

Strengthening Education and Health Services for Refugees and Host Communities (EHS)

Support to the Government of Pakistan in Improving Access to Public Services in Refugee-hosting Areas

Context

For more than four decades, Pakistan has been hosting one of the largest refugee populations in the world. Out of the 2.6 million registered Afghan refugees worldwide, approximately 1.4 million live in Pakistan. In addition, there are approximately 840,000 Afghans holding Afghan Citizen Cards (ACC) and it is estimated that there are over 1.3 million undocumented Afghans. Most refugees reside in the province of Khyber Pakhtunkhwa (52%), with two-third of them now living in urban and semi-urban areas alongside their host communities and relying on public services.¹

Our Approach

The project supports the Pakistani government partners to strengthen access to public education and health services in refugee-hosting communities. To this end, the project focuses on strengthening sector governance in education, health and local governance and supporting cooperation between the Commissionerate for Afghan Refugees (CAR) and subnational government structures. In line with the sustainable development goals (SDGs) and its principle Leave No One Behind (LNOB), the project focuses on improving the access to public services for vulnerable groups including Afghan refugees, women, children, youth and persons with disabilities. The project is implemented in four selected districts of Khyber Pakhtunkhwa with a significant percentage of Afghan refugees.

The Benefits

Urban Refugees Support Units

Three Urban Refugees Support Units (URSUs) have been established in Peshawar, Mardan and Haripur, catering to over 300,000 urban Afghan refugees in their catchment area. The URSUs provide referral services to urban Afghan refugees in the areas of health, education, livelihood, protection and repatriation. Comprehensive capacity development measures for 20 URSU/CAR officials have enabled them to better facilitate urban Afghan refugees.

Project name	Strengthening Education and Health Services for Refugees and Host Communities (EHS)
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Lead executing agency	Ministry of States and Frontier Regions (SAFRON)
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Community Engagement

60 Parent-Teacher Councils (PTCs) – a school-based body consisting of parents of the enrolled students, administration and locals – were reactivated. 600 PTC members, including 360 women, planned and implemented school facility improvements including separate washrooms for girls and boys, water supply schemes, electricity, boundary walls and accessible toilets for students with disabilities. Similarly, 360 members of 60 Primary Healthcare Management Committees (PCMCs) – government bodies established to improve governance and financial management of the basic health units and rural health centres – were capacitated which improved 60 healthcare facilities. In addition, 215,873 people have been reached through in-person community awareness raising sessions.

Education

Enrolment campaigns for out-of-school children and their families, addressing misconceptions impeding access to education, led to the enrolment of 7,880 children, including 746 Afghan refugees and 638 children with disabilities. Health screenings at schools benefited 19,623 students. 1,334 students received glasses and 381 received hearing aids, improving learning outcomes and reducing dropouts in targeted schools.



Improving Access to
Education Services



Improving Access to
Health Services



Linking Subnational
Government Structures



Enabling Innovative
Public Participation

¹ Data source: UNHCR, Pakistan

		Photos: © GIZ / EHS
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		<i>Left: IT lab in Government Girls High School, Khyber Pakhtunkhwa, Pakistan.</i> <i>Right: Community awareness session on health services for women in Khyber Pakhtunkhwa, Pakistan.</i>

Health

The Health Improvement Plans, aimed at improving the health and well-being of Afghan refugees and host communities, addressed clinical aspects of healthcare, community engagement, data management, and capacity-building of healthcare providers and officials. Reactivated School Health Services improved the health of school children, and 75 community midwives were capacitated to provide mother and child health services in their respective communities.

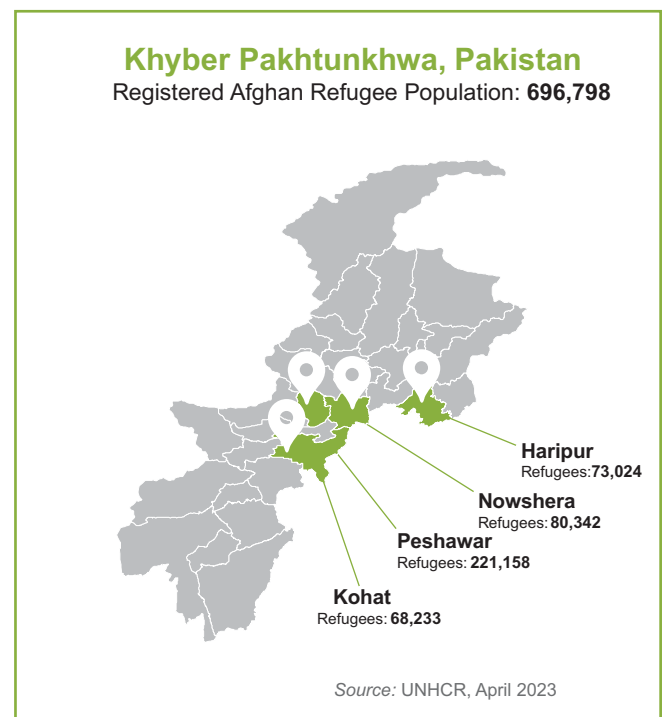
Inclusive and Gender Sensitive Planning

Participatory planning processes in the education and health sectors, having representation of Afghan refugees, women, persons with disabilities and marginalised groups, led to the development of inclusive plans at district level as well as at 60 schools and 60 health facilities. 131 health and education officials, including 50 women, from district and provincial levels were trained on gender and disability inclusion. 76 local government actors at Village/Neighbourhood Councils, and women activists were capacitated to make local development planning more inclusive and gender-sensitive.

Digital Transformation

A mobile app 'Mansooba-e-Amal' (Plan of Action) has been developed for community engagement in development planning. 155 village secretaries have been trained on the use of the app for inclusive planning. More than 1.6 million Afghan refugees and

members from host communities have been reached through social media campaigns on access to education and health services. IT labs have been established in 6 schools and solarised. A digital literacy programme has been rolled out, benefiting 1,114 students, including 791 girls.



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