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FMR 67 Editors' briefing: Public Health and WASH / Non-signatory States and the international refugee regime

This **Editors' briefing** provides an overview of the content of **FMR 67**, with links to the relevant articles, and a full contents listing of articles.

In the **Public health and WASH (water, sanitation and hygiene)** feature, authors discuss challenges, responses and innovations across a wide range of settings, and identify learning to inform future public health and WASH work with forced migrants.

Meanwhile, in the second feature, authors explore the status of protection in **non-signatory States**, examining in particular the role of UNHCR, civil society and legal actors in facilitating access to protection for refugees and asylum seekers.

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FMR 68, October 2021: Externalisation

FMR 69, March 2022: Climate crisis and displacement – from commitment to action

FMR 70, July 2022: Localisation of knowledge production

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PUBLIC HEALTH AND WASH

Public health has rarely been as much in the spotlight as it has been since the global COVID-19 pandemic began in late 2019. The role of water, sanitation and hygiene (WASH) in preventing infection has become visible to a much wider community as handwashing, sanitising and other methods of infection control have emerged as key in fighting the spread of the disease.

Adapting in crisis

COVID-19 has touched nearly all corners of the globe and many of the articles in this feature contain lessons learnt from the first 18 months of the pandemic. New thinking has been needed to deal with the scale and severity of the pandemic, and continuing adaptation and innovation required in order to keep pace with emerging understanding of the disease itself. Infection Prevention and Control (IPC) has been an essential component of pandemic response. IRC's 2020 assessment of IPC standards in health facilities in 22 countries exposes serious shortcomings in this area ([Eldred et al](#)). Lack of access to safe water, PPE supply chain shortages, staff capacity and training challenges, insufficient funding and inadequate health facility infrastructure all contribute to IPC standards being poor in many settings. The authors sound a call to action, concluding that beyond the current pandemic IPC will need investment to ensure that all these weaknesses are addressed.

Experiences in Ethiopia, Somalia and South Sudan have led to innovation in IOM's WASH work, particularly in the area of public health communication ([Abdelaziz et al](#)). While the pandemic has confirmed the importance of community engagement and the use of relevant and accessible channels to disseminate key health messages, it has also required new approaches due to social distancing and the reduction in international travel. The latter has meant that local staff and community members have been more active in hygiene promotion and COVID-19 information sharing, leading to positive results. The authors provide seven key lessons learnt from the pandemic response, including the success of household-level distribution of emergency supplies in targeting vulnerable groups who may have previously been excluded because they could not leave their homes.

Gabrielle Low's case-study from Mexico describes the ways in which UNHCR collaborated with local health authorities in Tapachula to ensure that refugees and asylum seekers in the town

were able to follow the government's 'stay at home' recommendation ([Low](#)). Initially a local hotel was used simply to house people needing to isolate due to testing positive for COVID-19 but later other primary care services were made available there as well through a clinic staffed by UNHCR-funded medical staff. As a short-term solution in a time of crisis, this set-up was a success, with positive feedback from those living there as well as from local authorities. However, the higher costs and the risk of creating permanent parallel structures for accessing health care mean that this model is best suited to immediate crisis response.

Vulnerable groups

The specific vulnerabilities of certain groups during the pandemic are explored in several other contexts in this feature. Older refugees living in Uganda face particular challenges in obtaining water and soap for essential hygiene practices needed to protect themselves against COVID-19, a disease which poses a higher risk to them because of their age. Avalos Cortez and van Blerk look at the realities of water availability and collection before and during the pandemic, highlighting the challenges faced by people with mobility and chronic health issues ([AvalosCortez-vanBlerk](#)). The pandemic has reinforced health inequalities across the world, a theme picked up by Olaya Requene in her article on responses to COVID-19 by displaced Afro-descendent populations in Colombia ([OlayaRequene](#)). In the light of chronic poor access to clean water and sanitation provision, this marginalised group has responded with their own protection strategies including community-organised hygiene stations, collective food provision, and imposed limits to the free movement of people into their areas. Traditional medicine has also been widely used both in treatment of symptoms and in disinfection to avoid infection. The COVID-19 pandemic highlights the State's lack of understanding of traditional medicine, and its lack of investment in health-care services. Real dialogue and participation of this marginalised group in decision-making is needed if public health outcomes in this region are to be improved.

Recent research by the Red Cross Red Crescent Global Migration Lab looks at barriers to accessing services and assistance during the COVID-19 pandemic, focusing on the experiences of migrants and refugees in eight countries ([Mau-Hoagland](#)). The pandemic has led to the exacerbation of pre-pandemic barriers to basic services due to legal exclusion, a lack of information and insufficient finances. The article's authors recommend that information is provided in relevant languages, financial support is given where required and that most importantly refugees and asylum seekers are integrated into COVID-19 prevention and vaccination programmes by ensuring all legal rights to services are confirmed and upheld.

Improving WASH interventions

The challenges of doing good WASH work are felt at the local level but several articles draw our attention to more structural issues within the sector and

suggest ways to address them. A group of authors from international agencies have co-authored an article charting progress towards more integration of WASH interventions in responses to displacement ([Deola et al](#)). The last decade has provided numerous examples of serious displacement crises with acute WASH needs, such as those in Yemen and DRC, but input from WASH agencies and professionals has often failed to play a critical and proactive role in improving wider public health because funding constraints and organisational mandates have forced a focus on immediate service provision. The 2020-2025 WASH Sector Roadmap is seeking to encourage integration of WASH into public health planning and has the widespread support of key actors in the sector. The authors provide some tangible policy recommendations including better use of data, more community management of WASH infrastructure, and strengthened advocacy efforts to secure greater financial support and policy change.

A case-study from Ethiopia shows how both national and regional policy has a significant impact on health outcomes at a local level ([Stevenson-Buffavand-Keestra](#)). Focusing on a cholera outbreak in the Lower Omo Valley, the authors describe how neglect of the environmental determinants of health (for example, contamination of open sources of water) has led to outbreaks of water-borne diseases even in the context of development projects that include WASH components. While the focus is often on individual and hygiene practices, this case-study highlights how environmental and political factors affect water quality and availability, sometimes in devastating ways. The authors appeal for careful analysis of economic and cultural realities when designing, implementing and evaluating WASH interventions if public health outcomes are to be improved rather than compromised or even reversed.

This theme is picked up in Allen and Muturi's exploration of Uganda's water supply management in refugee camps, which focuses on the transition from NGOs providing water services to regional utilities taking responsibility ([Allen-Muturi](#)). In order to make this change work for those living in the camps, particularly the poorest among them, understanding refugees' financial means and their water needs is essential. Water authorities and NGOs need to work with Refugee Welfare Councils (RWCs) and Water User Committees (WUCs) to ensure real community participation. The aim is to create a smooth transition to refugees paying for water at rates that are affordable and which are also sustainable for water providers.

Community engagement

The role of local actors is essential to the success of public health initiatives, making communication and trust-building activities increasingly important tools in public health and WASH programming. "We must either engage with the community or prepare to go home" is the conclusion of an article focusing on the experience of an Italian NGO, Doctors

with Africa CUAMM, in the emerging crisis in Cabo Delgado, Mozambique ([Cardona-Fox et al.](#)). Community activists, who understand the local context and languages, are the core of CUAMM's work in this complex emergency. Working alongside village health committees, elders, faith leaders and traditional healers, they provide information and training to the local population, and also monitor disease outbreaks and provide early warnings to health-care providers. They have made use of creative communication methods like *radionovelas* (radio soap operas) to reach people with important health messages, and worked with faith leaders to adapt public ceremonies to reduce the risk of contagion of COVID-19. Displaced health-care professionals have also played a significant role in providing help to the approximately 732,000 IDPs in the region, with nearly 600 state-employed health-care workers having been identified within this displaced group.

Tracking community perceptions can provide vital information for those working in public health. In Venezuela, Oxfam has been using a Community Perception Tracker to record communities' insights and concerns about COVID-19 ([Azzalini](#)). When discriminatory attitudes towards returnees (particularly a fear of them spreading the virus) were recorded, Oxfam's local partners were able to respond with interventions designed to promote dialogue and inclusion of returnees using social media and community action plans. It is hoped that this tool can be used more widely in responding to disease outbreaks.

Finally, two women in Liberia are showing how community members are serving in ways which defy stereotypes ([Zulu](#)). As refugees themselves, Odell and Emma wanted to help others in practical ways and put themselves forward to be trained to repair handpumps. Since then, alongside their team, they have repaired all the handpumps in the 33 blocks in their camp, carried out ongoing maintenance and hope to travel to other camps to assist there. As well as this manual work, they have been actively encouraging other women to join them, telling them, "Don't be afraid to fail or try out something new and challenge the status quo".

NON-SIGNATORY STATES AND THE INTERNATIONAL REFUGEE REGIME

In the nine articles in this feature, authors explore the status of protection in non-signatory States, examining in particular the role of UNHCR, civil society and legal actors in facilitating access to protection for refugees and asylum seekers.

The first article in this feature provides an **introduction** to the topic ([Janmyr](#)). The 1951 Convention Relating to the Status of Refugees and its 1967 Protocol form the foundation of the international refugee regime; 149 UN Member States are currently party to the Refugee Convention, its 1967 Protocol or both, while 44 UN Members are

not. Most non-signatory States are in the Middle East and in South and Southeast Asia. It is evident, however, that many non-signatory States engage with the international refugee regime in a number of ways, and that the Convention plays a substantial role in some of these States. UNHCR is often key in encouraging non-signatory State actors to accept certain international standards, which in turn influences State behaviour, though UNHCR faces challenges in doing so ([Janmyr](#); [Cole](#); [Skribeland](#); [Barbour](#)). **Domestic courts** sometimes engage with international refugee law norms and principles, affecting refugees' and asylum seekers' access to protection ([Janmyr](#); [Barbour](#); [Li-Shaffer-Nam](#); [Hossain](#); [Thanawattho-Rungthong-Arnoldfernandez](#)). States' **participation** in high-level meetings, forums and agreements such as the Global Compacts is also significant in helping to create **soft law obligations** that build on the hard law (the Convention) that these States have formally opted out of. Meanwhile, **civil society** can play an enabling role in many States ([Janmyr](#); [Barbour](#); [Li-Shaffer-Nam](#); [Thanawattho-Rungthong-Arnoldfernandez](#); [Clutterbuck et al.](#)).

Few **Asian States** have acceded to the Refugee Convention yet in practice they may have laws, policies, practices or systems that can be used to respond to refugees' protection needs ([Barbour](#); [Hossain](#); [Li-Shaffer-Nam](#)). Thailand is developing a screening mechanism to regularise stay and improve protection rights but there are concerns about perceived flaws in the system. A new Presidential Regulation in Indonesia is seeking to provide for improved inter-agency coordination and for search and rescue for refugees in distress at sea. In Bangladesh, the legal infrastructure is increasingly engaged and reflecting *non-refoulement* obligations. Other non-signatory Asian States have developed non-Convention refugee status determination procedures, including in India, Hong Kong and Taiwan. However, the region is also witnessing a number of negative trends, from encampment and border closures to growing xenophobia. Research and practice should investigate and support the development and sustainability of laws, policies and practices that can contribute to refugee protection in Asia, whether through treaty ratification, domestic legislation or ground-level practices that improve protection outcomes ([Barbour](#)).

Turkey has ratified the 1951 Refugee Convention and its 1967 Protocol but has applied an optional geographical limitation which means that Turkey applies the Refugee Convention only to refugees originating from Europe. However, Turkey now hosts some four million refugees and asylum seekers (including 3.6 million Syrians). Its protection regime has been fundamentally shaped by the Refugee Convention and by EU law but, with fewer than 100 people in Turkey with actual refugee status as per the Refugee Convention, for all practical purposes Turkey can be regarded as a non-signatory

State. Refugees in the country have limited rights and no long-term prospects. UNHCR has played a significant role until recently in registering refugees and assessing cases but now, with the recent establishment of Turkey's Directorate General of Migration Management, seems to be beginning to play a more supportive role ([Skribeland](#)).

Hong Kong has established a government-led refugee status determination mechanism, often considered a positive example of an alternative means by which refugee protection can be provided in a non-signatory State. However, the recognition rate under this mechanism is alarmingly low and its procedures in practice fall far short of international standards ([Li-Shaffer-Nam](#)). Although civil society and the courts have repeatedly articulated concerns, there is a lack of political will to effect real reform, in the context of a generalised xenophobic narrative. While still advocating for reform, civil society organisations are also working to enable refugees in Hong Kong to secure other routes to protection, such as private community sponsorship programmes for resettlement.

Civil society

Civil society plays a significant role in many non-signatory States in working to improve access to protection. Many face an arduous task in advocating for reform ([Li-Shaffer-Nam](#)), but in some contexts they have been able to make constructive contributions and are developing their capacity to do so. For example, there have been more strategy-focused discussions between national and local civil society actors in Aceh and Jakarta, resulting in greater potential to influence policy-level discussions, while civil society actors and lawyers in Taiwan are progressively taking on refugee cases. Meanwhile, in the Philippines and Korea civil society actors and UNHCR are collaborating effectively with the State and with each other and are well networked ([Barbour](#)).

In **Thailand** a coalition of civil society organisations has put into action lessons from previous approaches to influencing the government and has now developed more effective strategies focusing on both raising issues and suggesting solutions ([Thanawattho-Rungthong-Arnoldfernandez](#)). The authors identify a number of elements in the coalition's success, including being led by local Thai civil society, having a broad base of actors, following up on the government's commitments at the regional and global level (including in the Global Compact for Migration), coordinating with peer governments to bring pressure to bear, using international human rights mechanisms to report on progress, and holding open forums for all stakeholders.

Courts and other legal actors

Although **Bangladesh** is not a signatory to the Refugee Convention, a number of recent court judgements in relation to Rohingya refugees indicate respect for elements of the Convention's rulings ([Hossain](#)). It is evident that national law in Bangladesh prevails over international law but it still remains a generally

accepted principle that customary international law is binding as long as it does not contradict domestic law – and the Supreme Court has upheld the principle of *non-refoulement* on a number of occasions. Meanwhile, in Hong Kong a series of judicial review decisions have forced the government to establish *non-refoulement* screening, thereby addressing some of its international obligations towards refugees as a party to certain international human rights treaties ([Li-Shaffer-Nam](#)).

In the absence of national legal frameworks relating to refugees in **Lebanon** and **Jordan**, legal actors have had to be creative in developing strategies and approaches to try to protect refugee rights in practice ([Clutterbuck et al](#)). Such actors tend to have to resort to arguments of fairness, humanitarian consideration and consistency as 'alternative protection mechanisms' rather than relying on the law. Non-signatory States, however, are nevertheless bound to respect the human rights of refugees as stated by other international human rights treaties that they have ratified, as well as by those provisions of the Refugee Convention that have become part of customary international law, such as the prohibition on *refoulement*. These arguments can be promoted by legal aid actors. At a practical level, legal aid providers in Lebanon and Jordan have found ways to liaise with government officials, accompany refugees to obtain documents, negotiate disputes and provide legal awareness services, but face many legal and administrative barriers to doing so.


Funding and influence

One article focuses on the difficulties that can arise when international agencies secure funding from non-signatory States ([Cole](#)). UNHCR has raised significant levels of funding from governments and individual donors, including through Zakat contributions, particularly in the Gulf States, Indonesia and Turkey – funds that have enabled UNHCR to support programmes and populations that have been historically neglected. There are restrictions, however, in how and where these donations can be spent, which have implications for how UNHCR operates. In addition, where there is significant funding at stake, there may also be influence: this is certainly not a new challenge but it may have implications for those doing advocacy to encourage such States to enhance refugee protection in their own territories, or indeed to become signatories to the Refugee Convention.

A refugee's perspective

The final article reflects the harsh conditions under which a refugee lives in Indonesia, a non-signatory State ([Ioniad](#)). He faces restrictions on accommodation, work, movement, property rights, health-care access – and even on love! Moreover, traditional resettlement countries are increasingly shutting their doors to refugees. If the barriers to a normal, dignified life in Indonesia were lifted, he and his fellow refugees would be able to contribute to the local economy and help build communities.

PUBLIC HEALTH AND WASH

 **Breaking down silos: integrating WASH into displacement crisis response**
 Claudio Deola, Syed Yasir Ahmad Khan, Antonio Torres, Emmett Kearney and Ryan Schweitzer (Save the Children / International Medical Corps / International Organization for Migration / UNHCR)

Water, sanitation and hygiene (WASH) interventions are key to good public health outcomes for forcibly displaced people. A collaborative 'roadmap' for better integration of WASH services in crisis response has recently been launched.
www.fmreview.org/issue67/deola-khan-torres-kearney-schweitzer

 **Collaboration in times of crisis: a case-study from Mexico**

Gabrielle Low (UNHCR)
The COVID-19 pandemic has generated new thinking as those working with forced migrants try to secure safe accommodation and access to basic services for asylum seekers and refugees despite the challenging context.
www.fmreview.org/issue67/low

 **Equity and community engagement in the transfer of water supply management**

John Allen and Caroline Muturi (Oxfam)
Efforts are under way in Uganda's refugee settlements to transfer responsibility for water services from NGOs to the country's utilities. The transition needs to be carefully managed if it is to succeed.
www.fmreview.org/issue67/allen-muturi

 **Thinking upstream: a critical examination of a cholera outbreak in Ethiopia**

Edward G J Stevenson, Lucie Buffavand, and Sarai M Keestra (Durham University / Institut des Mondes Africains / London School of Hygiene and Tropical Medicine)
A case-study from the Lower Omo Valley explores some of the challenges to water security for people who have been displaced within their own homelands.
www.fmreview.org/issue67/stevenson-buffavand-keestra

 **Refugee women in Liberia: repairing handpumps, dispelling myths**

Gibson Zulu (UNHCR)
Two refugee women in Liberia are repairing handpumps in order to support others in their community.
www.fmreview.org/issue67/zulu

 **The role of traditional medicine and community strategies in combating COVID-19**

Angela Yesenia Olaya Requene (Harvard University)
Displaced Afro-descendant communities in Colombia have experienced significant marginalisation during the pandemic but have drawn on ancestral knowledge to try to mitigate the impacts of COVID-19.
www.fmreview.org/issue67/olayarequene

 **Work with the community or go home: local engagement in Mozambique**

Gabriel Cardona-Fox, Giovanna De Meneghi, Edoardo Occa and Andrea Atzori (Johns Hopkins University / Doctors with Africa CUAMM)
A health intervention in a complex crisis, such as the one in Cabo Delgado, Mozambique, can only succeed if the community is effectively engaged and actively participates in the response.
www.fmreview.org/issue67/cardonafox-demeneghi-occa-atzori

 **Tracking community perceptions in Venezuela during COVID-19**


Raissa Azzalini and Oxfam team in Venezuela (Oxfam)
A new tool to collect and track people's perceptions in the context of COVID-19 is providing valuable information to help support communities during the pandemic, while enabling greater community engagement.
www.fmreview.org/issue67/azzalini

 **Assessing infection prevention and control during COVID-19 in 22 humanitarian contexts**

Claire Eldred, James Kahia, Lilian Kiapi, Bibi Lamond, Stacey Means, Laura Miller and Liz Walker (International Rescue Committee)
Infection Prevention and Control (IPC) is important for building a resilient health system – and critical during a pandemic. A multi-country assessment undertaken in late 2020 has highlighted significant shortcomings which need to be addressed.
www.fmreview.org/issue67/eldred-kahia-kiapi-lamond-means-miller-walker

 **WASH responses to COVID-19 in Ethiopia, Somalia and South Sudan**

Yasmine Zaki Abdelaziz, Gemma Arthurson, Haley West and Antonio Torres (International Organization for Migration)
In the face of COVID-19, adaptation, innovation and learning from experience have been key to responding adequately to the needs of displaced people.
www.fmreview.org/issue67/abdelaziz-arthurson-west-torres

 **Barriers to accessing services and assistance during COVID-19: learning from those directly affected**

Vicki Mau and Nicole Hoagland (Australian Red Cross)
Recent research across a number of countries highlights significant disparities in access to basic public health services during the COVID-19 pandemic. States have a responsibility to learn from the current pandemic and address the barriers that exist.
www.fmreview.org/issue67/mau-hoagland

 **The impact of COVID-19 on older refugees**
 Evelyn Avalos Cortez and Lorraine van Blerk (University of Dundee)

Older refugees are particularly at risk from COVID-19. WASH services are key to reducing disease transmission for this vulnerable group.
www.fmreview.org/issue67/avaloscortez-vanblerk



An IRC staff member provides hygiene training in the context of an Ebola outbreak in Sierra Leone.

NON-SIGNATORY STATES AND THE INTERNATIONAL REFUGEE REGIME



Non-signatory States and the international refugee regime

Maja Janmyr (University of Oslo)

Many of the world's top refugee-hosting countries have not acceded to the 1951 Refugee Convention and yet they engage with the international refugee regime in a number of ways. Not only are international refugee law norms being disseminated and adopted in these States but also non-signatory States often participate in the development of international refugee law by being present and active in global arenas for refugee protection.

www.fmreview.org/issue67/janmyr



Beyond Asian exceptionalism: refugee protection in non-signatory States

Brian Barbour (Act for Peace/UNSW)

Few Asian States have acceded to the Refugee Convention yet they may have laws, policies, practices or systems that can be of use in responding to refugees' protection needs.

www.fmreview.org/issue67/barbour



Turkey: party or non-party State?

Özlem Gürakar Skribeland (University of Oslo)

Somewhere between party and non-party to the Refugee Convention, Turkey is a rather unique case from the perspective of refugee law and practice, with its protection regime fundamentally shaped by the Refugee Convention and the optional geographical limitation allowed under it.

www.fmreview.org/issue67/skribeland



Hong Kong's Unified Screening Mechanism: form over substance

Rachel Li, Isaac Shaffer and Lynette Nam (Justice Centre Hong Kong)

Hong Kong is often cited as a positive example of a non-signatory territory that has established a government-led refugee status determination mechanism. However, in the absence of a broader public or executive-led commitment, this mechanism falls far below international standards.

www.fmreview.org/issue67/li-shaffer-nam



Alternative protection in Jordan and Lebanon: the role of legal aid

Martin Clutterbuck, Yara Hussein, Mazen Mansour and Monica Rispo (Norwegian Refugee Council)

In the absence of a codified refugee rights framework in Jordan and Lebanon, legal actors must be creative in the development of strategies and approaches to ensure the protection of refugee rights in practice.

www.fmreview.org/issue67/clutterbuck-hussein-mansour-rispo



Non-signatory donor States and UNHCR: questions of funding and influence

Georgia Cole (University of Edinburgh)

Non-signatory States are increasingly important as donors, and UNHCR has been targeting some of these new funding sources. With funding, however, come influence and challenges.

www.fmreview.org/issue67/cole



Bangladesh's judicial encounter with the 1951 Refugee Convention

M Sanjeeb Hossain (University of Oslo)

Despite Bangladesh not having ratified the 1951 Refugee Convention, a number of recent court judgements indicate respect for elements of the Convention's rulings.

www.fmreview.org/issue67/hossain



Advancing refugee rights in non-signatory States: the role of civil society in Thailand

Naiyana Thanawattho, Waritsara Rungthong and Emily Arnold-Fernández (Asylum Access / Peace Way Foundation in Thailand)

A coalition of civil society actors has developed effective strategies for working alongside the Thai government to facilitate better policies for refugees.

www.fmreview.org/issue67/thanawattho-rungthong-arnoldfernandez



The challenges we face in a non-signatory country

JN Joniad (Rohingya journalist)

Refugee journalist JN Joniad has been living in Indonesia since 2013, unable to move on and yet unable to access his basic rights.

www.fmreview.org/issue67/joniad

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Cover image: Community members waiting for the water supply to start flowing (Western Uganda). Credit: Caroline Muturi.

