

Africa Newsletter



UNHCR
The UN Refugee Agency

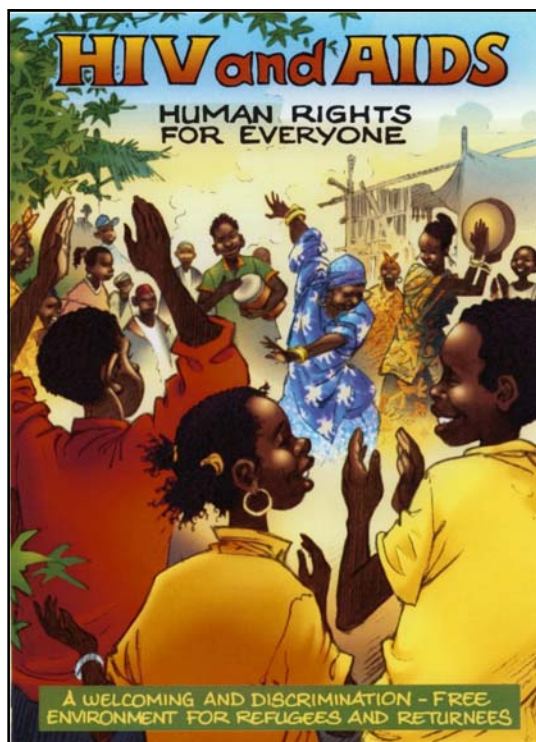
Africa Bureau, first quarter 2006



"HIV and AIDS, human rights for everyone": a new UNHCR cartoon booklet promotes a welcoming and discrimination-free environment for refugees and returnees in Africa

Fatou's father, an African refugee, has been sick for several months now. Because he is suspected by other refugees and the local community of being infected with HIV, children refuse to play with his children. To counter such prejudices, UNHCR wants to disseminate a cartoon booklet titled *"HIV and AIDS, human rights for everyone: a welcoming and discrimination-free environment for refugees and returnees"*.

A key message of the booklet is "[r]efugees suffer from stigma and discrimination in many ways. They are often stigmatised just for being



refugees....Also, they are falsely accused of spreading HIV. This leads to discrimination and unfair treatment".

UNHCR's HIV-AIDS Unit will distribute this booklet shortly throughout UNHCR operations in Africa to its beneficiaries and communities' hosting refugees and returnees. This cartoon booklet, which targets primarily the youth, highlights the cycle of displacement and advocates for a **welcoming and discrimination free environment for refugees and returnees**.

It will soon be available in English and French on UNHCR website (www.unhcr.org and www.unhcr.fr).

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Improved access to HIV AIDS services in Southern Africa

Talking to myself about voluntary repatriation of Liberian refugees from Nigeria

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"Talking to myself about voluntary repatriation of Liberian refugees from Nigeria"

It is almost 2 a.m., Thursday 9th February 2006 and I am in front of my computer trying to put together a report on the last repatriation convoy. It's only about 325 refugees who left Oru refugee camp for a "dignified return" to Liberia. Other West African countries have already repatriated over 40,000 refugees, so what's the deal about some 325 people from Nigeria?

The fact is that we are talking about voluntary repatriation in safety and dignity. One could think it's just about using words, but it can be a tangible element in an operation and according to the refugees themselves, this repatriation movement was the most "dignified" they have ever seen or heard of because of chartered air-planes, provisions for excess luggage, and smiling and healthy women and children having their sandwiches in

exclusive air-conditioned waiting rooms of the international airport. As little 13 year-old Miss Dabbeh Decontee put it when asked how she felt about returning home: "everything is cool." They were like regular passengers. who could be business men and women, or people going on vacation. They were relaxed and at ease. It was a beautiful scene, which for me, was so far removed from other assignments, where we were repatriating refugees by convoys of 500 persons every week, using trucks as was the case from Kissidougou (Guinea) to Kailahun and Kono in Sierra Leone and so on.

Now back to the beginning. The preparations for this repatriation exercise started around October last year, just before a tragic series of airplanes

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Africa



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This cartoon booklet will be an additional tool that specialised implementing and operational partners working with UNHCR can use during HIV and AIDS **prevention** and **awareness** activities.

These activities are conducted in various venues in refugee and returnee settings, such as schools, antenatal care clinics, outpatient clinics, youth centres, and food distribution sites. Typical activities include the distribution of leaflets and brochures on HIV and AIDS, but more lively communication tools, such as drama, dance events are also used to sensitize communities.

In **Showak** in Eastern Sudan, where youth centres have been established like in many other refugee settlements in Africa, young refugees are trained as peer educators. They receive information on HIV prevention and are encouraged to talk publicly about sexual and reproductive health. At the centres, youths also have opportunities to watch videos on HIV and AIDS, to play sport activities, and to develop dance and drama to perform in the community- all with HIV-related messages.



Scenario : Marian Schilperoord, Paul Spiegel. Drawings : Mohamed Aouamri. Colors : Jean-Jacques Chagnaud. Funding : Department of Humanitarian Assistance of the Royal Danish Ministry of Foreign Affairs.

UNHCR is working very closely with donors and **UNFPA** to ensure that sufficient condom supplies are available in refugee sites. A five-day workshop on condom logistics was held last year in Ghana with participants from five countries in the region. The purpose of the workshop was to enable UNHCR and implementing partners to manage and monitor the distri-

bution of male and female condoms in refugee operations.

Specific attention is also given to major repatriation operations in Africa, such as **Angola, Liberia and Burundi**, for HIV and AIDS prevention. For instance, HIV awareness packages for returnees were provided upon departure from DRC, Namibia and Zambia to Angolan returnees. Furthermore, returnees in Liberia and Burundi received packages consisting of HIV and Sexual Transmitted Infection (STI) awareness messages together with condoms.

In **Angola**, programmes focused on improving basic knowledge about HIV and AIDS in the returnee and surrounding populations, largely through "palestras" (community dramas); this was as an integral part of UNHCR's phased reintegration programme. A special focus was placed on messages against stigmatisation and discrimination directed towards Angolan returnees. Programmes also emphasised the importance of seeking HIV-related counselling, testing and care.

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UNHCR Strategic Plan for Refugees, HIV and AIDS (2005-2007)

Since 2002 UNHCR ensures that all programmes in Africa integrate HIV and AIDS activities as part of multisectoral programming. The UNHCR Strategic Plan for Refugees, HIV and AIDS (2005-2007) is based on UNHCR policies, lessons learned and technical guidance from UNAIDS, and the Inter Agency Standing Committee guidelines on HIV/AIDS in emergencies. For HIV/AIDS responses to be effective, it is fundamental to develop multi-sectoral and multi-partner approaches.

The HIV/AIDS programmes apply a **human rights-based approach**, ensuring that refugees and other persons of concern to UNHCR live in dignity and free from discrimination. The key objective of these HIV/AIDS programmes are to reduce HIV transmission and to improve treatment and care for people living with HIV/AIDS, by improving planning and reinforcing surveillance, monitoring and evaluation of the programmes. In that perspective, UNHCR has employed four HIV/AIDS coordinators in Africa, respectively in Accra, Kinshasa, Nairobi and Pretoria, who support UNHCR country offices with the establishment of multisectoral HIV/AIDS programmes.



Improved access to HIV-AIDS services for refugees in Southern Africa

Discussion with Laurie Bruns, Senior Regional HIV-AIDS Coordinator for Southern Africa, based in Pretoria.

Laurie, are HIV AIDS programmes implemented for urban refugees different from those designed for camp based refugees? The strategies we employ are the same, focusing on **prevention** and of course **protection** to prevent practices such as discrimination and stigma against refugees based on real or perceived HIV status. We also have **care** and **treatment** components in all of our programmes. In both settings, our work is also based on a **rights-based approach** with the objective of ensuring that refugees have **non-discriminatory access to HIV/AIDS services** which are equivalent to those available to surrounding host communities. In the urban setting, the focus is on ensuring refugee access to local services; we don't want to create parallel services just for refugees.

In South Africa for example, refugees have access to the same home-based care services as the local population through a local NGO. To facilitate this access, UNHCR has provided initial financial support to train refugees (who have a nursing background for instance), to be certified as carers attached to the local NGO. This gives an opportunity for refugees, in need, to receive support from someone, who speaks their own language while benefiting from the same level of care as the local population.

The same is true for the voluntary counselling and testing programme. Counselling is provided by trained refugees fluent in French or Swahili for beneficiaries, who speak these languages, for example. However, there are

some constraints, which are more visible in the urban context. For example, it is challenging to ensure that refugees are allowed access to local programmes but it is sometimes more difficult to ensure that refugees know about the local services available to them. That's why sensitisation is key and establishing links with the refugee community are crucial.

Do refugees in your region have access to antiretroviral therapy (ART treatment)? Refugees have increasing access to ART treatment in the sub-region. Here again, UNHCR, together with key partners such as the US Centre for Disease Control and Prevention, and other UN agencies, advocates for non-discrimination between refugees and host communities. Some positive results have been achieved in the sub-region regarding refugee access to ART. For instance, in South Africa, Namibia and Zambia, the governments have issued official policies guaranteeing the same access to ART for refugees as the host community.

One major challenge we face, as more and more refugees have access to ART, is ensuring continuity of treatment in a voluntary repatriation scenario. For example, in Angola and DRC, returnees, who had access to ART in South Africa or Zambia may not benefit from the same services in their country of origin where there is limited or no access to ART. Much more needs to be done by UNHCR and its partners, including donors, to ensure that ART is available in the main areas of return. ART is treatment for life;

UNHCR's advocacy efforts should therefore extend beyond the asylum period. The same is true for refugees, who are resettled or locally integrated.

What are the main challenges to carry out HIV AIDS programmes in the sub-region? Are there some constraints specific to urban refugees? The main challenge regarding the programmes for urban refugees is to maintain regular contact with the refugee community, which is more difficult than with camp based refugees as an urban refugee population is more dispersed and often more mobile than a camp population. For instance, to inform refugees about their right to access local services is more difficult, but this challenge is not specific to HIV/AIDS programmes- it is actually a constraint for many activities for urban refugees. One strategy we employ in the HIV/AIDS programme to address this is to train refugees to educate their peers and communities.

There are other challenges as well, including the need for more funding which would enable us to do more, especially in terms of building capacity of our own colleagues and implementing partners, and strengthening child and youth focused programmes. HIV is a relatively new area of work for UNHCR so we still have a long way to go. Fortunately, the organisation has recognised that combating HIV/ AIDS is part of our core protection mandate so it is becoming rapidly integrated into our programmes and our way of working with refugees.

Africa



“Positive lives”

In 2005 several countries hosted the Positive Lives Exhibition. This is a unique project that focuses on the human stories of people infected by and or affected by AIDS and documents the social and emotional impacts of the AIDS epidemic. Positive Lives Exhibition has also added a dimension to the fight against HIV/AIDS from a different perspective. Positive Lives exhibition has travelled to refugee sites in Angola, Benin, Ghana, Kenya, Namibia and Republic of Congo.

Refugee youth in Southern Africa viewing the “Positive Lives” exhibition. UNHCR/ Laurie Bruns.



The integration of HIV and AIDS, food and nutrition activities in refugee settings in Uganda and Zambia :

Based on the manual “integration of HIV/AIDS activities with food and nutrition support in refugee settings: specific program strategies, UNHCR, WFP and UNICEF started activities in Uganda and Zambia. In **Uganda**, *Feed the Children Uganda*, a local NGO, is supporting other NGOs with the implementation of the integration of HIV and AIDS with food and nutrition support in refugee settings. Food distribution sites are used to increase awareness on HIV, voluntary counselling and testing and HIV prevention activities. In **Zambia**, implementation is by UNHCR’s implementing partners Aktion Afrika Hilfe, World Vision, Zambia Red Cross and HODI.

An integrated approach to HIV awareness in Tanzania

In Kibondo refugee camp in Tanzania, Stop AIDS, a local organization formed by refugees, linked up with the Tanzanian Service Health and Development for People Living with HIV/AIDS—a group within the local host population—to provide HIV awareness and education to both refugees and the surrounding community. The groups’ efforts included providing education prevention programmes to secondary schools, as well as to youth and adolescent groups as part of out-of-school activities. The two groups also worked together to organize joint concert sessions and mass campaigns in schools and public places, where members spoke publicly and helped to educate audiences on issues involved in living with HIV. In the future, several of the Stop AIDS members, sponsored with DAFI scholarships, studying at Tumaini University in Iringa, are planning to expand their activities to the University. In addition, the Tanganyika Christian Refugee Service, a non-governmental organization supporting Stop AIDS groups in refugee camps, will launch a programme called Men Against AIDS in Tanzania. This programme will be integrated into the work already being done by the refugee camps’ Stop AIDS members.

Behavioural Surveillance Surveys in Rwanda and Kenya

Behavioural Surveillance Surveys (BSS) have been implemented in Rwanda, Kenya and Tanzania refugee camps, in cooperation with implementing/operational partners and local authorities. The BSS is using a questionnaire that includes questions related to HIV and AIDS in the pre-displacement, displacement and post-displacement/interaction situations and has a strong gender-based violence component developed. The studies are undertaken in both the refugee sites and the surrounding communities. The studies support the development of innovative and comprehensive HIV prevention and care and treatment programmes.

Documentary Upendo Nyakati za Ukimwi – Love in the Times of AIDS :

In this documentary Noe Sebisaba a Burundian Refugee in Tanzania, tells his story of living positively with HIV. Noe was the first refugee that openly declared that he was living with HIV. Some thought that he was confused, other condemned him for bringing shame on his family. But the youth in Kanembwa refugee camp understood and admired his courage. In this documentary Noe tells his story: ***Within being a refugee and within AIDS, I have found a life of love, truth and freedom.*** The DVD is available from hivaid@unhcr.org.

Africa



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Over the last few years UNHCR has undertaken a concerted effort to develop comprehensive programming towards preventing and responding to **sexual and gender based violence issues, which also exposes refugees to HIV**. The response included the development of guidance of essential post-rape medical services. In 2005 important efforts were made by UNHCR to address the risk of HIV transmission due to rape. A timely provision of post-exposure prophylaxis (PEP; a 28-day course of antiretroviral therapy) taken within 72 hours following rape reduces the likelihood of HIV infection to the rape survivor if the assailant was HIV-positive. Based on an evaluation carried out last October

on the introduction of PEP in the clinical management of rape survivors in Kibondo Tanzania refugee camps, clinical staff in **Chad, Cote d' Ivoire, Guinea, Ghana, Kenya, Namibia, Sierra Leone, Tanzania and Uganda** were trained on improved clinical management of rape including the provision of PEP. As a result, PEP is currently offered to rape survivors in these nine countries, in addition to South Africa. UNHCR aims to double this in 2006. Together with UNFPA a joint training on introduction of PEP and clinical management of rape is scheduled for the Southern Africa region in July 2006.

Voluntary Counselling and Testing (VCT) programmes in Africa are also expanding. At the moment, over 30 refugee camps in 11 African countries have access to VCT, reaching approximately 900,000 persons. **Preven-**

tion of Mother to Child Transmission (PMTCT) is available in 18 refugee camps in nine African countries, reaching approximately 650,000 beneficiaries. PMTCT services include a comprehensive set of services; group and individual counselling during prenatal care, VCT, provision of nevirapine to HIV-positive women and their infants, family planning counselling and services, postpartum care and breastfeeding counselling. The involvement of men in the PMTCT programmes is a major challenge; however, efforts are being taken to increase male participation. For instance, in Tanzania, the International Rescue Committee encouraged men to attend the antenatal services with women. Group counselling was provided and in 2005, 30% of the women are counselled and tested together with their partners.

Geneva, In Brief...

Highlights from the UNHCR March Standing Committee

On the occasion of the March 2006 UNHCR Standing Committee, the Regional Bureaux presented overviews of the main political and operational developments in respective areas of responsibilities for 2005. In her statement, Ms Kamara, Africa Bureau Director, recognised the political developments that have led to an increase of voluntary repatriation movements, particularly to DRC, Liberia and Angola.

At the same time, she highlighted the persisting obstacles to the successful completion of return operations, especially volatile security situations, food shortages, and lack of reintegration opportunities in many areas of return, such as Burundi and the DRC, and emphasised the current funding shortfalls the Organisation is facing. She also raised the increased responsibilities assigned to UNHCR in the cluster approach adopted by IASC Principals regarding IDP operations pointing out the urgent need for predictable and adequate funding to enable UNHCR to fulfill its commitments.

Delegations expressed appreciation for the positive developments and

achievements of 2005, particularly in pursuing voluntary repatriation and in addressing IDP protection concerns. In this connection, UNHCR was encouraged to further pursue partnerships with other agencies and regional organizations, particularly the Intergovernmental Authority on Development (IGAD) and the African Union (AU). Some delegations expressed concern for the continuous displacements of population particularly in Northern Uganda and to Burundi.

There was unanimous agreement on the worrying, negative impact on UNHCR's operations of the current critical financial situation, particularly in terms of assistance to camp-based refugees and to IDPs. Delegations also encouraged UNHCR to accelerate repatriation operations, particularly to Liberia and to adopt strategic plans for sustainable reintegration and other durable solutions to protracted refugee situations and forgotten crises.

In addition, delegations expressed interest to know more about the implementation of the High Commissioner's Five Commitments for Refugee Women as well as of the Age, Gender

and Diversity Mainstreaming (AGDM) and of new registration mechanisms. Questions were also posed on the impact of the cluster approach on the protection of IDPs and on the restructuring of UNHCR in the field in connection with the progress of voluntary repatriation operations.

In replying to the queries from the different delegations, Ms. Kamara expressed appreciation for the support so far shown by donor countries and shared the delegations' concerns for the declining levels of assistance in Africa. She recognized that basic standards were not met because of serious financial constraints and reiterated her appeal for funding as a means to ensure adequate levels of assistance and progress towards the sustainability of durable solutions.

Ms. Kamara finally stressed the Agency's commitment to pursue durable solutions by continuing voluntary repatriation, by planning and using resettlement strategically as a protection and a durable solution tool and reiterating UNHCR's determination to meet its obligation towards IDPs.

West Africa



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crashes occurred in Nigeria. The decision of the Government to ground most airlines for services quality control meant that repatriation had to be postponed. As a result, UNHCR and IOM reviewed the repatriation plans and identify a suitable airline in the sub region. That's how a Ghanaian airline was selected.

A total of 3 convoys in three consecutive days were agreed with the Ghanaian company to repatriate the 325 persons. The first convoy, on Sunday 22 January, was quite smooth. The second convoy left the camp on Monday around 5 a.m. and arrived in Lagos by 7.30 a.m.. UNHCR, IOM, Red Cross teams were all in place, but the airline personnel was no where to be found until 9 a.m., when they showed up to inform that the aircraft had to be serviced, thus postponing the second movement to the following day.

There was a bit of panic among the staff on what should be done with the 110 refugees already at the airport. Taking them back to the refugee camp could have a negative impact on the remaining group. Refugees could have stayed at Hajj Camp, close to the airport, with UNHCR making arrangements for food, but Hajj Camp has no furniture and people would have had to spend the night on a bare hall with no sanitation facilities. After many discussions, it was agreed that the refugees would stay in a closeby hotel, which offered air-conditioned rooms with TV sets and all necessary accessories: "Kind Room", "Queen's Palace" and other fancy names were written on the doors. Some refugees could not believe it.

The following morning, at the airport by 3 a.m., the personnel of the airline company was still nowhere to be seen. Telephone calls started running between Lagos, Abuja, Monrovia for both UNHCR and IOM, to find a solu-

tion. Eventually, another airline agreed to transport all remaining refugees on the next Saturday, with the first group of refugees scheduled to leave at 5 am and the second one at 1 pm. The two convoys eventually departed as planned, each of them with more than 100 refugees on board.

The issue of total amount of luggage permitted has often deterred many



Liberian refugees from Nigeria upon departure for Monrovia. 2006/ UNHCR/ Babawali Owolabi.

refugees in the past from deciding to return. Taking this into account, the airline had originally agreed to transport up to 50 kg of luggage per person, to enable the refugees to take some of their hard-earned belongings accumulated during years of exile in Nigeria. However, for various administrative and technical complications, the airline could eventually not carry over 30 kgs luggage per person and a solution had to be found for the excess luggage.

We promised to do it, thus, we have to do it. This luggage included not only the usual suitcases, but also small generators, one okada (motorbike), pop-corn machines, sewing machines and other precious items for a new start in Liberia. It also included 10 computers, which some Nigerian good samaritans had donated to refugees in the camp. This permitted a group of refugees to start a computer school in the camp in 2003. This has now established in Monrovia, where some of the teach-

ers who repatriated the previous year, built a centre and were waiting for the computers to kick off a free training programme.

Nonetheless, some 10 days after the repatriation, the excess luggage is yet to reach Monrovia. I can imagine the scene from here, with our former refugees, now "returnees", harassing the office in Monrovia for their precious belongings and even threatening to go on strike, claiming transportation money for all the "go-and-come-back".

What happened eventually? IOM concluded a separate agreement with a speed delivery courier company to carry the remaining 162 pieces of luggage. The airway bill number was communicated since the end of January, so why are they now delivering the items piece by piece? According to the three manifests, 95 % of returnees are Monrovia residents, while 5 % are to continue inner country to their final destinations. Who will

take the belongings up there and who will pay the bill?

So many sleepless nights and questions, whose answers lie beyond our immediate control. I sincerely think that my team had done the best to organize a most dignified departure. *(Based on an account by Brigitte Mukanga-ENO, UNHCR Lagos)*

There are 6,000 Liberian refugees in Nigeria, living mainly in Oru camp and in Lagos. It is anticipated that some 2,600 refugees will return in 2006 by air or by sea in partnership with IOM. Early March, Liberia President Ellen Johnson Sirleaf, visited Nigeria, where she met with refugee representatives. "Mama Africa", as the refugees named her, called upon them to return home and help rebuild the country.

Côte d'Ivoire / Impact des événements de Guiglo sur l'aide aux réfugiés et la présence de l'UNHCR dans la zone d'accueil

Le processus de paix en Côte d'Ivoire a connu en janvier 2006, et plus précisément le 18 janvier, une dimension jusque-là insoupçonnée sur les activités humanitaires dans l'ouest du pays, notamment à Guiglo, où le bureau de l'UNHCR a été saccagé et incendié alors que ceux de ses partenaires subissaient aussi d'énormes dommages. Pourtant, rien ne justifiait ou du reste ne présageait une telle animosité à l'encontre de l'UNHCR dans cette localité où elle opère depuis maintenant 15 ans. C'est dans ce climat qui prévalait dans la ville que les fonctionnaires de l'UNHCR et d'autres agences ont dû quitter Guiglo, laissant derrière eux un nombre important de personnes dans le besoin, dont 6000 réfugiés du camp de Nicla et 7000 déplacés internes du Centre d'Accueil Temporaire.

Fin janvier, une mission inter-agence avait conclu que les conditions de sécurité n'étaient pas réunies pour un retour des agences internationales à Guiglo ; cependant, leurs partenaires nationaux pouvaient mettre en œuvre les activités de survie. Néanmoins, en février et mars, le personnel international de l'UNHCR a effectué des missions ponctuelles à Guiglo afin d'assurer un minimum de présence de l'Organisation et deux agents nationaux ont très rapidement été redéployés à Guiglo. Cette stratégie a eu pour avantage de rassurer les réfugiés sur la poursuite des activités en vue de répondre aux besoins de protection, d'assistance et de recherche de solutions durables.

L'évacuation du personnel de l'UNHCR à Abidjan suite à la destruction de son bureau l'a amené à adapter sa stratégie de mise en œuvre de ses activités au camp de Nicla. Désormais, les activités sont limitées à la protection, à l'aide de subsistance (santé et nourriture) et l'accent est mis sur la sensibilisation pour le rapatriement volontaire au Libéria.



Le bureau de terrain du HCR à Guiglo après les événements du 18 janvier 2006.

La déclaration de la phase de promotion du rapatriement volontaire pour l'ensemble des réfugiés libériens ayant été faite début février 2006, l'UNHCR a signé un accord avec l'ONG Search For Common Ground (SFCG) en vue d'encourager les réfugiés à retourner chez eux. Aussi, une mission de «Go and see visit» a-t-elle été organisée au Libéria, dans les comtés du Grand-Gedeh et du Nimba en mars. Par la suite, un groupe de théâtre interactif venu du Libéria s'est rendu dans les villes de Guiglo (Camp de Nicla), Tabou (Centre de transit), San-Pedro et Danané pour sensibiliser les réfugiés sur l'évolution positive de la situation générale du pays.

SFCG produit également chaque semaine des rapports de situation qu'elle diffuse à partir des radios

locales pour informer les réfugiés.

Le nombre total de réfugiés libériens rapatriés de Côte d'Ivoire depuis septembre 2004 à ce jour est de plus de 15.000 personnes, dont 100 du camp de Nicla. La fermeture du camp de Nicla est prévue pour décembre 2006 et les réfugiés qui auront choisi de rester à Guiglo seront encouragés à s'installer dans les villages. En tout état de cause, l'UNHCR a initié des discussions dans le but de renforcer les capacités des structures nationales à soutenir les réfugiés qui désireraient rester dans cette zone.

Sur le plan général, les agences humanitaires retournent progressivement dans la région. Dès la mi-avril 2006, le personnel international de l'UNHCR résidera à Duékoué et les

fonctionnaires nationaux de l'UNHCR retourneront à Guiglo. Le « guesthouse » de l'UNHCR à Guiglo fera désormais office de bureau du terrain. De même, les forces de l'Opération des Nations Unies en Côte d'Ivoire (ONUCI) se redéplient dans cette région. D'ores et déjà, elles sont retournées à Boléquin, Toulepleu, Duékoué et seront selon toute vraisemblance bientôt de retour à Guiglo.

Début 2006, la Côte d'Ivoire accueillait quelque 40,000 réfugiés libériens, en plus de 13,500 qui sont rentrés au Libéria l'année dernière. Il est prévu qu'environ 18,000 personnes rentreront cette année, dont 16,000 avec l'aide du HCR.

Regional developments



Uganda/ Assistance to Congolese new arrivals from North Kivu

In late 2005, the Congolese army, backed by MONUC UN Peacekeeping forces, initiated military operations aiming at eliminating irregular armed forces in the eastern DRC. As a result of this, some 20,000 persons fled North Kivu to seek refuge in neighboring Uganda in the first part of 2006.

In response to the situation UNHCR teamed up with other organizations, such as UNICEF, WFP and MSF, to meet the most immediate needs of the new arrivals both at the border points and in the settlements, such as water, food, drugs, sanitation and shelter.

One year before, a similar influx had occurred and the majority of individuals (with the exception of some 8,000 people) returned to DRC a few days after the fighting had stopped. Similarly, most of the new arrivals in January 2006 traveled back to DRC in a mat-

ter of weeks. The remaining 3,095 individuals expressed their desire to be transferred to a refugee settlement. They were transferred to Nakivale settlement, which hosts the majority of the new arrivals (2,500 persons) and Kyaka II.

Some three months after this new influx, the situation in DRC is still extremely fragile and the phenomenon of Congolese seeking safety over night on the Ugandan side of the border in Kisoro District appears to have increased.

As the elections approach in the DRC, UNHCR continues to closely monitor the situation and a contingency plan to receive and assist further new arrivals is in place. In total UNHCR assists 22,406 Congolese refugees in Uganda in close partnership with the Government and GTZ.



Influx of refugees from DRC / Ishasha, close to the border with DRC/ UNHCR / S. Yngrot / January 2006

The drought in the Horn of Africa and its impact on refugees

An evolving crisis in the Horn of Africa where recent severe droughts, coupled with the effects of past and ongoing conflicts, have put several millions on the brink of starvation. WFP, with the other humanitarian actors, continues to monitor and respond to this crisis, which has an impact on refugees, returnees, IDPs and host population in the entire sub-region.

In response to the drought, WFP is massively scaling up its operations in **Kenya**, to reach 3.5 million beneficiaries and has extended its geographical coverage from 17 to 25 targeted districts. The Government of Kenya has announced

that all food will be channeled through WFP; in this regard, WFP is working to ensure that beneficiaries will be targeted through a community based mechanism, involving local relief committees who will oversee the distribution.

Since the last quarter of 2005, over two thousand Somalis and Ethiopians crossed into Kenya, especially in Dadaab and Kakuma camps, with the expectation that they would get life-sustaining assistance, in particular food and water. UNHCR has initiated registration and is providing life-sustaining assistance while it develops agreed procedures with

WFP on food assistance. Unfortunately, in February 2006, WFP was forced to cut food rations for refugees by 20 percent as a result of poor funding. While WFP Kenya has received fresh pledges, the cuts will last for another month due to limited food availability in the country and the region as a whole.

In **Ethiopia**, the serious humanitarian situation in southeastern parts of the country persists, especially in Somali region and Borena zone of Oromiya region, where concern is growing over the water situation both for humans and live-

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Regional developments



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stock. WFP closely monitors the food security situation. In the Somali region, while dispatches of WFP food were slow in January and early February, they have accelerated in the past month following high-level government interventions. Due to the drought in the Somali region, where the only refugee camp (Kebritayah) for Somalis is located, the host community and refugees share the water UNHCR provides from the Jerrar Valley Water System. In addition, UNHCR is providing water for livestock and host communities up to 100 kilometers from the camp both from this system and through manmade dams (hafir dams).

In **Djibouti**, as a result of lack of rain during successive seasons and the persistent drought conditions, the traditional coping

mechanisms of many Djibouti pastoralists have been stretched to the limit. The food security situation is reported very critical in five out of the six livestock dependent areas, including those hosting refugees. Following a joint assessment mission conducted last year by FEWSNET/Government of Djibouti/WFP, WFP designed and implemented an emergency operation (EMOP) for 47,500 drought victims in the rural areas.

Together with FEWS Net/Somalia, WFP has issued an early warning that parts of Southern **Somalia** are at high risk of famine/humanitarian catastrophe from July to December 2006. WFP has scaled up its relief operations in Southern Somalia from 120,000 metric tons to some 180,000 metric tons for 2006 to reach 1 million people in need of assistance. According to FAO's Food Security

Analysis Unit, at least 1.4 million people are in need of assistance, including one million and 400,000 persons assisted respectively by WFP and Care International, while ICRC plans to provide limited and temporary relief to some 100,000 people.

The humanitarian tragedy in the South and Central Somalia has turned into an unprecedented humanitarian crisis, prompting a revision of the Consolidated Appeal for Somalia up from US\$ 174 million to US\$ 326 million. While UNHCR is not promoting voluntary returns to Central and Southern Somalia, UNHCR is participating together with other UN and humanitarian agencies in drought relief efforts in the worst hit areas in the North, where the population is also facing an acute food and livelihood crisis. **(A contribution from WFP).**

Lofa county continues to receive the highest number of returnees

As of mid March, Lofa County continues to receive the highest number of returnees with convoys from Guinea and Sierra Leone bringing more than 1,000 people every week. Overall, 29,465 Liberian refugees have returned with assistance from UNHCR and its partners.

Meanwhile, WFP's ongoing distribution of second tranche food ration indicates that most of the 116,785 IDPs who received travel grants have returned home.

In addition, according to NRC monitoring reports, there are more than 120,000 spontaneous returns to Lofa County. Spontaneous returns comprise mostly persons sought refuge among communities in border areas of neighbouring countries during the war and were not registered with UNHCR.



Launching of the repatriation movements on the Gueckedou-Kesseney (Guinée)- Foyah (Liberia) at the end of January 2006./ UNHCR Guinea.

In Brief...

Mr Guillermo Bettocchi replaced Ms Simone Wolken as Representative in **Somalia**. The new Head of the Regional Hub in **Nairobi** is Ms Neimah Warsame, who was previously the Head of the East and Horn of Africa Desk in Headquarters. Mr Golam Abbas, who was previously Deputy Representative in Liberia, took over from Ms Warsame in January in **Geneva**.

Africa



Funding Update

	ANNUAL PROGRAMME BUDGET						SUPPLEMENTARY PROGRAMME BUDGET						GRAND TOTAL		
	AFRICA	CENTRAL AFRICA & GREAT LAKES*	EAST & HORN OF AFRICA	SOUTHERN AFRICA	WEST AFRICA	SUB-TOTAL	Darfour	Southern Sudan Repatr. and Reintegr. + IDPs	Repat. and Reintegr. of Congolese Refugees	DRC	LIBERIA	SOMALIA		UGANDA	SUB-TOTAL
INITIAL BUDGET		190,158,105	99,206,821	56,157,105	103,900,704	449,422,735	33,185,494	65,863,243	75,570,862	14,707,251	13,754,660	4,712,603	6,572,031	214,346,144	663,768,879
REVISED BUDGET		193,881,660	102,624,729	56,142,104	107,155,090	459,808,583	18,536,425	65,863,243	75,570,862	14,707,251	13,754,660	4,712,603	6,572,031	199,717,075	659,520,658
BROADLY EARMARKED FUNDS (at regional and sub-regional level)	42,684,493	11,809,045	6,407,035	3,768,844	8,229,705	72,899,122									72,899,122
% Revised Budget		6%	6%	7%	8%	16%									
EARMARKED FUNDS (at country/sectoral level)		52,984,739	16,248,738	5,388,484	16,381,267	91,003,228									91,003,228
% Revised Budget		27%	16%	10%	15%	20%									
SB CONTRIBUTIONS							4,153,746	11,037,333	9,588,700	2,734,128	5,141,373	1,376,936	2,303,078	36,335,294	36,335,294
FUNDS AVAILABLE	42,684,493	64,793,784	22,655,773	9,157,328	24,610,972	163,902,350	4,153,746	11,037,333	9,588,700	2,734,128	5,141,373	1,376,936	2,303,078	36,335,294	200,237,644
PERCENTAGE FUNDED OF REVISED BUDGET		33.4%	22.1%	16.3%	23.0%	35.6%	22.4%	16.8%	12.7%	18.6%	37.4%	29.2%	35.0%	18.2%	30.8%

The following donors have provided UNHCR with broadly earmarked funds: Australia, Ireland, Monaco, Sweden, United States of America and Private donors,

The following donors have provided UNHCR with earmarked funds : Belgium, Canada, Denmark, European Commission, Finland, France, Germany, Greece, Ireland, Japan, Luxembourg, Netherlands, Norway, Spain, Sweden, United Kingdom, United States of America and Private donors.

Contribution to the Africa Newsletter : The Africa Newsletter is prepared by the Africa Bureau with the contribution of Offices in the Field and the support of Headquarters colleagues. Special thanks to the HIV AIDS Unit, as well as External Relations colleagues based in the field. Special thanks also to WFP for the article on drought in the Horn of Africa. For comments : please contact H  l  ne Daubelcour, External Relations Officer, Africa Bureau (+ 41 22 739 83 68) or daubelco@unhcr.ch.