Primary health care coverage standard

29 March 2023

**Key points**

- Standards of primary health care coverage apply to refugee camps and to out-of-camp (including urban) situations.

- Community health programmes should be initiated in consultation with local health authorities and community representatives, and should ensure a balanced representation of women and men.

- Programmes should provide information on major health problems, health risks, the availability and location of health services, and behaviours that protect and promote good health. They should address and discourage harmful practices.

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1. Overview

All refugees should have access to curative and preventive healthcare services, whether they live in refugee camps or out-of-camp (including urban) situations. UNHCR will support Ministries of Health to open and strengthen access.

Distance to health facilities should be considered when health facilities are designed and constructed. At least one health facility should be within 5 km. of refugee locations. Where this is not the case, an effort should be made to increase coverage.

2. Main guidance

**Emergency standard**

- The number of health facilities is sufficient to meet the essential health needs of all the disaster-affected population. In addition:
At least one health care facility is available for every 10,000 people. (Basic health units are primary healthcare facilities that offer essential health services.)
- In rural dispersed settings, at least one health care facility is available for every 50,000 people.
- One district or rural hospital is available for every 250,000 people.
- More than 10 in-patient and maternity beds are available for every 10,000 people.

**Longer-term standard**

The above standards apply to emergencies and long-term situations.

3. **Links**

   [UNHCR Public Health](https://www.unhcr.org)  [iRHIS](https://www.spheremanual.org)  [The SPHERE Handbook](https://www.spheremanual.org)

4. **Main contacts**

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