, they should benefit in an equitable manner from disarmament, demobilization and reintegration programmes. • Programmes for children released from armed groups and forces are more effective when addressed in the framework of tracing, reunification and reintegration rather than in the framework of a professional discharge from formal functions as for adults. • Security Council Resolution 1612 requests the Secretary-General to implement a monitoring and reporting mechanism on children and armed conflict, which includes the recruitment and use of children in armed conflict. • The military recruitment of girls and boys is one of UNHCR's five priority issues related to refugee children. • If the answer is "yes", please indicate under "Comments" the number. 				
REFERENCES <ul style="list-style-type: none"> • Convention on the Rights of the Child, Art.38 and 39. • Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict. • 1977 Additional Protocols to the Geneva Conventions. • ILO Convention on the Worst Forms of Child Labour, No. 182. • Statute of the International Criminal Court. • UN Security Council Resolution S/RES/1612 (2005) • UNHCR (1994) <i>Refugee Children. Guidelines on Protection and Care</i>. UNHCR, Geneva. • UNHCR, <i>Summary Note on UNHCR's Strategy and Activities for Girls and Boys of Concern to UNHCR</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
27	Percentage of returnees below poverty line	0%	<input checked="" type="checkbox"/> Sex	Economic security
			<input type="checkbox"/> Age	Employment and economic well-being
RATIONALE To measure the minimum level considered sufficient to sustain a family in terms of food, housing, clothing, medical needs, and education. This indicator is link with the Millennium Development Goal 1: "Eradicate extreme poverty and hunger".				
METHODS OF MEASUREMENT Survey				
DATA SOURCES National Statistics; MDG Reports. The World Bank Indicators estimates use unit record household data whenever possible, while PovcalNet uses grouped distribution. Use the World Bank Poverty Gap Ratio.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • This indicator provides a traditional measure of the general level of poverty in a given area. It indicates the relative number of people in poverty which constitute the major part of disadvantaged groups. Obtaining information on these groups helps designing and targeting economic development to specific groups and geographical areas. • According to UN official documents, the term "poverty line" is defined as "an income level that is considered minimally sufficient to sustain a family in terms of food, housing, clothing, medical needs, and so on". • For monitoring country poverty trends, indicators based on national poverty lines should be used, where available. • Efforts should be made to promote mainstreaming of refugees/returnees into existing national indicators. • Other related indicators include Household consumption expenditure, which is the expenditure incurred by resident households on consumption goods or services, excluding expenditure on fixed assets in the form of dwellings or on valuables. When dwellings are occupied by owners, the imputed value of the housing services enters into both the output and final consumption expenditure of the owners. Valuables are expensive durable consumption goods that do not deteriorate over time, are not used up in consumption or production, and are acquired primarily as stores of value. They consist mainly of works of art, precious stones and metals and jewelry fashioned out of such stones and metals. • The indicator is disaggregated in female-headed households and in male-headed households. 				
REFERENCES <ul style="list-style-type: none"> • World Bank Development Indicators. • Shim, J., Siegel, G., (1995) <i>Dictionary of Economics. Business Dictionary Series</i>. John Wiley & Sons, New York. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). • UN, (2003) <i>Indicators for Monitoring the Millennium Development Goals</i>. United Nations, New York. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
28	Number of returnees with access to land for agricultural purposes		<input type="checkbox"/> Sex ✓	Economic security
			<input type="checkbox"/> Age	Employment and economic well-being
RATIONALE To measure the accessibility of households to arable agricultural land. Arable land includes land under temporary crops, temporary meadows for mowing or pasture, land under market or kitchen gardens and land temporarily fallow.				
METHODS OF MEASUREMENT Survey				
DATA SOURCES National land use reports, World Bank Development Indicators, local agriculture authorities; NGO reports.				
FREQUENCY OF MEASUREMENT Annually				
NOTES <ul style="list-style-type: none"> • FAO and the World Bank regularly undertake surveys of land use in developing countries. • Particular attention is needed to the ration between available arable land in a given area and population density. • In small areas of return, UNHCR can engage with FAO and other partners on specific RA surveys. • The indicator is disaggregated in female-headed households and in male-headed households. 				
REFERENCES <ul style="list-style-type: none"> • 1951 Refugee Convention, Art. 34. • WB, (2002) <i>World Bank Development Indicators – Rural Environment and Land Use</i>. World Bank. • FAO, (1996) <i>Land Quality Indicators and Their Use in Sustainable Agriculture and Rural Development</i>. FAO, Rome. • FAO, (2002) <i>Gender and Access to Land, FAO Land Tenure Studies</i>, Rome. UNHCR (2002) <i>Livelihood Options in Refugee Situations: Promoting Sound Agricultural Practices</i>. UNHCR, Geneva. 				

N. REF. SIR	INDICATOR DESCRIPTION	STANDARD	DISAGGREGATION	REF. AREA
29	Percentage of returnees (of working age) employed or engaged in income generating activities		<input checked="" type="checkbox"/> Sex	Economic security
			<input type="checkbox"/> Age	Employment and economic well-being
RATIONALE To measure percentage of returnees who have access to income to meet basic individual/household needs, and are on the path towards self-reliance.				
METHODS OF MEASUREMENT Numerator: Returnees (of working age) employed or engaged in income generating activities Denominator: Number of working age returnees				X 100 = %
Survey: individual households survey				
DATA SOURCES Refugees; IPs implementing IGA or microfinance projects.				
FREQUENCY OF MEASUREMENT Bi-annual				
NOTES <ul style="list-style-type: none"> • It is important to get income information from each income earner, since errors can occur when respondents report for others. • It is important to capture all sources of income since much revenue is generated by episodic activities, such as part-time or seasonal labour, or sales of assets. • When gathering information for this indicator, it would be important to note what livelihood strategies returnees are developing, and whether these strategies/activities have contributed to self-reliance and sustainable livelihoods. • Employment should generate income sufficient to achieve an adequate standard of living. • Household income in relation to basic food basket is a key access indicator that measures the amount of family economic resources available to satisfy basic food needs. However, this is one of the most difficult and complicated indicators to collect (amongst the indicators relating to economic security). However, economic status is a fundamental window into livelihood security. 				
REFERENCES <ul style="list-style-type: none"> • WB, (2002) World Bank Development Indicators – Rural Environment and Land Use. World Bank. • FAO, (1996) <i>Land Quality Indicators and Their Use in Sustainable Agriculture and Rural Development</i>. FAO, Rome. • UNHCR, (2000) <i>Handbook for Emergencies</i>, 2nd Edition 2000, UNHCR, Geneva. • UN, (2000) <i>United Nations Millennium Declaration</i>. Resolution adopted by the General Assembly 18 September 2000 (A/RES/55/2). 				

Acronyms

AIDS	Acquired Immunodeficiency Syndrome
APR	Annual Protection Report
ART	Antiretroviral therapy
ASR	Annual Statistical Report
BID	Best Interests Determination
CAP	Consolidated Appeal Process
CCA	Common Country Assessment
CDC	Center for Disease Control
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CIR	Camp Indicator Report
COP	Country Operations Plan
CR	Country Report
CRC	Convention on the Rights of the Child
DAR	Development Assistance for Refugees
DIP	Department of International Protection
DLI	Development through Local Integration
DOS	Division of Operational Services
ECHA	Executive Committee for Humanitarian Affairs
FAO	Food and Agricultural Organization
FC	Faecal Coliforms
FIGSS	Field Information and Coordination Support Section
FMIS	Financial and Management Information System
GIS	Geographic Information System
GPS	Global Positioning System
HIV	Human Immunodeficiency Virus
HRR	Humanitarian Response Review
Kcal	Kilocalorie
IASC	Inter-Agency Standing Committee
ICCPR	International Covenant on Civil and Political Rights
IDPs	Internally Displaced Persons
IGA	Income Generating Activity
ILO	International Labour Organization
IOM/FOM	Inter-Office Memorandum/Field Office Memorandum
IP	Implementing Partner
JAM	Joint Assessment Mission
LOI	Letter of Instruction

MCH	Maternal and Child Health
MDGs	Millennium Development Goals
MSF	Médecins Sans Frontières
MUAC	Mid-upper arm circumference
NCHS	National Center for Health Statistics
NER	Net Enrolment Ratio
NGO	Non-Governmental Organization
ODI	Overseas Development Institute
OMC	Operations Management Cycle
OMS	Operations Management System
ORB	Operations Review Board
PCOS	Programme Coordination and Operations Support Section
PDM	Post food Distribution Monitoring
FICS	Field Information and Coordination Support Section
PMR	Project Monitoring Report
POP	People-Oriented Planning
PRS	Poverty Reduction Strategies
RA	Returnee Area
RBA	Rights-Based Approach
RBM	Results-Based Management
RSD	Refugee Status Determination
S&I	Standards and Indicators
SGBV	Sexual and Gender-Based Violence
SIR	Standards & Indicators Report
Sitrep	Situation Report
SOP	Standard Operating Procedure
SPMR	Sub-Project Monitoring Report
TBAs	Traditional Birth Attendants
TC	Total Coliforms
UAM/SC	Unaccompanied Minor/Separated Children
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
UNESCO	United Nations Education, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
VRF	Voluntary Repatriation Form
WFP	World Food Programme
WHO	World Health Organization

Glossary

Activity: a specific action or series of specific actions, which are undertaken to transform inputs into outputs. Activities can be broken down into tasks and sub-tasks as part of the work planning process. Activities have a time frame with expected start and end dates. An Activity is the second level of budgeting (under Sector) in the FMIS budget structure; it identifies the task being carried out.

Annual Programme Interim Report: the Annual Programme Interim Report focuses on implementation rates and achievements at mid-year, and allows for revision of objectives and adjustments of resources that may be required. An Annual Programme Interim Report consists of a financial part and narrative part. The latter should show the progress in implementation against objectives and expected outputs as described in the COP and Project Descriptions. The narrative part is for internal purposes only and replaces the former Mid-Year Progress Report. The financial part of the Report will indicate the financial rate of implementation and should be analyzed in light of the achievements reflected in the narrative part.

Assumption: in the planning process, a prediction, a condition, or an event that must exist if a Project or Sub-Project is to succeed, i.e. meet its objectives. Typically, project planners have little or no control over these conditions or events, but effective planning demands that assumptions be articulated and considered as part of analyzing the likelihood of the project being successful.

Assessment: the information and analysis that form the basis on which to plan and implement operations. An assessment is an essential pre-condition for planning effective refugee operations in existing or new camps, in rural and urban areas, as well as in repatriation operations.

Baseline: the Oxford English Dictionary defines baseline as *“The number from which, as a definite starting-point, a system of numeration proceeds”*. In the context of this Guide, a baseline gives the relevant indicators of the condition of the target population at the beginning of an operation.

Code of Conduct: a guide to help staff make ethical decisions in their professional lives and in their private lives – to the extent that the latter affects their professional work.

Country Operations Plan (COP): document prepared by every country operation which sets out the overall protection and solutions strategy as well as the hierarchy of objectives (goal,

sector objectives and outputs) for each programme. The COP is the only narrative document on the basis of which resource allocations for the Planning Year will come into effect. It is submitted during the second half of March of the Planning Year, giving a snapshot on the completed previous year, an update on the Current Year as well as an early proposal for the following year.

Country Report: document prepared by every country operation to report on the impact and results of the overall protection and solutions strategy as well as the objectives and outputs established for a country programme. The reporting period for the Country Report is 1 January to 31 December of the preceding year.

Denominator: the lower part of a fraction used to calculate a rate, proportion, or ratio.

Example: Indicator No. 34 (Urban Programme): Percentage of refugees resettled

Numerator: Number of refugees resettled

Denominator: Number of refugees identified for resettlement.

Durable Solutions: solutions to refugee situations which are lasting. They include voluntary repatriation (to country of origin), local settlement or integration (into country of asylum), and resettlement (to a third country).

Emergency: 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. Emergency assistance is aimed at meeting basic survival needs quickly. Emergency projects normally last no longer than 1 year and focus essentially on life-saving and life sustaining measures including community-based psychosocial response.

Evaluation: an analysis and assessment, as systematic and objective as possible, of UNHCR's policies, programmes, projects, practices, or procedures, focusing on their planning, design, implementation, and impact

ExCom: the UNHCR Executive Committee is the Organization's principal governance mechanism. The ExCom meets annually, early October, and its work is facilitated by a Standing Committee which meets 3–4 times a year.

UNHCR's Five Commitments to Refugee Women: based on a series of discussions and dialogue with refugees, it was agreed that UNHCR will aim at addressing the specific concerns of refugee women: integrated country level strategies to address sexual and gender based violence (SGBV), including domestic violence; individual registration and documentation of women of concern to UNHCR; fifty percent women representation in camp management committees;

participation of women in food and non-food item distribution and food management committees; standard provision of sanitary materials to women.

FMIS: UNHCR's legacy computerized Financial and Management Information System, which provides a standard budget structure common to UNHCR and implementing partners. It is currently being replaced by the Management Systems Renewal Project (MSRP).

FMIS budget structure: this budget structure is based on four components: 1) Sector, 2) Activity, 3) Item, and 4) Sub-Item. These are sub-divided into two levels Sector/Activity and Items/Sub-Items. The Sector/Activity level is the primary focus of project management and the minimum level of reporting throughout FMIS.

Gap analysis: an analysis of discrepancies between the current situation and the accepted standard. Gaps can be closed by directly providing external inputs or by increasing the resource base of the community.

Gender: the term used to denote the sexual characteristics assigned to men and women. These social characteristics are constructed on the basis of different factors, such as age, religion as well as national, ethnic, and social origin. They differ both within and between cultures and define identities, status, roles, responsibilities and power relations among the members of society or culture. Gender is learned through socialization. It is neither static nor innate, but evolves to respond to changes in the social, political and cultural environment. Sex refers to the biological characteristics of males and females that are universal.

Gender analysis: the systematic investigation of the differential impacts of development (and humanitarian assistance) on women and men. It is a tool that should be applied throughout the project cycle (appraisal, monitoring, evaluation), as well as to any assessment of benefits, the beneficiary profiles, and the evaluation of executing agencies. It is also applied in the design and implementation of policies, in the development of human resources, and training etc. Gender analysis also refers to the examination of a social process which considers the roles played by women and men, including issues such as the division of labour, productive and environmental factors that influence women and men.

Gender equality: a concept that means that all human beings should be free to develop their personal abilities and make choices without the limitations set by strict gender roles; that the different behavior, aspirations and needs of women and men are considered, valued and favoured equally. The term is also used to refer to the equal rights, responsibilities and opportunities of women, and men, girls and boys including the formulation and implementation of policies and programmes.

Goal: in relation to a country operation, the desired overall result to be achieved through UNHCR's involvement with a beneficiary population or theme.

Hierarchy of objectives: the cascade in the OMS planning framework from goals down to sector objectives and outputs. A hierarchy of objectives can be developed at all levels of the organization, from the highest level of organizational goals (mandate, mission statement) down to the level of individual staff members (CMS objectives).

Impact: the higher-level effect achieved through implementation of activities to meet goals and objectives. In a normal UNHCR country operation, impact refers to the quality and intended change produced by a programme. For example, by achieving the sector objective to provide sufficient quantities of cooking fuel to all segments of the refugee population in a given camp, higher level impacts are 1) a positive contribution to the nutritional status of the population, 2) a reduction in sexual violence in connection with firewood collection, and 3) mitigation of environmental damage around the camp. UNHCR seeks to develop operational strategies which have the broadest impact.

Implementing partner: any organization or agency (governmental, non-governmental inter-governmental, United Nations, or multilateral) to which UNHCR delegates responsibility for the implementation of financial or material assistance, and provides funds for this purpose through a standard (Sub-) Project agreement.

Indicator: a unit to measure signs of change towards the achievement of results. Two types of indicators are employed in the OMS. An *impact indicator* is a sign of change in conditions or in institutional practice that affects refugees and persons of concern or their welfare. A *performance indicator* is a measure of performance toward the achievement of planned outputs that can be quantified or graded in terms of quality and readily revisited within a foreseen timeframe. Performance indicators are set at the output level.

For the purpose of this Guide an indicator is defined as: A variable scale on which it is possible to objectively measure different points and that corresponds to, or correlates closely with, variations in the conditions of the refugees and persons of concern.

Input: any human, financial, or material resource which is transferred through activities into an output.

Internally Displaced Persons: internally displaced persons are persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border (OCHA, 2004)

IOM/FOM: Inter-Office Memorandum/Field Office Memorandum originating from UNHCR Headquarters and containing management instructions.

Milestones: in relation to work plans, a marker signifying that an important interim-phase has been completed.

Millennium Development Goals: the MDGs were set out in the 1990s by international conferences and summits. They were later compiled as the International Development Goals. In September 2000, the Member States of the United Nations unanimously adopted the Millennium Declaration. Following consultations among international agencies, the General Assembly recognized the Millennium Development Goals as part of the road map for implementing the Millennium Declaration. In the Millennium Declaration, the UN Member states were confident that humanity could make measurable progress towards peace, security, disarmament, human rights, democracy and good governance. They called for a global partnership for development to achieve the eight Goals that were agreed upon by 2015. MDGs address many of the same needs as humanitarian relief agencies including UNHCR, in sectors such as food, education, gender equality mainstreaming and women's empowerment, children, reproductive health, HIV/AIDS and environment. The last Goal, namely to engage in a global partnership for development, represents the means to achieve the first seven.

Monitoring: a continual review of performance during implementation undertaken by implementing partners, host governments, and UNHCR Field offices. Monitoring involves a systematic review of financial and programme performance, as measured against previously established planned achievements. Indicators are applied regularly and frequently to ascertain whether benefits are reaching the intended target group. Refugee men, women, boys and girls should participate in monitoring.

Numerator: the upper portion of a fraction used to calculate a rate, proportion, or ratio:

Example: Indicator No. 34 (Urban Programme): Percentage of refugees resettled

Numerator: Number of refugees resettled

Denominator: Number of refugees identified for resettlement

Objective: the intended result or impact of any Project or Sub-Project undertaken by UNHCR. An objective is a statement of the situation expected to prevail on completion of a Project or Sub-Project; a statement of desired results and impact, which contribute towards the achievement of the programme goals.

Operations Management System: the management framework for planning, organizing, and controlling UNHCR protection and assistance activities; the means by which UNHCR ensures that all aspects of its operations are appropriate, consistent, and effective.

Operational partner: any organization or agency with which UNHCR collaborates to provide protection and assistance for refugees or other persons of concern to UNHCR but which does not receive funds from UNHCR to implement activities on its behalf.

Output: a specific result of programme activities whose delivery is within the control of UNHCR or an implementing partner and for which implementers can be held fully accountable. An output contributes towards achieving an objective. Typical examples of outputs are “the number of classrooms built”, “cooking fuel distribution systems operational”, or “workshops delivered”.

Persons of concern: a generic term to describe all persons whose protection and assistance needs are of interest to UNHCR. UNHCR's authority to act on behalf of persons of concern other than refugees is based on General Assembly resolutions.

Planning: a complex process; many types of planning are undertaken at various levels: global, regional, sub-regional, “situation” (cross border planning around common caseloads and themes), country, site, work unit, project, sub-project and individual. Moreover, when engaging in planning, it is important to make a clear distinction between plans (paper documents) and the *planning process* (staff retreats, technical review sessions, lessons learned exercises, strategic planning meetings, objective setting sessions, etc.). For detailed reference see (UNHCR, 2004a).

Planning Year: the year for which initial project planning is undertaken. In the current programming cycle, programme teams report on the Previous Year, implement in the Current Year, and undertake initial planning for the following year, which is the Planning Year.

Protracted refugee situation: a situation in which refugees find themselves in a long-lasting and intractable state of limbo, where their lives may not be at risk, but their basic rights and essential economic, social and psychological needs remain unfulfilled after years in exile. A refugee may receive assistance, but is unable to enjoy some or all of those basic rights (freedom of movement, employment, education, etc). See EC/54/SC/CRP.14 (30th Meeting of the Standing Committee).

Resources: elements such as material items, people, capacities, knowledge and skills of men, women, boys, girls, and funds which can be applied to meet needs and produce an intended result.

Result: a change in the condition of a beneficiary population or situation of a host country which has a relationship to the (individual) beneficiary. A result is brought about by the intervention of UNHCR in concert with its partners.

Sector: an aggregation or categorization of UNHCR project activities; a level within the FMIS budget structure. Under current UNHCR procedures, objectives are formulated for each project at the FMIS Sector level.

Self-reliance: the ability of an individual, household or community to depend (rely) on their own resources (physical, social and natural capital or assets), judgment and capabilities with minimal external assistance in meeting basic needs, and without resorting to activities that irreversibly deplete the household or community resource base.

Sexual and Gender-Based Violence: gender-based violence is violence that is directed against a person on the basis of gender or sex. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty. While women, men, boys and girls can be victims of gender-based violence, women and girls are the main victims. This form of violence shall be understood to encompass, but not be limited to the following:

a) Physical, sexual and psychological violence occurring in the family, including battering, sexual exploitation, sexual abuse of children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation.

b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution. c) Physical, sexual and psychological violence perpetrated or condoned by the state and institutions, wherever it occurs.

Situation analysis: an analysis that comprises, in UNHCR, three closely interlinked phases: analysis of existing information (all the available information on a particular situation concerning refugees, internally displaced persons, and/or returnees is gathered from a wide range of internal and external sources), participatory assessment (structured discussions are organized with refugee women, girls, boys, and men of all ages and backgrounds to identify risks in relation to service delivery and operations and solutions), participatory planning (participants include donors, host government authorities, implementing and operational partners, and refugee men, women, boys and girls).

Situation monitoring: in many agencies, situation monitoring more commonly refers specifically to the world beyond the programme plans, e.g. Situation monitoring measures change in a condition or a set of conditions, or lack thereof (e.g. changes in the situation of children and women or changes in the broader country context).

Standard: a specific fixed point or range on the variable scale (indicator) that has to be reached or maintained to avoid occurrence of unacceptable conditions for refugees and persons of concern or unacceptable levels of performance.

Target: measured against standards set for an indicator and set monthly, quarterly, or annually to work towards meeting or exceeding a standard.

Type of assistance: UNHCR's programmes and projects are divided into the five operational types of assistance:

- **Emergency:** Assistance following an influx of refugees or other persons of concern to the High Commissioner, aimed at meeting basic survival needs quickly, normally lasting no longer than 1 year, and essentially focusing on life-saving and life-sustaining measures;
- **Care and Maintenance:** Assistance to refugees in relatively stable situations in which survival is no longer threatened but the durable solution for the refugee group has not yet been determined;
- **Voluntary Repatriation:** The most desirable solution (as long as the voluntary nature of the repatriation is safeguarded), which also covers assistance to help refugees overcome practical difficulties in repatriating, in safety and dignity to their country of origin;
- **Local Settlement:** Where voluntary repatriation is not yet possible, assistance to help refugees become self-supporting in the country of first asylum and to integrate into the economic and social life of the local community; and
- **Resettlement:** Where no other durable solution is feasible, assistance to enable refugees to resettle in a third country.

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Annex 1 (SIR)



Standards and Indicators Report (PCOS and FICSS / DOS)
Version 1.0, Geneva, February 2006

COUNTRY LEVEL			
PART I. GENERAL INFORMATION			
	IDENTIFICATION	INFORMATION	COMMENTS
	Country		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	UNHCR Office		
	Focal point		

PART II. POPULATION CATEGORIES OF CONCERN TO UNHCR (PLEASE REFER TO ANNUAL STATISTICAL REPORT, TABLE I)					
	POPULATION FIGURES AT END OF PERIOD	FEMALE	MALE	TOTAL	COMMENTS
	Refugees (1951 Convention)				
	Asylum-seekers (i.e. those without a final RSD decision)				
	Internally Displaced Persons (IDPs)				
	Returned refugees during year				
	Returned IDPs during year				
	Stateless (non-refugees)				
	Others of concern (describe under "Comments")				
	Total				

PART III. ACCESS OF ASYLUM-SEEKERS AND REFUGEES TO RIGHTS (WITHOUT DISCRIMINATION)						
	ACCESS TO THE TERRITORY		ASYLUM-SEEKERS	REFUGEES	STD.	COMMENTS
1	Have border authorities been clearly instructed to refer asylum-seekers to the competent authority?	?	Y/N			Yes
2	Are there credible reports of refoulement?	?	Y/N		Y/N	No
	Freedom of movement					
3	Are there cases of unwarranted detention beyond ExCom Conclusion 44?	?	Y/N		Y/N	No
	Right to documentation					
4	Do all asylum-seekers / refugees have access to individual identity documentation?	?	Y/N		Y/N	Yes

	ACCESS TO THE TERRITORY		ASYLUM-SEEKERS	REFUGEES	STD.	COMMENTS
	Right to public education					
5	Do asylum-seekers / refugees have access to [compulsory and] free primary education?	?	Y/N		Yes	
6	Are school diplomas / certificates obtained in the country of origin recognized in host country?	?	Y/N		Yes	
	Right to health care					
7	Do asylum-seekers / refugees have access to emergency and primary health care services?	?	Y/N		Yes	
	Access to gainful employment					
8	Do all asylum-seekers / refugees have a right to engage in gainful employment?	?	Y/N		Yes	

PART IV. REFUGEE STATUS DETERMINATION						
STATELESSNESS				VALUE	STD.	COMMENTS
9	Do states grant nationality to persons born in the territory of the state, if they would otherwise be stateless?	?	Y/N		Yes	
10	Are there reported cases of arbitrary deprivation of nationality leading to statelessness?	?	Y/N		No	
11	Do states allow renunciation of nationality only if the person concerned has acquired another nationality?	?	Y/N		Yes	
12	Are births of non-refugee stateless children properly registered?	?	Y/N		Yes	
GENERAL				VALUE	STD.	COMMENTS
13	Do all asylum-seekers have access to RSD procedures?	?	Y/N		Yes	
14	Do all asylum-seekers have access to information and counselling on RSD procedures?	?	Y/N		Yes	
15	Are reasons for rejection shared in writing with the applicant?	?	Y/N		Yes	
16	Are applicants permitted to remain in the country while an appeal is pending?	?	Y/N		Yes	
17	Are rejected asylum-seekers being deported/repatriated?	?	Y/N		No	
18	Average processing time between submission of application and first instance decision (in days)	?				
19	Average processing time between submission of application and final decision (in days)	?				

PART V. DURABLE SOLUTIONS						
GENERAL				VALUE	STD.	COMMENTS
20	Do refugees receive preferential treatment in naturalization procedures?	?	Y/N		Yes	
21	Do stateless persons receive preferential treatment in naturalisation procedures?	?	Y/N		Yes	
22	Does the government permit the local integration of refugees?	?	Y/N		Yes	
23	Is any undue pressure exercised on refugees influencing their voluntary choice to repatriate?	?	Y/N		No	
24	Does the government allow access to land / agricultural production to refugees / asylum-seekers?	?	Y/N		Yes	

URBAN PROGRAMME			
PART I. GENERAL INFORMATION			
	IDENTIFICATION	INFORMATION	COMMENTS
	Country		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	UNHCR Country Office		
	Focal point		

PART II. DEMOGRAPHY (PLEASE REFER TO ASR, TABLE II AND III)							
REFUGEES AND ASYLUM-SEEKERS AT END OF PERIOD	ASYLUM-SEEKERS			REFUGEES			COMMENTS
	FEMALE	MALE	TOTAL	FEMALE	MALE	TOTAL	
Under 5 years							
5-17 years							
18-59 years							
60 years and over							
Total population							

PART III. PROTECTION							
PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
1	Number of refugees and asylum-seekers refouled	?				0	
2	Percentage of asylum-seekers in detention	?				0%	
	- Number of asylum-seekers in detention (EP)						
	- Total no. of asylum-seekers (i.e. those without a final RSD decision) (EP)						
LEGAL STATUS			FEMALE	MALE	TOTAL	STD.	COMMENTS
3	Percentage of refugees and asylum-seekers registered individually	?				100%	
	- Total number of refugees and asylum-seekers individually registered (EP)						
	- Total number of refugees and asylum-seekers (EP)						
4	Percentage of adult refugees and asylum-seekers issued individual identity documentation	?				100%	
	- Total number of refugees and asylum-seekers ≥18 years old issued individual identity documentation (EP)						
	- Total number of refugees and asylum-seekers ≥18 years old (EP)						

PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
5	Percentage of newborns issued a birth certificate	?				100%	
	- Total number of newborn refugees and asylum-seekers issued with individual birth certificates (DP)						
	- Total number of newborn refugees and asylum-seekers (DP)						
SPECIFIC PROTECTION NEEDS			FEMALE	MALE	TOTAL	STD.	COMMENTS
6	Percentage of older persons with specific needs assisted	?				100%	
	- Number of older persons with specific needs assisted (DP)						
	- Number of older persons with specific needs (EP)						
7	Percentage of disabled persons ≥18 years old with specific needs assisted	?				100%	
	- Number of disabled persons ≥18 years old with specific needs assisted (DP)						
	- Number of disabled persons ≥18 years old with specific needs (EP)						
8	Percentage of disabled persons <18 years old with specific needs assisted	?				100%	
	- Number of disabled persons <18 years old with specific needs assisted (DP)						
	- Number of disabled persons <18 years old with specific needs (EP)						
9	Percentage of ex-combatants ≥18 years old with specific needs assisted	?				100%	
	- Number of ex-combatants ≥18 years old with specific needs assisted (DP)						
	- Number of ex-combatants ≥18 years old with specific needs (EP)						
10	Percentage of ex-combatants <18 years old assisted	?				100%	
	- Number of ex-combatants <18 years old assisted (DP)						
	- Number of ex-combatants <18 years old (EP)						

Note: (EP) End of period; (DP) During period

PART III. PROTECTION (CONTINUED)							
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
11	Does your Office have a Standard Operating Procedure (SOP) for SGBV? (Y/N)	?				Yes	
			FEMALE	MALE	TOTAL	STD.	COMMENTS
12	Percentage of SGBV cases who received support	?				100%	
	- Number of SGBV cases who received support (DP)						
	- Number of SGBV cases reported (DP)						

SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
13	Percentage of SGBV cases <18 years old who received support	?				100%	
	- Number of SGBV cases <18 years old who received support (DP)						
	- Number of SGBV cases reported <18 years old (DP)						
14	Percentage of asylum-seekers / refugees who participated in SGBV training	?				10%	
	- Total number of participants in SGBV training (DP)						
	- Total number of asylum-seekers / refugees (EP)						
15	Percentage of UNHCR and partner staff who have completed SGBV training	?				10%	
	- Total number of UNHCR and partner staff who have completed SGBV training (DP)						
	- Total number of UNHCR and partner staff at end of year (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
16	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	?				100%	
	- Number of UACs/SCs for whom a BID has been carried out (EP)						
	- Number of UACs/SCs identified (EP)						
17	Percentage of UACs/SCs for whom tracing has been successfully completed	?				100%	
	- Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	- Number of UACs/SCs identified (EP)						
18	Are children <15 years old involved in child labour?	?	Y/N			No	
19	Percentage of adolescents (12-17 years old) reached through targeted programming	?				100%	
	- Number of adolescents reached through targeted programming (DP)						
	- Total refugee population 12-17 years old (EP)						

PART IV. SELF-RELIANCE, ASSISTANCE AND COMMUNITY SERVICES							
GENERAL			VALUE			STD.	COMMENTS
20	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N) (DP)	?	Y/N			Yes	
HEALTH			VALUE			STD.	COMMENTS
21	Do refugees and asylum-seekers have access to emergency and primary health care services without discrimination?	?	Y/N			Yes	
HIV AND AIDS			VALUE			STD.	COMMENTS
22	Do asylum seekers / refugees have access to antiretroviral therapy from any source, if available in hosting community?	?	Y/N			Yes	

WOMEN			VALUE			STD.	COMMENTS	
23	Percentage of female members in asylum seeker / refugee representative bodies	?				50%		
	- Number of female members in asylum-seeker / refugee representative bodies (EP)							
	- Total number of members in asylum-seeker / refugee representative bodies (EP)							
24	Percentage of needs met for sanitary materials	?				100%		
	- Cost of sanitary materials provided (US\$) (DP)							
	- Cost of providing adequate sanitary materials (US\$) (DP)							
SELF-RELIANCE AND INCOME GENERATION			FEMALE HEADED HOUSEHOLDS		MALE HEADED HOUSEHOLDS		STD.	COMMENTS
25	Percentage of asylum-seekers and refugees below the national poverty line	?					0%	
			FEMALE	MALE	TOTAL	STD.	COMMENTS	
26	Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)	?						
	- Number of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities) (EP)							
	- Number of working age asylum-seekers and refugees (EP)							

Note: (EP) End of period; (DP) During period

PART IV. SELF-RELIANCE, ASSISTANCE AND COMMUNITY SERVICES (CONTINUED)							
EDUCATION			FEMALE	MALE	TOTAL	STD.	COMMENTS
27	Percentage of refugee students enrolled in Grades 1-6	?				100%	
	- Total number of refugee students enrolled in Grades 1-6						
	- Total refugee population 6-11 years old						
28	Percentage of refugee students enrolled in Grades 7-12	?					
	- Total number of refugee students enrolled in Grades 7-12						
	- Total refugee population 12-17 years old						

EDUCATION			FEMALE	MALE	TOTAL	STD.	COMMENTS
29	Percentage of students with specific needs attending Grades 1-6	?				100%	
	- No. of students with specific needs attending Grades 1-6						
	- No. of students 6-11 years old with specific needs						
30	Number of refugees enrolled in tertiary education (EP)	?					
31	Number of 15-24 years old refugees enrolled in training (formal, non-formal, vocational, skills, etc.) (EP)	?					
32	Literacy rate for asylum-seekers / refugees aged 15-24 years old (EP)	?				100%	

PART V. DURABLE SOLUTIONS							
REPATRIATION UND RESETTLEMENT			VALUE			STD.	COMMENTS
33	Percentage of refugees who repatriated (DP)	?				100%	
	- Number of refugees who repatriated (DP)						
	- Number who expressed willingness to repatriate (signed VRF) (DP)						
34	Percentage of refugees resettled	?				100%	
	- Number of refugees resettled (DP)						
	- Number identified for resettlement (DP)						
35	Average processing time for resettlement submissions (days)	?					
36	Average processing time for resettlement departures (days)	?					

Note: (EP) End of period; (DP) During period

REFUGEE CAMP / SETTLEMENT			
PART I. CAMP/SETTLEMENT INFORMATION			
IDENTIFICATION		INFORMATION	COMMENTS
	Location		
	Type of location (camp or settlement)		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	Date established (dd/mm/yy)		
	UNHCR Office		
	Focal point		
	First administrative level ("province")		
	Second administrative level ("district")		
	Total number of days in reporting period		
GEOGRAPHICAL INFORMATION		INFORMATION	COMMENTS
	Total surface area (m2)		
	Distance from border by road (km)		
	Geographical latitude (N/S)		
	Geographical longitude (W/E)		

PART II. DEMOGRAPHY								
POPULATION		BEGINNING OF PERIOD			END OF PERIOD			COMMENTS
		FEMALE	MALE	TOTAL	FEMALE	MALE	TOTAL	
	Under 5 years							
	5-17 years							
	18-59 years							
	60 years and over							
	Total population							
	Females 15-49 years							
POPULATION MOVEMENTS DURING PERIOD					FEMALE	MALE	TOTAL	
	Total arrivals (DP)							
	Total departures (DP)							

POPULATION EVENTS DURING PERIOD			ADMINISTRATIVE RECORD			COMMENTS	
			FEMALE	MALE	TOTAL		
1	Crude Birth Rate (annual)	?					
	- No of live births						
2	Infant Mortality Rate (<1 year old) (annual)	?					
	- Number of deaths <1 year old						
3	Child Mortality Rate (< 5 years old) (annual)	?					
	- Number of deaths <5 year						
4	Crude Mortality Rate (annual)	?					
	- Number of deaths (Total)						
DEMOGRAPHIC SURVEY DATA (IF AVAILABLE)		SURVEY DATA (IF AVAILABLE)		RATE / 1,000 / YEAR			COMMENTS
		BY	DATE	FEMALE	MALE	TOTAL	
	Crude Birth Rate (annual)						
	Infant Mortality Rate (annual)						
	Child Mortality Rate (annual)						
	Crude Mortality Rate (annual)						

PART III. PROTECTION							
PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
5	Number of refugees and asylum-seekers refouled (DP)	?				0	
6	Number of refugees and asylum-seekers killed (DP)	?				0	
7	Can the population move freely in/out of location (Y/N)	?				Yes	
LEGAL STATUS			FEMALE	MALE	TOTAL		
8	Percentage of refugees and asylum-seekers registered individually	?				100%	
	- Total number of refugees and asylum-seekers individually registered (EP)						
	- Total number of refugees and asylum-seekers (EP)						
9	Percentage of adult refugees and asylum-seekers issued individual identity documentation	?				100%	
	- Total number of refugees and asylum-seekers ≥18 years old issued individual identity documentation (EP)						
	- Total number of refugees and asylum-seekers ≥18 (EP)						

Note: (EP) End of period; (DP) During period

PHYSICAL PROTECTION			FEMALE	MALE	TOTAL	STD.	COMMENTS
PART III. PROTECTION (CONTINUED)							
LEGAL STATUS (CONTINUED)			FEMALE	MALE	TOTAL		
10	Percentage of newborns issued a birth certificate	?				100%	
	- Total number of newborn refugees and asylum-seekers issued with individual birth certificates (DP)						
	- Total number of newborn refugees and asylum-seekers (DP)						
SPECIFIC PROTECTION NEEDS			FEMALE	MALE	TOTAL	STD.	COMMENTS
11	Percentage of older persons with specific needs assisted	?				100%	
	- Number of older persons with specific needs assisted (DP)						
	- Number of older persons with specific needs (EP)						
12	Percentage of disabled persons ≥18 years old with specific needs assisted	?				100%	
	- Number of disabled persons ≥18 years old with specific needs assisted (DP)						
	- Number of disabled persons ≥18 years old with specific needs (EP)						
13	Percentage of disabled persons <18 years with specific needs assisted	?				100%	
	- Number of disabled persons <18 years old with specific needs assisted (DP)						
	- Number of disabled persons <18 years old with specific needs (EP)						
14	Percentage of ex-combatants ≥18 years old with specific needs assisted	?				100%	
	- No. of ex-combatants ≥18 years old with specific needs assisted (DP)						
	- Number of ex-combatants ≥18 years old with specific needs (EP)						
15	Percentage of ex-combatants <18 years old assisted	?				100%	
	- Number of ex-combatants <18 years old assisted (DP)						
	- Number of ex-combatants <18 years old (EP)						
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)			VALUE			STD.	COMMENTS
16	Does your Office have a Standard Operating Procedure (SOP) for SGBV? (Y/N)	?				Yes	
			FEMALE	MALE	TOTAL	STD.	COMMENTS
17	Percentage of SGBV cases who received support (DP)	?				100%	
	- Number of SGBV cases who received support (DP)						
	- Number of SGBV cases reported (DP)						

		FEMALE	MALE	TOTAL	STD.	COMMENTS	
18	Percentage of SGBV cases <18 years old who received support (DP)	?			100%		
	- Number of SGBV cases <18 years old who received support (DP)						
	- Number of SGBV cases reported <18 years old (DP)						
19	Percentage of asylum-seekers / refugees who participated in SGBV training	?			10%		
	- Total number of participants in SGBV training (DP)						
	- Total number of asylum-seekers / refugees (EP)						
20	Percentage of UNHCR and partner staff who have completed SGBV training	?			10%		
	- Total number of UNHCR and partner staff who have completed SGBV training (DP)						
	- Total number of UNHCR and partner staff at end of year (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
21	Percentage of UACs/SCs for whom a Best Interests Determination (BID) has been carried out	?			100%		
	- Number of UACs/SCs for whom a BID has been carried out (EP)						
	- Number of UACs/SCs identified (EP)						
22	Percentage of UACs/SCs for whom tracing has been successfully completed	?			100%		
	- Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	- Number of UACs/SCs identified (EP)						
23	Percentage of adolescents (12-17 years old) reached through targeted programming	?			100%		
	- Number of adolescents reached through targeted programming (DP)						
	- Total refugee population 12-17 years old (EP)						
24	Have children been recruited for military purposes? (Y/N) (DP)	?			No		

Note: (EP) End of period; (DP) During period

PART IV. COMMUNITY SERVICES / DEVELOPMENT						
GENERAL			VALUE		STD.	
25	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N) (DP)	?			Yes	

GENERAL			VALUE			STD.	
CAMP MANAGEMENT			VALUE / DATE			STD.	COMMENTS
26	Percentage of female members in camp management committees	?				50%	
	- Number of female members in camp management committees (EP)						
	- Total number of members in camp management committees (EP)						
TARGETED COMMUNITY ASSISTANCE			FEMALE	MALE	TOTAL		
27	Percentage of needs met for sanitary materials	?				100%	
	- Cost of sanitary materials provided (US\$) (DP)						
	- Cost of providing adequate sanitary materials (US\$) (DP)						

PART V. FOOD, NUTRITION, HEALTH AND HIV AND AIDS								
FOOD AND NUTRITION			FEMALE	MALE	TOTAL	STD.	COMMENTS	
28	Percentage of food beneficiaries entitled to food who received food during latest food distribution	?				100%		
	- Number of food beneficiaries entitled to food assistance and who received food during latest distribution							
	- Number of beneficiaries entitled to food assistance during latest food distribution							
29	Average number of kilocalories available per person per day	?				≥ 2,100		
	- Total number of kilocalories distributed per day							
	- Total population (EP)							
30	Percentage of female members in food distribution committees	?				50%		
	- Number of female members in food distribution committees (EP)							
	- Total number of members in food distribution committees (EP)							
31	Latest nutritional survey conducted (mm/yy)	?				Annual		
SURVEY DATA (IF AVAILABLE)		BY	DATE	FEMALE	MALE	TOTAL	STD.	COMMENTS
32	Rate of malnourished 6-59 mths children (Global Acute Malnutrition) measured by Z-score						< 5%	
HEALTH				FEMALE	MALE	TOTAL	STD.	COMMENTS
33	Number of persons per primary health care facility	?					< 10,000	
	- Total population served by primary health care facility (EP)							
	- Number of primary health care facilities (EP)							

HEALTH		FEMALE	MALE	TOTAL	STD.	COMMENTS
34	Annual number of consultations at primary health care facilities per person	?			1-4	
	- Number of consultations at primary health care facilities (DP)					
	- Total population served by primary health care facility (EP)					
35	Percentage of live births attended by skilled personnel (excl. TBAs)	?			≥ 50%	
	- Number of live births attended by skilled personnel (excl. TBAs) (DP)					
	- Number of live births (DP)					
36	Percentage of newborn children with low birth weight (< 2500 gs) (weighed within 72 hrs)	?			< 15%	
	- Newborn children < 2500 gs (weighed within 72 hrs) (DP)					
	- Total number of newborns weighed within 72 hours of birth (DP)					
SURVEY DATA (IF AVAILABLE)		BY	DATE	TOTAL	STD.	COMMENTS
37	Measles vaccination coverage	?			≥ 90%	
HIV / AIDS		TOTAL			STD.	COMMENTS
38	Number of condoms distributed per person per month (DP)	?			≥ 1	
	- Number of condoms distributed per month					
39	Have stocks of condoms run out for more than a week? (Y/N) DP	?			NO	
		COMMUNITY		REFUGEES	STD.	COMMENTS
40	Is antiretroviral therapy available in / for hosting community / refugees? (indicate in appropriate cell)	Y/N		Y/N	see guide	

Note: (EP) End of period; (DP) During period

PART VI. WATER, SANITATION, SHELTER & ENVIRONMENT						
WATER		INFORMATION				
41	Average quantity of water available per person per day (litres)	?			≥ 20	
	- Available water during one month (m3) (DP)					
	- Total population consuming water during one month (EP)					
42	Number of persons per usable water tap	?			< 80	
	- Population using water taps (EP)					
	- Number of usable water taps (EP)					
43	Number of persons per usable well/hand pump	?			< 200	
	- Population using wells/hand pumps (EP)					
	- Number of usable wells/hand pumps (EP)					

WATER			INFORMATION		
44	Percentage of pop. living within 200 m from water point	?		100%	
45	Percentage of positive faecal coliform detected at distribution points per 100ml sample during the year	?		0%	
46	Percentage of households with sufficient daily water storage capacity	?		100%	
SANITATION			INFORMATION	STD.	COMMENTS
47	Percentage of families with latrines	?		100%	
	- Number of family latrines in use (EP)				
	- Total number of households/families (EP)				
48	Number of persons per drop-hole in communal latrine	?		≤ 20	
	- Population using communal latrines (EP)				
	- Number of drop-holes used in communal latrines (EP)				
49	Number of persons per communal shower head	?		≤ 50	
	- Population using communal showers (EP)				
	- Number of communal shower heads in use (EP)				
50	Number of persons per communal refuse pit	?		≤ 500	
	- Population using communal refuse pits (EP)				
	- Number of communal refuse pits (EP)				
51	Percentage of communal buildings with adequate water/sanitation	?		100%	
	- Communal buildings with adequate water/sanitation (EP)				
	- Number of communal buildings (EP)				
SHELTER & PHYSICAL PLANNING			INFORMATION	STD.	COMMENTS
52	Average camp area per person (m ²)	?		> 45M ²	
	- Total surface area (m ²) (EP)				
	- Total population (EP)				
53	Percentage of households with adequate dwellings	?		100%	
	- Number of adequate dwellings (EP)				
	- Total number of dwellings (EP)				
54	Average dwelling floor size per person (m ²) (EP)	?		≥ 3.5	
ENVIRONMENT			INFORMATION	STD.	COMMENTS
55	Environmental Action Plan created/reviewed (mm/yy)	?			

Note: (EP) End of period; (DP) During period

PART VII. EDUCATION						
PRIMARY SCHOOL (EXCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
56	Percentage of refugee students enrolled in Grades 1-6	?			100%	
	- Total number of refugee students enrolled in Grades 1-6					
	- Total refugee population 6-11 years old (EP)					
	- Number of refugee students enrolled in Grade 1					
	- Number of refugee students enrolled in Grade 2					
	- Number of refugee students enrolled in Grade 3					
	- Number of refugee students enrolled in Grade 4					
	- Number of refugee students enrolled in Grade 5					
	- Number of refugee students enrolled in Grade 6					
57	Percentage of refugee students with specific needs enrolled in Grades 1-6	?			100%	
	- Total number of refugee students with specific needs enrolled in Grades 1-6					
	- Total refugee population 6-11 years old with specific needs (EP)					
SECONDARY SCHOOL (EXCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
58	Percentage of refugee students enrolled in Grades 7-12	?				
	- Total number of refugee students enrolled in Grades 7-12					
	- Total refugee population 12-17 years old (EP)					
TERTIARY EDUCATION, VOCATIONAL TRAINING AND LITERACY RATES						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
59	Percentage of 15-24 years old enrolled in training (non-formal, vocational, skills, etc.)	?				
	- Number of refugees 15-24 years old enrolled in training programmes (DP)					
	- Total number of refugees aged 15 to 24 years old (EP)					
TEACHERS (INCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS
60	Number of students per teacher	?			≤ 40	
	- Number of refugee and local students enrolled in Grades 1-12 (EP)					
	- Total number of teachers (EP)					

TEACHERS (INCLUDING LOCAL POPULATION) (MEASURED IN OCTOBER/NOVEMBER OF REPORTING YEAR)				FEMALE	MALE	TOTAL	STD.	COMMENTS
61	Percentage of refugee teachers			?			100%	
	- Total number of refugee teachers (EP)							
	- Total number of teachers (EP)							
62	Percentage of qualified or trained teachers			?			≥ 80%	
	- Number of qualified or trained teachers (EP)							
	- Total number of teachers (EP)							
SURVEY DATA (IF AVAILABLE)		BY	DATE	FEMALE	MALE	TOTAL	STD.	COMMENTS
63	Literacy rate for refugees 15-24 years old						100%	
EDUCATION				VALUE			STD.	COMMENTS
64	Is there a local education committee with IP/ government participation? (Y/N)			?			Yes	

PART VIII. ECONOMIC SECURITY								
AGRICULTURAL PRODUCTION AND INCOME GENERATION				FEMALE HEADED HOUSEHOLDS	MALE HEADED HOUSEHOLDS	STD.		COMMENTS
65	Number of refugees with access to land for agricultural purposes (DP)			?				
66	Number of refugees engaged in agricultural production (DP)			?				
				FEMALE	MALE	TOTAL	STD.	COMMENTS
67	Percentage of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities)			?				
	- Number of asylum-seekers and refugees (of working age) employed or self-employed (engaged in income generating activities) (EP)							
	- Number of working age asylum-seekers and refugees (EP)							
PART IX. DURABLE SOLUTIONS								
REPATRIATION AND RESETTLEMENT				VALUE			STD.	COMMENTS
68	Percentage of refugees who repatriated (DP)			?			100%	
	- Number of refugees who repatriated (DP)							
	- Number of refugees who expressed willingness to repatriate (signed VRF) (DP)							
69	Percentage of refugees resettled			?			100%	
	- Number of refugees resettled (DP)							
	- Number of refugees identified for resettlement (DP)							
70	Average processing time for resettlement submissions (days)			?				
71	Average processing time for resettlement departures (days)			?				

Note: (EP) End of period; (DP) During period

RETURNEE AREA			
PART I. GENERAL INFORMATION			
IDENTIFICATION		INFORMATION	COMMENTS
	Country		
	Returnee area (RA) name		
	Reporting period: From (dd/mm/yy)		
	Reporting period: To (dd/mm/yy)		
	First administrative level ("province")		
	Second administrative level ("district")		
	UNHCR office		
	Focal point		
	Is RA included in the National Development Plan? (Y/N)		

PART II. DEMOGRAPHY (PLEASE REFER TO ASR, TABLE II AND III)					
RETURNEES (RETURNED DURING REPORTING YEAR)		END OF PERIOD			COMMENTS
		FEMALE	MALE	TOTAL	
	Under 5 years				
	5-17 years				
	18-59 years				
	60 and > years				
	Total				
	Total number of returnees since start of returns				
	Total number of returned IDPs during year				
	Total number of returned IDPs since start of returns				
	Total population in RA (EP) (Returnees and non-returnees)				
	Number of returnee households				
1	Infant Mortality Rate (<1 year) (returnees and non-returnees)				
2	Child Mortality Rate (< 5 years) (returnees and non-returnees)				
3	Crude Mortality Rate (returnees and non-returnees)				

PART III. ACCESS TO RIGHTS (RETURNEES ONLY) / PROTECTION				
PROTECTION		VALUE	STD.	COMMENTS
4	Are there cases of arbitrary detention? (Y/N)		No	
5	Do all returnees have access to individual identity documentation without discrimination? (Y/N)		Yes	

PROTECTION				VALUE	STD.	COMMENTS		
6	Are all returnees allowed to vote? (Y/N)				Yes			
7	Are birth certificates given in country of asylum recognized? (Y/N)				Yes			
8	Are there reports of security incidents directed at returnees? (Y/N)				No			
SEXUAL AND GENDER-BASED VIOLENCE (SGBV)				FEMALE	MALE	TOTAL	STD.	COMMENTS
9	Percentage of SGBV cases who received support						100%	
	-Number of SGBV cases who received support (DP)							
	-Number of SGBV cases reported (DP)							
10	Percentage of UNHCR and partner staff who have completed SGBV training						10%	
	-Total number of UNHCR and partner staff who have completed SGBV training (DP)							
	-Total number of UNHCR and partner staff at end of year (EP)							

PART IV. SOCIAL INTEGRATION						
GENERAL				VALUE	STD.	COMMENTS
11	Has a Participatory Assessment been conducted at least once during the reporting year? (Y/N)				Yes	
SPECIFIC GENDER EQUITY				VALUE	STD.	COMMENTS
12	Percentage of female members in community representative bodies				50%	
	- Number of female members in representative bodies (EP)					
	- Total number of members in representative bodies (EP)					
HIV / AIDS			COMM.	RETURN.	STD.	COMMENTS
13	Is antiretroviral therapy available in / for hosting community / returnees? (indicate in appropriate cell)		Y/N	Y/N	see guide	
14	Will there be a possibility for returnee to continue ART in returnee area? (Y/N)				Yes	
WATER / SANITATION				VALUE	STD.	COMMENTS
15	Percentage of families with improved water supply at an adequate level of service				100%	
16	Percentage of returnee families with latrines				100%	
SHELTER				VALUE	STD.	COMMENTS
17	Percentage of returnees living in adequate dwellings? (survey)				100%	
HEALTH				VALUE	STD.	COMMENTS
18	Do returnees have access to emergency and primary health care services without discrimination (Y/N)				Yes	
19	Measles vaccination coverage				≥ 90%	

Note: (EP) End of period; (DP) During period

PART IV. SOCIAL INTEGRATION (CONTINUED)						
EDUCATION				VALUE	STD.	COMMENTS
20	Percentage of school aged population in returnee area (RA) living within reasonable distance from primary school (as per national standard or less than 5 km) (survey)				100%	
21	Are educational diplomas / certificates obtained in asylum country, recognized in country of origin? (Y/N)				Yes	

EDUCATION			VALUE	STD.	COMMENTS		
		FEMALE	MALE	TOTAL	STD.	COMMENTS	
22	Percentage of RA students enrolled in Grades 1-6				100%		
	-Total number of RA students enrolled in Grades 1-6						
	-Total RA population 6-11 years old						
23	Percentage of RA students enrolled in Grades 7-12						
	-Total number of RA students enrolled in Grades 7-12						
	-Total RA population 12-17 years old						
24	Number of 15-24 years old students enrolled in tertiary education or training (formal, non-formal, vocational, skills, etc.) in RA (EP)						
CHILDREN			FEMALE	MALE	TOTAL	STD.	COMMENTS
25	Percentage of UACs/SCs for whom tracing has been successfully completed				100%		
	-Number of UACs/SCs for whom tracing has been successfully completed (EP)						
	-Number of UACs/SCs identified (EP)						
		VALUE			STD.	COMMENTS	
26	Have children been recruited for military purposes? (Y/N) (DP)				No		

PART V. ECONOMIC SECURITY							
	EMPLOYMENT AND ECONOMIC WELLBEING	FEMALE HEADED HOUSEHOLDS		MALE HEADED HOUSEHOLDS		STD.	COMMENTS
27	Percentage of returnees below poverty line (EP)					0%	
28	Number of returnees with access to land for agricultural purposes (DP)						
		FEMALE	MALE	TOTAL	STD.	COMMENTS	
29	Percentage of returnees (of working age) employed or engaged in income generating activities (DP)						

Note: (EP) End of period; (DP) During period