

ISRAEL

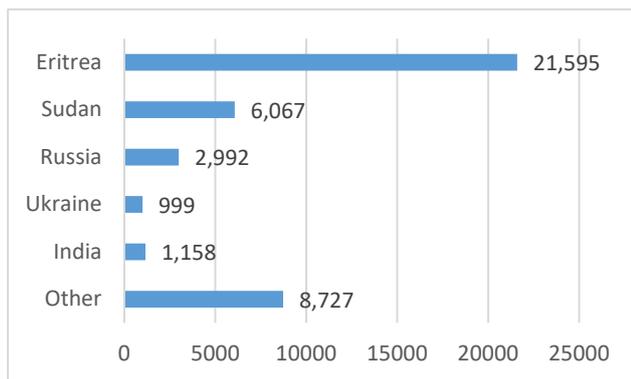
September 2021

Israel is a State Party to the 1951 Convention Relating to the Status of Refugees and its 1967 Protocol, but has yet to adopt national refugee legislation. Over the last 15 years, some 80,000 persons have sought asylum in the country, however less than one per cent were granted refugee status or other forms of protection.

While those with refugee status enjoy basic rights on almost equal footing to nationals, **asylum-seekers and particularly those from Eritrea and Sudan have few rights beyond a general policy of non-deportation**, despite their long stay in Israel. Consequently, most of their essential social, economic and psychosocial needs remain unmet.

UNHCR's main focus in Israel is **to promote and support qualitative improvements to the national asylum system and the treatment of people of concern** in accordance with international refugee and human rights law.

PERSONS OF CONCERN (as of 30/06/2021)



Total: 41,538 (plus an estimated 8,500 children)

Numbers by status

- Refugees: 573
- Humanitarian status: 1,302
- Asylum-seekers: 29,164
- Stateless persons: 42
- Others of concern: 10,457

UNHCR PRESENCE IN ISRAEL

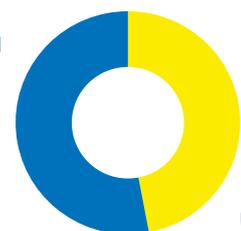
Staff: 14 national staff
 8 Affiliate Workforce
 2 international staff

Offices: 1 office in Tel Aviv

Funding in 2021 (as of 28 September 2021)

USD 6.7 M requested for 2021

Gap 53%
 USD 3.5 M



Funded
 47%
 USD 3.1 M



Working with Partners

The Government of Israel is **UNHCR's key partner in its mission to ensure the protection of refugees and asylum-seekers** in accordance with international standards. UNHCR works collaboratively with various Government ministries, particularly the Ministries of Interior, Justice, Foreign Affairs, Welfare, Education and Health. UNHCR has also established constructive working relations and mutual co-operation with relevant Parliamentary committees, resident diplomatic missions, and other national stakeholders. UNHCR is also increasing engagement with municipalities hosting asylum-seekers, particularly those in peripheral areas of Israel hosting smaller satellite communities of asylum-seekers.

UNHCR **maintains strong links with local civil society organizations and community-based associations**. At present, UNHCR has funding-based partnership arrangements with nine NGOs involved in implementing projects in the areas of health (*Physicians for Human Rights Israel, Israel Aids Task Force*), child protection and education (*Mesila - Aid and Information Centre for Migrant Workers and Refugees*), psychosocial counselling and support (*ASSAF - Aid Organization for Refugees and Asylum Seekers in Israel*), community outreach and vocational training (*African Refugee Development Center*), worker's rights (*Kav LaOved*), legal assistance and representation (*HIAS Israel, Hotline for Refugees and Migrants, Tel Aviv University Refugee Rights Clinic*).

COVID-19

UNHCR's population of concern—particularly the 28,000 asylum-seekers from Eritrea and Sudan who remain in a precarious social and legal context for more than a decade—has been acutely affected by the COVID-19 pandemic. Recent surveys indicate a spike in financial and psychological distress arising from the loss of income, lack of opportunities and social isolation.

The Government has taken commendable measures towards the **inclusion of refugees and asylum-seekers into national COVID-19 preparedness and response** with respect to testing and vaccinations, and has provided support to relief programmes for the most vulnerable. UNHCR and its partners have undertaken efforts to supplement these programmes, whether through protection services, psychosocial counselling, cash assistance, or outreach and awareness-raising activities.

Main UNHCR Activities

Protection

- UNHCR **promotes and monitors respect for refugee rights and the standards of treatment of asylum-seekers**, particularly with regards to access to asylum procedures and fair adjudication of their claims, access to basic services, freedom of movement and security of residence.
- Following a detailed report by an expert RSD consultant in early 2020, UNHCR has continued to engage with Israel on **strengthening its asylum system**. While some reforms have been introduced following the report, many areas for improvement remain. UNHCR has continued to monitor and observe government RSD interviews and to meet with the authorities and provide guidance on individual asylum cases and training on various RSD-related issues. In early 2021, UNHCR provided detailed comments on the proposed amendments to the national asylum law, some of which were incorporated into the final text.
- **Detention monitoring** remains an important part of UNHCR's work and cooperation with Israeli authorities. In 2020 and 2021, the number of detained asylum-seekers has been at its lowest level in over a decade. Since the outbreak of COVID-19, UNHCR and partners have successfully advocated for the release of the majority of people of concern from detention.

- UNHCR plans and implements various **capacity-building and professional development programmes** (45 sessions in 2020 and 17 in the first half of 2021) for a wide-range of stakeholders, including government officials, judges, adjudicators, legal practitioners, learning institutes, community-based organizations, and the media.

Gender-based Violence (GBV)

- It is estimated that among the refugee and asylum-seeker population in Israel, there are around 4,000 survivors of torture, GBV and enslavement at the hands of traffickers in the Sinai region over the period 2004-2012. Very few of these survivors have been accepted into the State-run rehabilitation programs for victims of trafficking, given the restrictive application of the relevant national legislation.
- UNHCR works within a multi-stakeholder partnership framework to **ensure GBV prevention, risk mitigation and response intervention for survivors**. In addition to UNHCR-funded services provided by Tel-Aviv based partners, UNHCR has focussed on building networks and capacity for GBV response in peripheral areas, particularly through municipalities and the network of social workers assigned by the Ministry of Welfare to help integrate asylum-seekers into existing programmes for GBV survivors. UNHCR also coordinates a **multi-stakeholder GBV forum** which meets regularly for coordination and collaboration on GBV issues.
- Asylum-seekers engaged in sale or exchange of sex are of particular concern. In 2021, UNHCR funded a dedicated social worker to provide one-on-one engagement, focused on psycho-social support and livelihoods, with an identified cohort of women and their children.

Livelihoods and Inclusion

- Advocacy for **improving livelihoods through economic inclusion and participation** has been a key component of UNHCR's strategy for achieving protection and solutions outcomes for persons of concern. The repeal of the Deposit Law in 2020 and the subsequent return of over 95% of withheld funds (ILS 207 million – approx. USD 64.4 million) which had been deducted from asylum-seekers' earnings was a significant positive development.
- Asylum-seekers are generally employed in low-skilled, manual jobs at the bottom of the pay scale. UNHCR supports vocational training programmes to help them upgrade their skills or acquire new ones. In 2021, some 1,200 beneficiaries are participating in over 100 different learning programmes. UNHCR is also supporting the **participation of 350 refugee women in language and vocational training programmes** suited to their needs, with the provision of childcare arrangements.
- **Access to health services:** Asylum-seekers have no access to the national health insurance system. They rely either on employer-based insurance if they are in employment, or on the assistance provided by a handful of NGOs providing free or low-cost health care. Recognizing the gravity of the problem, the Ministry of Health recently announced its plan to make appropriate arrangements for extending the public health insurance scheme to all asylum-seekers, an endeavour for which UNHCR has offered concrete technical and financial support.
- UNHCR supports the **Israeli AIDS Task Force** with funding for testing and awareness-raising activities throughout Israel.



Cash-Based Interventions

- In 2021, **UNHCR Israel continued its CBI programme (budgeted at USD 1 million) to mitigate the effects of COVID-19** for the most vulnerable populations of concern, namely women engaged in the sale and exchange of sex, victims of domestic abuse, torture and trafficking survivors, LGBTI individuals, persons with chronic illnesses, and victims of child abuse. A total of 2,750 persons (1,550 female and 1,200 male) benefited from the programme so far in 2021.

Child Protection and Education

- **Education in Israel is compulsory and free for children aged 3 - 17 years**, regardless of nationality or legal status. UNHCR works with the relevant authorities at the national and municipal levels to **ensure the inclusion of asylum-seeking children** (some 8,500 individuals) into the existing national system for child welfare and protection.
- UNHCR also provides **support across a range of education levels**, including support for improved conditions in early childhood facilities hosting asylum-seekers and for after-school programmes.
- Of particular concern is the **segregated nature** of many education settings in Israel, with asylum-seekers in Tel Aviv and some other areas attending kindergartens and schools largely designated only for foreign children. UNHCR convenes an **Education Forum** attended by principals of Tel Aviv-based schools to discuss and address issues relating to quality education, attendance, connected learning, and advocacy for desegregation.
- In 2021, UNHCR provided **465 laptops** to support remote learning of refugee and asylum-seeking students affected by COVID-19 school closures who lack access to computers.



Durable Solutions

- Achieving durable solutions for long-staying asylum-seekers in Israel, mostly Eritreans and Sudanese, remains a fundamental challenge. Absent political will for local integration, UNHCR has been **implementing a small resettlement programme** over the years, prioritizing the most vulnerable individuals and families - survivors of torture or GBV, serious medical cases, severely traumatized refugees who require specialized treatment unavailable

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