ZIMBABWE

MOZAMBIQUE

Main Objectives

- Help to create an environment conducive to the local integration of refugees.
- Provide temporary assistance to the most vulnerable asylumseekers and refugees.
- Enhance local capacity to respond to refugee needs by offering training programmes, advice and policy support to government and nongovernmental organisations.
- Find specific durable solutions for individual refugees, including voluntary repatriation and resettlement where appropriate.

SWAZILAND INDIAN OCEAN SOUTH AFRICA LESOTHO ATLANTIC OCEAN UNHCR office International boundary Planning Figures

BOTSWANA

WINDHOE

NAMIBIA

Population Jan. 2003 Dec. 2003 Asylum-Seekers 70.000 90.000 70.000 90.000 Total

Total Requirements: USD 4,493,670

Working Environment

UNHCR's South Africa office in Pretoria has regional responsibility for protection, programme and administrative activities in Botswana, Lesotho, Madagascar, Mozambique, South Africa, Swaziland and the other Indian Ocean Island States.

Recent Developments

In a promising development, in May 2001, the South African Department of Home Affairs (DHA) announced that it would be issuing identity documents to recognised refugees as provided for in the 1998 Refugee Act, thereby enabling them to engage in everyday business transactions and gain access to public services. However, over the ensuing months very few identity cards were issued, owing to technical problems at DHA. Furthermore, the benefits of the new refugee ID have not materialised as earlier envisaged, on account of its non-standard format, which unfortu-

nately was not recognised by many local institutions.

To gain further insight into the socio-economic situation of refugees in South Africa, UNHCR commissioned a baseline survey in 2002, in order to gather critical demographic data not compiled by the Government. This data will be used to better target programmes and resources that correspond to the various needs of refugees and to obtain a better understanding of how refugees subsist in South Africa.

In terms of health, the HIV/AIDS pandemic is of primary concern in South Africa, and indeed, throughout the region. Refugees are vulnerable to exposure to the virus before, during and after flight. Access to treatment for nationals is a hotly debated subject, and education and prevention programmes in the country are growing, but they do not reach the majority of refugee populations because of language and cultural barriers.

Among the population of concern, there are specific vulnerable groups such as single-headed households and unaccompanied and separated children. Female refugees are particularly vulnerable to the high levels of crime in the country, as are unaccompanied children. UNHCR will target these special groups through programmes to empower refugee women and to promote family tracing and reunification for separated children.

Constraints

The high level of xenophobia in the country keeps much of South African society beyond the reach of the refugee. Funding constraints limit access to schooling for primary school age refugee children, some of whom have their education delayed by a year or more. Basic assistance and self-reliance programmes are also limited to the most needy among the refugee population, leaving the vast majority of refugees to fend for themselves in a competitive environment of high unemployment and over-stretched social services. Compounding these problems is the increasing number of opportunistic claims clogging the asylum system. This represents a challenge to UNHCR and its partners in their efforts to target limited resources to the most needy amongst the population.

Strategy

Protection and Solutions

UNHCR will continue to focus on legal and institutional capacity-building. This will include providing country of origin information to DHA and relevant partners, promoting the implementation of a more effective and efficient RSD procedures, ensuring timely issuance of identity cards to recognised refugees, and lobbying government departments dealing with health, education, housing and social welfare to open their programmes to needy asylumseekers and refugees. The Office will also offer more systematic support to its implementing partners through training, regular monitoring missions and individual case reviews. Continued emphasis will be



Medical care is an essentiel part of providing protection to populations of concern to UNHCR. UNHCR / L. Gubb

placed on supporting enhanced professional NGO services, with a renewed focus on standardisation of policies and the application of appropriate criteria by all implementing partners.

UNHCR will work together with DHA in the development of a more accurate, comprehensive database on refugees and asylum-seekers in order to ensure an up-to-date record of the population of concern. and timely identification of vulnerable cases, and to work towards appropriate solutions.

Pending coverage of refugees within national HIV/AIDS programmes, UNHCR will support targeted HIV/AIDS prevention and education programmes. The Office will work closely with local initiatives which provide care and support for persons infected and affected by HIV/AIDS and promote access to treatment.

In collaboration with government and NGO partners, UNHCR will intensify efforts to prevent and respond to sexual and gender-based violence. This will be carried out through joint awareness raising campaigns, training and monitoring missions.

Requests for voluntary repatriation in the countries covered by UNHCR have begun to increase recently due to promising developments in Angola and the Democratic Republic of the Congo and the opening up of new travel routes to Somalia. UNHCR will facilitate the voluntary repatriation of individual cases and groups to their countries of origin.

Resettlement activities will focus on women-at-risk and refugees with legal and physical protection needs. Reinforcement of the resettlement unit through an additional international staff member will ensure more streamlined, systematic screening and processing of resettlement cases.

UNHCR will actively participate in South African contingency planning exercises, following the successful capacity-building efforts in this area undertaken in 2002, in view of the potential for South Africa to play a lead role in a regional emergency response mechanism.

The "Roll Back Xenophobia" public awareness campaign, which was launched in 1998 in cooperation with the South African Human Rights Commission, will be revamped to reach a broader audience and to prod civil society to take responsibility for eradicating xenophobia. The overall goal of the campaign will remain the same (a reduced incidence of xenophobic attacks and related discriminatory practices) but it will adopt new and innovative approaches.

In the Indian Ocean Island states (Comoros, Madagascar, Mauritius and Seychelles), UNHCR will promote accession to the international instruments, the enactment of national legislation and the establishment of eligibility procedures to provide protection to persons seeking asylum. Meanwhile, prospects for the local integration of mandate refugees will be explored as an alternative to resettlement.

Assistance

To ensure that the basic needs of the population of concern are adequately addressed, UNHCR will provide a time-limited, comprehensive basic assistance package for needy new arrivals and vulnerable cases among the existing populations of concern. This comprehensive, systematic approach to emergency assistance will cost more than the previous arrangement, but it is vitally needed in order

to establish a foundation from which recognised refugees can move towards self-reliance. Ensuring access to basic education will remain a priority for UNHCR.

After a review of the small business loan programme and the piloting of a limited, revised small business initiative, UNHCR will support a more comprehensive self-reliance programme which will include business skills training for eligible applicants and the support of a full-time "business mentor" to monitor the initial period of a new business.

Desired Impact

The activities planned for South Africa in 2003 are intended to form the basis from which appropriate durable solutions can be identified for individual refugees and asylum-seekers in the country, including voluntary repatriation, local integration and the resettlement of eligible candidates. Efforts to reduce the incidence of xenophobia, raise awareness of refugee rights and build the capacity of local institutions will enable refugees to more effectively exercise their legal and socio-economic rights.

Organisation and Implementation

Management Structure

The Branch Office comprises nine international staff, including two JPO posts, and 24 national staff. All activities of Protection, Programme and Administrative Units in the Office are co-ordinated through the Representative. Also attached to the Office are five international posts with wider regional responsibilities.

Co-ordination

UNHCR will work with 12 implementing partners in South Africa, both governmental and non-governmental. The Office will continue to broaden the assistance base for refugees through government support programmes, charitable organisations such as churches and other faith-based organisations, specialised local agencies working on behalf of women and children and in the area of HIV/AIDS prevention, care and support.

Co-operation is well established with UNHCR Liaison Offices in Botswana and Mozambique and with relevant UNDP offices in the Indian Ocean Island States; formal and informal consultations take place on a continuous basis with sector specialists based in South Africa.

In addition to the support and oversight provided to the countries mentioned above, in October 2001, the South Africa Branch Office assumed responsibility for protection and programmes on behalf of the small refugee population in Swaziland as the UNHCR Liaison Office there was officially closed in September 2001.

UNHCR will actively participate in the UN Theme Group on HIV/AIDS. While practical co-operation with other agencies remains limited due to the relatively small scale and rural locations of UNfunded development programmes, UNHCR will pursue an active role in UNDAF deliberations and contribute to the drafting of the Common Country Assessment document. UNHCR will also continue to engage South African institutions in broader humanitarian efforts, as South Africa is in a position to play an influential and substantive role in the international humanitarian community.

Offices

Pretoria

Partners	
Government Agencies	
Department of Home Affairs	
Department of Social Development	
NGOs	
Agency for Refugee Education, Skills Training and Advocac	;y
Bonne espérance Shelter	
Cape Town Refugee Centre	
Centre for the Study of Violence and Reconciliation	
Community Agency for Social Enquiry	
Jesuit Refugee Service	
Lawyers for Human Rights	
Margaret Sanger Centre International (South Africa)	
Mennonite Central Committee	
National Consortium on Refugee Affairs	
Planned Parenthood Association of South Africa	
University of Cape Town Legal Aid Clinic	
University of the Witwatersrand Law Clinic	
Others	

Others

IOM

South African Human Rights Commission

UNDP

Budget (USD)				
Country	Annual Programme	Supplementary Programme	Total	
Protection, Monitoring and Co-ordination	436,642	0	436,642	
Community Services	180,000	0	180,000	
Domestic Needs	400,000	0	400,000	
Education	200,000	0	200,000	
Health	110,000	0	110,000	
Income Generation	100,000	0	100,000	
Legal Assistance	135,241	0	135,241	
Operational Support (to Agencies)	200,000	0	200,000	
Transport / Logistics	465,959	0	465,959	
Total Operations	2,227,842	0	2,227,842	
Programme Support	2,058,098	207,730	2,265,828	
Total	4,285,940	207,730	4,493,670	