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Update on Global programmes

Summary

This paper provides an overview of developments in the global programmes of the Office of the United Nations High Commissioner for Refugees. It focuses on interventions and implementation in the following key areas: (a) self-reliance and inclusion; (b) development partnerships; (c) nutrition and food security; (d) education; (e) cash-based interventions; (f) public health, including mental health and psychosocial support; and (g) energy, settlement planning, shelter and housing, and water, sanitation and hygiene.

I. Introduction

As of June 2025, global programmes of the Office of the United Nations High Commissioner for Refugees (UNHCR) supported the needs of millions of forcibly displaced individuals, against a backdrop of new and ongoing conflict, political instability and human rights violations. These programmes covered the following areas: (a) self-reliance and inclusion; (b) development partnerships; (c) nutrition and food security; (d) education; (e) cash-based interventions; (f) public health, including mental health and psychosocial support; and (g) energy, settlement planning, shelter and housing, and water, sanitation and hygiene. UNHCR continues to co-lead the global shelter cluster and the global camp coordination and camp management cluster.

A. Self-reliance and inclusion

UNHCR collaborated with partners to advance refugee self-reliance and inclusion by enhancing access to economic opportunities, agriculture, social protection, and financial inclusion for forcibly displaced and stateless people. Strategic partnerships with the International Labour Organization are facilitating implementation in more than 35 countries, supporting access to economic opportunities and rights. The implementation of the economic inclusion and social protection multi-stakeholder pledge of the Global Refugee Forum is progressing well across its three pillars: advancing law and policy reform, expanding programme outreach, and strengthening data and evidence, while continued investment and collaboration remain essential to translate this momentum into tangible gains in refugee self-reliance and inclusion.

UNHCR also supported agricultural investments in displacement-affected areas. Key initiatives included engagements with the International Finance Corporation (IFC) and partners to identify agribusiness opportunities, including land access, market linkages and skills profiling in Chad, Ethiopia, Rwanda, Uganda and Zambia, to mobilize private sector investments. Agricultural roadmaps are being developed in Cameroon and Zambia, engaging governments, private sector actors, and development partners to promote inclusive policy reforms and investment.

In the area of social protection, increased advocacy within global donor initiatives resulted in the adoption of the Common Principles on linking humanitarian assistance and social protection- including for refugees.¹ Furthermore, displacement was formally recognised as a key driver of fragility by the High-Level Panel on Social Protection in Conflict, led by the United Kingdom of Great Britain and Northern Ireland. Technical support was also extended to six countries.²

Limited access to financial services remains a barrier to socioeconomic inclusion. In collaboration with global law firm DLA Piper, UNHCR launched a mapping of regulatory frameworks in over 80 countries, identifying key legal and practical barriers, as well as good practices. Good practices include a blended finance initiative in Uganda and the launch of the Kiva Refugee Investment Fund, which channels capital to financial institutions serving refugees. Furthermore, the IFC-UNHCR joint initiative strengthened financial inclusion gap assessments in ten³ operations, which led to six projects with financial institutions targeting Europe and Latin America.

B. Development partnerships

UNHCR continues to engage a broad spectrum of development partners to promote refugee inclusion, self-reliance, and durable solutions, combining country-level initiatives with global financing, data and policy collaboration in line with a sustainable response approach.

At the operational level, UNHCR supported government-led strategies aimed at enabling self-reliance and the inclusion of refugees in national systems. In Kenya, the Shirika Plan received backing through the PROSPECTS Partnership⁴ (Government of the Kingdom of the Netherlands), Japan International Cooperation Agency and the Government of Denmark. In Ethiopia, collaboration with the German Development Cooperation, through the *Deutsche Gesellschaft für Internationale Zusammenarbeit* or GIZ, facilitated the development of the draft Makatet roadmap, which will serve as a framework for inclusion and self-reliance countrywide. In Zambia, the Japan International Cooperation Agency and the United Nations Development Programme facilitated integrated area-based plans, including a \$6 million grant for infrastructure and services, and a new technical cooperation project. Through the Global Islamic Fund for Refugees, \$2.5 million was allocated for refugees and host communities in Chad, Egypt and Libya.

UNHCR deepened its partnership with the World Bank to leverage the dedicated financing window and innovative financing instruments for refugees. Through the International Development Association Window for Host Communities and Refugees, over \$5.5 billion was allocated to 21 eligible low-income countries, and the Global Concessional Financing Facility provided \$1 billion as grants for middle-income refugee-hosting countries. The IFC-UNHCR joint initiative explores opportunities to support private companies' interventions in areas hosting refugees and internally displaced people, focusing on decent jobs for forcibly displaced people and their host communities, enhanced access to financial services and value chain integration. The joint initiative supported financial inclusion gap assessments in ten operations, collecting data to showcase the business opportunity in engaging with forcibly displaced people. This has led to six projects with financial institutions targeting forcibly displaced populations and host communities in Europe and Latin America. The World Bank-UNHCR Joint Data Center on Forced Displacement advanced 42 activities and contributed to the integration of displaced populations into national data systems in 20 countries. It also enabled data-informed programmes worth around \$4.7 million across nine⁵ countries and supported Ethiopia's directive on refugee employment. A joint team was also established with the World Bank to accelerate sustainable responses across UNHCR operations.

See https://resources.peopleinneed.net/documents/1336-common-principles-for-linking-humanitarian-assistance-and-social-protection_0.pdf

² Angola, Burundi, Mauritania, Mozambique, Nigeria and Zambia.

³ Brazil, Chad, Colombia, Ecuador, Peru, Poland, Mauritania, Mexico, the Republic of Moldova and Romania

⁴ The project is implemented by UNHCR, the International Finance Corporation, the International Labour Organization, the United Nations Children's Fund and the World Bank. It operates at the global and regional levels, and focuses on eight countries in the Middle East and North Africa and in the East and Horn of Africa.

⁵ Bangladesh, Burundi, the Central African Republic, Chad, Colombia, the Democratic Republic of the Congo, Ecuador, Lebanon and Yemen.

The partnership between UNHCR and the International Monetary Fund has been instrumental in framing forced displacement as a macroeconomic issue, enriching policy discussions on economic growth, fiscal space and debt sustainability, as part of Article IV⁶ consultations. The 2025 World Economic Outlook and the Regional Economic Outlook for Sub-Saharan Africa underscore the economic implications of hosting refugees and the potential of inclusive policies. Complementing this, UNHCR engagement with the Organisation for Economic Co-operation and Development has become vital for producing data on Official Development Assistance related to displacement and for promoting the humanitarian-development-peace nexus, such as through its contributions to the 2025 States of Fragility Report.

C. Nutrition and food security

UNHCR and partners screened 1.36 million people in 20 countries for acute malnutrition, leading to the treatment of over 113,000 children and 13,000 pregnant and breastfeeding women. Support for maternal and child nutrition was strengthened through counselling on feeding practices for infants and young children, reaching 274,000 women and caregivers. Despite exceptional funding constraints, which contributed to a more than 30 per cent decline in admissions compared to the same period in 2024, these interventions remain critical to protecting refugee health and resilience.

In 2025, funding shortfalls have severely undermined food assistance for refugees. UNHCR is working closely with the World Food Programme (WFP) and donors to sustain life-saving assistance, while also expanding complementary approaches that reduce dependency, including livelihoods, social protection, and access to national services. These efforts underscore the urgency of scaling up sustainable responses and self-reliance initiatives.

D. Education

In 2025, the Global Refugee Forum pledge on education inclusion was advanced through the INSPIRE technical assistance facility, a partnership with the World Bank and the Foreign, Commonwealth and Development Office of the United Kingdom of Great Britain and Northern Ireland. Under the leadership of the Government of Zambia, a joint event convened technical counterparts from 15 countries to exchange good practices and launch the Guide on the Inclusion of Refugee Children in National Education Systems. The engagement enabled governments to identify priority barriers, align financing and delivery arrangements and initiate country roadmaps for inclusion with follow-up support.

The Secondary Education Working Group, in partnership with Plan International, published a report⁷ which outlines an action agenda to improve access to and retention in national secondary education systems for forcibly displaced adolescents and youth.

As the global lead on refugee higher education, UNHCR continues to expand the Albert Einstein German Academic Refugee Initiative, known as the DAFI tertiary scholarship programme. Beneficiary female students account for 45 per cent. In June 2025, UNHCR and the Tertiary Refugee Student Network co-convened the global 15by30 refugee higher education conference, advancing the goal of enrolling 15 per cent of refugee youth in higher education by 2030.

UNHCR continues to advance connected education initiatives. The Instant Network Schools programme, in partnership with the Vodafone Foundation, reached over 130 connected classrooms in six countries. The ProFuturo partnership delivered digital learning to 26 primary schools in Nigeria, Rwanda and Zimbabwe.

In response to the Sudan crisis, efforts focused on early inclusion in national systems and improving learning quality. In Chad, remedial programmes and education systems reached

⁶ International Monetary Fund (IMF) Article IV consultations are annual or near-annual discussions between the IMF and each member country, to assess economic and financial developments, policies and prospects.

⁷ See https://inee.org/sites/default/files/resources/SEWG On the precipice of progress FINAL.pdf.

⁸ The Democratic Republic of the Congo, Egypt, Kenya, Mozambique, South Sudan and the United Republic of Tanzania.

70,000 children, while in Uganda, 34,000 benefited from improved classrooms and teacher training. In early 2025, Sudanese refugees in the Central African Republic sat national exams for the first time, with a 60 per cent pass rate overall and 100 per cent among girls. Yet in eastern Chad, many children have remained out of school for two years, highlighting urgent gaps in safe, equipped classrooms and the protective role of education.

While efforts to include refugees in national education systems are increasing, close to half of school-aged refugee children remain out of school. Barriers to enrolment and retention persist in both protracted and emergency contexts.

E. Cash-based interventions

As of 30 June, UNHCR had delivered cash assistance to 2 million people (53 per cent female) in some 100 countries. Cash proved to be cost-effective with bank fees ranging from 1-3 per cent. Post-distribution monitoring in 74 countries⁹ indicated that 98 per cent of UNHCR cash recipients reported overall satisfaction with the cash assistance, and 96 per cent reported that cash improved their living conditions.

UNHCR uses cash as a modality to deliver assistance in line with the sustainable responses approach, including enhancing digital payments and promoting financial inclusion, and has documented practices in 11 countries. As of 31 August, \$121 million had been delivered through the UNHCR cash management system, CashAssist.

Cash is being used in emergencies, weather-related disasters and return situations, with preparedness measures in place in 90 per cent of countries at risk of displacement. As chair of the Global Cash Advisory Group¹¹ with the United Nations Office for the Coordination of Humanitarian Affairs, UNHCR continues to support and improve cash working groups in refugee settings. Cash assistance remains cost-effective and is the preferred form of support. However, declining resources are jeopardizing the only lifeline for many. Post-distribution monitoring found that 66 per cent of recipients could meet only half or less of their basic needs.

F. Public health, including mental health and psychosocial support

UNHCR is advancing inclusive, resilient public health responses that integrate refugees into national systems while sustaining emergency preparedness and essential care. The next global public health strategy for 2026–2030, which is currently under preparation and is adequately resourced, aims to advance refugee inclusion in national health systems, promote long-term resilience, cost efficiency and better health outcomes for both refugees and host populations.

The integrated refugee health information system now operates in 22 countries, ¹² covering 191 camps and settlements, and provides robust evidence for planning and advocacy. More than 3.8 million health consultations were conducted, benefiting refugees (83 per cent) and local communities (17 per cent). Health facilities provided over 54,000 women with skilled childbirth care, achieving a 94 per cent skilled birth attendance rate. Funding cuts caused a 9 per cent decrease in consultations compared to the same period in 2024.

In 2025, most of the seven new emergencies declared by UNHCR occurred where public health programmes were already in place, enabling rapid scale-up with national authorities and partners. UNHCR coordinated with health ministries, the World Health Organization (WHO) and partners to support refugee-inclusive outbreak responses covering cholera in Chad, Kenya, Ethiopia, Democratic Republic of the Congo and the Sudan; measles and dengue in the Sudan; and mpox in the Democratic Republic of the Congo and Uganda.

Capacity for mental health and psychosocial support in emergencies was strengthened in Burundi, Chad and the Sudan, including through emergency deployments under a surge support mechanism funded by the Government of the Netherlands (Kingdom of) with an emphasis on needs assessments and basic psychosocial support training for refugee-led

⁹ See https://www.unhcr.org/media/cash-assistance-2024-main-outcomes-post-distribution-monitoring

Afghanistan, Costa Rica, Egypt, Iraq, Jordan, Mexico, the Republic of Moldova, Uganda, Ukraine and Zambia. See https://www.unhcr.org/media/cash-and-sustainable-responses

¹¹ See https://reliefweb.int/topic/quality-cash-coordination-framework-qccf

¹² See https://www.unhcr.org/media/annual-public-health-global-review-2024

organizations and national non-governmental organizations. Interagency work with WHO, the United Nations Children's Fund and the United Nations Population Fund on the roll-out of the Minimum Service Package continued, including through capacity-building workshops with the Government, United Nations partners, and non-governmental organizations and refugee-led organizations in Ethiopia and Peru. In Bangladesh, an intervention designed to support adolescents experiencing stress, depression and anxiety was adapted linguistically and culturally to meet the needs of Rohingya adolescents and their caregivers. National psychologists and refugee volunteers were trained to deliver the programme.

UNHCR and WHO co-convened the Group of Friends of Health for Refugees and Host Communities, holding two stock-taking events focusing on multi-stakeholder pledges to integrate refugees into health systems and strengthen mental health and psychosocial support. Participants emphasized removing legal and administrative barriers; meaningful refugee engagement; and securing sustainable financing and partnerships. At the seventy-eighth World Health Assembly, UNHCR co-hosted a side event with the International Federation of Red Cross and Red Crescent Societies and the WHO, advocating for the integration of non-communicable diseases and mental health and psychosocial support into emergency preparedness, response and recovery to ensure resilient and inclusive primary health care systems. UNHCR, WFP, and the Joint United Nations Programme on HIV/AIDS (UNAIDS) continued to lead the inter-agency task team on HIV in emergencies, updating the Inter-Agency Standing Committee Guidelines for Addressing HIV in Humanitarian Settings, which is due for release in 2026.

G. Energy, settlement planning, shelter and housing, and water, sanitation and hygiene

The Geneva Technical Hub 1.0 served as a collaborative platform to enhance the technical capacity of UNHCR, foster innovation and promote more sustainable and effective humanitarian responses, in line with the 2024–2030 Focus Area Strategic Plan on Climate Action. Between 2021 and 2024, the Geneva Technical Hub collaborated with Swiss academic institutions to develop tools such as guidance on flood risk and nature-based solutions, which are now being applied in Bangladesh, the Republic of the Congo and Kenya. As part of a Global Refugee Forum pledge, the Geneva Technical Hub 2.0 is being prepared with key partners, emphasizing localization, resource sharing, and joint learning. Additional donor engagement is being sought to expand its reach and impact.

To foster climate resilience and reduce dependency on fossil fuels, UNHCR is advancing the solarization of water systems and health facilities through Project Flow's innovative financing mechanisms. As of June 2025, implementation of solarization of 25 water systems and health facilities is ongoing in Ethiopia, Mauritania, Rwanda and the Sudan. These works are expected to benefit 1.2 million individuals in the coming years and reduce operational costs by an estimated \$900,000 per year.

As part of its commitment to scaling nature-based solutions in fragile settings, UNHCR advanced implementation of the Refugee Environmental Protection Fund, completing a multi-phase procurement process to launch clean cooking and reforestation pilots in Rwanda and Uganda. Backed by carbon finance, the pilots aim to restore over 100,000 hectares and enable more than one million refugees and host community members to access clean cooking. The Fund is targeting the generation of high-integrity, Article 6-ready¹³ carbon credits, with feasibility studies underway in Bangladesh and Brazil to prepare future pilots.

H. Global shelter cluster

The global shelter cluster operates in 37 countries,¹⁴ having reached over 5.9 million internally displaced people during 2025. UNHCR led or co-led in 16 of these operations. By mid-2025, 28 countries reported funding requirements of \$2.5 billion, of which only \$282 million has been received, leaving a substantial shortfall. An estimated 85 million people

¹³ Article 6 of the Paris Agreement provides the framework for international carbon markets and cooperation between countries in achieving their climate targets. "Article 6-ready" carbon credits are designed to meet these rules, ensuring environmental integrity, avoidance of double counting and eligibility for future use under the Paris Agreement mechanisms.

¹⁴ See https://sheltercluster.org/pages/operations

require shelter, with programmes targeting 27 million of the most vulnerable. The global shelter cluster also advanced its Strategy 2030 by prioritizing climate-resilient, inclusive and decentralized programming during a challenging funding period. It sustained essential global services while enhancing technical capacity and partner engagement, notably through climate adaptation initiatives and expanded learning opportunities.

I. Global camp coordination and camp management cluster

The global camp coordination and camp management cluster operated in 32 countries¹⁵, supporting over 20.8 million internally displaced people. UNHCR led or co-led 19 of these operations, where approximately 40 per cent of internally displaced people resided in displacement sites. The cluster focused on safe, dignified site management, climate-resilient infrastructure, capacity-building and strengthened local coordination. Across these contexts, a total of 20,397 sites were identified, with camp coordination and camp management activities covering 4,135 sites and providing direct assistance to 8.8 million people. Despite this scale, funding¹⁶ received by partners amounts to \$21 million, a 47 per cent decrease compared to 2024. According to UNHCR data,¹⁷ across the 27 countries, there are 51 million internally displaced people.

UNHCR is actively engaged in the Humanitarian Reset process launched by the Emergency Response Coordinator to ensure that the clusters co-led by UNHCR contribute towards a humanitarian response that is locally led and globally supported.

¹⁵ See https://www.cccmcluster.org/where-we-work

¹⁶ According to UNHCR funding analysis.

 $^{^{17}\,}$ Data does not represent all global camp coordination and camp management cluster members.