



ARMENIA

REFUGEE RESPONSE PLAN

October 2023 – March 2024

At a Glance

Armenia Planned Response

October 2023 - March 2024



101,000

Refugees in Armenia



95,000

Local population hosting
refugees



97 million

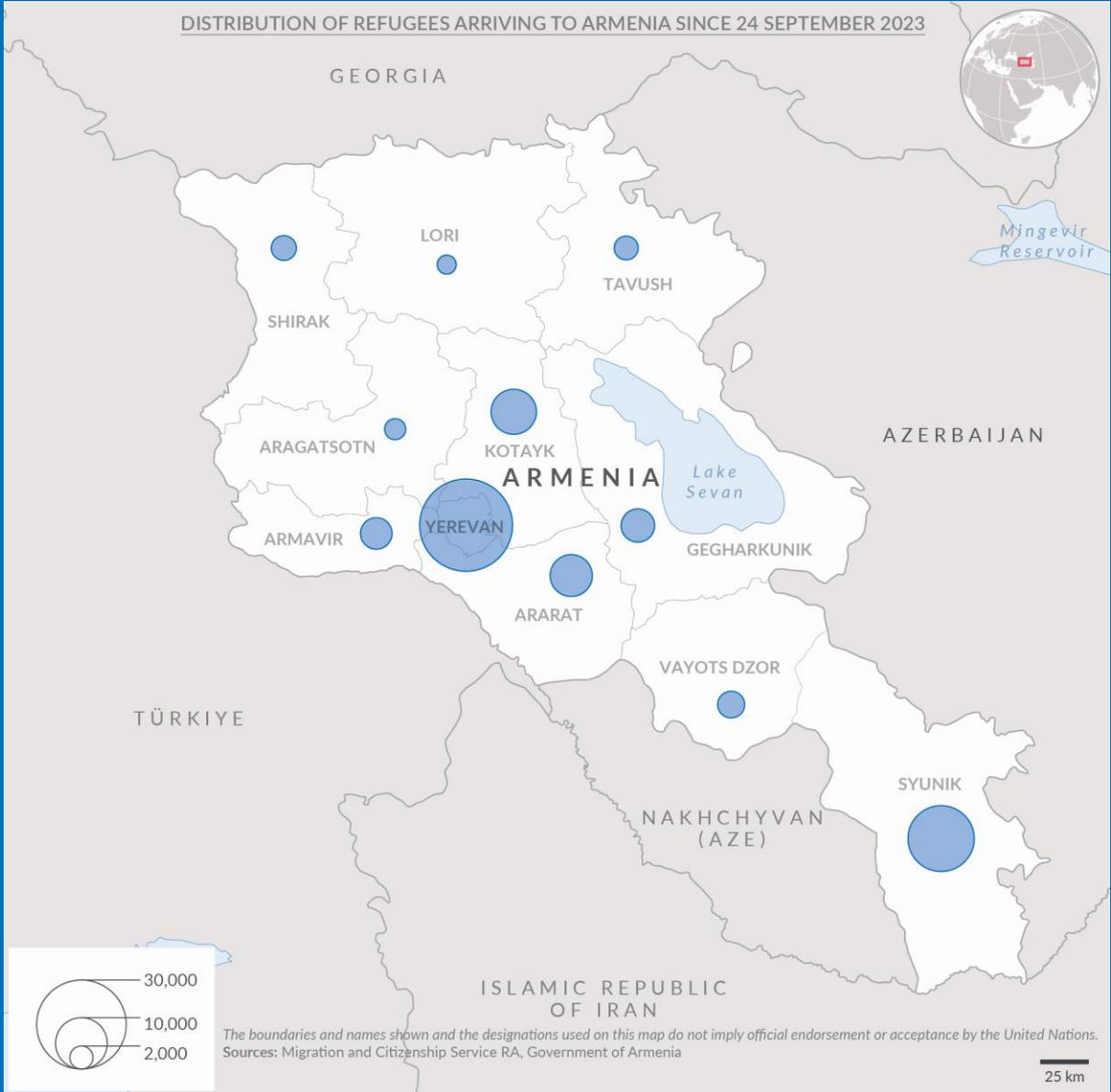
Total financial
requirements



60

RRP Partners

DISTRIBUTION OF REFUGEES ARRIVING TO ARMENIA SINCE 24 SEPTEMBER 2023



Current Situation

Following the recent escalation of the decades-long conflict in the region, the Government of the Republic of Armenia reported that between 24 September and 4 October 2023, 100,632 refugees, including 30,000 children, arrived in the country. An average of 15,000 people arrived per day, with a peak of 40,000 refugees entering the country on 27 September 2023. So far, the Government has registered 98,000 refugees in government-run registration centres.

Overall, the number of refugees constitute almost 3 per cent of the entire Armenian population, i.e., 1 in 30 people, which adds to the 36,000 refugees, asylum-seekers and stateless people of all nationalities who were already present in the country.

According to the latest available data from the Government of the Republic of Armenia, many of the new arrivals are vulnerable, including older people, women and children, pregnant women, people living with disabilities and people chronic health conditions, as well as new-borns. 52 per cent are women and girls, 31 per cent are children and 18 per cent are older persons. About half of the refugee population are from the countryside.

The refugees are currently located in different regions across Armenia, with the highest numbers residing in Yerevan (38 per cent), Syunik (16 per cent), Kotayk (8 per cent) and Ararat (7 per cent). Most refugees settle in areas where they have family, access to services, and feel supported.

Refugees arrived physically and psychologically exhausted. They were hungry, in need of emergency assistance including counselling, warm clothes and medicine. The Government of the Republic of Armenia is leading the response to ensure protection and lifesaving needs of refugees as well as ensuring medium- and longer-term planning. The Deputy Prime Minister is coordinating a working group composed of the various Line Ministries including the Ministry of Internal Affairs, Ministry of Territorial Administration, Ministry of Health, Ministry of Education, Science, Culture and Sports, and Ministry of Labour and Social Affairs.

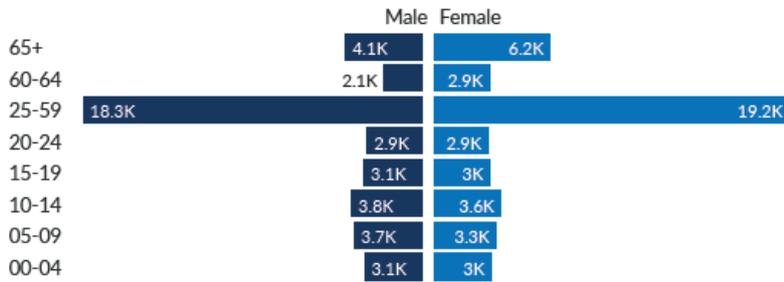
The host community response is characterized by a spirit of solidarity and unwavering generosity, with families and communities opening their doors to refugees. The local response, led by national and municipal authorities across the regions, has been equally remarkable, with volunteers, national and local non-governmental organizations, and civil society actors coming together to support those in need.

At the same time, humanitarian partners including UN agencies, national and international NGOs, and community-based organisations, under the overall leadership of the Government of the Republic of Armenia, scaled up their operations to complement the national response, through coordinated and inclusive interventions, to support urgent lifesaving needs and the resilience of both the refugees and communities hosting them, with a particular focus on the approaching winter.

Population Planning Figures

Country	Estimated Population as of end of September 2023	Planned Population as of March 2024 ¹
Refugees	100,514	101,000
Total		
Host Population to be supported by targeted assistance		
Host Population	95,000 ²	95,000
Total		

Age and gender breakdown of arrivals



16 %

Persons with disabilities



52 %

Women and girls



48 %

Men and boys



31 %

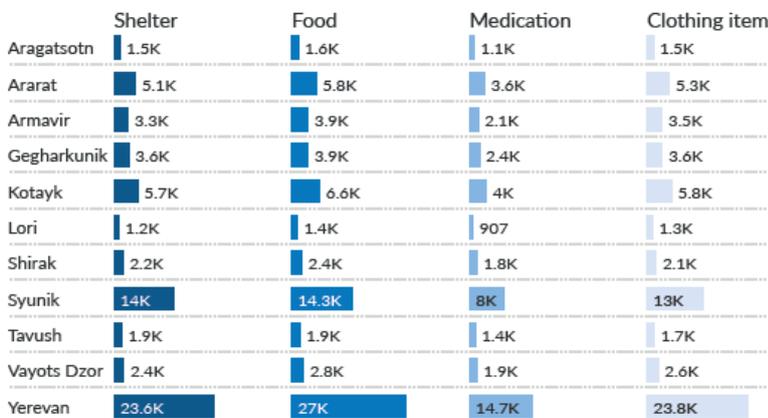
Girls and boys



1.9 %

Pregnant and lactating mothers

Reported needs by region



¹ This figure is not expected to change significantly over the next 6 months given that there is no imminent plan for returns or projections for more outflows. That said, this does not preclude the possibility for some onward movement.

² Support to the host population will be at the household level, as thousands of families across the country are hosting refugees, including at the community and institution-level, with an eye to expanding community resources and public services that may be under pressure due to the arrival of the refugee population. The host community figures may be revised based on the rapid needs assessment and comprehensive multi-sectoral needs assessment.

Refugee and Host Community Needs and Vulnerabilities

Refugees who have arrived in Armenia have acute protection and assistance needs due to their sudden displacement and prolonged isolation. This has had a profound impact not only on their ability to cope financially, but also emotionally. Most people arrived with very few belongings and require urgent emergency assistance, including food and water, blankets, bedding materials, medical assistance, mental health and psychosocial support, and shelter in the immediate term. With the upcoming winter, including possibly harsh weather conditions towards the end of 2023 and at the beginning of 2024, access to winter-specific assistance is particularly challenging for vulnerable groups, such as older persons, and persons with disabilities, as well as women and children.

52 percent of refugees are women and girls. In displacement situations, they may be exposed to heightened protection risks, such as gender-based violence (GBV), sexual exploitation and abuse (SEA) and other forms of violence, trafficking, and labour exploitation. In addition, women often must care for children and other dependents on their own. Single mothers are particularly vulnerable to poverty. To ensure refugee women's self-reliance, support in accessing the labour market is required. Additionally, basic assistance including protection services such as protection monitoring, child protection interventions, support to older persons and persons with disability, sexual and reproductive health services, are necessary.

Children constitute 31 percent of the total refugee population. Considering the nine-month closure of the Lachin corridor and the disrupted access to services during this period, children have had reduced access to food and medicine, and many arrived hungry, sick, and scared, having left their homes and communities very suddenly.

There are reports that their access to education during this period has also been interrupted, owing to limited access to food, electricity, water, and other basic services at schools. There is a risk of disrupted access to immunization of young children during this period, which needs to be closely monitored and addressed urgently. Key needs include access to basic life-saving support and social services, including shelter, food, social protection, health, education and addressing their psychosocial needs through child-friendly spaces, mental health, and psychosocial support (MHPSS) services, such as counselling, as well as prevention of any forms of violence, abuse, and neglect. The best interests of the child should be a primary consideration in all actions affecting them.

Refugees are at risk of multidimensional poverty due to the many needs they are facing, especially those at heightened risk, including single women, female-headed households, children (including unaccompanied and separated children), persons with chronic health conditions as well as persons living with disabilities and HIV, LGBTIQ+, and older persons. Thus, early identification of the most vulnerable and ensuring proper case management and support for inclusion in national systems from the onset is essential to restore refugees' access to basic services. They also require immediate livelihood recovery and access to tools to support them towards self-reliance, access to decent work and enhanced economic security.

During government registration, initial intake assessments show that most refugees have concerns about access to safe and affordable housing, as well as their inability to pay rent and utility costs as a result of increased prices in Armenia. While government authorities have swiftly responded to provide shelter and housing to refugees in different regions, the number of refugees is expected to outnumber the available spaces in affordable/ social housing. The locations of some collective shelters may also pose challenges for access to employment and services. There is an urgent need to repair and rehabilitate existing social housing/ collective shelters and to identify additional, sustainable, and affordable housing options in areas providing socio-economic inclusion prospects in close cooperation with municipalities. Targeted support to vulnerable populations to access services and appropriate accommodation is required. Host community members who have welcomed the refugees into their homes also need urgent support.

Refugees in general have access to the national health care system in Armenia. However, there is a need to bolster the health system to manage the sudden increase of health service recipients, including patients with specific needs and chronic conditions. Primary and secondary healthcare facilities, especially in rural areas are facing challenges to supply the necessary care, workforce, and medicines and provide specialized services. Specialized care is mostly concentrated in Yerevan, which will require putting in place adequate referral pathways and acute support to absorb the immediate influx of patients requiring care. The Mental Health and Psychosocial Support (MHPSS) needs of refugees are acute. The scale of the emergency and the added demand caused by the arrivals require substantial scale up of services. It is essential to provide training on management of vicarious trauma or secondary traumatic stress to service providers. Access to quality maternal and child healthcare is of particular importance, including immunization of children. Other key areas of need include provision of specialized services for vulnerable children and caregivers who have suffered from trauma, as well as special care for children with chronic illness or with wounds that occurred during military hostilities, and who are now in post-operative recovery and living with disability.

Host communities / local population, friends and families across Armenia have welcomed and supported refugees, the majority of whom are in Yerevan, Syunik, and Kotayk regions. Their continued assistance to refugees will soon become a challenge for them as well as public authorities and national systems.

The rapid arrival of large numbers of refugees will strain existing social support services in some areas of the country. While refugees of working age will have greater levels of social mobility and move to different areas in search of sustainable livelihoods, it will be more difficult for vulnerable and less mobile groups of refugee households to meet their basic needs. In this context, there will be increased need to support the national authorities at all levels, including the municipal authorities throughout the country and especially in regions hosting large numbers of refugees to ensure optimal support and public services, parity and continuity in social protection schemes, and opportunities for livelihood and resilience.

Emergency Response Strategy

The Refugee Response Plan supports and complements the government response by outlining and aligning the activities of humanitarian partners including civil society, refugee-led organisations, UN agencies, international and national NGOs. The strategy will focus on enabling the delivery of essential protection and humanitarian assistance while at the same time integrating inclusion, resilience, and solutions from the start, targeting both refugees and host communities with a longer-term view of strengthening public services.

Resilience presents a pathway towards advancing locally and nationally owned adaptive solutions and capacities. To build resilience among individuals, communities and institutions, stakeholders will aim to capitalize on links between humanitarian and development institutions, financing arrangements, processes, and programmatic approaches wherever feasible in line with the Humanitarian-Development-Peace Nexus approach. Critically, a cross-cutting, resilience-based approach that includes development programming builds on humanitarian assistance and aims to gradually reduce the need of refugees and other persons affected in the long-term. The RRP will also serve as a catalyst to attract development assistance that builds on a more comprehensive, longer-term, and holistic approach to engaging host governments, communities, and other relevant stakeholders.

Protection of women (including from GBV), children, persons living with disabilities and older persons is central to the response. The plan aims to mitigate, prevent, and respond to the protection risks faced by refugees by supporting timely and person-centred assistance through a multi-sectoral approach. Special attention will be paid to the identification of protection cases, information-sharing on available services and referral mechanisms, access to national services, and targeted household/individual assistance, as well as community mobilization and integration interventions. A holistic cross-cutting MHPSS approach will focus on protecting and promoting psychosocial well-being, preventing, and treating severe mental health conditions.

NFIs, shelter and food will continue to be provided in close collaboration with regional and local authorities and on the basis of their requests and needs assessments. Access to winter-specific assistance will be ensured for vulnerable groups (including older persons, persons living with disabilities, women and children) to mitigate the effects of the harsh winter. While in-kind assistance will be maintained, either to support collective accommodation centres or vulnerable households, Cash-Based Interventions (CBI) will be prioritized to enable refugees to meet their basic needs and move toward inclusion in national social protection schemes.

Fostering refugees' socio-economic inclusion into Armenian economy and society will be crucial to the sustainability of the response. RRP partners will support the Government to increase the absorption capacities of existing public services and to transit from collective accommodation centers to affordable individual housing. Access to employment will be supported by the rehabilitation of productive infrastructure, the reinforcement/development of income-generating activities, and capacity-building and upskilling of refugees and affected host community members.

Actors will promote dialogue and mutual understanding among refugees and host communities to foster a protection environment that promotes inclusiveness. Partners commit to ensuring that refugees and local community-based structures are consulted and engaged throughout the response. Accountability to Affected Populations (AAP) is a cross-cutting priority, reflected in the Government's ongoing efforts to improve two-way communication with refugees, ensure that they can exercise their rights and participate meaningfully in the decisions that affect their families and communities. RRP partners are committed to ensure that effective feedback and complaint mechanisms are put in place across the board and have stressed the need to ensure that communication with communities adjust to the diverse needs of refugees.

Emphasis is placed on data-driven and evidence-based decisions, through the realization of sectoral and multi-sectoral needs assessments with the authorities and the systematic collection of data on humanitarian actors' interventions. Information management (IM) will be key to respond in a coordinated manner to refugees across the country.

The transition from the immediate humanitarian response to longer-term development initiatives must be government-led, which requires long-term coordinated efforts by both humanitarian and development actors. Related to the concept of 'solutions from the start' every effort must be made, as soon as possible in the response, to find ways to limit the reliance on humanitarian assistance and progressively include refugees in national development plans and programmes and strengthen national systems and resilience.

Cash Modality

Cash-based assistance has been recognized by the Government and partners as the most dignified and flexible modality for providing immediate and medium-term support, thus upholding safety, catering for the individual needs of beneficiaries, and providing freedom of choice to affected families and host communities. Cash and voucher assistance (CVA) contributes to achieving multi-sectoral and sector objectives, including in food, protection, non-food items, shelter, and livelihood support.

The Cash Working Group has active and continuous participation of the Ministry of Labour and Social Affairs and more than 20 humanitarian and development partners. The Government demonstrates leadership in the elaboration of cash-based measures, ranging from multipurpose cash to cash for rent, utilities, food, work, and others (e.g., CVA support targeting certain groups of the population). Throughout 2020-2021, the Cash Working Group in collaboration with the Ministry of Labour and Social Affairs developed several framework agreements, templates, and Standard Operating Procedures (SOPs), enabling harmonized approach to CVA programming by humanitarian partners in support of Government-led programmes through various delivery mechanisms and to facilitate progressive inclusion in the national social protection system. The SOPs will be

revised and adapted to the current situation and enable fast mechanisms for rollout and complementarity of CVA by partners to the benefit of the refugees and host families/communities. Special attention will be paid to the diversity of options for various delivery mechanisms, as well as data protection, data sharing and complaint and feedback systems, in line with principles of accountability to affected populations. A basic harmonized post-distribution monitoring (PDM) tool has been developed within the Cash WG to ensure a standardized approach to PDM.

Strategic Objectives

SO1: Support the Government to ensure refugees have access to protection and address their immediate basic needs, with a particular focus on winterization.

Partners will ensure that refugees can access protection and meet their most immediate needs. This will be done through timely and person-centred access to information and assistance, ensuring a coordinated response with local, provincial, and national authorities.

SO2. Support service provision through national system.

Partners will ensure access to services through national systems with a special attention on most vulnerable areas or services facing higher pressure. Partners will work to strengthen the national capacities for delivering quality services as well as its resilience and shock responsiveness. Refugees and host community members will be supported to access services.

SO3. Foster the socio-economic inclusion and livelihoods of refugees through self-reliance activities and support, and the progressive inclusion into Armenian society and economy.

The refugee response will support the Government's efforts to reduce refugees' food insecurity, create livelihoods opportunities and an environment fostering self-reliance, and their medium to long-term inclusion into the Armenian economy and society. Strategic targeting of vulnerable host families in particular in rural areas with low incomes is needed. Preference should be given to vulnerable households and rural areas.

Sectoral Responses



PROTECTION

Protection actors will work closely with line Ministries and local authorities to support identification and referral of persons who may not yet have registered, as well as to support access to protection services and community mobilization. Monitoring and advocacy efforts will rapidly identify, and address protection risks and gaps. Moreover, studies will be carried out to identify refugees' intentions and inclusion perspectives, informing development of relevant programming.

There will be a particular focus on complementing the government response to the needs of the most vulnerable refugees, including addressing mental health and psychosocial needs. Multi-purpose cash assistance will be provided to persons at risk, older persons, persons with disabilities, female-headed

households, households with children and other vulnerable groups to support resilience and mitigate potential protection risks.

A community outreach approach will be adopted to identify needs, vulnerabilities, and community-based protection opportunities. Response actors will organize regular community events and fund refugee-led initiatives. Small grants will be made available to allow refugees to design and prioritize needed interventions, shifting ownership of these elements of the response to the refugee community.

Sub-Sector: Child Protection

Partners will prioritize strengthening the national child protection system and inclusion of refugee children, including those with disabilities, in the provision of services available within the national child and social protection systems in Armenia. At entry points in Armenia where most of the displaced population are on the move, as well as in communities across the country with a high concentration of refugee families. Partners will provide support to national authorities in ensuring Best Interest Procedures are in place for all unaccompanied and separated children and other children at risk. Partners will promote family-based alternative care arrangements, in close collaboration with the relevant government counterparts and duty-bearers, when needed. Partners will provide support to national child protection actors, ensuring that the best interests of children at risk are evaluated and upheld, with a particular focus on preventing violence and family separation as well as addressing children's MHPSS needs.

A critical aspect of child protection will be the provision of MHPSS activities targeting children and their families with protection risks and in need of assistance, including specialized services and case management. Child Protection and MHPSS activities will target families and host communities aiming also to include life skills development and parenting support. Prevention of violence and response services, including case management and referral to specialized services, will be strengthened through support to national systems at both central and local level to ensure that all displaced children and their families are included and provided with quality services. An emphasis will be put on increasing adolescents' participation in program design. Child protection partners will work closely with gender-based violence (GBV) actors to ensure a child and survivor-centred approach, and to ensure violence against children, including GBV prevention and risk mitigation measures are in place. Child protection partners will also work closely with Education and Health & Nutrition partners to ensure that centrality of protection for children extends to ensuring continued education and learning, skills development, and access to the public health system, with particular emphasis on maternal and child healthcare, reproductive health and healthcare of adolescent boys and girls as well as young women and men. Partners will disseminate child-friendly information, using existing platforms including those promoting accountability to affected populations (AAP), prevention of GBV and sexual exploitation and abuse as well as prevention of all forms of violence, abuse and neglect against children and adolescents. They will focus on strengthening children's and adolescents' participation and engagement and strengthen child-friendly two-way communication and feedback and response mechanisms.

Sub-Sector: Gender-Based Violence

Partners will ensure that all refugees have timely access to life-saving, multi-sectoral and survivor-centred services and to mitigate and prevent GBV risks in all sectors of work. The GBV Sub-Sector will work to strengthen access to resources, information and high-quality services for women and girls, including mental health and psychosocial support, women's empowerment activities, GBV case management, and sexual and reproductive health services, including clinical management of rape. These services will be provided in safe spaces and health facilities which may require expansion. Partners will reinforce GBV prevention and risk mitigation through information-sharing, including messages on protection from sexual exploitation and abuse (PSEA) and GBV, ensuring that refugees know where to seek assistance. Women and youth

empowerment interventions will ensure the sustainability of the response and make linkages to current programmes.

The Sub-Sector will coordinate GBV service provision and ensure that data collection meets safety and ethical principles. Existing referral pathways will be updated, and additional ones will be developed for all regions in Armenia where refugees are hosted. In addition, GBV risk mitigation will be mainstreamed across the response, in coordination with PSEA and health interventions.



Sub-Sector: Education

The inclusion of all refugee children and youth, including those with disabilities, into the national education system of Armenia will be at the center of Education partners' efforts and activities, along with investments in strengthening the capacity of the Armenian education system to accommodate newly arrived children and youth, and providing them with additional learning materials and supplies. Ensuring equitable and inclusive access to all levels and modes of education, including early childhood development and education, and improving the quality and inclusiveness of education and learning for refugee and vulnerable local children and adolescents will be the key strategic priority for the Education sector.

In line with national education directives and policies, Education Sub-Sector partners will ensure that refugee children and their families have access to formal, non-formal and informal education and learning, access to skills development for students and teachers, teacher training, and activities aiming to ensure the inclusion of children and youth, including those with disabilities and other vulnerable groups of learners into the education system. Partners will also provide support to continuity of learning for tertiary-aged youth through recognition of prior learning and provision of academic and psychosocial support. In close collaboration with the Ministry of Education, Science, Culture and Sports (MESCS) and other relevant authorities and government partners in Armenia, Education Sub-Sector members will work to support capacity development of teachers and other education personnel and inclusion of refugee teachers as required.

Education partners will also support the Government's efforts to provide MHPSS activities for students, teachers, and other education personnel, along with programs promoting and strengthening active engagement and protection of refugee children and youth, including gender-sensitive and violence prevention initiatives and support to parents.

Education partners will work closely with the Protection Sector partners to ensure the centrality of protection and coordinated MHPSS support and to address the special needs of the most vulnerable groups of children and adolescents. The same approach will be fostered when it comes to collaboration with partners providing cash-based assistance as well as partners providing support to the Government in inclusion of children and adolescents into the national healthcare system.



FOOD SECURITY AND NUTRITION

The sectoral response to the reported food security needs will be co-led and coordinated with the relevant government ministry and will consider the needs of refugees, host communities and families, as well as the broader food-affected population to promote social cohesion during the integration of refugees across a diverse internal context. Refugees and communities to be assisted will be determined based on government-

validated data and in coordination with local authorities at the provincial and district level, and in consultation with community members, to confirm efficient prioritization of resources and other support.

Assistance will take the form of food parcels; ready-to-eat and hot meals; cash-based assistance to support food needs via vouchers or the Government's food card programme; targeted livelihood assistance in hosting communities; and where relevant, nutrition support as decided in conjunction with the Ministry of Health. The composition of the food boxes, nutritional values and transfer values for the cash assistance will be determined in collaboration with the appropriate Government ministries and local leadership and verified at the community level.

Distributions where relevant, will be carried out through local and international civil society partners under the leadership of local authorities and branches, such as the Unified Social Service, and will be protection and gender-sensitive and include distribution monitoring. All recipients and the wider communities will also have access to Community Feedback Mechanisms (CFMs) to help ensure accountability of the sector response.

The self-reliance of refugee families is dependent on their ability to find decent work to ensure household food as part of their basic needs, and refugees may be dependent on food assistance until opportunities for generating income are available. Considering the loss of income and food generating capacity due to displacement it is of utmost importance that durable solutions to safeguard food security and nutrition are addressed through the lens of sustainability, resilience building and disaster reduction against shocks. Refugees in rural areas may depend on food assistance until food production is established and/or increased for those accommodated in rural host households.

Priority areas will include distribution of food to both urban and rural populations, paired with support for engaging in and increasing food production in rural areas. Support to host communities with potential to provide livelihood opportunities for refugees to bolster food production and reduce food insecurity is essential in a manner attendant to their specific needs, skills, interests, and long-term resilience. Given the often-limited access to own-source revenue streams faced by local administrations, the establishment of more direct alliances and coordination channels with the private sector will be supported.

The projects developed by the sector will aim to improve access to food, to prevent a deterioration of the nutritional status of under-five children and vulnerable populations, revitalizing markets and strengthening purchasing power.

Sector members will reduce dependency and improve sustainability through:

- Voucher and cash assistance will be favoured at inception to give the choice to meet their needs (food and non-food items) and to prevent further disruption of markets.
- Refugees who are not labour constrained and who receive cash or food should be engaged in cash for work programmes to the extent possible.
- Transition to conditional assistance gradually leading up to March 2024 to support resilience,
- Cash-plus social protection and nutrition-sensitive interventions that will complement other programmes and contribute to nutrition outcomes at community and household level, including improving food availability and access, restoration of productive assets and essential access routes and productive capacity.



HEALTH SECTOR

Health sector interventions will focus on:

- Ensuring access to essential health services and primary healthcare, including emergency medical supplies, trainings of primary health care workers, deployment of mobile clinics and pediatric mobile units, support to referrals, and measles vaccination rollout.
- Ensuring access to secondary health care: including specialized care for burn victims by emergency medical teams, and other priority groups of population and providing necessary emergency health care including through deployment of emergency medical teams.
- Providing mental health and psychosocial support: including counselling services by specialised and trained non-specialised health care workers, specialized clinical psychological or psychiatric services, and training to healthcare workers providing these services.

Under the overall coordination of the Ministry of Health, health partners will support access of refugees to quality health services in an equitable and inclusive manner. The Health Sector Coordination Group will have a technical sub-sector group for sexual and reproductive health (SRH), as well as a cross-sectoral coordination group for MHPSS that will ensure MHPSS services are integrated across sectors, including clear referral pathways and service mappings. Partners will raise awareness and share information on the prevention of non-communicable and communicable diseases and on SRH. Addressing children's health and development-related issues and ensuring continuum of care will be another key priority. Targeted support will be provided to address the specific needs of vulnerable groups. Partners will monitor refugees' access to and uptake of health care services and strengthen disease surveillance.

The sub-working group on SRH will ensure the availability of comprehensive SRH services to refugees and host community members, including youth and people with disabilities, through the enhancement of existing services, capacity strengthening, referral pathways, provision of supplies and equipment.



RESILIENCE

The overall goal of the sector is to ensure a holistic and system-wide response across the humanitarian-development-peace (HDP) nexus, that includes national and local actors, to improve aid effectiveness, inclusion in national systems and services, reduce vulnerability to shocks and to pave the way for resilience, sustainable peace and development. The Resilience Sector will focus on interventions that address the mid-term resilience needs in Armenia, including livelihood recovery, effective access to socio-economic rights, systems and services, social cohesion, and evidence-based decision-making, prioritizing resilience/inclusion/durable solutions from the start.

Livelihoods and economic inclusion support:

- i. Infrastructure rehabilitation and green solutions. The support will be directed to infrastructure rehabilitation, renovation works and refurbishments to ensure accessibility of essential services, including water supply and green energy for areas with a high concentration of refugees.
- ii. Employment, entrepreneurship, and job creation. In-kind support and grant mechanisms will be used to foster income generation and entrepreneurial activities of refugees and disadvantaged host households, with a specific focus on women, to speed up their financial inclusion and self-sufficiency.

The uptake of entrepreneurial knowledge and skills will be facilitated through training and mentorship with targeted support for women in close coordination with financial and business development service providers to support inclusion in existing systems and avoid the creation of parallel mechanisms. Labour market integration and access to decent work of the refugees and disadvantaged host households will be supported based on comprehensive labour force assessment through various mechanisms, including active labour market programs (ALMP), on-the-job trainings, paid internships, upskilling and reskilling through formal and non-formal market-based trainings, and result-based financing of ALMPs and self-sufficiency.

- iii. Support local production capacities. Support will be directed to restoring productive infrastructure and engaging the refugees and host populations in resilient and viable value chains.

Social cohesion and resilience: Host communities and refugees will be supported to develop social relations and bonds to bridge social division and enable trust-building. Effective communication and collaboration between groups will be facilitated for social cohesion on horizontal and vertical dimensions. Authorities and civil society will be supported in fostering cohesion and maintaining the strong culture of hospitality and community witnessed in the hosting areas.

Data-driven & evidence-based decision making and digital services: In cooperation with Government, the data and digital capacities of public agencies will be strengthened for more accessible and human-centred services (social protection, employment, migration and citizenship, mental health etc.) tailored to the needs of refugees and vulnerable host populations through digitalization and automation. All resilience interventions will be market-based and ensure a strong focus on data and evidence-base. The Minimum Economic Recovery Standards (MERS) will guide interventions.

Social Housing Strategic Vision & Enhanced Management: Support the Government in setting strategic vision and implementation of redesigned institutional and management models for social apartment buildings and decent work of refugee population and disadvantaged groups, including graduation from the social protection system.



SHELTER AND NFI

The Shelter and Non-Food Items (NFI) Working Group operates in close coordination with the Ministry of Labor and Social Affairs (MLSA) and the Ministry of Territorial Administration and Infrastructure (MOTAI). Most requests for NFI assistance come from municipalities and community-based organizations (CBOs) while there are ongoing efforts to enhance coordination and information sharing among actors, through the MLSA.

Partners' planned shelter activities are structured around three main objectives:

- i. Renovation and refurbishment of shelters (collective shelters and individual houses), incorporating green energy solutions and winter assistance, to ensure refugees have dignified living conditions. This includes the provision of emergency shelter assistance by supplying prefabricated containers for temporary short and medium-term accommodation.
- ii. Providing support for infrastructure recovery to ensure that refugees in shelters have access to basic services such as hot running water, clean energy, and sanitation.
- iii. Initiating mechanisms to facilitate refugees access to affordable and dignified housing. This includes repurposing vacant buildings, social housing initiatives, community-led housing projects, rent subsidies and guarantees, housing vouchers, the acquisition of underutilized houses from homeowners, brokering housing gift schemes, and complementing them with repair grants.

The distribution of NFI such as hygiene kits, bedding (including pillows, blankets, mattresses, bed linens, and beds), winterization support (including electric heaters, and solid fuel, procured locally where possible), kitchen sets and clothing, is tailored to the expressed needs of refugees. Municipalities, with the support of volunteers and CBOs, UN agencies and NGOs are responsible for organizing the distribution of NFIs. In addition, dignity kits for women and girls will be provided. Cash-based interventions will be resorted to, wherever possible.

Additionally, partners will continue to address the immediate gender-specific needs of refugee women, girls, boys and men and host communities around safe access to and availability of water, sanitation, and hygiene (WASH) services. Partners will also target WASH needs in schools and other social infrastructure facilities as required.

Cross-Cutting Priorities

Cross-cutting priorities underpin the entire response and informs Sectors' strategies and work. The Refugee Coordination Forum oversees and is accountable for them.



All the partners involved in the design and implementation of this plan, as well as their national implementing partners, will work on ensuring Accountability to Affected People (AAP) across the response. Priority will be given to strengthening comprehensive accountability processes nationwide, including feedback and response mechanisms, meaningful community engagement, communication with communities and organizational learning. At both the inter-agency and organizational level, RRP partners will jointly work to strengthen systematic processes promoting the meaningful participation of refugees and affected host community members in decisions that concern them, ensuring an age, gender, and diversity approach.

An AAP Task Force of the Refugee Coordination Forum will provide capacity-building and awareness-raising activities among partners to mainstream and promote minimum AAP standards as well as core humanitarian principles. The latter includes strengthening inter-institutional and inter-agency coordination for the advancement of collective AAP (including a joint reporting mechanism that informs the response) and establishing efficient community-based feedback and response mechanisms with an age, gender, and diversity approach, in coordination with the inter-agency PSEA Network and in close collaboration with local organizations, including refugee- and women-led organizations.

To ensure that refugees and affected host communities have access to accurate, timely and reliable information on humanitarian assistance and their rights and obligations, the AAP Task Force will promote a coordinated approach to avoid duplication and misinformation (harmonization of messages, common FAQ, information sessions), as well as joint campaigns on topics such as access to services, international protection, MHPSS, and prevention of trafficking, fraud and other protection risks, in close coordination with relevant sectors.



Protection from sexual exploitation and abuse (SEA) is an essential component of emergency refugee response plans as it upholds human rights, prevents harm, addresses vulnerabilities, supports well-being, and ultimately contributes to a safer and more resilient society. SEA is recognized as a severe violation of the authority of humanitarian actors towards affected communities, demonstrating a lack of accountability. The

heightened risks of SEA among refugees can be attributed to many factors including and not limited to the socio-economic vulnerability of the displaced population, increasing protection risks potentially affecting children and women, and the expanding involvement of humanitarian organizations in the response.

The UN inter-agency PSEA network, coordinated by UNHCR and WFP, will serve as the primary body for technical-level coordination and oversight of PSEA activities to prevent and respond to SEA of refugees and mitigate risks thereof. Inter-agency and multi-sectoral coordination are critically important to effectively integrate PSEA from the outset of the refugee response, including prevention, risk mitigation, community engagement, safe and accessible reporting, and a victim-centered response.



Mental Health and Psychosocial Support (MHPSS)

Within the overall humanitarian response, a comprehensive, cross-cutting, multi-sectoral Mental Health and Psychosocial Support (MHPSS) approach will be developed and implemented. It aims to protect and promote psychosocial well-being and prevent and treat mental health conditions, whether emergency induced or pre-existing. MHPSS will be coordinated and integrated across sectors, including Protection, Child Protection, Education, Health, as well as in humanitarian aid distributions, and the provision of basic services like water, sanitation, and hygiene, as described in interagency guidance, including the Mental Health and Psychosocial Support Minimum Service Package.

The delivery of MHPSS services will be based on situational analysis and assessments and prioritize access for displaced populations across all layers of support, while also reinforcing national MHPSS structures and resources. Frontline providers, such as social and healthcare workers, educators, local authorities, and community actors, will receive capacity-building training, including skills like psychological first aid (PFA), and other scalable psychological interventions, to identify and support people in distress and connect them to appropriate services with respect for their privacy and dignity. Service points, including child-friendly spaces, will be established in community-based settings and systems accommodating displaced populations. Services will be gender and age-appropriate, including psychosocial counselling, psychoeducation, community-based activities to strengthen social connectedness, and burnout prevention of frontline providers, and referrals. Those in need of specialized support will be directed to relevant mental health services, and hotlines and online digital platforms and tools will be utilized to reach individuals facing access challenges. Additionally, response modalities will include remote and mobile services, safe spaces for women and children, peer support networks, and awareness-raising activities to reduce stigmatization and provide information.



Age, gender, and diversity (AGD)

The Protection Sector, along with its sub-sectors, is responsible for the consistent application of AGD principles, in accordance with the specific guidelines outlined by individual agency policies. All participating agencies in the response will work together to eliminate both physical and institutional barriers, ensuring that the perspectives of individuals of all ages, genders, and diverse backgrounds are considered in designing the response process.

Partners, in cooperation with local authorities and host communities, will advocate for and implement targeted, gender-responsive coordination, programming and financing within the response, for those groups which are facing complex challenges, threats, and barriers, and often experience discrimination, abuse, and violence such as persons with disabilities, women and marginalized and underrepresented groups. Additionally, efforts will be made to increase meaningful participation and leadership of national and local civil society organizations, focusing on women-led organizations, women's rights organizations, and minority-rights groups, through flexible funding, capacity building, and facilitating access to humanitarian coordination structures.

The AGD approach will guide partners' response to ensure participatory and inclusive methodologies are applied to incorporate the capacities and priorities of women, men, girls and boys of diverse backgrounds into protection, assistance and solutions programmes. This approach also encompasses the collection and analysis of data disaggregated by age, sex, and diversity to inform programme design, monitoring and reporting. A Gender Task Force within the Refugee Coordination Forum with dedicated technical support will provide support to inter-agency coordination to ensure all sector and sub-sector working groups meet their obligations towards gender equality and inclusion.

All participating agencies in the response effort will work together to eliminate both physical and institutional barriers, ensuring that individuals of all ages, genders, and diverse backgrounds can actively engage and meaningfully participate in the response process.

Partners, in cooperation with local authorities and host communities, will advocate and implement targeted, gender-responsive coordination, programming and financing within the response. Efforts will be made to ensure the inclusion of those groups which are facing complex challenges, threats, and barriers and often experience discrimination, abuse, and violence such as persons with disabilities, women and marginalized and underrepresented groups. Additionally, efforts will be made to increase meaningful participation and leadership of national and local civil society organizations, focusing on women-led organizations, women's rights organizations, and minority-rights groups, through flexible funding, capacity building, and facilitating access to humanitarian coordination structures.



Resilience From the Start

The response across sectors will prioritize strengthening the resilience from the start on national, local, and individual levels. UNCT will introduce mid and long terms solutions grounded in a systems approach and translated into programmable interventions for transformational change. In this respect, the RRP aims to contribute to and foster self-sustaining nationally and locally owned processes and models, basing interventions on a joint UN-Government Assessment of the needs of the refugees and host communities to address root causes and vulnerabilities as well as the immediate impacts of the ongoing refugee crisis.

Partnership & Coordination

Recognizing the Government has the primary responsibility to protect refugees, UNHCR with the support of the RCO will support the government to coordinate the response, guided by the Refugee Coordination Model (RCM) in a complementary and cohesive manner, ensuring that multisectoral activities are impactful, address refugee needs, and are in line with government priorities.

All the sectoral responses presented in this plan are in line with the government's vision and strategic priorities and aim to support its leadership. Emphasis will be placed on data collection including the one related to the interventions of actors involved in this plan to ensure complementarity and facilitate coordination with national and regional authorities.

National level. The Government is leading the response to ensure protection and lifesaving needs of refugees, including the medium- and longer-term planning and response. The Deputy Prime Minister is currently leading a government working group composed of the various Ministries such as the Ministry of Internal Affairs, Ministry of Territorial Administration, and Infrastructure, Ministry of Labour and Social Affairs, etc. A joint Government – UNHCR coordination mechanism, herein referred to as the Refugee Coordination Forum, is being established to support the government in coordinating the response. The

coordination structure will be led by the Deputy Prime Minister, co-led by UNHCR, and will include Line Ministries and UN agencies and programmes as sector leads, and the humanitarian community as members.

The coordination ensures effective and complementary support by coordinating humanitarian and development partners working in five sectors – Protection, Food Security and Nutrition, Health, Shelter/NFI, and Resilience. The Protection Sector also includes three sub-sectors: GBV, Child Protection and Education. Two cross-cutting working groups under the Refugee Coordination Forum (Information Management and Cash) provide support and expertise as part of the the multi-sectoral response. The Cash Working group also coordinates cash preparedness and response actions.

Sub-national level / Local level. 63 government humanitarian centers have been scaled up across the country to ensure efficient geographical coverage of the authorities' response, bringing coordination to the point of delivery. To support this decentralized approach, working groups were established by the Governor's office or municipality in several provinces, to coordinate efforts with the local authorities, UN, and NGOs. At local level, the authorities also rely on community involvement to support refugees and assess their needs.

To ensure the effective implementation of an area-based approach corresponding to the distribution of refugee's population, special attention will be paid to local level coordination forums with participation of regional authorities and municipalities. Actors will ensure to optimize their capacities and existing presence in the field. This coordination framework is in line with localization agenda. Both in terms of technical capacity and network, NGOs and CBOs are a clear asset to effectively respond to the current situation.



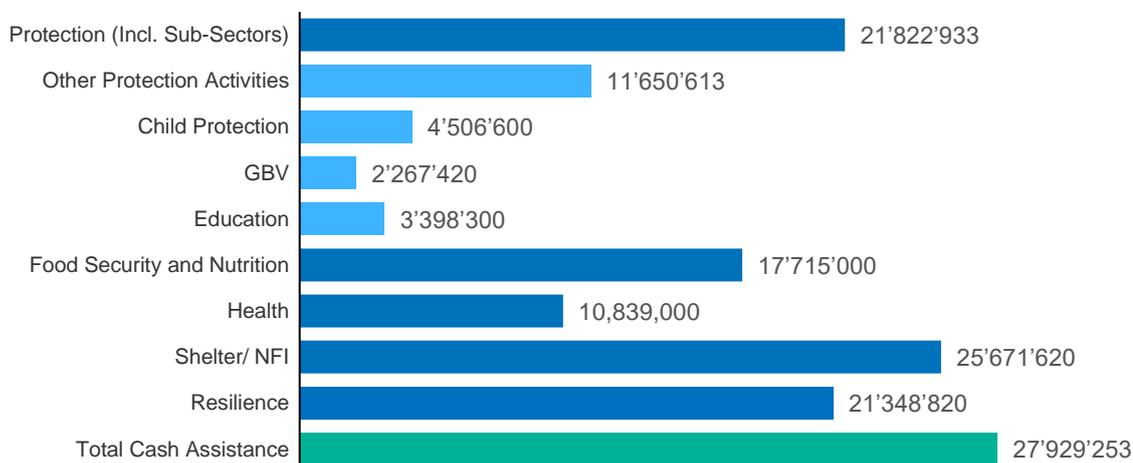
Notes: This list only includes appealing organizations under the RRP, many of which collaborate with implementing partners to carry out RRP activities. Implementing partners can also be highlighted in this section if they are different from operational partners.



Inter-Agency Financial Requirements



Budget summary by sector USD



* This is a breakdown by sector of the requirements for cash assistance which are included in the above total sectoral budgets. Cash assistance is pursued and reflected as a key modality of assistance and protection in line with UNHCR's CBI Policy 2022-2026. Cash assistance is used as a cross-cutting modality across the various sectors, including protection, and is budgeted for accordingly and in line with a basic needs approach. As the modality of choice of persons of concern, cash assistance will be used as the primary means to meet immediate basic needs and provide important protection outcomes.

³ The term national NGOs in this table also includes community-based organizations.

Goris Youth Union	NGO	14'000		5'000		13'000		32'000
Gyumri Youth Palace	CBO	35'000						35'000
Hadrut/Shushi	CBO	10'000						10'000
HEKS/EPER Armenia NGO	NGO					325'420		325'420
Homeland Development Initiative Foundation	INGO			-		25000		25'000
IOM	UN	1'510'000			1'088'000	4'937'000	2'065'000	9'600'000
Kasa Swiss Foundation	NGO		72'000	48'300				120'300
Krunk	RLO	40'000						40'000
"Little Star" Educational Charitable Social Organization	CBO			15'000				15'000
Medecins du Monde	NGO				200'000			200'000
Mission Armenia NGO	NGO	30'000				1'121'282		1'151'282
New Generation Humanitarian NGO	CBO	6'125			146'000	66'456	73'500	292'081
Oxygen Armenia	NGO	80'000						80'000
Partnership and Teaching	CBO	56'000						56'000
People in Need	INGO					3'656'250		3'656'250
Project Hope	NGO				600'000			600'000
Psychosocial Recovery Center	NGO				250'000			250'000
Resilient Syunik	NGO				100'000			100'000
SafeYou	NGO	80'000						80'000
Save the children	INGO	50'000		25'000		75'000		150'000
Seda Ghazaryan mental health foundation	NGO				20'000			20'000
Sexual Assault Crisis Center NGO	NGO			130'000				130'000
Sisian Adult Education	CBO	25'000						25'000

Center Foundation										
Sose Women's Issues	NGO	36'700						9'280		45'980
Syunik Development	CBO	30'000					20'000			50'000
Ukraine Forum	RLO	20'000		10'000			20'000			50'000
UN Women	UN	300'000						200'000		500'000
UNAIDS	UN					600'000				600'000
UNDP	UN					300'000	5'000'000	9'050'000		14'350'000
UNESCO	UN			300'000						300'000
UNFPA	UN			2'000'000		2'500'000				4'500'000
UNHCR	UN	8'997'788					4'602'212	1'000'000		14'600'000
UNICEF	UN		4'000'000	3'000'000		1'630'000	4'000'000			12'630'000
Voskeporik NGO	CBO		50'000							50'000
WFP	UN					14'340'000		2'480'000		16'820'000
WHO	UN						2'500'000			2'500'000
Women's Resource Center (WRC)	NGO			11'000						11'000
World Vision Armenia	INGO	50'000						700'000		750'000
Young Tavush NGO	CBO	30'000								30'000
Youth for change	CBO			10'000				100'000		110'000
Total per sector		11'650'613	4'506'600	2'267'420	3'398'300	17'715'000	10'839'000	25'671'620	21'348'820	97'397'373

Annex 2 – Monitoring Framework

Sector	Indicator
	Protection # of people received protection services (eg; information on services and refugee rights in relevant languages, helpline, , identification of persons with specific needs and targeted assistance including cash) # of individuals referred through Protection Monitoring
	Child Protection # of children provided with child protection services, including MHPSS # of participants trained on child protection and children's right
	GBV # of regions with functional referral pathways # of persons reached through community outreach on prevention and mitigation of GBV, including communication campaigns # of service providers/organizations who have received capacity building support on GBV in emergencies
	Education # of children accessing formal or non-formal education, including early learning # of teachers receiving training # of children receiving learning material
	Food security and Nutrition # of individuals receiving (in kind/cash /vouchers) assistance # of children/caregivers receiving infant and young children feeding (IYCF) counselling sessions
	Health # of individuals referred to receive medical care at primary and secondary level # of individuals, including children, receiving health services, including MHPSS and rehabilitation # of service providers trained # of health facilities supported with medical equipment, supplies and medicine # of refugee children up to 15 years vaccinated
	Shelter & NFIs # of individuals who received shelter and housing assistance (in kind or cash) # of individuals who received household and domestic non-food items (in kind or cash) # of shelters rehabilitated / upgraded
	Resilience # of people who benefitted from livelihoods, income generating activities and economic inclusion interventions # of individuals participating in activities promoting social cohesion and peaceful coexistence between refugees and host communities
	Cash # of individuals supported through CVA

