EXECUTIVE COMMITTEE OF THE HIGH COMMISSIONER'S PROGRAMME 60th Meeting 24-26 June 2015

NGO Statement on Refugee Public Health, including HIV/Aids Agenda Item 3.b

We affirm the vital importance of public health and HIV programmes for persons of concern. We reaffirm the life-saving priority of continuing prevention, treatment and care for persons of concern whose HIV/AIDs treatment has been interrupted. Consistent access to anti-retroviral therapy is a critical provision as is continuing efforts to eliminate Mother To Child Disease Transmission.

In 2014 UNHCR adopted a multi-sectoral approach to public health, nutrition and WASH with an emphasis on reducing childhood mortality in the first six months of new emergencies. However, the 5 top recipients of humanitarian aid are all protracted crises. The multi-sectoral approach should therefore be applied in a meaningful way in the context of protracted humanitarian crises.

Both the continuation of access to medication and the screening for new cases of tuberculosis are critical in emergency response. As was highlighted in the 2015 launch of the alternatives to camps policy, the majority of refugees and IDPs globally live outside of camps. Effective TB control strategies must therefore include an emphasis on partnership with entities that provide testing and support for host communities.

We are encouraged by the Mental Health Gap action programme efforts to integrate Mental Health needs into primary care. This effort should not be done to the exclusion, however, of providing access to care for people with severe mental disorders.

Thank, Mr. Chair