

UNHCR Essential Drugs Manual

Guidelines for Use of Drugs
in Refugee Settings and
UNHCR List of Essential Drugs



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- The Drug Action Programme, WHO, Geneva.

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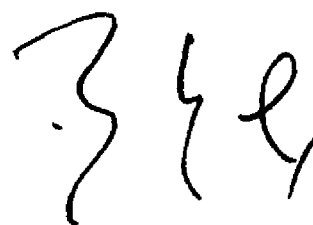
The Technical Support Service, UNHCR, Geneva, would be grateful to receive copies of any adaptations or translations of this manual into other languages.

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Foreword

The present manual is one of a series of technical documents being produced by UNHCR. The purpose of this series is to provide policy guidelines, for UNHCR field staff and implementing partners, in the various technical sectors that form the foundation stones of assistance programmes to refugees.

I believe that manuals such as this one are a vital link between the different parties who are striving together to achieve durable solutions to the plight of refugees: the international community, host Governments, non-governmental organizations, and the refugee communities themselves.



Jean-Pierre HOCKÉ
United Nations
High Commissioner for Refugees

Preface

The purpose of this manual is to provide essential information for those involved in the management and supervision of drug supplies in refugee health services.

While the contents address many of the general principles underlying the management and use of drugs in refugee settings, this document specifically focuses on the key components of the UNHCR Essential Drugs Policy, which has as its primary objective the introduction of a standardized list of drugs through UNHCR-assisted programmes, world-wide.

The implementation of an essential drugs policy will always meet obstacles, not the least of which is opposition from medical staff. Doctors, especially, tend to resent any restriction upon their freedom of choice: they must be helped to understand that the Essential Drugs Policy of UNHCR will enhance both the efficacy and efficiency of the services they provide – ultimately thereby improving the care delivered to refugees.

Implementation should be gradual. Existing stocks of any drugs not on the UNHCR List will of course be consumed but future planning and budget revisions must begin to limit drug orders to the confines of the List. These “confines” are in fact quite generous, especially when compared to the Emergency Health Kits, for example, which provide a range of drugs that is reduced to the extreme minimum necessary for emergency-phase curative care. The UNHCR List provides in essence at least one appropriate drug for treating the vast majority of conditions that will be met among refugee communities. Senior health staff should make a choice, from the UNHCR List of

drugs most appropriate to the different levels of services in their region: there is indeed room for such choice in the range of drugs provided.

Feedback on the present manual is actively sought from both health and managerial staff. Please send comments to the Technical Support Service, UNHCR, Geneva.

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