REPORT ON RAPID ASSESSMENT OF SOUTH SUDANESE REFUGEE INFLUX INTO NORTHERN UGANDA

March 2015
Introduction

Since violence erupted in South Sudan in mid-December 2013, refugees and asylum seekers continue to flee to neighboring countries including Uganda. A team of researchers from Refugee Law Project (RLP) visited Amuru, Adjumani and Kiryandongo districts to assess the trend of influx and the emerging issues relating to South Sudanese refugees and asylum seekers.

This briefing paper presents preliminary findings and analysis relating to conflict, mental health and psychosocial wellbeing, gender and access to justice issues affecting the South Sudanese refugees/asylum seekers and the host communities. Conducted over the period 17—21 February 2015 the rapid assessment surveyed three districts; Pabbo, Atiak, Bibia and Elegu border (entry point/reception centre) in Amuru district; Nyumanzi reception centre, Nyumanzi, Mireiyi and Ayilo settlements in Adjumani district and; Kiryandongo settlement in Kiryandongo district. The research team conducted fifty-two interviews with key government officials, police and judicial officials, humanitarian workers, politicians, refugees/asylum seekers, and local inhabitants. Additionally, the team conducted eight Focus Group Discussions (FGD) with interest groups such as women and youth, mostly within the refugee settlements.

While this rapid assessment cannot make a conclusive statement on the situation, this briefing sheds light on the emerging issues and concerns surrounding refugee rights and welfare, as well as critical needs and areas of potential interventions by different stakeholders.

Highlights

❖ Uganda currently hosts almost 160,000 registered South Sudanese refugees and asylum seekers, of which the largest concentration (97,095 or 61%) are in Adjumani district, followed by Kiryandongo (34,637 or 22%)
❖ The remaining balance of approximately 29,397 (17%) are found in eight refugee locations, including 7,245 in Kampala
❖ South Sudanese are also settling in Atiak and Bibia in Amuru district, but are avoiding registration and are therefore not included in the official statistics
❖ Continuing conflict, fear of insecurity and the search for family reunion are key factors causing the current influx
❖ Over the period 1-18 February 2015, the number of arrivals recorded by police at Elegu border point fluctuated between a low of 21 (17th February) and a high of 94 (8th and 10th February), with a daily average of 51.5

1 Interview with OPM official, Pakele, Adjumani district, 21 February 2015. See also, UNHCR Fact Sheet - January 2015, (Appendix I)
Gender disaggregated statistics were not available, but respondents explained to the research team that most adult men had remained behind either to fight or to search for livelihood options.

Memories of violence, loss of loved ones and property, poor nutrition, inadequacy of basic needs, harassment, abuse and bulling are affecting the mental health and psychosocial wellbeing of refugees and asylum seekers.

Language barriers, cultural and ethnic differences, self-relocations and insufficient funding remain a huge challenge particularly to service providers.

Land conflicts involving refugees and host communities are emerging.

**Situation Overview**

The conflict in South Sudan remains unresolved. Notwithstanding the signing of the Agreement on the Reunification of the Sudan People’s Liberation Movement (SPLM) on 21 January 2015, Uganda continues to receive asylum seekers and forced migrants from South Sudan. Anywhere between 21 to 100, South Sudanese are received daily at Elegu border entry point/collection centre in Amuru district, Northern Uganda (See Figure 1 below for Monthly average). Nearly 160,000 registered South Sudanese refugees and asylum seekers are hosted in Uganda with about 97,095 located in the fourteen (14) settlements in Adjumani district and approximately 34,637 in Kiryandongo. Rhino Camp, Kyangwali and Nakivale settlements, as well as Kampala, the capital city, also host South Sudanese refugees and asylum seekers.

The South Sudan crisis has claimed the lives of thousands, leaving many widowed, orphaned and/or separated from their families and relatives. Signs of distress, fatigue, anger and anxiety are noticeable among new arrivals as well as those in settlements. Psychosocial distress relates to loss of loved ones and property, loneliness, stigma, and lack of domestic needs like adequate food, cooking utensils, clothing and bedding.

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2 Focus Group Discussions with men and women at Nyumanzi refugee settlement
3 UNHCR Fact Sheet--January 2015, available through the link [http://data.unhcr.org/SouthSudan/download.php?id=1748](http://data.unhcr.org/SouthSudan/download.php?id=1748)
4 Interview with OPM official, Pakele, Adjumani district, 21 February 2015.
5 Interview with UNHCR at Kiryandongo district, 19 February 2015.
6 See Appendix 1 (UNHCR Fact Sheet -- January 2015)
Moreover, an acute gap in provision of Functional Adult Literacy (FAL) is limiting the possibilities of integration of refugees in host communities. Nearly all youth are out of school with only 2% of the estimated 16,000 youth accessing secondary education. Land related problems involving refugees and host communities are emerging.

Many women report having to assume the role of family heads and deciding to engage in extra-marital sexual relations in a bid to:

- re-create a family setting (father figure who can teach them traditional practices) for their children
- find a substitute bread winner for the family who can also complete certain tasks such as building shelters
- satisfy their own sexual needs
- reduce the risk of social stigmatisation

In Amuru district specifically in Atiak and Bibia, a good number of South Sudanese are settling within communities with little support from relatives. There is no designated settlement and their identity/status is yet to be verified by OPM and UNHCR. There has been no registered case of voluntary repatriation, but there have been cases of spontaneous return and self-relocation. It is believed by OPM that this accounts for the absence of approximately 15,000 registered refugees.

With alleged recruitment of child soldiers, food insecurity and a persistent governance crisis in South Sudan, forced displacements and migrations are likely to continue. There is a need therefore, to maintain emergency relief services while effecting a transition from emergency response (focus on basic needs) to focus on rights based issues such as access to justice, education, health, livelihoods and issues of belonging and identity.

### Key Findings

#### Refugee Inflow and Humanitarian Operations
The Office of the Prime Minister (OPM) and over twenty-eight (28) humanitarian agencies are doing a lot to manage the influx and respond to emerging issues. However, the situation requires further attention. Effective settlement management and security is hampered by the limited infrastructure and funding. Camp commandants and leaders do

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7 Interview with OPM official at Pakele, Adjumani district, 21 February 2015
8 Land conflicts were largely reported in Atiak Sub County, Bibia Parish, Pacilo village, in Amuru district
9 FGD with South Sudanese women in Kiryandongo settlement, Kiryandongo district, 19 February 2015
10 Self-relocation relates to a situation in which refugees choose to resettle themselves to a new place other than the one they were assigned to without notifying the OPM, UNHCR or concerned authorities
11 Interview with OPM official at Pakele, Adjumani district, 21 February 2015
not have office space for coordination and registering emerging concerns. Local leaders and police lack training on the interpretation and application of refugee law, and sometimes act in a manner that infringes on refugee rights (e.g. using road-blocks to prevent refugees exercising the right to freedom of movement). They also lack resources with which to respond swiftly to emergencies. Language barriers affect proper screening, documentation, and integration of refugees and asylum seekers. Occasionally, military uniforms are recovered during the screening processes. Efforts by government and humanitarian agencies to establish the details of those reportedly settling in the various parts of Amuru and other districts have not yet been successful.

**Figure 1: Total number of South Sudanese received at Elegu Border point between November 2014 and mid-February 2015.**

Source: Elegu border Police post.

**Mental Health and Psychosocial Wellbeing**

Refugees and asylum seekers present similar mental health and psychosocial problems. Concerning mental health, four common conditions emerged: (1) Depression (2) Post-Traumatic Stress Disorder (PTSD) (3) Anxiety, and (4) Alcohol abuse. An interview with Transcultural Psychosocial Organization (TPO) reveals that eight out of ten refugees suffer from at least one of the above four conditions in Adjumani, implying that 80% of refugees experience mental health problem. 13 Participants also revealed that the prevalence is compounded by the fact that many refugees suffer from two or more mental health conditions at once, as well as by other psychosocial problems related to the lack of adequate basic needs such as food, cooking utensils and beddings, including social, economic and medical needs. “*They are sick, [there is] no treatment, then fears and frustrations arise, with too much thinking, then you hear them say; “if we were at home,*

13 Interview with a mental health expert at TPO Adjumani field office, 20 February 2015
we would not be living like this” said a respondent. According to OPM data clerks, some new arrivals break down during screening and the subsequent Refugee Status Determination (RSD) interview process. Moreover, peaceful coexistence among refugees was becoming a challenge due to psychological problems.

Despite the existence of over 28 humanitarian agencies responding to the refugee situation in Adjumani, there is a huge gap on mental health and psychosocial support as the focus has largely been on relief and other emergency services. According to a mental health expert, there are very few organizations or mental health workers doing credible mental health and psychosocial support, despite the need for a combination of psychological and medical treatment alongside social support in the areas of housing, food, school fees and scholastic materials. Existing programs focus on ‘trauma counselling’ with little or no attention to social needs. Despite some organizations dealing in livelihood support, this assessment reveals a pressing lack of alternative livelihood strategies, with the result that some resort to drinking and gambling in trading centers. Equally, trauma has occasionally resulted in suicide.

Access to Justice Issues
There are established police stations and police posts in most of the areas visited including some settlements. Police have limited transport facilities, few personnel and are generally poorly facilitated despite the fact that 90% of the cases reported to the police are criminal in nature. For example, in Nyumanzi police post, 120 cases of refugees in conflict with the law were reported between December 2014 to February 2015. Cases reported are mainly assault, theft, defilement and under-age sex, particularly sexual acts between children. Under Section 129A of the Penal Code Amendment Act 2007, children below the age of 12 who engage in sexual activities are usually placed in the hands of a probation/social welfare officer for assistance to reform. Children above 12 years are

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14 Interview with a mental health expert at TPO Adjumani field office, 20 February 2015
15 FGD with OPM data clerks at Nyumanzi refugee reception centre in Adjumani on 20 February 2015
16 TPO, MSF and Tutapona are mentioned as key Organisations dealing in mental health and psychosocial support. However, others such as DRC, LWF are starting to engage in mental health and psychosocial issues
17 Interview with a mental health expert at TPO Adjumani field office, 20 February 2015
18 Interviews with OPM and RDC indicate that, suicide cases so far recorded are few and isolated and men are most victims with only two women victims so far
supposed to be prosecuted before the family and Children’s court, but this seems not to be happening.

Early marriages and child abductions, ignorance of the law, poverty and cultural practices are the key causes and drivers of these crimes. Struggle for water at the water points, as well as disputes concerning children, account for many of the assaults committed by women.

Bail for refugees remains a challenge, as the person seeking bail is required to have a fixed place of abode and substantial sureties. This is further complicated by some refugees who, when granted bail, escape back to their countries of origin.

Refugee Welfare Committees (RWCs) established by OPM together with clan heads (all male) play a big role in dispute resolution within the settlement. This has seen a reduction in ethnic tension among refugees in the settlements.

While refugees in principle have a right to practice their profession and access employment opportunities, those engaged in gainful activities complain of discrimination and exploitation at work. OPM is aware of this and has noted some technical difficulties involved like general unemployment in the country, verification of academic qualifications, and professionals applying for low paying jobs.

Naturalization is being piloted in Adjumani. The criteria for naturalization is enshrined in the Uganda Citizenship and Immigration Control Act; one must have lived in Uganda for 20 years, speak one of the indigenous languages, have never been convicted of any criminal offence and, have resided in the country for 24 months prior to the date of the application. While there is no established procedure for naturalization in the Law, the ongoing practice is that applicants pick application forms from the district headquarters, fill and return them to the district. Similarly, applicants are required to attach all the supporting documents including birth certificates, passports, and letters from the LCs to their application. These applications are then transferred to Immigration for verification. Those who meet the criteria then advance their application to court. Court listens to the application based on facts from the applicant and grants an order to Immigration to grant citizenship by naturalization. The applicant can then present the court order to immigration for granting of citizenship. Thus far 72 application forms have been picked but only 51 have been returned to the District Headquarters. Of the 51, 34 have commenced with the court process.

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20 Interview with RDC Adjumani district, 21 February 2015
Some refugees interviewed testified to instances in which officials like police do not recognize the attestation cards issued to refugees as identification. This affects free movement and access to services by refugees.

**Gender and Sexuality Issues**

It is evident that there are more women, children and elderly in settlements as opposed to male youth and men. According to TPO, the ratio of women to men in settlements is 6:1 while the ratio of children to generally adults is 7:1.  

It is alleged that most men remained to take part in the ongoing conflict, while others were killed, wounded or separated from their families during flight and their whereabouts remains unknown. One respondent said: “our husbands are not here and we have not heard from them for months”.

Consequently, women in FGDs reveal that women have assumed the role of family heads and breadwinners for their families in the absence of their husbands, in a bid to provide food on the table to supplement the limited food rations offered by WFP. In Kiryandongo, for instance, food distribution is done monthly, based on a minimum per person of 12kgs of sorghum, 2.4kgs of beans, 1.5kgs of corn soya blend and 0.9kgs of cooking oil which refugees state is not enough.  

The forms of Sexual and Gender Based Violence (SGBV) cases recorded by police and Refugee Welfare Committees include defilement, rape, early marriages, indecent assault, and domestic violence. Some cultural practices in South Sudan such as certain parts of the Dinka marriage tradition, in Uganda are considered rape. Age of consent in South Sudan is 16 years as opposed to 18 years in Uganda, such that marriages that are legal in South Sudan are categorised as ‘early marriages’ and therefore ‘defilement’ in Uganda. Victims of sexual violence receive treatment from Médecins Sans Frontières (MSF) and the nearby health centers.

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21 Interview with a mental health expert at TPO Adjumani field office, 20 February 2015  
22 FGD with women refugees at Ayilo refugee settlement, Adjumani district on 21 February 2015  
23 FGD with women refugees at Kiryandongo refugee settlement, Kiryandongo district, 19 February 2015  
24 Interview with an official from Samaritan Purse, Kiryandongo district, 19 February 2015  
25 Interview with Camp official of Nyumanzi refugee settlement, 20 February 2015  
26 Interview with the government official at Adjumani District Headquarters, 20 February 2015
Essential Sectoral Issues and Concerns

Education:
While UNHCR and Windle Trust facilitate some refugee school-going children, many refugees are unable to access education services due to language barrier (as many children speak Arabic) and lack of school fees and scholastic materials.

Furthermore, access to secondary education and adult literacy is limited. Majority of youth are out of school with only 2% of the projected 16,000 youth accessing secondary education. Meanwhile, there is no any agency dealing in adult education, thus, presenting a gap in Functional Adult Literacy (FAL) as well as affecting proper integration of refugees in host communities including their access to social services.

Food and Nutrition
World Food Program (WFP) distributes food items (maize meal, beans, sorghum, cooking oil and salt) to refugees in settlements, quarterly. Yet, refugees raise concerns over lack of necessities like cooking utensils, as well as sufficient food rations. Refugees are meant to supplement the food offered by WFP however; some are unable to get alternative sources of food and constantly survive on posho and beans, thereby raising concerns relating to the lack of a balanced diet, including problems of malnutrition for children and breastfeeding mothers.

Health
Most settlements and host communities have health facilities providing medical treatment. However, complaints of lack of medicines, harsh treatment by some medical workers, and poor maternal health services linked to safe deliveries emerged. The common illnesses presented by refugees include; fever, flu cough, typhoid, hypertension, pneumonia, and headache. The problem of language barriers cuts across and, impacts on proper access to medical services, since the majority of this refugee population speak Arabic and Dinka dialects, which most health workers are not conversant with.

Water, Sanitation and Hygiene (WASH)
Refugees rely on the few available boreholes distributed within the settlements and host communities. Struggles for water in boreholes are

27 Surprisingly, health worker respondents did not mention malaria as a problem
reportedly leading to fights mostly among refugee women. Visibly, there is piped water in Nyumanzi reception centre and efforts to provide piped water within Nyumanzi and Ayilo refugee settlements.

Sanitation and hygiene in Nyumanzi reception centre is managed by Danish Refugee Council (DRC). Community sensitization on hygiene and sanitation is often conducted by OPM and other humanitarian agencies; however, more still needs to be done to avoid likely incidences of disease outbreaks.

**Shelter and Non-Food Items**

Standardized shelter kits comprising of tents and poles are offered to new arrivals. Notably, some assistance is rendered to the extremely vulnerable persons like the PWDs, unaccompanied minors, and women at risk in establishing their shelters. Meanwhile, refugees expressed concerns over lack of necessities like sleeping items and clothing.

The non-food items (NFI’s) are in stock but not availed as planned due to some operational challenges (mostly planning), though OPM is looking into a possibility of replacing damaged blankets and tents among other supplies.

**Land and Environmental Issues**

Host communities in Adjumani have voluntarily availed land for settling of refugees. OPM allocates plots of land to refugees depending on the size of their families. Unlike Kiryandongo, the available land in Adjumani is mostly for settlement and not cultivation due to lack of adequate land. Land-related conflicts between registered refugees and host communities appeared relatively minor.

One respondent argued that environmental degradation is being caused by locals felling trees in order to supply fuel to refugees: “It is the nationals cutting down the trees for firewood and for burning charcoal, otherwise, we have been conducting environmental mitigation sensitization, community policing and marking of trees so that the refugees do not destroy our environment”.28 Additionally, refugees themselves collect firewood and small poles for use in settlements. In order to address such environmental concerns,

28 Interview with an OPM staff at Nyumanzi refugee reception centre, Adjumani District, 20 February 2015
Adjumani plans to plant about 450kms of trees along the riverbanks, schools, and health centres as a mitigation measure alongside continued community sensitization.\textsuperscript{29}

**Recommendations**

- Functional Adult Education needs to be introduced to equip refugees with Basic English language skills to enable them to adequately interact with host communities as well as easily access basic social services
- There is need for government, humanitarian agencies and development partners to maintain emergency relief services while effecting a transition from emergency response (focus on basic needs) to focus on rights based issues such as access to justice, education, health, livelihoods and issues of belonging and identity
- The Government of Uganda and development partners should build capacity of the duty bearers such as immigration officials, police, judiciary and local leaders on refugee rights, laws and forced migration issues
- District leadership and development partners should increase advocacy on refugee education, particularly access to secondary education to minimize situation of youth indulging in risky behaviors and crime
- OPM and development partners should widen the sensitization and awareness creation on naturalization and other durable solutions available to refugees
- Government and development partners should support refugees through creation of livelihood projects as sustainability strategy for refugees
- Government, particularly Ministry of Health should ensure prompt and adequate supply of drugs in health centers for both refugees and host communities
- Government, donors and development partners should consider increasing support to mental health service provision
- Mental health and psychosocial support should be mainstreamed into the operations of humanitarian NGOs alongside their relief activities

\textsuperscript{29}Interview with OPM official at Pakele, Adjumani district, 21 February 2015
About Refugee Law Project: a Centre for Justice and Forced Migrants

The Refugee Law Project (RLP) is a Community Outreach Project of the College of Law, Makerere University. It seeks to ensure fundamental human rights for all, including asylum seekers, refugees, and internally displaced persons within Uganda. RLP envisions a country that treats all people within its borders with the same standards of respect and social justice.

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Jackson Odong compiled this report with valuable input from Stephen Oola and Dr Chris Dolan. For more information contact us at info@refugeelawproject.org or visit our website at www.refugeelawproject.org. You can also follow us on Facebook, Twitter and Youtube.
Appendix I: Map showing Registered Refugees and Asylum-seekers in Uganda
Appendix II: Map showing only South Sudanese Registered Refugees and Asylum seekers in Uganda