FACTSHEET

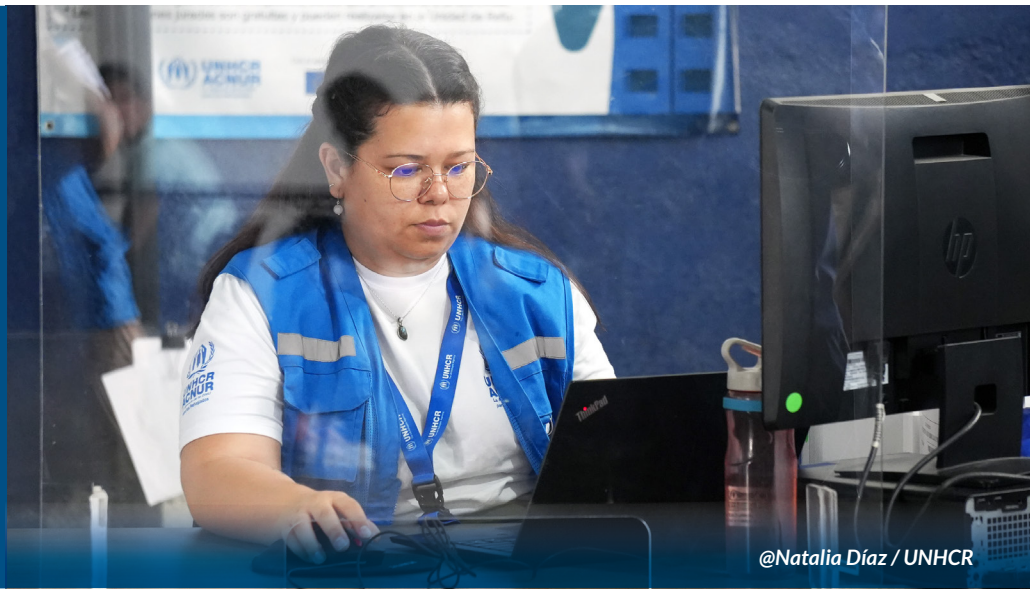
COSTA RICA: Health

As of August 2024

Background

Although Costa Rica offers free healthcare services for emergency care – including to children, pregnant and lactating women – many asylum-seekers and refugees face recurrent healthcare needs to address severe or chronic illnesses. Access to healthcare continues to be consistently identified as a critical need in dialogues with people forced to flee in Costa Rica.

In participatory assessments, UNHCR has identified challenges in accessing health services to address both chronic and acute illnesses, as well as mental health situations and services to promote sexual and reproductive health.



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AGREEMENT FOR ACCESS TO HEALTHCARE: UNHCR-CCSS

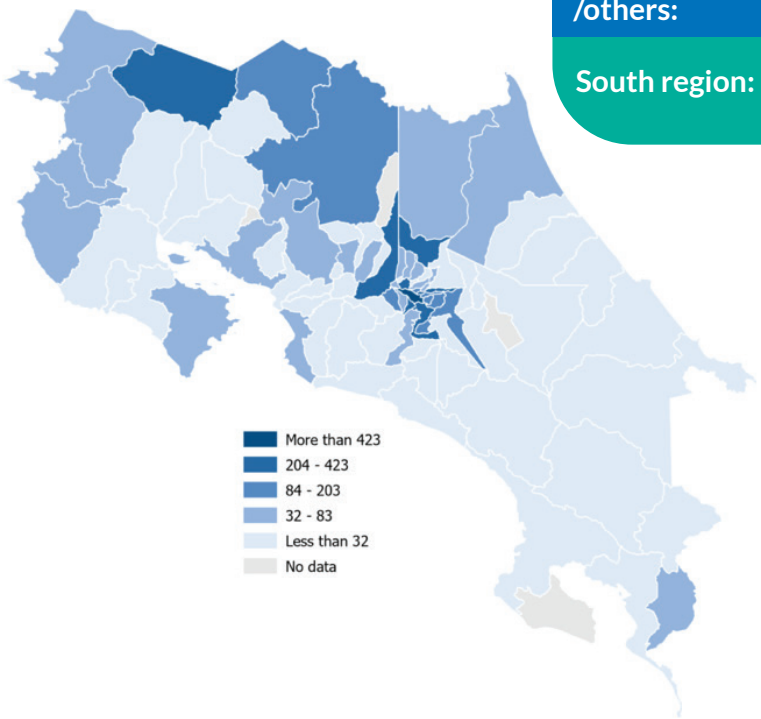
Project description

In 2020, UNHCR and the Costa Rican Social Security Fund (CCSS) signed an agreement to provide **monthly spaces** for health insurance for forcibly displaced and stateless people. The agreement has enabled UNHCR to support the Government of Costa Rica by providing over USD 9.4 million **since 2020 for the CCSS** to respond to pressing health needs faced by the most vulnerable asylum-seekers and refugees. Because of the onset of the COVID-19 pandemic, the agreement was extended through an addendum until March 2021. In 2024, **a fifth agreement was signed allowing** 5,000 **monthly insurance spaces** throughout the year.

Although Costa Rica offers free health services in case of emergencies, **people forced to flee still face health needs,** particularly for the treatment of serious or chronic diseases. In order to mitigate this gap and cover those who are most vulnerable, since 2020, **UNHCR supports the Costa Rican Social Security Fund (CCSS)** to provide health insurance quotas for refugees and asylum seekers who are not covered by existing social protection schemes. This scheme promotes **effective access to the right to health** and avoids the creation of parallel systems.

Beneficiaries per region:

Northern region:	18%
Metro Area /others:	81%
South region:	1%



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Key figures

5 years
Duration
(Jan 2020-Dec 2024)

USD 9.4 M
Total cost of the project

USD 27 CRC 17,470
Monthly insurance cost per individual

I-2020	II-2021	III-2022	IV-2023	V-2024
USD 1.8M	USD 2.3M	USD 1.5M	USD 1.9M	USD 1.9M

How it works

Selection

Chronic health and serious vulnerabilities underpin the selection criteria. Potential beneficiaries are **assessed and ranked according to the UNHCR scorecard criteria.** Selected beneficiaries receive health insurance cards, which grant them **access to all public health services throughout the country,** except for CCSS benefits such as disability, pension or death insurance. **Children (<18), pregnant and lactating women are excluded** as they can receive free universal services from the CCSS.

Implementation

A prerequisite for inclusion in the selection process is **not having outstanding debts with the CCSS.** In-person distribution has been reinstated on a limited basis in 2022. UNHCR provides beneficiaries with telephonic guidance on how to access medical services.

- Registration and/or verification of people for/with whom we work by UNHCR
- Identification of potential beneficiaries by UNHCR
- Verification of potential beneficiaries by CCSS
- Issuance of insurance numbers by CCSS & notification to UNHCR
- Issuance of insurance cards by UNHCR & delivery to people for/with whom we work

Exit strategy

- The UNHCR-CCSS **partnership complements** Costa Rica's commitment to integrate asylum-seekers and refugees through the promotion of employment opportunities.
- Once a person **receives a work permit** and finds a formal job, the employer by law must provide health insurance. This allows **transfer of this benefit** to another asylum-seeker.
- Refugees and asylum-seekers are also **unsubscribed from the programme if they become self-employed** and require making voluntary insurance coverage payments to the CCSS.
- To mitigate the risk of **individuals accruing debt** in case their employment or documentation situations are not resolved by the end of the project's 12 months, asylum-seekers will be automatically unsubscribed from the health insurance scheme.
- The Government of Costa Rica and UNHCR are **currently seeking additional financial support to continue the insurance scheme** and to extend it to other asylum-seekers in particularly vulnerable conditions.

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- Through **funds from the European Union (EU)** and the coordination of the **Spanish Agency for International Development Cooperation (AECID),** a project called "Health Coverage and Access to Employment for the Migrant Population" (CSAEM) was signed in August 2023. In this project, an agreement signed between the Ministry of National Planning and Economic Policy (MIDEPLAN), the University of Costa Rica Foundation (Fundación UCR) and the Costa Rican Social Security Fund (CCSS), with technical and operational support from UNHCR, allowed access to **insurance** for 3,775 **people** from September 2023 to August 2024.

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María Auxiliadora Health Clinic

Based on urgent health care needs for refugees, UNHCR, **through its partner *Casa María Auxiliadora*,** implements a healthcare project, which consists of a health clinic in San José, including the hiring of a doctor to complement the work of the volunteer team providing primary healthcare. Under a regular schedule, this team provides health consultations to i) **refugees and asylum-seekers who are on the waiting list** for inclusion under the UNHCR-CCSS agreement, and ii) **persons in mixed movements who do not qualify** for inclusion under the UNHCR-CCSS agreement.

As assessed, people have access to medical treatment, laboratory tests, and office examinations. In addition, medicines are available as part of the program and, in 2023, **high-end medical equipment and other necessary supplies were donated** to the clinic. In the first semester of 2024, 2,400 people accessed medical consultations under this program, funded through the **UNHCR-CCSS agreement.**

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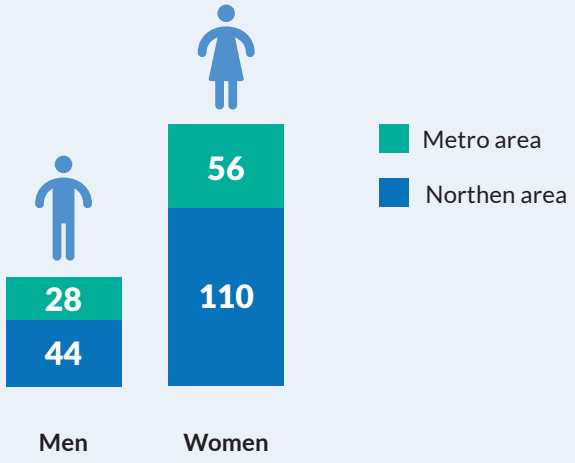
OTHER INITIATIVES

Sexual and Reproductive Health

People forced to flee, **particularly LGBTIQ+ people, have sexual and reproductive health needs,** ranging from relevant and timely information to specific services.

Since 2021 UNHCR, funded by UN AIDS, has worked on this area, through the hiring of a consulting group that during 2023 conducted 12 **workshops and training courses on sexual and reproductive health and HIV to** 238 **people** in both the Metro Area (GAM, 184 people) and the Northern area (84 **people).**

SRH assistance per sex and region (2023)



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In 2023, a total of 515 **condoms (30** internal and **485** external) and 238 **brochures** with recommendations and assistance pathways on sexual health issues were handed out through information activities organized both in the Metro Area and the Northern area.

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Mental Health and Psychosocial Support (MHPSS)

During 2024 UNHCR has implemented mental **health promotion programs** through its partner CENDEROS. In the first semester of 2024, **521 people** have been assisted in individual therapy processes, of which 54% are women, 37% children and adolescents, 7% men and 2% non-binary persons.

54%	37%	7%	2%
women	children and adolescents	men	non-binary persons

In 2024, CENDEROS conducts **listening and dialogue** with communities from both the Metro Area and Upala and Los Chiles cantons in the Northern border. These circles consist of **psychoeducational group therapies** that provide emotional support and facilitate thematic discussions in which participants share their life stories and experiences, motivate others, and thereby increase their resilience.

Through art **therapy sessions,** participants have worked on self-perception, self-esteem management and envision of their life plans. Also, children from the communities of Guararí, Alajuelita and Pavas have participated in **art therapy groups specialized for children** to strengthen their self-esteem, practice emotional self-regulation tools, and carry out activities to develop motricity and concentration.

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Response to population in mixed movements

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At the Southern border, as part of the inter-agency work carried out by humanitarian partners at the **Southern Migration Station (EMISUR)** in Paso Canoas, **UNHCR financed the hiring of a nursing professional** by its implementing partner HIAS, who provided primary medical attention to the refugee and migrant population in transit from June 2023 to June 2024. Thanks to this work, in the first semester of 2024, **664 people had access to medical consultations.**

UNHCR appreciates the contributions of donor countries that contribute to Costa Rica and global programs with unearmarked funds:
As of 31 July 2024

UNHCR Costa Rica also appreciates the contributions of our private donors globally:
Republic of Korea and Japan

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