



# ***Refugee Law Project***

*Faculty of Law, Makerere University*



**REPORT ON A VISIT BY THE LEGAL AID AND  
COUNSELING DEPARTMENT TO KIRYANDONGO  
REFUGEE SETTLEMENT CAMP  
14<sup>TH</sup> – 26<sup>TH</sup> JULY 2008**

# Refugee Law Project

## Vision

**Human rights for all people in Uganda irrespective of their legal status. This vision is informed by relevant international laws as well as the Constitution of Uganda.**

## Mission

**To empower asylum seekers, refugees, deportees, IDPs and host communities in Uganda to enjoy their human rights and lead dignified lives.**

## Mandate

- **To promote the protection, well-being and dignity of forced migrants and their hosts.**
- **To empower forced migrants, communities and all associated actors to challenge and combat injustices in policy, law and practice.**
- **To influence national and international debate on matters of forced migration, and justice and peace, in Uganda.**
- **To be a resource for forced migrants and relevant actors.**

**All of the above is achieved through a combination of activities broadly categorized under legal aid and counseling, research and advocacy, and training and education.**

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## **List of Acronyms**

<b>ARV</b>	<b>Anti Retro Viral</b>
<b>IDP</b>	<b>Internally Displaced Person</b>
<b>IP</b>	<b>Implementing Partner</b>
<b>IRC</b>	<b>International Rescue Committee</b>
<b>LAC</b>	<b>Legal Aid and Counselling</b>
<b>OPM</b>	<b>Office of the Prime Minister</b>
<b>RLP</b>	<b>Refugee Law Project</b>
<b>SGBV</b>	<b>Sexual and Gender Based Violence</b>
<b>TASO</b>	<b>The Aids Support Organization</b>
<b>UAM</b>	<b>Unaccompanied Minor</b>
<b>UNHCR</b>	<b>United Nations High Commissioner for Refugees</b>

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## **Background**

The Refugee Law Project as carries out field visits as part of its outreach programme to enhance and promote refugee protection. A visit to this refugee settlement was scheduled in order to follow up on the Kenyan Refugees who were at a transit camp in Mulanda and follow up on Sudanese refugees many of whom approached our Kampala office with reasons for not repatriating voluntarily.

## **Methodology**

The team gathered information primarily using interviews and focus group discussions. Follow ups were done with pertinent partners for clarity.

## **Findings**

The following are the pertinent issues that came up in various discussions had with the Kenyan and Sudanese refugees both on an individual and group basis:

### **Information- Communication gap**

There is an apparent communication gap amongst settlement authorities and between the settlement authorities and the refugees. This is as far as provision of services is concerned. The Kenyan refugees say they are regarded as arrogant and ‘know it all’ because they are pushing for provision of services. All the Kenyan refugees look back at the life and the treatment they lived and received while in the transit camp in Mulanda and say ‘back there we were treated like human beings, were fed well on rice, milk, sugar, porridge for the little ones, medication, given kerosene lamps and it was almost like home. Here we are treated like dogs and it is the same people that treated us back there in Mulanda that are treating us like we are less of human beings here in the camp’. To this end, they demand to know their rights. A few were seen holding the Refugee Act 2006 and demand that someone tell them what their rights are.

The team got to know that the phrase ‘we want to know our rights’ was referred to whenever the refugees want to inquire for information as to which office offers a particular service, how often that assistance is meant to be delivered and if it is not, what are the complaint handling procedures in place. They were not sure of which office to go to ask for a service or information. For instance when their food rations were not given on the date they were told they demanded to know their rights. It should be noted that most of the Kenyan refugees are about 2 months old in the camp and are adjusting to settlement life.

The LAC team’s visit to the Mulanda Transit camp saw all the above being provided not just by the UNHCR but by a number of organisations and well wishers. It was perceived that the Kenyan situation was only temporal and asylum seeker status was given with a hope that very soon a majority would return home. Unfortunately, violence has continued to prevail in areas where most of the refugees come from making it difficult for them to return but instead seek refugee status in Uganda. Those that went back walked into IDP camps. When the Kenyan Prime Minister was invited to come over and speak to the asylum seekers about returning back to a peaceful Kenya. The Prime Minister was booed.

The RLP office had received reports to the effect that about 300 Kenyan refugees had walked out of the camp. There have been too many guesses as to where they went. On reaching the camp, the fellow refugees inform that the number is greater than 300. The camp authorities are aware of these missing people but were not informed by the families and individuals of this move, they just realised during the recent verification and census exercise that was conducted in the month of June. Whereas fellow refugees state that the refugees left because they could not cope with the harsh settlement conditions of life and decided to leave for other places like Hoima in search for greener pastures and others going back home, the camp authorities also add that this lot came with a hope of getting resettled to a third country abroad but when saw it not forthcoming they decided to leave for Kenya. When refugees were consulted on the resettlement issue, they responded that they were told from the transit centre in Mulanda that if they agree to move to the settlement, they will be assured of resettlement. They were told this by the UNHCR because they were resisting leaving the transit centre.

The refugees also gave another dimension to the return issues; that those who have returned at least have something like properties to return to unlike those who have stayed; that they suffered the brunt of the tribal clashes and election violence where all their properties were burnt to the ground. Those around the Mt. Elgon area claim that besides the general election violence, they had tribal clashes in their communities and it was their fellow neighbours that caused their flight. They are therefore not even in the further future seeing any hope of return as they can not stand their neighbours.

The UNHCR Kigumba office when consulted on whether they were ready to receive the Kenyan refugees stated that, they were not properly prepared. That they had requested the head office to allow a delegation from their office go and visit and see what kind of life the Kenyan refugees were living at the transit camp but they were denied this chance saying that the head office is handling the situation. The UNHCR Kigumba office team actually showed surprise when the LAC team briefed them on what kind of life the Kenyans lived in light of the demands they are making now.

Had the UNHCR regulated all the assistance that was flowing into the transit centre and gave accurate information of what the refugees were to expect at the settlement, this problem the UNHCR –Kigumba office is facing now would not have arisen.

A communication gap also exists between the UNHCR, OPM and the Implementing Partner – IRC. It is claimed that IRC is pulling out of the camp from provision of services and so far has handed over the medical and educational sections to the government – on 24th July, 2008. IRC will also be exiting from the settlement in December 2008 as the Sudanese refugees repatriate. There have been gaps in service provision as delivered by the IRC but these can not be discussed with the UNHCR. The UNHCR actually says that it has been difficult dealing with the IRC mentioning that over 50% of their budget was funded by the Americans which does not automatically engender the culture of information sharing. An instance of this is reflected in situation where they talk over plans with an officer at one point but fail follow up because the officer in question has been transferred as the organisation is moving out. It was also reported that IRC had trained a few Kenyan refugees but did not inform the UNHCR or OPM the nature of the training and when it was to be conducted. The UNHCR only received remarks from the refugees who came asking

for stuff that they had no knowledge of and to be told that such training on leadership had taken place at a specific period.

The IRC does not share a compound with the OPM and the UNHCR who are based near the settlement police. It is reported that IRC does not want to be swallowed by the other organisations and needed their space. However, this arrangement has made the communication gap even wider further and working relations in terms of making referrals and quick consultations on refugee cases very difficult. One has to drive about 1km to the IRC compound to make a quick consultation on a case. This has also hampered UNHCR's monitoring role of her Implementing Partner. Contrasting with reports from the Kenyan refugees, UNHCR stated that they communicated all they had to timely and encouraged their partners to do the same.

Issues that were miscommunicated relate to basic needs concern i.e. food, shelter, clothing and medical care and these are discussed in this report.

The UNHCR

#### Recommendations

- Working together as a team to avoid confusion amongst organisations and also confusing the refugees
- Express communications must given both oral and in writing to refugees as to any delays in service delivery
- Meetings need to be held to inform the Kenyan refugees on the life in the settlement vis-à-vis the life the life had in Mulanda

#### **Food and livelihood**

There is a general complaint from all the Kenyan refugees that they have not received their food rations for the month of June. At the time of the visit, the team observed announcements on the OPM notice boards requesting both Kenyan and Sudanese refugees to collect food on different dates. When the day arrived for the Kenyan refugees to collect food rations, they were served with only a cup of cooking oil yet they expected maize and beans as they had not received June rations. They complained that they have failed to make sense out of the food ration distribution because they can not be expected to cook nothing with the cooking oil as they were all out of food. That unless they were expected to drink the cooking oil.

They also complained that the 15 kilograms of maize and 1.5 kilograms of beans per person per month as food rations given are not enough. Maize grain is given out and it is up to the family to grind it to flour so that they can make posho out of it. The refugees said that in the circumstance they are forced to sell a portion of the their food ration so as get money for grinding the maize and for buying other food items like salt, sugar, a meal for the little ones.

The team noticed that there was a lack of communication as the refugees had not received their food rations. They were not told what the problem was in delivering the food or even informed of the tentative dates when the food will be delivered and this irked them into asking to be informed on their rights. The food later arrived but again they questioned why it was distributed on a Saturday the 19th day of July 2008.

When the food finally came, the team looked at the type of maize that was distributed. The maize was so dirty and if sorted before grinding the same will reduce the food

ration by half. The food ration now being received by the Kenyan refugees in the above portions is considered a 100% ration. Even without selling some of it to buy other food items or to afford the grinding and before the sorting, the 100% ratio is not enough to feed a normal person for a month. The refugees wonder how they are supposed to further ration the food rations.

It is thought that the WFP does not take extra care to make sure that the food dispatched from the food stores is the same that reaches its beneficiaries. The LAC team has been to other camps and seen the quality of maize that the refugees there receive as compared to the maize delivered in Kiryandongo settlement; a considerable part of the Kiryandongo maize was bad, which even further reduces the food ration the refugees have to receive. Unfortunately, for a starving people, they can not stop to think twice about it.

They have been encouraged to grow their own food but as they have been in settlement for about two months, a harvest can not be expected. However, a few resorted to harvesting young bean plant leaves which is chopped up for a meal when the food was delayed. A majority though have claimed not to be farmers by profession, that they used to do various jobs back in Kenya and have never attempted to dig all their lives.

They are also given 4 cups of maize and 4 cups of beans as seedlings to plant and they said it is not enough. They have been allocated 1 acre each for cultivation. From observation and general concerns raised, the seedlings given were indeed not enough to cover even one acre especially for those who decided to take up cultivation.

The UNHCR office when spoken to said that plans are underway to provide more seedlings and land to those who are interested in cultivation. That also more hoes and pangas are being given on a case by case basis to those that deserve them. However the UNHCR could not commit to a time space within which this plans will come through.

It should also be noted not all the Kenyans are farmers; they come from diverse professional backgrounds. Even for those who used to farm back in Kenya did this on a large commercial scale and have expressed concerns as to the mode of farming here. They said that they were used to employing commercial methods of farming like the use of tractors, ploughs and not digging by hand. That clearing of shambas (gardens) using jembes (hoes) is so tiring and time wasting. The team came across one such professional who has sold some of her belongings so as to hire the nationals' oxen at Ushs. 30,000/- to plough one acre.

The youth that have failed to return to school especially higher education like university and higher secondary classes i.e. senior 5 and 6 and can not dig have resorted into indulging in sex trade for money. This is has been reported to be happening amongst the girls mostly and single mothers who practice this in Bweyale town the nearest urban centre. The girls do this so as to purchase sanitary towels and basic food items. Talking about this openly at first was a shame amongst the women and even the men who know that their daughters are indulging in this. However, they justify this as a means to an end.

The men on the other hand sell off anything that is more than one in the homestead ranging from mattresses, blankets and clothes to make ends meet.

Also as last resort, the Kenyan refugees have taken to stealing food from the Sudanese refugee's gardens and are trying to justify this saying it is the fault of the UN and therefore it is an 'acceptable' thing to do. That they are not expected to starve to death under the watch of the UN who are aware of their plight. The Sudanese refugees on the other hand are also complaining that they are trying as hard as possible to contain their neighbours as they are saving up on food to take back home during the repatriation because they have heard from those who had earlier repatriated that the food situation in the Sudan is very dire.

One Sudanese lady said that once she caught a Kenyan refugee in her garden plucking ears of corn and assisted him pluck more and thereafter warned him not to return asking for more. She did this because she understood that they are still new and do not have food. That she will also appreciate if they asked for it than steal. That is difficult for them Sudanese refugees to feed the Kenyans as they have been removed from receiving food rations and have been asked not to plant anymore food crops so that they can repatriate. Most of them are waiting to harvest whatever was planted early in the year and are preparing to leave early next year.

On the contrary, the Kenyan refugees claim that the Sudanese refugees do not give food when politely requested and they are also asked to pay for it. That money then becomes a problem and they are forced to steal.

#### Recommendations

- Proper communication is needed to alert refugees of any delays and causes of delays
- The UNHCR needs to step up with their plans on increasing the amount of seedlings in light of the planting seasons.
- WFP should place one of their staff at the settlement whenever this food is delivered to verify that what was dispatched from the stores is what has been delivered to its beneficiaries.

#### **Medical assistance**

The medical sector was run by the IRC before its official hand over to the district on the 24th day of July 2008. As the IRC is exiting, the staffing was cut from about 36 to 19 only including the cleaners. This cut unfortunately only looked at the repatriation of Sudanese refugees and not the entry of Kenyan refugees. The health centre also does not have a medical doctor; instead it has 2 clinical officers, one registered nurse and one midwife. At the time of the team's visit, long queues at the health centre every morning were seen everyday. The health centre receives both refugees and nationals.

Kenyan refugees spoken to say that the main diseases they suffer from are malaria, typhoid and skin rashes from water. There is also a small percentage suffering from tuberculosis, HIV/AIDS and sight problems especially for the aged i.e. in the 70s. The main complaint is that discrimination against Kenyan refugees and favouritism for the Sudanese is conducted at the health centre by all the medical personnel because the medical personnel speak the same language as the Sudanese refugees. The language of communication used at the health centre and most places in the settlement where

notices of awareness are placed, even schools in Acholi. This has caused a problem of language interpretation for the Kenyan refugees.

Some Kenyan refugees with a medical background wanted to know if they can volunteer at the Health Centre to cut down on discrimination based on language. Kenyan refugees claim that they are labelled stubborn and wiseacres and as a result when they present at the health centre with their medical treatment books which are collected at the start of the day, Sudanese refugees will all be called out and attended to first despite the fact that the Sudanese came later. Some claimed that they have had to return home unattended to and returned the following day to the same kind of treatment.

Besides the discrimination, the refugees claim that the health centre lacks essential drugs. Kenyan refugees also claim that back in Kenya, the treatment for malaria was fancidar and metakelfin, however, here in the settlement they are given quinine. That once they tried to question the tenacity of this treatment in light of what they used to be medicated upon, they were told that they could either take it or leave it.

Refugee mothers who had given birth a few days before the arrival of the team in the settlement also decried a lack of support from the health centre. They wanted to know if in their situation as refugees they can be assisted with some food and non food items. They claim that since they are not given a soft meal by the UN to boost their energy upon delivery, at least the hospital that deals with the mothers who have just given birth are in a better position to understand these mothers' vulnerable positions as some do not have breast milk for the baby. That a feeding program should be introduced just as it was at the transit camp. They now say that the pregnant mothers dread the day for delivery as they are not sure of food support or any other support.

The medical personnel in charge of the health centre when approached with the above concerns stated that the health centre is rated as health centre III which has to adhere to a criteria. That formerly when it was run by the IRC, things were different, it had 2 medical doctors and the staffing generally was bigger to match the refugee population. As far as food support for the lactating mothers is concerned, there used to be a program Saving Grace that fed the mothers and the malnourished children but as financial support for it fell short, the program closed. This kind of assistance also can not be obtained from a Health Centre III setting as policy dictates so.

#### Medical Referral System

The medical services in the settlement are provided by a health centre III which in essence lacks sophistication in the least that is to say blood transfusion, x-ray facilities; it also lacks the HIV/AIDS clinic and mental health therapists. This has to be outsourced or a patient has to be referred to a hospital to be handled by the medical experts in the area complained of. The first referral point is the Kiryandongo hospital which has been described by both the Kenyan and Sudanese as ill equipped with a constant absence of qualified medical personal, lacking drugs and a majority of times one will need another referral. One has to get back to the settlement and obtain another referral from the health centre based on the advice given by Kiryandongo hospital. The second referral is to Hoima hospital which is a regional referral hospital. Upon failure to manage the case, one is finally required to procure another referral to

Mulago hospital in Kampala for further management of the case. Refugees have to keep moving between the referral hospitals and the settlement for financial assistance from the settlement authorities to enable them travel and for subsistence upon admission.

One such case<sup>1</sup> whose condition was worsened because of the constant movements besides causing her too much distress has been requested to pay back the money given to her and the caretaker as subsistence if she requires a final referral to Mulago. In the meantime, she can not properly sit up right or do any chores at home because she sustained a fracture in the back during the election violence. Also before that she had undergone three operations back in Kenya and is in need of another very urgently. It is claimed the office of the IRC will not assist unless the subsistence money is paid back. She has all the referral forms in place but can not leave the settlement. She also emits an offensive smell as she needs to be professionally cleaned out.

The other cases that the team came across are those of the elderly who require the help of spectacles to aid and enhance failing sight. One such case was of an older Kenyan refugee in his 70s. A group of old men in his age bracket said that it has become a burden to the IP to raise US\$ 150,000 to buy him the glasses saying that they can not waste all that money on one refugee. He has been tossed from hospital and offices over the past two months without much success. He claims to have gone as far as Inter Aid, the UNHCR's urban implementing partner and received the same answer as he got from the settlement IP. The doctors prescribed two sets of glasses; one for reading and the other to be used often and they in all cost US\$ 150,000/-

Clarification was made with regard to the medical referral system by the in charge of the health centre. When refugees have been referred, a nurse accompanies refugees on every trip and at each point of referral. If they are not taken on admission, the nurse waits and returns with them. When admission is required for further monitoring of the case, the refugee is left at the hospital with an amount of money for his/her subsistence. If a further referral is made, and the health centre ambulance has visited the hospital, the refugee is required to seize the opportunity other than returning to the settlement for transportation. In the event that the referral has been made and there is no vehicle, then the refugee is required to report back to the settlement for transportation assistance.

A few refugees were spoken to in trying to verify the procedure above and they expressed ignorance of such. They said that one can not receive subsistence monies even if they were just required to 'hijack' the ambulance and divert it their way; also drivers follow orders. The only way to get assisted is by returning to the settlement to collect it.

#### Recommendation

- Provide information on the existing procedures to the beneficiaries
- Discrimination at the health centre in unforeseen cases can lead to loss of life and should therefore be avoided
- Language of communication has to be diversified to accommodate all refugees in the settlement and also nationals

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<sup>1</sup> She is a mother of two of whom are the between the ages of 4 and 8.

- Medical referral procedure should be shortened as to avoid further complications of an exiting condition by allowing caretakers to represent the patients who will present to the office medical recommendations.

### **Water and Sanitation services**

There are very few boreholes in the settlement and majority are not located near the homesteads. The refugees complained of having to walk long distances to fetch water. They claim that when they had just arrived the water turned yellow when it stayed in a water container for 3-4 hours but the water was then treated after their leaders tabled the issue before the IRC. They do not have alternative water sources besides the few boreholes.

The scarcity of the boreholes has caused quarrels at the water collection points as the Sudanese have claimed to be the lords saying that the Kenyan refugees are encroaching on their property. That wasn't it for their being in the first place the boreholes would not have been drilled. The Sudanese refugees have also used this line of argument not to follow any kind of order or orderliness like the first come first serve approach at the water collection places. One of the boreholes near a church is usually locked with a padlock and it is the Sudanese who the key to it. There are a number of refugees both Sudanese and Kenyans living around this borehole because it is at the church, nearer a school, the Panyadoli health centre and the Molokony trading centre. The Kenyan refugees have been forced to walk to other water points to fetch water.

Walking through the settlement one is greeted by the smell of human excretion on either side of the village paths and homesteads. As far as sanitation and hygiene is concerned the Kenyan refugees say they are going through a culture shock as they find most of the Sudanese cultural habits repulsive in this regard. That it is against the Sudanese culture for the Sudanese women to use toilets/pit latrines and therefore they are to ease themselves in the nearest bushes regardless of who their neighbour is.

Pit latrines are dotted all over the settlement and are poorly constructed. In the Sudanese community about four families share a pit latrine whereas on the Kenyan side, each homestead has its own and where a number of homesteads share, the pit latrine is bigger. The Kenyans however complain that they are not properly dug as they do not have the necessary tools to do this. One case that spoke to the team complained of a pit latrine facing her tent and it when it rains floods, the water flows directly from the pit latrine to her tent. She said she is a single mother and does not know how to dig a pit latrine. That she inherited the plot from the Kenyan refugees that left the camp.

It is also said that the IRC promised to dig pit latrines in the settlement at least 20 public pit latrines but the project seems not to have taken off. The main worry is that there is bound to be an outbreak of disease during the rainy season which is coming in the month of August. With regard to this, UNHCR reported that IRC did not fulfil their agreement of digging the 20 pit latrines despite them hinting at the importance of preventing diseases. They, IRC claimed that they lacked staff to accomplish the job and that UNHCR suggested they hire temporary staff to accomplish them.

### Recommendations

- There is need to communicate to the refugees how far the pit latrine construction project is
- Train the refugees on construction of pit latrines and avail them with tools and necessary materials.
- Sensitization of the refugee population on sanitation and use of pit latrines generally

### **Housing**

Kenyan refugees have decried housing as the biggest challenge they have faced in settling. They have been in the settlement for 2 months and were at the transit center for about 4 months. They are using the tents they came with from the transit camp here in the settlement. Some of the tents have given way because of the weather conditions, others caught fire as the cooking is done very close by and the tents are too low, cooking sometimes is done inside the tents whenever it rains in the day and some as a result of negligence and out of ignorance on how to maintain them have given way.

The challenge also arises when it rains and the tents flood because there is no mechanism of locking out the water. The tents are not built on any raised ground that would have formed a foundation. Families said that whenever it rains in the night, they are forced to wake up and hold their beddings lest they get drenched in the water. That a cloudy night is most dreaded as this means spreading the beddings out to dry in the morning. The team had chance of seeing this happen; on a night it rains, mattresses, blankets and clothes are spread out to dry the following day. It will only be unfortunate if it does not shine enough to dry the beddings.

Relatedly, the refugees raised concern that they are getting sick especially the very little ones from sleeping in the tents. When it is hot, the tents get heated up twice the temperatures outside and when it is cold outside, it gets much colder inside especially in the night. Most of them present with colds, coughs and chest problems. Mothers worry for their children as they do not have enough warm clothing and bedding. Most families have sold some of the beddings to buy food and have ended up with fewer bedding which they have to share. Children most times share a 3x6 mattress and a smaller blanket. They lay their heads on the mattress and the rest of the body is on plastic sheeting. The plastic sheeting has also been affected by termites and ants as it acts like a carpet for the tent and most have large holes from where hot cooking pots and charcoal stoves are placed whenever it rains and at night.

Similarly, there were numerous complaints that snakes evaded the tents and most of the refugees end up sharing a mattress with the reptiles as they search for warmth in the night. The snakes easily find their way into the tents because there is no mechanism of securely locking the entrance of the tent; it is not like a proper door shutter. Also the invasion of snakes is a result of settling in bushy places which they were required to clear and pitch their tents on the same day of arrival.

There is a small portion of Kenyan refugees that have managed to get mud and grass thatch huts, these are rented or bought from the Sudanese refugees who are either repatriating or whose relatives have repatriated and some left behind. Not a majority have been able to enter such arrangements because they are financially incapable.

This arrangement has also presented its own problems for the Kenyan refugees. They say that even they bought the huts from those who had repatriated, their relatives suddenly show up claiming that it was left to them and they will only let the Kenyan refugee have it on an agreement of pay monthly rent for it. Any disagreement in this regards leads to the burning down of the hut in the night by unknown persons.

The housing problem has been escalated by the need to settle nearest the trading centres, social infrastructures like schools, hospitals and churches and along main paths in the settlement. Both the Sudanese and Kenyan refugees wait for a family that has registered for repatriation and lives along the main road to take over. The Kenyans claim that the Sudanese have had the upper hand in this case as they usually claim a relation with the family that left. This has led to quarrels and physical fights amongst them.

There is word that the IRC is due to provide building materials and rumour also has it that IRC is planning to give 4-5 poles to each family for roofing regardless of the family size. The Kenyan refugees are already complaining that their way of life is different from the Sudanese; unlike the Sudanese who back home were used to living in small round huts the Kenyan refugees state that a proper house if constructed be it out of mud and wattle and thatch should be square and large enough to accommodate the entire family. On top of that, there should be another smaller hut used as a kitchen to shelter one from rain and scorching heat when preparing a meal. They do not encourage the use of grass to thatch the roof as it is prone to be infested by termites and ants. In this regard they therefore request for more building materials for more than one hut.

Still as far as provision of building materials is concerned there is general complaint that they lack the construction skill and they would need to be taught how to do it or hire someone who can do it. When it comes to hiring someone with the skill, they say it will be difficult on their part to pay the said persons for their service.

IRC was contacted to clarify on this issue. As far as they are concerned, despite the fact that they are phasing out of the settlement, UNHCR requested IRC to settle the Kenyan refugees a few days before their arrival into the settlement. As a matter of fact, IRC refers to this situation as fire fighting meaning emergency. They were not prepared both financially and with man power to handle the situation. IRC has already scaled down their staff from about 105 to half. Settle meant putting up tents and temporal latrines that were meant to last two days. IRC also states that the UNHCR is supposed to bring in an Implementing partner to take over from them and that they are willing to orientate them but so UNHCR has not communicated any of their plans to the IRC.

IRC however, still put a proposal to their donors to help out with the housing project but for only a month. They are willing to train the refugees on how to build proper housing for themselves. They also encourage the Kenyan refugees to buy huts from Sudanese who are repatriating.

#### Recommendations

- Communication is very key; make use of the notice boards to make all the plans known to the refugees.

- There is need for UNHCR to work hand in hand with IRC as they phase out.

### **Youth**

This is a forgotten group in light of the struggle to survive. The camp has 7 kindergartens – early childhood schools, 4 primary schools and 1 senior secondary school which is a self-help i.e. run by parents who have to pay school fees as it is not government aided but subsidized. The secondary school has up to senior four, students that require higher secondary education have to move out of the camp and pay for such a school. There is also a vocational training institute that imparts skills in tailoring and brick laying and construction among others.

It seems that there has not been much attention given in this area leaving the youth very idle. Some claimed that they were in polytechnics pursuing diplomas in engineering and other areas. The youth now grumble that they have been misrepresented to as they were told at the transit centre that they would receive education assistance. Most of them can be seen at the trading centres within and outside the settlement rather too idle and drunk.

Parents were at pains to openly admit that their young daughters who have failed to join university in Uganda have eloped with nationals, sell their bodies for sex to get assistance and live a life befitting a youth. They also say that alcohol regulations in Uganda are too loose and the alcohol itself is cheap thus the youth in their teen age have resorted to taking. The youth who were restricted from taking alcohol have discovered that they can partake of it without the long hand of the law reaching them. As a result they take it to get drunk to forget their worries. Parents are also now more worried if they discovered drugs. The UNCHR stated that it was the first time they heard about women prostituting themselves and offered to look into the matter.

Drunkenness is not only amongst the youth but also the elders of the society, the formerly employed with white collar jobs now rendered jobless. They openly admit to stealing food crops from the Sudanese gardens which are sold to afford alcohol. They steal because they can cultivate food themselves as they were never farmers back in Kenya and because they have nothing else to do. They claim that it is the only escape from their worries and reality at least for the space it lasts.

### Recommendations

- Encourage the youth to form youth clubs and elect their own needs through which they can come up with issues that concern them and forward them to the office.
- UNHCR should also bring in other organisations that deal with youth like the Right to Play to provide sports equipment. This cuts down on the idleness.
- For those who were already in the university or about to join university, should be enrolled back in school through UNHCR's higher education support organisations.

### **School issues**

For this year, Kenyan refugee primary school pupils and lower secondary (what is commonly referred to as O' Level) school have been exempted from paying tuition. An organisation not known to UNHCR or the IRC stepped in to help and rescue the situation, it paid for all the Kenyan refugees' secondary education for this year. Beginning next year they will all be required to pay tuition; US\$ 1,000/- for lower primary, US\$ 5,000/- for upper primary and US\$ 56,000/- for secondary education. Parents will also be required to also buy uniforms and all scholastic materials for their children. Already the parents have expressed concern that they will not be in position to afford the tuition.

Unlike in other camps where there is or used to be feeding program in schools, in this settlement, no such program exists. This has required students to go back home for lunch and has also forced some parents to move closer to the schools to make it easier for their children to walk to and fro school during the breaks. The schools on the other hand are too far for some children making it almost impossible for them to walk to and fro during the lunch break. Students complain that they have ended up having one meal in a day as they have leave home early to walk the distance to school and walking home for lunch is seen as a luxury. Research has proved that going without meals while studying greatly affects the students' performance in class and over all. A majority of Kenyan youth who are idle in the settlement were pursuing higher secondary school and university education.

Parents also mentioned a couple of problems faced by children in school. One of the most disturbing one was that their children were not accustomed to certain activities like slashing, digging sweeping in their country of origin and this has greatly affected them.

Another problem relates to the ill-treatment of children in school; here children are abused by teachers, they are called "bogus" and all sorts of other abusive words. This lowers the self esteem of these children and motivation to go to school. In addition, children are segregated at parades they are told to line up according to nationalities. This confuses the children for they know all pupils are refugees and children are constantly expressing their discomfort with this arrangement to parents

Parents complained about the consistency of school authorities regarding time-keeping. They reported that school starts late and times keep shifting and that sometimes the teachers are not in class. As a result, they worry about their children's discipline in the future.

Other complaints revolved around books. Parents complained that teachers collect books and lose them. They are required to give the little ones extra books and as such it bothers them that one cannot look at one book and track a child's progress at school. Secondly, books are kept in the school library but are not given to the children to use. Parents question this kind of behaviour and its implication on the quality of education their children receive.

### **Recommendations**

- There should be an assessment of the conditions in the schools in order to address problems relating to the new caseload

- Education of the Kenyan refugees on the Ugandan education system

### **HIV/AIDS persons**

The refugees were too quick to request us to pay special attention to the HIV/AIDS affected persons and families. They referred to them as the vulnerable group. On speaking to a few of the affected persons, they said they get medical support from The Aids Support Organisation (TASO) but remain with the challenge of feeding. They also receive ARVs from Kiryandongo hospital and not the health centre in the settlement. This category of people can easily be identified in the settlement at they wear pink T-Shirts, a donation they get from the IRC office. The affected persons say that it is a mark of identification given to the sick persons and their caretakers.

As far as their feeding is concerned, when rations are given out, there is no special regard given to the HIV/AIDS affected persons to supplement the maize meal and beans because the WFP has withdrawn their support towards the food-for-life. This group of individuals are also expected to cultivate as much as others do and do whatever others do to support themselves. However, this does not auger well with the single parents who are affected along with their children.

The team came across a single mother of two who is HIV positive, one of the children is positive too. She, at the time of the visit also had tuberculosis. She said that while at Mulanda transit centre, her CD 4 count was at 700 but gradually dropped as she settled in the settlement and is at 300 now. She was allocated a plot of land far off from the health centre and the schools. She had to move house with the help of the community so that she can live close to these services for her sake and the sick child. She said commuting everyday for the child weakened her yet she was ill fed. At one point the child had to be admitted in the health centre for two weeks and lacked food to feed the child. Because she moved to someone else' plot, she can not cultivate near her tent, she is required to go to her allocated plot everyday on foot. She says that she has given up and has had to sell one of the mattresses and blankets so that she can buy a soft meal for herself and the child. They all now sleep on one mattress and share a blanket but she worries how safe the children are from catching the tuberculosis.

IRC's position on this is that they have written to the WFP over this and WFP seems non responsive. At the end of the day, it is well wishers that come in the camp and leave something for this group and it is not regular assistance. They however, assist the group with some non food items but as IRC is phasing out, they will be handing over to the UNHCR.

The Aids Support Organisation (TASO) comes into the settlement once every month to offer counseling sessions and medication to the refugees. The refugees stated that TASO tells them that they have to feed on a proper diet as the medication is strong. However, when the refugees ask for food support, they are told that TASO does not extend food assistance to non citizens.

The team spoke with to TASO - Masindi official seeking clarification to allegations made. TASO confirmed that ARVs and food assistance is never given to non citizens as a matter of policy. This is on the basis that refugees are migrants and their period of stay in Uganda can never be determined. If they returned to their countries of origin, follow-ups can not be done on one hand and on the other the TASO has to account to

the donor which will result to an immediate cut of the budget. IDPS as opposed to refugees receive ARVs from TASO because upon resettlement, they can be tracked within Uganda. That whereas TASO does not give refugees ARVs, the government hospitals are free to do so.

TASO provides the refugees with counseling services, treatment of opportunistic infections like tuberculosis, pneumonia and diarrhoea among others, medication such as Septrin- Prophylaxis, health education and advocacy for their rights. Apart from these, they also give home care kits and basic care kits. The home care kit – which constitutes of a blanket, a pair of bed sheets, mackintosh, 1 bar of soap, 1kg of sugar and 1 mosquito net, is only given to the bedridden. The basic care kit constituting of a mosquito net, condoms, safe water vessels and a water purifier is given to all patients.

As regards extending food assistance, certain procedures have to be adhered to and one must be on ARVs. A region has to be assessed for food security. Once the TASO donor is satisfied that the region is not food secure i.e. the region lacks enough food, and then extension of food assistance can be authorised.

Despite all the above, the TASO encourages all the HIV/AIDS affected persons to feed on a well balanced diet so as bolster their CD 4 counts. Proper feeding is a must, regardless of what stage one is at.

#### Recommendation

- TASO should provide more information to their donors that refugee situation is never temporal and repatriation exercise takes a long time that will enable them communicate in adequate time and transfer services to regions that require it.
- UNHCR should look more into feeding of the HIV/AIDS affected persons.

#### **Mental health and the disabled**

There are few cases of the mentally challenged and disabled persons in the settlement. Reports from the police indicate there is no special program handling these people. They request anyone who has seen a mentally challenged person roaming in the settlement to report the case to the police who then refer the case to the IRC, the authority responsible. That there have been about 3 cases but 2 disappeared from the camp as they tend to roam all over the camp and making incomprehensible statements. One is believed to have said that she will walk up to Busia border and return and the following day went missing. She could not be traced.

The team found some changes in service provision at the time of the visit. All health and education programs were in the process of being handed over to the district. At the health centre under the district, there is no program to cater for psychosocial problems. The new case load of refugees from Kenya has a number of mental health illnesses which include psycho-trauma and depression as a result of events that happened in their country. Another lot from this case load presents with anxiety related to fears of insecurity in the camp again relating back to activities e.g. roles in the election campaigns, in the country of origin.

## Gender Based Violence

The team identified some cases of GBV amongst the Kenyans which occurred both in the country of origin and in the camp. These however have received little or psychosocial assistance. This can be explained in part by lack of knowledge for the victims on where to go for assistance and secondly no available persons to deal with the victim because at the time of the visit, IRC was scaling down operations and the new structure that was taking over has no provision for such a service. For instance there was a defilement case involving minors a boy aged 10 and girl 4, which ended up in a legal stalemate. However, no psychosocial assistance has been offered to the parents and children involved. One of the team members offered brief interventions for the victim's family and the victim. He also reached out to the perpetrator but efforts to reach his mother were futile. An intervention from OPM and UNHCR is underway to ensure reconciliation takes place between the two parties.

The Sudanese were also consulted on the issue of GBV before and during the time IRC started their interventions and the response was that the IRC programs helped a lot especially regarding domestic violence which has decreased significantly. The men had complaints against the program stating that it made their women become bigheaded. A few discussions with the Sudanese girls corroborated the aforementioned success of the interventions for domestic violence. They however complained that sexual harassment remained a big problem and that the interventions did nothing to address it. Girls are touched on the breasts, buttocks, private parts at the boreholes, on the way to fetch firewood and in addition called all sorts of degrading names. In addition, they mentioned that rape and defilement still goes on though reporting is not done for a number of reasons which include

- Fear of the perpetrators family. Families promise to revenge when they get back to Sudan
- Girls lack money to pay police
- Fear of the perpetrator for sometimes they are detained for short periods and are released.
- Some relatives do not encourage parents reporting because they look at it as spoiling the name of the victim
- Poor parents lose hope because they cannot afford to pay for justice

The disabled too lack a program that caters for their needs ranging from means of communication, ways of coping to feeding. The team had chance to interact with a 54 year old crippled deaf mute, communication was difficult and his caretaker, a young couple of 25 and 21 and their 9 months old child does not know any form of sign language for communicating. They rely on his actions to decipher his feelings. They say that sometimes when they fail to totally communicate, the deaf mute crawls away from home to home trying to express his grievance. To make matters worse for him, he came without family from Kenya and can not communicate in writing either. His first his caretakers who had quite an experience in sign language abandoned him and went back to Kenya because they were disgruntled with the settlement life. He then moved from family to family looking for anyone who could replace his former caretakers. In the entire village/ranch where he resides, there isn't even one person who knows sign language. He would do with a wheelchair.

### Recommendations

- UNHCR should work towards setting up a program to deal with psychosocial issues

### **Social support for the elderly and Un Accompanied Minors.**

Un accompanied minors (UAMs) and the elderly persons of 70s who were referred to the team by fellow refugees complained of lack of support from the '2office' in terms of buying scholastic materials and uniforms for the unaccompanied minors, medical care for the elderly and feeding for both groups.

The UAMs are supposed to be taken care of by foster families but a majority are not, and as a result they have they decided to self identify and live in groups in their own tents. The girls for instance because of this arrangement have fallen victims of attempted rapes and defilement from older men and boys in their age bracket. They claim that when they report these cases to the OPM, they are told to be looking for all possible reason to get resettlement.

The elderly on the other hand hang out together and live by themselves. A majority have illnesses that creep in at their age, like failure of eyesight among others. Some of them are still going strong and want to do businesses but are not sure if they can do it for long as they complain that life in the settlement is too harsh on them. That they are expected to queue for every assistance; they resent this practice as they think that they ought to be respected given their age and frail condition. A few members in the community do lend a hand once in a while like when it comes to collecting food rations during food distribution days, they are given lifted on the back of the bicycle to the distribution centres to collect food. They also say that is difficult for them to afford the maize grinding money as they are too old to work. Even they complain about the type of food given to them, the maize grains and beans.

### Recommendation

- Since the verification exercise already occurred, assistance to these vulnerable groups should be expedited
- Organization of communities to help out some of these individuals

### **Protection matters**

The UNHCR's presence is felt in the camp, the refugees say they see are free to register their protection issues to the protection officer though they do not get feedback as soon as they wish it and also sometimes, they are no responses or action taken. A number also complain that home visits and investigation of claims are not done.

The Kenyan refugees mostly from the Kikuyu tribe say they are apprehensive of the Sudanese because they speak a dialect similar to the Luo, an ethnic group that made them flee their country. The Sudanese who spoke Acholi had no idea of this going through the camp, however they said that they claimed that the Kenyans are rough and they cut up their colleague who was returning home at night drunk. He accidentally meandered into a Kenyan refugee's tent and the Kenyan decided to raise an alarm thinking that it was a Luo who had followed them down to the settlement in

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<sup>2</sup> Office refers to the UNHCR, OPM and IRC

Uganda. His neighbours came and with the use of pangas hacked him. At the time of the team's visit the Sudanese refugee was still in Lacor hospital on admission.

Much as the repatriation exercise for the Sudanese is ongoing, there is a portion of this community that does not want to repatriate and want nothing to do with the exercise not even in the further future. They claim that they have security problems back in the Sudan. Some claim to have been visited by people that are after them in the Sudan, and also that there is a heavy presence of the SPLA spies always in the settlement. Some individual cases have evidence to show for this allegation and the police too confirm this.

Police says they refer all insecurity cases in which full investigations have been conducted to the UNHCR protection office, unfortunately, processing of their cases takes a long time. They do not have a protection house but advise serious cases that claim insecurity and need immediate protection to pitch tent near the police officers' homes. When the insecurity threats lessen, the refugee is advised to return to his ranch awaiting a response from the UNHCR protection office.

On repatriation still, the Sudanese refugees claim that much as the exercise is meant to be voluntary, a few statements made by the settlement authorities imply otherwise. They have had statements such as 'your country is safe, Ugandans are there doing business, why are you still in Uganda?', 'you have had enough of this country; it is time to go back to yours'.

They say that the above statements and many more end up jeopardizing the voluntariness of the exercise. Some also claim that they have been denied OPM identification cards to date because they want them to return to Sudan.

#### Recommendation

- There is need to conduct more visits and investigations.
- Impress further on the refugees the voluntary nature of the repatriation exercise
- There should be a proper protection unit for cases that require immediate protection.

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#### **Conclusion**

It appears that Kenyan refugees came at a bad time when the IRC is checking out of the settlement. The UNHCR also seems to be overwhelmed with the entire hand over and finding of a new implementing partner. The communication and information sharing has been the biggest challenge in manning the settlement. These gaps that existed between the UNHCR and her IP and police should be taken as a lesson learnt. That for team work and easy monitoring, there is need for as much transparency as possible and a good information flow system. At the time, the UNHCR seems to have grand plans underway as IRC exists but the IRC on the other hand are not made aware of these grand plans; knowledge of the grand plans might help the IRC hand over properly and orient the incoming implementing partner.