

## **Community-based Health Insurance Among Refugees in Rwanda**

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### **Summary**

Refugees are at high risk of experiencing limited health access and being exposed to diseases prevalent in conditions where there is poor sanitation, hunger, poverty, and over crowdedness. Despite these challenges refugees deserves full access to health services. Refugees in Rwanda experience these problems to various degrees. The government, refugees' agencies, and nonprofit organizations have been responding accordingly to improve the well-being of refugees living in Rwanda.

Along the lines of expanding refugees' access to health care, the UNCHR and the Rwanda Social Security Board have initiated a program to incorporate refugees into the Community-based Health Insurance (CBHI) initiative. The CBHI applies in all health care facilities around the country and covers all health services ranging from primary to tertiary health services.(1)

### **Introduction and Background**

Rwanda hosts more than 172,000 refugees living in six camps around the country, most refugees are from neighboring countries. Around 53% of the refugees are from Burundi, while the rest are from the Democratic Republic of Congo and other African countries. The Government of Rwanda has put into place several measures to incorporate refugees into normal life as real citizens of the country. Refugees in Rwanda are granted the right to work and the government has a policy to progressively integrate refugees into the national health and education system.(2)

Refugees in Rwanda access basic health services from their camps with the help of humanitarian staff. When there is a need, refugees are referred to secondary and tertiary health services in local public and private health institutions.(3) Under collaboration with several national and international agencies that have refugee wellbeing as part of their mission, health centers and other facilities have been established to ensure improved health care among refugees in Rwanda. Water and sanitation facilities, environmental and healthy sources of energy, and community basic health education programs have been launched in various camps under the support of various agencies and nonprofit organizations.

With the aid of the community-based health insurance, Rwanda has advanced universal health coverage. With this type of health insurance, all targeted populations contribute according to their social economic status as arranged in the Ubudehe categories I, II, III and IV.(4)

## **Community-based Health Insurance**

Normally Rwanda has a community-based health insurance initiative that has significantly expanded health access to all Rwandans despite inadequate financial capacity. As of January 2016, CBHI subscriptions are reported to have increased by 79%, and this program is voluntary and requires the family to contribute for all of its members. The CBHI pays 90% of all hospital bills and the patient is required to pay only the remaining 10% which can be provided by most of Rwandans.(5)

It has been a long while since refugees were not able to benefit from this risk pooling. This means that previously they had to carry all their medical bills despite terrible financial vulnerability and high risks for developing diseases. Under the policy of integrating refugees into the national health and education system, the Ministry In Charge of Emergency Management (MINEMA), the UNHCR, and the Rwanda Social Security Board signed an memorandum of understanding to ensure that refugees could also benefit from the community-based health insurance the same way nationals do.

Knowing the cost and gaps in health care for urban refugees, and the fact that only the most vulnerable were supported by UNHCR, UNHCR has financially supported and pushed forward this project as a more cost-effective and sustainable approach to meeting the health needs for urban refugees and refugee students who are away from their camp-based families. Refugees are considered as a special category, but pay the same premium rate as nationals do.

Since September 2019, 18% of refugees in Rwanda began to benefit from the CBHI. Benefiting refugees are mainly students in high school and refugees living in urban areas. Currently, more than 50% of the target refugees are enrolled and the rest are being progressively enrolled subject to the verification and issuance of national documentation. The CBHI covers all health costs described under primary, secondary, and tertiary health care within government health facilities across the country.(1)

This program involves several partners to support its success and sustainability. The MINEMA, Rwanda Social Security Board (RSSB), Africa Humanitarian Action (AHA-health partner), and the United Nations High Commissioner for Refugees (UNHCR) are current partners working to provide unlimited health access to refugees in Rwanda.(1)

## **Outcomes**

With the community-based health insurance, refugees in urban areas and students can access any government health care facilities wherever they live or work as Rwandan nationals. This helps refugees to focus on their daily activities, studies for students, and paves a way for a good future and strong human capital production.(1)

## **Conclusion**

Refugees are prone to experiencing poor health access and diseases that favor their living conditions. Initiatives aimed at boosting refugee access to health services by overcoming barriers should be supported. Governments,

nonprofit local organizations, and international agencies which have the aim of improving access to health among refugees are called to join this battle to ensure refugees in Rwanda are enjoying access to health services the same as nationals.

This project of incorporating refugees in the community-based health insurance will continue to evolve and be enhanced. The MoU will be revised before its validity ends.(1)

### **Works Cited**

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