



## Fast Facts

**Country:** Turkmenistan

**Duration:** November 2006 to December 2009

**Implementing UN Agencies:** UNHCR; UNFPA

**Other Implementing Partners:** Government Ministries; National Centre for Medical Prevention and AIDS Control; local and sub-provincial administrations; CBOs

**Budget:** \$1,236,598.41

**Key Words:** Refugees; rural communities; access to basic social services; inclusive community development; capacity building

## BACKGROUND

In 2005, Turkmenistan was host to over 11,000 refugees from Tajikistan and Afghanistan. The majority of the refugees had settled in remote rural areas in the Lebap, Mary and Ahal provinces, living and working on collective farms allocated by the Turkmen authorities. Many of the settlements were remote and widely dispersed with rudimentary social infrastructure impeding access to schools, health facilities and markets. Since the majority of refugees had expressed the desire to permanently settle in Turkmenistan, local integration with host communities

was necessary in order to build a cohesive and thriving society. Beyond naturalization, integration required improving perceptions among host and refugee communities, as well as building the capacity of refugees to become self-sufficient and actively participate in the economic and social life of the community. Furthermore, inadequate infrastructure needed to be improved in order to support the empowerment of both refugee and host communities towards inclusive community development.

## PROGRAMME OVERVIEW

### GOALS AND OBJECTIVES

The overall goal of the project was to promote the local integration of refugees into their host communities. To achieve this goal, the project aimed to: (i) improve access to quality social services and infrastructure benefiting refugee and host communities; (ii) promote social and economic

empowerment of refugees in targeted settlements in the Ahal, Mary and Lebap provinces; and, (iii) implement up-to-date reproductive health protocols in the targeted areas with particular emphasis on adolescent girls.

### BENEFICIARIES

The direct beneficiaries of the project included 11,000 refugees, some of whom were in the process of obtaining Turkmen citizenship. A further 257,700

people from host communities were indirect beneficiaries of the project.



## NOTABLE ACHIEVEMENTS

(i) To improve infrastructure in the target provinces, 11 safe water projects (installation of water pumps, construction of water reservoirs, and upgrading of water supply systems) along with improved health facilities and schools were developed. As a result, refugees and host communities had access to potable water and waterborne diseases were eliminated in priority areas. In addition, road construction improved access to central areas of the villages for refugee and host communities, which was vitally important for their ability to deliver foodstuff as well as to access schools and health facilities. These combined infrastructure projects greatly supported inclusive community development efforts.

(ii) To promote the social and economic empowerment of refugees, vocational trainings were organized through the state vocational schools in the target provinces. Courses included welding; tailoring and stitching; tractor operation and motor-mechanics;

as well as accounting and computer courses. The establishment of 17 workshops provided additional opportunities for applying and developing the skills attained through the vocational trainings. As a result, employment increased and participants reached a functional level of financial stability and self-sufficiency.

(iii) More than 400 health providers received training in reproductive health, allowing them to provide high quality information on healthy reproductive practices during regular household visits. Over 90 per cent of women and adolescents gained knowledge about reproductive health and contraceptive use as a result of direct trainings, the training of health care providers, and public awareness events. The combined improvement in health knowledge and practice resulted in a considerable decrease in the number of women requiring urgent health interventions for preventable reproductive health issues.

## LESSONS LEARNED

The project highlighted the added value of the human security approach in addressing complex and interconnected issues. By recognizing that improvements in employment, health and education for displaced communities could be hampered by social tensions, the project focused on strengthening the social and economic resilience of both the refugees and the host communities. Subsequently, shared goals and strategies were established through ongoing

dialogue between these communities, thereby strengthening inter-communal partnerships. In addition, by bringing together a network of stakeholders with diverse expertise and resources, the project was able to promote a locally driven protection and empowerment framework that could respond to the human security needs of the three provinces in a more effective, targeted and sustainable manner.