“This is my third time being a refugee...I’m tired of this war. I need a place of peace to go home to (and) to be buried in.”
— South Sudanese refugee woman at Kuluba reception center
Introduction

Uganda faces one of the world's largest and fastest-growing refugee crises. The implosion of South Sudan has forced more than 1.5 million refugees to seek asylum in the region, with Uganda host to an estimated 700,000 of them. Thousands continue to arrive daily and the United Nations Refugee Agency forecasts that 925,000 South Sudanese refugees could reach Uganda by year’s end. Of those registered through December 2016, 86 percent are women and children fleeing war, hunger, and appalling acts of gender-based violence. No emergency response is perfect, but the Ugandan government and aid agencies deserve great credit for receiving South Sudanese refugees in a dignified and protective manner. Of particular note is the positive impact of Safe from the Start, a United States government-funded global initiative to prevent and respond to gender-based violence from the onset of emergencies. But these considerable efforts are hampered by severe funding shortfalls, which could become more glaring as refugees continue to arrive. It is critical that donors increase their support for the refugee response so that basic services can be provided and women and girls can be protected. The transition to longer-term assistance, and greater support for refugee-hosting communities, must also begin now – or else Uganda’s warm welcome may wear out.

Recommendations

• International donors should fully fund the 2017 Refugee Response Plan for Uganda to meet growing needs in emergency response capacity; food; water, sanitation, and hygiene; shelter; health; and protection, including gender-based violence (GBV).

• The United States Department of State’s Bureau of Population, Refugees, and Migration and the U.S. Agency for International Development’s Office of Foreign Disaster Assistance must maintain their political and financial commitment to the Safe from the Start initiative, and further expand it to other emergencies to ensure women and girls are consistently prioritized.

• International development agencies should:
  • Align more of their programming to fit the Ugandan Refugee and Host Community Empowerment Strategy (ReHoPE), including programs for equity, gender responsiveness, and women’s empowerment; and
  • Expand their field presence in and engagement with refugee-hosting areas to better understand community needs, and participate more fully in refugee-response coordination.

• The Uganda National Non-governmental Organizations Forum should establish, and donors should support, a refugee response working group to identify common challenges and advocate more effectively to the Ugandan government, United Nations agencies, and donors.

• The Ugandan government should:
  • Respect the competitive and transparent nature of partnership selection and contracting, and fully abide by ethical standards, including the provisions of Uganda’s Leadership Code Act;
  • Ensure that any complaints pertaining to the management of the refugee response are fully investigated by the Inspectorate of Government and that any informers and witnesses are provided with appropriate protection; and
  • Finalize the acceptance of the World Bank’s financing package in support of refugee-hosting areas.

• The UN Refugee Agency (UNHCR) and Uganda’s Office of the Prime Minister should:
  • Prioritize partnership applications from specialized trauma counseling agencies; and
  • Review procedures for identifying people with specific needs at border points to determine if they are in compliance with UNHCR’s Emergency Handbook guidance, and conduct refresher trainings for all personnel responsible for such identification.

• The Gender-Based Violence Working Group in Uganda should:
  • Test innovative, survivor-centered approaches to encourage women and girls to report sexual violence and seek services upon reception at border crossings; and
  • Immediately revise and streamline strategies for sensitizing women and girls on GBV with a view toward improving reporting and facilitating access to services upon reception, in accordance with the 2015 Inter-Agency Standing Committee Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.
Background

Uganda currently faces the fastest-growing refugee crisis in the world. From July 2016 through January 2017, more than 512,000 South Sudanese refugees arrived in the country – an average of roughly 2,400 per day. This staggering rate of influx into one country, sustained over such a long period, has few precedents in recent years. As a consequence, Uganda has now become the top-ranking refugee-hosting country in Africa, with more than a million refugees in total. It also hosts what is likely the world’s largest refugee site, Bidibidi, with more than 270,000 residents.

In December 2016, Refugees International (RI) traveled to Uganda, where the research team spoke with newly-arrived South Sudanese refugees in the West Nile sub-region. By and large, these refugees had fled the country’s southern Equatoria region, including the capital city of Juba, and entered Uganda through more than six formal and informal border crossings. Many of the refugees spoke of attacks on their home villages by members of the Sudan People’s Liberation Army (SPLA), in which civilians were killed on the basis of their ethnicity or their perceived political affiliation. One recent arrival from Yei River state told RI that he fled with his family after SPLA forces killed his father and brother. “They were not rebels; they were just civilians,” he told RI. “After my brother died, I ran into the bush for two months with my family. There was no food, no medicine for my children. If the soldiers see you coming back from the bush to your place to get food or something else, they will just kill you.” Other refugees said that life in South Sudan had simply become intolerable after more than three years of war. “The country is going down,” one refugee from Juba said. “There is no safety, no jobs, and no law. People get killed, and there is nothing anyone can do about it.”
Of particular concern are the numerous and continuing reports of sexual and other forms of gender-based violence (GBV) perpetrated against civilians in South Sudan. In early December 2016, United Nations human rights investigators said that rape is being used as a tool for ethnic cleansing, and that sexual violence in South Sudan had reached “epic proportions.” As recently as January 2017, the UN Mission in the Republic of South Sudan (UNMISS) and the Office of the High Commissioner for Human Rights (OHCHR) released a joint report in which they affirmed that serious rights violations, including sexual violence, committed by SPLA and SPLM/A-In Opposition continue in and around Yei. In January 2017, the UN Refugee Agency (UNHCR) reported that refugees arriving from the Equatoria region cited rape and sexual abuse of women and girls as one of the primary reasons for flight—something that refugees told RI repeatedly. In focus group discussions, women described to RI how rape is being used as a tax to be paid by women fleeing the country.

“We hired a driver to take us to the Oraba border point. When we reached Kimba, there were two soldiers. They told the women to get out, to remove their clothes and lie down. The children saw their mothers get raped.”

—South Sudanese woman, Bidibidi refugee settlement

Recent reports from South Sudan indicate that the situation continues to deteriorate; atrocities continue, with the UN Special Adviser on the Prevention of Genocide warning that “there is a strong risk of violence escalating along ethnic lines, with the potential for genocide.” The country’s economy also remains feeble, with crisis-
emergency-level food insecurity expected in most of the country during the first half of 2017.\textsuperscript{6} Mass rapes continue to be reported.\textsuperscript{9} The international community, meanwhile, has been unable to meaningfully constrain the conflict: a regional protection force authorized by the UN Security Council in August 2016 remains blocked by the South Sudanese government, and a December 2016 resolution imposing an arms embargo on South Sudan failed to garner the necessary votes. In short, there is no reason to believe that South Sudanese will be able to return home anytime soon, or that the influx of new arrivals will dissipate. Indeed, UNHCR currently projects that the number of South Sudanese refugees will increase from just over 600,000 today to 925,000 by the end of 2017.\textsuperscript{10}

In many parts of Africa – to say nothing of North America or Europe – a refugee crisis of this magnitude might be expected to produce panic: the closure of borders, the expulsion of asylum-seekers, and restrictions on humanitarian access. But this has not been the case in Uganda. Instead, the Ugandan government under the leadership of the Office of the Prime Minister (OPM), which holds the mandate for refugee policy, has kept its borders open to refugees and has extended its longstanding, generous refugee policy to these new arrivals.\textsuperscript{11} In brief, the policy gives refugees substantial freedom to choose between living in Ugandan villages and towns or in so-called refugee settlements.\textsuperscript{12} In the settlements, each refugee household receives a plot of land for their shelter, usually about 100 square feet in size, as well as access to nearby land for collective agriculture. Uganda also integrates refugees into local social services and permits refugees to move freely and seek employment.

The objective of the RI mission to Uganda was to study a humanitarian response that has been widely lauded as a model for other refugee-hosting nations in the region and beyond. Further, given the reported scale of sexual violence, the RI team gave special attention to how the humanitarian community is serving refugee women and girls.

The RI team also interviewed dozens of refugees at various stages of the arrival process, including at border crossings, reception centers, in transit to refugee settlements, and during plot allocation.

### Meeting Emergency Needs

As mentioned above, the Ugandan government’s highly accommodating policy toward refugees has facilitated humanitarian access and has had a dramatic, positive impact on the lives of South Sudanese refugees – something that no amount of international aid can replace. Uganda’s policy has allowed humanitarians to prevent some of the problems that typically arise in an emergency response. For example, the government’s willingness to provide land for settlements in a timely manner has minimized congestion in refugee sites and the health and protection problems that it causes. Yet many humanitarians who spoke to RI felt this had generated a false sense of security, papering over the need for greater resources and donor engagement. “There needs to be greater attention in capitals to what’s happening in South Sudan and how this response is managed,” one senior aid worker said. “If we had 20,000 refugees here dying of cholera, that might get people’s attention ... But instead, no news is seen as good news.” Another added, “We’re all overwhelmed, and we shouldn’t hide that fact. We can’t be as stretched as we are without affecting refugees’ protection.”

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Funding for refugee relief in Uganda has been seriously inadequate. In 2016, the inter-agency appeal for South
Sudanese refugees in Uganda received just 40 percent of the resources required. The effects of this shortfall are plain to see: the World Food Program has halved rations for most refugees who arrived prior to mid-2015. And as the number of refugees increases, further cuts for additional populations are inevitable without substantial new funding – a move that is certain to increase the vulnerability of women and children, who make up the vast majority of the refugee population. While many refugees do have access to agricultural land, humanitarians told RI there is a clear need for additional food assistance – particularly for South Sudanese refugees. One food security official told RI that areas hosting South Sudanese refugees “are, climatically, and in terms of the refugees’ skills, less productive for agriculture than, for example, the Congolese refugee areas” in the west of the country. Further, RI was told that many South Sudanese refugees arrived in Uganda or received access to land too late for the main planting season (which runs from August to October), leaving them almost entirely reliant on food aid until July 2017 at the earliest. Without direct food aid, the U.S. Agency for International Development estimates that newly-arrived South Sudanese refugees will face crisis-level food insecurity by mid-2017.

Water, sanitation, and hygiene (WASH) needs also remain unmet in many areas, with multiple refugee settlements falling well below the global standard of 15 liters of water per person per day. RI was told that in some major refugee-hosting areas, humanitarians need to drill upwards of 130 meters to find water – far deeper than expected, requiring substantially more investment. Shelter
conditions too have suffered from a lack of funding. Humanitarians told RI that, per Ugandan refugee policy, refugees are expected to build their own shelters. This has the benefit of allowing refugees to design shelters that they want to live in, but it creates challenges when the shelter materials they need (such as lumber and grass) are in short supply, or when refugees physically cannot build their shelters or do not know how. Shelter kits and construction assistance for vulnerable refugees are insufficient and leave refugees – especially women and girls – at risk. For example, in Palorinya settlement, RI met an 18-year-old woman from Yei who came to Uganda alone after her grandmother went missing. RI accompanied her as she collected what she could of her shelter kit and transported it to her plot of land, where she had no instruction or assistance in assembling the shelter as dusk approached. She lamented to RI that she was likely to sleep in the open for an unforeseeable amount of time until she secured assistance.

An additional need (closely related to the previous three) is for sufficient and highly-experienced emergency staff. At the field level, it was clear to RI that the presence of a strong UNHCR emergency team had made a difference in the quality of response. Most gaps in the response that RI identified could be traced to inadequate resources rather than ineffective policies or coordination. And in interviews with RI, many NGO staffers expressed confidence in UNHCR’s work at field level. These positive results were not accidental, and they did not come cheaply. Since July 2016, UNHCR has deployed more than 40 temporary Emergency Response Team (ERT) staffers to Uganda, with additional ERTs currently being requested. Emergency trainings were also conducted for UNHCR’s permanent staff in Uganda, as well as government and NGO staff. But the emergency in Uganda has not subsided: thousands of refugees are arriving daily and new sites are being created almost monthly. And already, UNHCR is having difficulty recruiting sufficient ERTs to replace those who have rotated out. Indeed, RI was told that UNHCR could no longer afford to pay NGO partners for ERT staff contributed through standby mechanisms. UNHCR also faces a severe challenge in converting temporary, emergency positions to permanent assignments, with only about a third of the permanent staff positions needed for 2017 being approved by headquarters. If the Ugandan response does not continue to receive strong emergency staff, there is a danger that the quality of reception will degrade over time, with standards slipping as each new settlement opens. It is therefore vital that donors fully fund the 2017 Regional Refugee Response Plan and that UNHCR continues to prioritize Uganda within its own budget.

Another need is for improved coordination and advocacy at the national level, which most aid workers whom RI interviewed highlighted as problematic. NGO representatives expressed particular concern about the lack of clarity regarding UNHCR’s financial position in the country, and what partners were expected to contribute to the response. This placed strain on organizations trying to plan interventions in the various refugee sites. One humanitarian told RI, “We go to UNHCR and tell them, ‘We have ‘X’ amount of money, but we need to know what we will receive from you.’ We got a letter saying that we are an implementing partner, but we still need to know what that means in terms of money and activities.” Another aid agency staffer added, “Every NGO is bringing as much
of their own money as possible to encourage UNHCR to choose them as an implementing partner. This has played out badly in Bidibidi settlement, where more than 30 NGOs are spending their own money but don’t know if they have defined roles.”

In recent weeks, UNHCR has moved to strengthen the role of site and sector leaders in identifying partners for the refugee response. This may help to create a more orderly process and reduce some of the uncertainty felt by NGOs. However, NGOs may be even better served if they can work together to improve their relationship with UN agencies and the Ugandan government. Indeed, RI noted that while there is a national NGO Forum in Uganda, it has not focused its efforts on the refugee response. Putting the refugee crisis more firmly on its agenda, or creating a refugee working group within the forum – with the support of donors – could help NGOs to identify common challenges and advocate more effectively.

**Safe from the Start**

**Progress for Women and Girls**

A disproportionate number of the refugees arriving in Uganda are women and children. According to the UNHCR, through December 2016, 86 percent of the registered South Sudanese refugees in Uganda were women and children. This astounding figure, coupled with the alarming reports about GBV inside South Sudan, served as an alarm bell for humanitarian responders on how and what they should prioritize in their operations.

During its visit to Uganda, the RI team was mindful that despite the existence of multiple humanitarian policies, guidelines, and specialized programs designed to address GBV from the start of an emergency, humanitarian operations have repeatedly failed to deliver lifesaving services for women and girls and prevent continued incidents of GBV in displacement. Living conditions typically fall short of established standards, creating vulnerabilities; protection programs are amongst the last to receive funding; and lifesaving care for GBV is limited. RI has often found that a confluence of factors lead to these failures, among them shortfalls in funding, the absence of protection staff with the appropriate expertise, a lack of practical knowledge as to how to integrate GBV into a response, and institutional or host-country barriers to action.

Recognizing that GBV is a lifesaving priority and that additional assistance is needed in response to ongoing shortcomings within the humanitarian community in this regard, the U.S. government announced its Safe from the Start (SFS) initiative in 2013 to prevent and respond to GBV in humanitarian emergencies worldwide. Its goal is to reduce the incidence of GBV and ensure quality services for survivors from the very onset of emergencies through timely and effective action. The initiative’s three objectives are to: 1) increase the number and reach of quality, evidence-based, dedicated GBV prevention and response interventions in new and ongoing emergencies; 2) better ensure that all humanitarian assistance helps to mitigate GBV risks and address the unique needs of women and girls; and 3) increase accountability within the international humanitarian architecture for prioritizing GBV prevention and response in emergencies. By design, SFS is meant to change the way the humanitarian sector does business, so that institutional policies and capacity exist for humanitarian agencies to place equal value on GBV prevention and response as a lifesaving priority, alongside water, food, and shelter.

Following the 2016 refugee influx, a UNHCR senior protection officer was deployed to Yumbe district in Uganda’s West Nile sub-region to help humanitarians meet the objectives of Safe from the Start. The protection officer has worked with the UNHCR emergency response team to ensure that their activities (primarily in protection, WASH, shelter, and food security) minimize and address risks to women and girls. RI witnessed the level of gender integration in the UNHCR operation, as the officer was consulted in troubleshooting problems in WASH, for example. Likewise, the officer conducted outreach to other members of the team regarding site planning, distributions, management, and other activities. This has resulted in an unusually well-integrated response at this stage of an emergency.

In addition to UNHCR, several other UN agencies and INGOs deployed gender and protection technical staff to ensure a gender- and protection-sensitive approach to
their own programs. Through multiple interviews with a great number of organizations intervening in the West Nile sub-region, it is RI’s assessment that UN agencies and INGOs responding to the emergency were making deliberate and concerted attempts to mitigate risks to women and girls.

There are also GBV prevention and response initiatives in the established sites that RI visited. Protection desks are in place, which serve as one-stop-shops where refugees can seek information, lodge a complaint, learn about their rights and responsibilities, and be oriented to appropriate protection personnel in UN agencies and/or INGOs. RI also visited women’s resource centers where GBV survivors can receive or be oriented to health and psychosocial services, as well as vocational training and livelihood opportunities. What struck the RI team members was the fact that these desks and centers were already operational in areas that had just begun accommodating refugees, even just a month prior. The refugees whom RI interviewed felt empowered because they had someone to whom they could direct a concern and seek resolution. When queried as to how they accessed GBV services, some GBV survivors told RI that they had approached the protection desks, which then referred them to volunteers associated with nearby women’s resource centers. In at least one of the settlements RI visited, these volunteers formed part of a vast network

“South Sudan is in flames. I lost my father, sister-in-law, uncle. The women’s support center has helped me deal with this. I can sleep now. I will never stop coming.”

—South Sudanese woman, Bidibidi refugee settlement
of refugees trained by INGOs to sensitize the population about GBV and facilitate access to the resource centers.

Aid agencies reported that when core relief items were distributed, they nearly always included materials specific to women and girls’ needs – among them, dignity and maternity kits and hand-held solar lamps. Women interviewed did lament shortages of these materials but appreciated that such items were somewhat available, including at reception centers where refugees sometimes have to spend the night prior to transport to a settlement. In other words, it appears that funding shortages in Uganda did not lead to the prioritization of other relief materials at the expense of women’s dignity kits, as RI has unfortunately seen in many emergency situations. This recognition that women’s needs are as important as all others is fundamental to the Safe from the Start approach.

Finally, with SFS funds, humanitarian agencies have been able to embark on the costly but vital task of erecting solar-powered outdoor lighting. RI saw these lights installed in both refugee reception sites and refugee settlements. Such lighting is critical to the safety of women and girls, but in most emergencies (particularly at the onset) it is considered too expensive and relegated to secondary or tertiary priority. The value of this investment is now well-recognized; other non-U.S. donors have committed to funding solar energy in Uganda’s refugee settlements, and UNHCR has decided to include solar lights in its global supply stock.

Overall, it is RI’s assessment that while imperfect, SFS funds and policy initiatives have led to a serious effort to prioritize refugee women and girls in Uganda. This undoubtedly made an impact on the lives of refugee women and girls whom RI interviewed. In multiple focus groups and individual interviews, women reported that they felt listened to, that they had access to services to help them cope with life in exile, and that they depended greatly on both the volunteers and the women’s resource center staff. Women specifically and repeatedly named hand-held solar lamps as being one of the most important items distributed to them. The lamps allowed them, for example, to go to latrines without fear of robbery or assault. Further, the lamps are serving purposes far beyond what one would expect: women told RI that they left the lamps on in their tent overnight, as a deterrent to a would-be thief or assaulter. The lamps also allowed them to tend to their infants in the middle of the night. Some, however, lamented that they were of questionable quality and had already malfunctioned or entirely broken.

Some of the refugee women reported having fled to Uganda two or three times before, and many said the current refugee response effort was a marked improvement from the previous ones. When RI asked a group of women how they believed the humanitarian community was doing compared to past emergency responses, nearly all of the women cheered with enthusiasm and gave a thumbs-up. While these results cannot be entirely attributed to Safe from Start, they do show that, under the right conditions, the initiative can deliver real results for women and girls. The U.S. Department of State’s Bureau of Population, Refugees, and Migration, and the U.S. Agency for International Development’s Office of Foreign Disaster Assistance therefore must maintain their political and financial commitments to Safe from the Start and further expand it to other emergencies.

Troubleshooting and Areas for Continued Improvement

The SFS initiative in Uganda and the deployment of a senior protection officer with SFS funds – one of only six such deployees worldwide – is a good start, and has made demonstrable gains, from which other emergency operations can learn. There are nonetheless gaps and technical concerns that can and must be addressed.

One of the objectives of SFS is to increase the number of dedicated GBV prevention and response interventions in new emergencies. In this regard, RI found two areas for improvements in Uganda. First, the number of interventions is limited, and their reach is quickly being dwarfed as the influx increases and Ugandan authorities are forced to open new sites. With a 60 percent gap in funding for the 2016 response plan, GBV actors were not able to achieve the number and quality of interventions that they had planned. The existing programmatic gap may widen dramatically if, as violence escalates, there is a sharp increase in the number of South Sudanese women and girls arriving in Uganda in need
of immediate GBV services. Therefore, donors must ensure that their funding for GBV increases in parallel with all other sectors of the response. Such funding will help ensure SFS’s objectives are met.

Another area for improvement RI observed is that, despite the widely publicized reports of sexual and other forms of GBV in South Sudan, there has been surprisingly minimal effort to identify survivors upon arrival in Uganda and meet their immediate health needs at the reception centers. The vast majority of the existing GBV prevention and response programs are dedicated to GBV that may occur in the Ugandan refugee sites themselves.

Humanitarian organizations are quick to point out the barriers to meeting the need of survivors upon arrival, including the fact that refugees are arriving traumatized and confused, limiting their capacity to fully process the wealth of information about their registration, shelter, and land plot assignments. In fact, the UN and OPM co-managed process of refugee reception in Uganda is impressive. Ugandan police officers stationed at formal and informal border points screen newly-arriving refugees for arms or contraband and then direct them to humanitarian facilities nearby. They are taken to formal reception centers, undergo a preliminary registration, receive a health and vulnerability screening, and are transferred to a settlement. While it is RI’s understanding that there previously were serious coordination and logistical problems in this relocation exercise, OPM, UNHCR, and partners worked to improve the process and, at the time of RI’s visit, it appeared seamless. One NGO worker, in describing its efficiency and speed, labeled it a “military operation.” This in itself is a protection measure for the population: UNHCR and OPM have committed to ensuring that no refugees stay in mass shelters for more than 24 hours – which dramatically reduces the health and protection risks often seen in other emergencies.

Ironically, it is precisely the efficiency of this operation that leads to a lost opportunity. Given the patterns of violence in South Sudan, it must be assumed that amongst the arriving refugees, there are individuals who have suffered sexual violence in their place of origin or while en route to Uganda. This gives humanitarian agencies a very small window of time to act – and it must be at reception – to provide critical sexual and reproductive care, to treat sexually-transmitted infections, and unwanted pregnancy. At present, according to UN and NGO personnel whom RI interviewed, a stockpile of post-rape kits has been made available by the U.S. government, but they are not being put to use at border points. Doing so would slow down, if not halt, the transfer of refugees from border points to refugee sites. As one senior INGO official put it, “At transit sites...the numbers [of refugees arriving] are so huge, so there is really very little time to do any meaningful screening.”

In interviews with RI, UNHCR staff said they were aware of this gap and were brainstorming solutions to identify survivors and give them care. RI also participated in focus group discussions with newly-arrived refugee women, in which they were asked how women and girls could be encouraged to come forward and seek services. These women explained that because of the trauma and confusion of flight, coupled with the cultural shame and stigma associated with sexual violence, it would be challenging to report GBV upon arrival and accept services. Under the leadership of the SFS deployee, humanitarian actors have committed to testing innovative options. RI encourages the protection community to continue this exercise in consultation with recent arrivals, and urges donors to support pilot programs that can contribute to best practice in this and other emergencies. A survivor-centered approach must be respected in the piloting of any initiative.

In the meantime, RI identified small but key adjustments that can be made to facilitate women in need accessing services upon arrival. At present, there is very little information available to women and girls at reception sites...
about GBV and accessing services. At times, information is shared through megaphones, but GBV messages get lost amidst a flurry of other information new arrivals receive. In some reception centers, informational GBV handouts are distributed, which describe GBV, its root causes, and consequences to the survivors, the family, and society. This approach is fundamentally flawed and will do little to promote survivor reporting and access to medical services. The handout is written in highly technical English, and some of its pictorial messages are confusing or inappropriate. For example, it includes a picture of a female genital mutilation/cutting – a practice which is not believed to be widely practiced in South Sudan. Further, the handout includes no information about how, when, or where to report and seek services. In fact, refugee women RI interviewed in settlements had no recollection of any GBV information distributed to them at reception centers. Some reception centers at border points do include temporary facilities for women and girls who report sexual violence. But with the current system for distributing information to new arrivals, it is not clear that these are used as intended.

The 2015 Inter-Agency Standing Committee Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action state:

Consider separate, confidential and non-stigmatizing spaces in registration, greeting and transit centres for engaging with those who may have been exposed to or are at risk of GBV. Ensure reception areas for new arrivals are equipped with a GBV specialist or with a focal point person who can provide referrals for immediate care of survivors (including those who disclose violence that occurred prior to flight or in transit and/or those encountering ongoing violence).
Accordingly, UNHCR and all implementing and operational partners should immediately revise their strategy for sensitizing women and girls on GBV with a view toward improving reporting and facilitating access to services, including at reception centers. The GBV working group should also facilitate further sessions with refugee women and girls to test pictorial and native-language handouts that relay key GBV messages for refugees.

Further, UNHCR, OPM and other partners involved in the screening of refugees at the reception centers must review their procedure for identifying people with specific needs. At present, representatives from several agencies sit at one table and ask refugees questions to determine their vulnerability. At the reception site where RI witnessed this process, screeners were of mixed gender, reducing the possibility that a woman or separated child would report a case of GBV. Further, from RI questioning, it was clear that personnel did not have a clear understanding of how to categorize different specific needs. Upon a review of a few cases that were logged, RI found that some recently-registered women were not correctly categorized as women-at-risk. Under the leadership of the UNHCR protection team, refresher trainings should be carried out for all personnel classifying persons with special needs, with on-site mentoring, based on guidance set forth in the UNHCR Emergency Handbook and UNHCR’s Guidance on the Use of Standardized Specific Needs Codes. This is of paramount importance, as it is the only way to flag cases of individuals that need specialized assistance in building shelter or accessing medical care and psychosocial services, among other needs, at the port of entry. As one INGO Director lamented, “We have a grasp of the percentage of women and children in the refugee population, but not the number of people with specific needs, much less what those needs are.”

When questioned about GBV programming gaps, humanitarians across the board said that psychosocial services to address trauma was the largest. One organization which carries out trauma stress screenings told RI that new arrivals are experiencing high levels of trauma. RI recognizes that the women’s resource centers are playing a role in addressing mental health concerns, as many women interviewed stated that they were only able to sleep after frequenting the counseling at the centers. However, the demand far exceeds the supply of psychosocial counselors in the centers. Further, in the sub-region, there is only one organization dedicated to providing professional psychiatric assistance – assistance for which many may not qualify in the absence of demonstrable psychiatric disorders. One INGO director told RI that with the current mental health interventions, they are only “covering the tip of the iceberg.” There are other organizations operating in Uganda that have tested models of trauma counseling – both at the individual and community levels – that hope to provide services in the refugee settlements. However, they have had difficulty securing funds, gaining implementing partner status with UNHCR, and/or receiving authorization from OPM to operate in the sites. UNHCR and OPM should immediately prioritize partnership applications related to counseling to refugees, and donors should appropriately fund such interventions.

Creating a Foundation for the Long-Term

The scale and speed of refugee arrivals since July 2016 has given Uganda the appearance of a sudden-onset emergency. But this refugee crisis actually began more than three years ago, when violence in Juba in December 2013 caused thousands to flee within South Sudan and to neighboring countries. If current trends persist, there will continue to be emergency response needs in Uganda, even as the refugee situation writ-large becomes protracted. An orderly transition from relief to development-style aid will not be feasible here: both are needed now.

Years of research and experience have shown that protracted refugee crises demand the involvement of both humanitarians and development actors. Uganda is a prime example of this. The Ugandan government’s will-

“Most of us are widows or our husbands are not here. We need support in fetching grass and poles for constructing shelter.”

—South Sudanese woman, Bidibidi refugee settlement
ingness to give refugees access to work and social services is commendable. However, a 2016 World Bank study determined that “Refugees and their host communities [in Uganda] remain vulnerable due to underlying poverty and vulnerabilities exacerbated by weak social services delivery, poor infrastructure, and limited market opportunities.” RI’s own research echoed these findings: in the refugee-hosting areas that RI visited, humanitarian aid was clearly serving as a stopgap for proper development investment. If that aid is not replaced by longer-term support, both refugees and their host communities will suffer. The refugees’ protection could also be undermined if the needs of host communities are not met, and if conflict or opposition to receiving refugees results.

Uganda’s host communities have responded to the recent refugee influx with extraordinary generosity, but also with shrewd calculation. One local resident working in Bidibidi settlement explained it in the following way: “The refugees have been here before, and some of us here have been refugees also. They are our brothers and sisters, so there is a humanitarian element to this. But we also know that by accepting the refugees, development will come to this area.”

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health facilities. Yet already, some of these residents are growing wary. In Bidibidi refugee settlement, for example, RI witnessed local leaders complaining to UNHCR about the placement of a health clinic within a refugee settlement. One of the leaders told RI, “We do welcome the refugees, but we want to make sure that everyone can access services. Look around here and you will see hardly any locals’ homes. We see this as a misallocation of resources.”

Humanitarians told RI they had observed this trend with concern. One aid worker in West Nile explained, “Whenever OPM comes to a village to ask for land for refugees, they make a lot of big promises about jobs and infrastructure ... But our duty as humanitarians is to help the largest number of people. And if there are more refugees than locals, that’s where our aid will go.” Another humanitarian explained that while Ugandan officials have not discussed “capping” arrivals from South Sudan, refugee fatigue remains a possibility, particularly at the local level. “In the beginning, as one district got an economic boost from the refugees, competition arose between the districts over who could receive more refugees,” the humanitarian said. “But the money for aid now is not what it was, and district governments are noticing this. Expectations are very high and may not be met. That could turn the tide.” This highlights the need for development support in refugee-hosting areas, which can be targeted at host populations in a way that refugee aid cannot.

To their great credit, the Ugandan government, UN agencies, and the World Bank have done much to address this problem, at least at the policy level. Refugees have been integrated into Uganda’s national development planning, and they are the targets of two initiatives that could have a significant impact: the Settlement Transformation Agenda and the Refugee and Host Community Empowerment Strategy (ReHoPE). Taken together, these initiatives are meant to improve the situation of refugee-hosting areas, and enhance the self-reliance of refugees, through development interventions. Both are promising, but neither has had a significant impact at field level yet, according to RI’s research.

In the case of the Settlement Transformation Agenda, the World Bank authorized a $50 million loan in May 2016 to support government investments in livelihoods and local social services. But as of late January 2017, the loan package had still not been approved by Uganda’s Parliament. For its part, ReHoPE is intended to attract programming commitments from the full range of UN humanitarian and development agencies in Uganda, but so far, it has only received programmatic funding from UNHCR – something which is not sustainable. These delays have caused concern among many NGO partners, who currently see the strategies as “pieces of paper,” in the words of one humanitarian. Further, the presence of development agencies in refugee-hosting areas remains weak: in Yumbe district, humanitarians told the RI team that they could recall only one visit to the area by the UN Development Program, no visits by the World Bank, and a reluctance by the UN Children’s Fund to fully involve itself in refugee issues. The Ugandan government, donors, and UN agencies must not allow these initiatives to lose momentum. Their success is important not just for Uganda’s refugees and hosts, but also for the future of humanitarian-development cooperation globally. As a pilot country for the UN’s Comprehensive Refugee Response Framework, Uganda could provide a model for future refugee responses around the world. Moreover, Uganda’s experience is being watched closely by other regional players: humanitarians told RI that in the last two years, multiple government delegations from Tanzania and Ethiopia have visited Uganda to see if lessons can be learned from its approach to refugees. So it is vital that Uganda’s experience be a successful one over the long-term.

“Most of us are farmers, and we don’t want to be dependent on handouts. But we need good land, otherwise the UN will have to take care of us. Suppose this war lasts for ten years—then what?”

—South Sudanese refugee, Kuluba refugee reception center

UN development agencies must therefore make concrete contributions to ReHoPE, including for gender equity...
and women’s empowerment, by aligning more of their programming with its strategy. These agencies will also have to expand their field presence in refugee-hosting areas and participate more fully in refugee-response coordination. Otherwise, they may be blind to what host communities actually need and risk duplicating the efforts of humanitarians. For its part, the Ugandan Parliament should work expeditiously to approve the acceptance of the World Bank’s financing package in support of refugee-hosting areas.

Ensuring an Efficient and Transparent Response

The refugee response in Uganda is jointly led by UNHCR and OPM. By all accounts, OPM is heavily involved in both the oversight and coordination of humanitarian assistance. This involvement was, in many respects, viewed positively by humanitarians interviewed by the RI team. UN and NGO representatives said that, in general, OPM staff had a positive attitude toward refugees, and that they set high expectations for the quality of assistance delivered and for the level of participation in coordination mechanisms. This has surely contributed positively to the quality of the refugee response. Some of OPM’s other activities are, however, cause for concern.

According to multiple senior humanitarians with whom the RI team spoke, OPM exercises tight control over where NGOs can intervene and in which sectors they can work. NGOs are obliged to obtain permission from OPM in order to operate in refugee settlements. Further, OPM is a signatory to all partnership agreements between NGOs and UN agencies. Such measures are not unusual in refugee situations; however, humanitarians told RI that OPM personnel had used these measures as a means to interfere in decisions about partnerships and contracting. RI was told of multiple cases in which OPM personnel had requested

Young men from South Sudan’s capital, Juba, wait to receive shelter kits in Palorinya refugee settlement. One told RI, “The world should sit our leaders down to talk peace. If not, then we need to get new leaders.”
that UN agencies or NGOs establish partnerships with specific national NGOs or contract with specific companies. Some humanitarians said that they had accepted this arrangement with resignation. “We do not have full control over our implementing partners, and there are some that we would not have picked otherwise,” one humanitarian said. “When the government disagrees with us, we lose... Everything becomes difficult at the institutional level if we put our foot down and try to say no to a partner.” Another humanitarian recounted that their aid agency had hired a private contractor after “so much pressure” from OPM staff, and that the contractor’s subsequent work was delayed and of poor quality, forcing the aid agency to take a loss. When humanitarians have resisted OPM’s entreaties, the government’s reaction has sometimes been unhelpful: RI was told of cases in which aid organizations were allegedly denied access to settlements after rejecting a contractor that OPM suggested, and of cases where OPM allegedly delayed approving projects for months because of disagreements over the choice of a contractor.

Some senior humanitarians said they believed that the pressure they encountered could be related to a desire by OPM to include more Ugandan NGOs in the refugee response. However, they were also quick to point out that if this was true, OPM’s requests could be made in a more constructive fashion. “They sometimes tell you that they are trying to have the UN or international NGOs partner with local NGOs. That sounds fine, but then a specific local NGO is forced onto us,” one INGO official told RI. “If they want us to do capacity-building of local groups, then we can do that, but through a normal call for proposals.”

Many NGO staffers with whom RI spoke were also dissatisfied with UNHCR’s approach to partnerships. In the words of one aid worker, “UNHCR’s partnership guidelines say that OPM has no role in partner selection” until the final concurrence with UNHCR’s choice of partner. “But in practice, the government is involved in selecting partners from the beginning of the process.” UN officials with whom RI spoke did not deny the government’s involvement in these decisions. “OPM does take a very strong view on partner selection,” one said. “The agreements are tripartite with the government, and we cannot go without them.”

Some aid agencies complained that donors, too, had not taken the matter seriously enough. Senior humanitarians told RI that they had raised transparency issues with donors, but, in the words of one NGO representative, “donors have not read out to us what, if anything, they have done in response.” One UN official added, “Donors are afraid of the government here. They prefer to let the multilaterals have the tough discussions. Perhaps they challenge the government in closed-door settings, but I am unsure to what extent they deliver those messages.” When asked by RI researchers in mid-December 2016 how they had handled complaints about transparency, donor representatives said that they were aware of the concerns but had either not raised them with OPM or had raised them only at the working level. In early February 2017, after RI’s visit, donors communicated to RI that they conducted consultations with humanitarian agencies and determined that, in the words of one donor representative, “pressure has been put on procurement and partner selection” by OPM. RI was also told that donors have proposed an “integrity review of procurement processes (including engagement of stakeholders in implementing partners procurement processes) and of partner selection processes.” RI welcomes these important actions by the donor community.

In response to the concerns raised by NGOs and donors, a senior Ugandan official with responsibility for the matter told RI that if OPM staff had made recommendations about partners or contracts, “If the recommendation is done – because these people come to seek recommendations, in which agencies are officially notified about the competencies, capacities, and so on of these agencies – there is no forceful or irrational partnering of one agency with the other. There is nothing like that.” The official went on to say that “we’ve seen undue pressure being exerted on NGOs by the district local authorities to have companies from these local areas taking on jobs and contracts for service delivery... You find that there is undue pressure being exerted – even on [the national] government.” The official insisted, however, that all partnership agreements and contracts should follow accepted procedures, and that should any implementing partner receive undue pressure from OPM, “then we are open to discussion and taking the necessary corrective action against such action. We don’t encourage it. And we’ve advised our staff not to be doing it at all, and it’s not an official position.”
The importance of transparency and accountability here cannot be overstated. Even the appearance of mismanagement could have a detrimental impact on fundraising – and ultimately, on the refugees themselves. All actors involved in the refugee response, including the Ugandan government, should therefore follow established norms and guidelines for partnership and contracting.

UN leadership (including at headquarters level, if necessary) must insist that all parties in Uganda respect the integrity of the partner selection process. For its part, the Ugandan government must ensure that its oversight of the refugee response meets the highest ethical standards, including the provisions of Leadership Code Act. As the individual ultimately responsible for the refugee response, the Ugandan Prime Minister should take the lead in this regard. Uganda’s Inspectorate of Government should also ensure that any complaints pertaining to the refugee response are fully investigated, and that any informers and witnesses are provided with appropriate protection. RI notes with satisfaction that the Inspectorate of Government has previously brought charges related to misuse of humanitarian funding, which hopefully indicates a willingness to pursue further cases if necessary.

**Conclusion**

In interviews with RI researchers, humanitarians and officials cited many different factors that contributed to the relative success of Uganda’s refugee response – but none of them believed success was inevitable or accidental. Among other things, they pointed to Uganda’s strong refugee policy, experienced and empowered humanitarian leadership, and a commitment to protection – including women and girls’ protection – across all sectors of the response. These factors are, in many ways, interdependent: for example, without an accommodating refugee policy, humanitarians will inevitably face protection challenges they cannot overcome. However, Uganda’s system – in many ways, a model for the world – cannot be sustained without continued commitment and investment, particularly by donor governments. As the number of South Sudanese refugees grows, any reduction in aid would be devastating for vulnerable refugee families. It would also undercut, and possibly reverse, the important achievements of Safe from the Start for the benefit of refugee women and girls. Finally, it would send a disheartening message to Ugandans that the world’s wealthiest nations are not willing to share their burden. Donors must therefore strengthen their involvement in this response, so that this hard-won humanitarian success is not squandered.

Michael Boyce and Francisca Vigaud-Walsh traveled to Uganda in December 2016. RI extends a special thanks to the refugees and asylum-seekers who shared their stories with us.

**Endnotes**

1. Apart from the South Sudanese refugees, Uganda hosts roughly 400,000 refugees from other nations – some of them present for more than 20 years. They include refugees from Burundi, the Democratic Republic of Congo, Eritrea, Rwanda, Somalia, and Sudan. While Uganda’s urban refugee population is mixed, the refugee settlements RI visited housed only South Sudanese refugees.

2. Pending a UNHCR-OPM confirmation exercise currently underway.


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12. The International Refugee Rights Initiative reported in 2015 that, “Article 30 of Uganda’s Refugees Act 2006 states that ‘a recognised refugee is entitled to freedom of movement’ but it then goes on to say that this will be ‘subject to reasonable restrictions’. In practice this means that refugees are free to move outside the camp but need official permission if they are going some significant distance away, for instance, to the next town.” See David Kigozi, “Congolese Refugees and Freedom of Movement in the Kampala Urban Space,” International Refugee Rights Initiative, April 16, 2015, http://rightsinexile.tumblr.com/post/117881725422/congolese-refugees-and-freedom-of-movement


15. Several NGOs noted that field-level working groups were better coordinated around concerted action. In some cases, such as for GBV and WASH, field-level working groups were operational well before any coordination or information-sharing at the capital-level.


17. This is a joint initiative of the U.S. State Department’s Bureau for Population, Refugees and Migration, and the U.S. Agency for International Development’s Office of Foreign Disaster Assistance.


22. For additional details, see Ibid. P. 19-26.


25. Ibid. See paragraph 24.