



Navigating Vulnerability and Integration: Refugee Resettlement from Rwanda to Third Countries under the Medical Needs Category

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The Research Question:

How do medical needs criteria affect the selection of vulnerable refugees in UNHCR's resettlement programmes in Rwanda?

What are the implications for resettlement as a burden-sharing mechanism?

Context

133,628 refugee and asylum seekers in Rwanda

Approximately 50 cases resettled per year on medical grounds

Medical Referrals: Less than 5 percent of the quota of a Resettlement State
Sometimes less



Concept of Promising Victimhood (Welfens)

*Refugees must show that they are vulnerable
But also 'promising': Able to recover, integrate and contribute.*

“...policies and practices require refugees to demonstrate they are at risk, yet willing and able to overcome their vulnerability to become law-abiding, self-sufficient and culturally adaptable members of the host society.” (Welfens 2023)

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Practical implications of Promising Victimhood

What does this entail when you have a medical condition?

**Four factors described in UNHCR Handbook:
Diagnosis, Treatment, Prognosis and Informed consent**

Implications for Resettlement from Rwanda

Initial medical assessment and referral

Challenges and waiting periods

Prognosis and prioritization issues

The very process meant to provide relief can exacerbate the suffering it aims to alleviate, highlighting the complex interplay between health, bureaucracy and time in the lives of refugees. While the system aims to assist the most vulnerable, delays in resettlement often prolong their suffering, undermining its humanitarian objectives.



Burden-Sharing: Ideal vs Reality

Public rhetoric: “prioritise the most vulnerable”

Practice: preference those with integration potential

Gap between humanitarian ideals and political realities

So, when you have limited opportunities, you have to weigh them carefully. [...] There are certain illnesses that you find which make people quite vulnerable and in need of resettlement, but in the end, you cannot resettle them because you have to prioritise someone with a better prognosis.

(Medical doctor, Rwanda)

The Paradox of Choice

UNHCR must balance humanitarian aims with resettlement states' expectations.

→ The most vulnerable often remain excluded.



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