



# Building Communities of Practice for Urban Refugees

## **Africa Regional Workshop Report**

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## **FINDINGS AND HIGHLIGHTS**

### **The *Building Communities of Practice for Urban Refugees* Workshop in Pretoria, South Africa**

This paper is the second in a series of five reports on workshops designed to broadcast and replicate good practices for urban refugee programmes. The workshops are a product of the *Building Communities of Practice for Urban Refugees* project funded by the U.S. Department of State's Bureau for Population, Refugees, and Migration (BPRM). There will be a workshop in each of the five geographic regions. In addition to the workshops there will be a roundtable event in a particular city in each region.

The Building Communities of Practice for Urban Refugees Workshop hosted 37 participants (22 UNHCR staff, 15 partners) from 10 countries. There were 11 panels on urban refugee related topics including livelihoods, education, health, legal assistance, safe houses, social assistance, mapping and sharing data, outreach methods, outreach centres and outreach strategies. Each of these panels consisted of presentations of good practice activities followed by a questions and answers session from the plenary and then the grounding of the discussion by a subject matter expert.

Additionally, there was a Host Panel that included the keynote speaker, the Regional Representative for Southern Africa, as well as a global trends presentation from the Head of UNHCR's Policy Development and Evaluation Service (PDES) and a review of the Bureau for Population, Refugees and Migration (BPRM)'s activities in the region presented by the Pretoria based U.S. Embassy official. The Host Panel was followed by a Policy Panel that reviewed the three current UNHCR policies that are most relevant to the theme of the workshop: the "Urban Refugee Policy", the "Community Based Protection Policy", and the "Alternatives to Camps Policy."

Throughout the workshop, special presentations were made by local organizations, including the Government of South Africa's Social Security Association (SASSA), the Maharishi Institute and the National Association of Child Care Workers (NACCW), who presented on their "Isibindi Model." These local presentations illustrated the wide variety of potential partnerships that exist in urban communities.

The **overall findings from the workshop's good practice presentations** centre on three principles: conducting frequent assessments, proactive partnerships that enable refugees to mainstream into national systems, and expanding upon the financial and social capital that exists within refugee communities. Presenters on the majority of the panels described how the assessments they conducted, often in partnership with other organizations, informed their programming. Panellists spoke frankly about how they were surprised by the information they acquired from these assessments and cases where they adapted their programming to incorporate the new information. Assessments that mapped host community services and the actual access to these services by refugees were promoted. The frequency and rigor of assessment methods were also emphasized by the panellists as well as the

importance of triangulating assessment data with other datasets, e.g. data from NGOs, other UN organizations, and government statistics.

Panellists presented examples on how they were able to include refugees into national programmes for health care and health insurance, education and social security. All these examples were the result of inter-agency advocacy campaigns. In some instances, UNHCR directly or indirectly provides financial support to the national system, e.g. health care. In all cases though, refugee participants in the programmes are called upon to be accountable toward and contribute to the system at the same level as host country nationals.

Successful programmes presented in the livelihoods panels were based on refugee communities accessing financial capital generated from within their own communities or through online sources. Again, careful assessments were necessary in measuring the cohesion and capacity of the community or individuals to generate capital or use web-based funding. Mapping stakeholders and social capital in the host community needs to be done in parallel with mapping the refugee community in order to find mutual interests and how best to meet the needs of the combined community.

## **LIVELIHOODS – Access to jobs and capital**

1. *Accessing the formal sector can be done effectively through a work-study degree program and a skills profiling and job matching programme: Maharishi Institute and Church World Service (CWS) matching services.*
2. *Creating access to financial capital can be done through refugee pooled funds and web-based platforms.*
3. *UNHCR’s “Minimum Criteria for Livelihoods Programming” provide critical guidance in urban economies.*

The Maharishi Institute fills the skills gap in South Africa through an innovative approach to providing a Bachelor’s degree in Business Administration. The programme targets youth who would not normally meet the qualifications necessary for entry into a university degree programme. Maharishi prepares students for six months to a year to bridge the gap in their education and bring them up to the tertiary education level. To help students focus and acquire better habits of attention, Transcendental Meditation is a required component of the programme. Then, the first two years of their education is used to prepare them for the world of work. The next two years, the students split the day by working four hours a day and studying four hours a day. The students work with employers who are partners of Maharishi and through this work fund their own education. When the students complete their degree, they are placed with one of the employers in Maharishi’s network. The Institute provides networks that the students cannot normally access. With its business partners, and the donation of the building, the model is self-sustaining. Refugee students, with the proper Department of Home Affairs (DHA) documents, would be eligible to be accepted.

Church World Service (CWS) is preparing refugees for the workforce through a pilot programme for the intensive case management approach to job training. This programme is for both urban refugees and local community participants. The purpose is to improve the employability of refugees and conduct employer outreach. The latter purpose is consistent with UNHCR’s livelihoods guidance that requires a market survey before launching a livelihoods programme. The programme is based on a CWS study in three countries that found that despite sophisticated skill sets, refugees often cannot access the formal economy and instead get relegated to the informal economy. Further studies state that refugees in the formal economy have more stable livelihoods. The programme matches refugees with employers. CWS develops the “supply side” by coaching individuals for employment interviews, acquiring documentation and other steps necessary for recruitment. CWS also facilitates access to medical care, childcare, or other community services that a full-time employee would need. Concurrently, CWS expands the “demand side” by mapping local businesses and the skills they require as well as their expectations for employees’ performance. CWS emphasizes to the employers that they have identified a pool of employment-ready individuals, both refugees and local community participants, who are legally authorized to work, and who have participated in employment readiness training tailored to the local workplace norms.

In another programme that teaches business skills and provides refugees with startup capital, the International Rescue Committee (IRC) created the EA\$E (Economic And Social Empowerment) programme with Congolese urban refugees in Bujumbura. The EA\$E methodology includes:

- Support in creating Village Savings and Loans Associations (VSLA) (members are self-selected and in Bujumbura always included host community members).
- Business Skills Training for VSLA representatives and continuous mentoring from the IRC team during the first cycle.
- Group Couple Discussions Series in order to reduce risks of domestic violence that frequently occurs when women supercede their husbands' income and become more financially autonomous.

Neither UNHCR nor IRC is putting money into the loan system. They are only providing the training and tools (safe boxes, ledgers). The women in the VSLA are self-selected. They serve as mentors to the next cohort of savers, thanks to positive mentorship during the first period. The EA\$E programme answers a dire need for savings and loans from the refugee population. It creates solidarity amongst women and vulnerable urban refugees who are feeling isolated and sometimes abandoned. The community generated capital to start the first batch of loans and underwent sensitization regarding domestic violence and cultural issues in lending, e.g. Islamic usury laws are important pre-requisites for the success of this programme.

Similarly, since refugees are not able to open bank accounts in Tanzania, the Tanganyika Christian Refugee Service (TCRS) has been helping refugees manage their own VICOBA's (Village Community Banks). Refugees buy shares, for 1,000 Tanzanian shillings each, for the startup capital. These pooled funds are put in one basket for lending. The funds are augmented by various fees collected from members for being late or missing meetings or for other administrative issues. Money is set aside for insurance, social services, etc. The funds are entrusted to one shareholder and two key keepers. As a collective they agree who loans should be made out to. Upon granting the loan, the members themselves monitor the use and repayment of the funds.

UNHCR Kenya and RefugePoint are working to make financial capital more accessible to refugees by connecting them to the lending platform, KivaZip. KivaZip is a pilot programme of Kiva.org, a web-based micro-lending institution started in 2005. While Kiva.org operates through field partners to disburse and collect loans, meaning that no direct legal relationship between lender and borrower exists, KivaZip connects lenders and borrowers directly via an online platform. In cooperation with UNHCR and its partner RefugePoint, KivaZip has facilitated 0% interest loans to refugees in Nairobi with payment schedules that are spread over months, allowing even weekly payments, making access to financial capital more affordable and manageable to refugees. A refugee has the opportunity to obtain larger loans with a good repayment record.



RefugePoint acts as a trustee and selects refugees to participate in microfinance activities with KivaZip. As a trustee, RefugePoint does not bear financial responsibilities but uses its name to promote the stories of borrowers and connect them with lenders. The need for financial resources to sustain livelihood activities for urban refugees is significant beyond what agencies can provide. Not all refugees however are fit for the KivaZip programme. RefugePoint goes through a selection process that ensures that a refugee has the capacity to repay a loan before recommending him or her to KivaZip. All recipients, prior to receiving a loan, first receive a cash grant, to help smooth consumption, as well as close scrutiny of their proposed business plan. Given that many refugees are not internet literate, RefugePoint has invested in assisting them to complete the application form which is done online. Both the disbursement and repayment of loans are done via m-pesa which refugees are already familiar with. The close monitoring of loan recipients by RefugePoint has also ensured consistent repayment rates.<sup>1</sup>

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<sup>1</sup> As of December 2014, 64 loans have been made to urban refugees in Kenya through Kiva Zip.



## **EDUCATION – Increasing options through partnerships**

- 1. Mainstreaming refugees into national education systems through joint negotiations expands educational opportunities.*
- 2. Fifty percent of all refugees are under the age of 18 and a broad number of options need to be explored to accommodate the “youth bulge.”*

In 2014, UNHCR entered into formalized partnerships under a Memorandum of Understanding with three national universities and Windle Trust Kenya (WTK). All parties agree that broader access to higher education is desirable for refugee populations. The universities agree to support enrolment and avail university services to refugee students at par with Kenyan students. The universities also agreed to waive the extra fees paid by international students for refugee students including higher insurance costs. Meanwhile, UNHCR provides documentation and Albert Einstein German Academic Refugee Initiative (DAFI) scholarships. UNHCR ensured that if a student drops out, a new one will be immediately accepted so that the DAFI scholarship funds are not lost. WTK oversees the registration, tuition payments and other administrative processes for individual students. WTK also provides subsistence for related costs such as medical insurance, books, travel and academic projects. The three organizations collaborate on fundraising.

To promote refugee education integration into the national system, the Ethiopia operation has been actively working with partners, as per the UNHCR Global Education Strategy. Previously all refugee children in Ethiopia attended private schools. By the end of 2010 this changed due to an agreement with the Government of Ethiopia that stipulated that refugee children would be granted access to national schools on par with the host community. Preschool, primary and secondary education is provided for all urban refugee children. While UNHCR is phasing out its assistance for private school enrolment, families who reside far away from a government school may be supported to attend private schools that are close to their residence. By 2017, all children starting school will be within the government system unless they fit the criteria for private education or can afford to attend private schools by paying for it themselves.

The Government of Ethiopia created and administered placement exams for children who did not have documentation that verified their academic levels. Assistance funds were increased to cover associated costs for government schools – books, uniforms, shoes, special fees – and to ensure the refugee children’s access was on par with the Ethiopian students. Despite these supports, there was resistance amongst the refugee parents who wanted their children to attend English and French speaking schools. An intensive consultation process ensued with the refugee community to convince them that mainstreaming into the national education system was the best option for the long run.



## **HEALTH – Using and supporting systems**

- 1. Mainstreaming refugees into national health insurance funds and health care systems reduces vulnerability.*
- 2. In turn, UNHCR and partners need to support the national health systems.*
- 3. UNHCR needs to continue to monitor and evaluate health care options for refugees to ensure they are effective.*

In 2014, the Nairobi Office initiated enrolment of vulnerable refugees to access the National Health Insurance Fund (NHIF). The Fund will significantly allow refugees to access national health services and have part of their medical fees covered by the Fund. The annual subscription cost to the fund is 12USD. The first refugees enrolled in the NHIF were the DAFI scholars in Kenya since medical insurance is a prerequisite to university attendance. By using the NHIF for its 200 current students, the DAFI programme in Kenya saved 19,000USD and was able to support 37 more students for university education. Although this initiative has significantly reduced the health burden for UNHCR and made it possible for refugees to access health facilities, it should be noted that UNHCR continues to underwrite the 12USD subscriptions. Nevertheless, the enrollment proves that national services that are presumed to only be available to the country's citizens can be accessed by refugees.

UNHCR Ethiopia also works with its partners (the Administration for Refugee and Returnee Affairs (ARRA) and the Development and Inter Church Aid Commission) DICAC, plus the International Organization for Migration (IOM) for refugee status determination (RSD)) to ensure that all refugees are able to fulfill their rights in accessing primary health care and essential life-saving secondary and tertiary health services through the national health system. UNHCR and ARRA advocate with authorities to continue making health services available at similar or less costs to that of nationals or subsidized where necessary. In turn, UNHCR supports and facilitates integration into and the strengthening of the public health system. This may include direct funding or indirect support via partners. UNHCR, ARRA, the Ministry of Health and partners will assess, monitor, and evaluate the health, nutritional, educational and economic status of refugees, ensuring needs are met in line with accepted standards and that quality services are available and accessible. Since the existing government health institutions in the country demand service charges, the health partner DICAC has made contractual agreements with many government and private hospitals and clinics.

These activities necessitate close collaboration with the Government of Ethiopia on many topics: budgets, guidelines for treatment criteria, support to the national institutions in terms of training and equipment, referral mechanisms, etc. UNHCR needs to monitor the national health service providers closely to ensure the quality of service. Close collaboration with the refugee associations is equally important to listen carefully to their concerns regarding the services, introduce the referral procedures and build their trust in the government system including for the prescription of generic drugs; reportedly they all look like Panadol.



## **SHELTERS & SAFEHOUSES – Safehouses need to be sustainable**

- 1. Specialized care and after-care homes for refugees are receiving support from governments in two places yet the homes are separate from the system for host country nationals. The medical safehouses can also separate refugees from their families, which is not ideal. It would be better to regularize specialized and after-care facilities within the norms of the national systems.*
- 2. Safehouses are based on needs for immediate safety of refugees who are in imminent or continued risk of harm. However, any harm that can result from accepting an individual or family into the safehouse needs to be carefully considered. Exit strategies and safehouse boundaries need to be clearly and consistently explained.*

UNHCR supports the Government of Sudan in running a medical guesthouse that accommodates urban refugees in Khartoum as well as refugees residing in other states in Sudan. The guesthouse has 60 beds. These are exceptional cases that need treatment in a private hospital due to unavailability of treatment in the public hospital. A steering committee reviews which cases are admissible and when the patient completes his treatment, the Refugee Commissioner of Sudan (CRS) pays for a return ticket to the camp. The total number of patients treated in 2014 was about 5,200 according the Government of Sudan.<sup>2</sup>

In the city Addis Ababa, where outreach for medical personnel has been a challenge, medical partner DICAC runs a shelter to care for persons in need of specialized care on a short and longer term basis under the auspices of ARRA and UNHCR. Persons requiring post-operative support or other type of support (mental health, observation, recovery after giving birth) are provided care in the urban shelter which consists of 35 beds. The refugees contribute to this “all inclusive” service through 80% of their assistance allowance. Previously these persons were either kept at home with a health care professional visiting on a regular basis which was time consuming and costly for medical professionals to reach them or they were kept in the hospital for a longer period to recuperate, which was also costly and there was a higher risk of secondary infections, and not all the refugees had relatives who could bring them food and care for them. Clear Standard Operating Procedures on how to run the shelter including hygiene standards and close collaboration with the partner (DICAC) on referrals are essential. Refugee patients in the shelter and their families have been counseled on contagion and appropriate use of the shelter.<sup>3</sup>

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<sup>2</sup> Although this programme is run by the Government of Sudan and therefore may be more sustainable, I do not see it as a good practice. If I understand correctly, the guesthouse is for refugees only. The preferred practice would be to integrate them into health care facilities for nationals. Also, moving medical patients from other provinces seems risky.

<sup>3</sup> Again, even though this is under the auspices of ARRA which is a government body as a subset of the Ministry of Interior, the shelter for refugees is a parallel system that rings of “separate but equal.” I would prefer to see the refugee community linked into the national system for home-care which exists. The presenter of this practice assured us that UNHCR, ARRA and DICAC are working toward this paradigm.

UNHCR and its implementing partner, Action Africa Help (AAH), manage a sexual and gender based violence (SGBV) prevention campaign and a programme to support asylum seekers at the Transit Center at Makeni as well as individual SGBV survivors from the urban areas and from the two settlements. They manage a safehouse which was donated by the Government of Zambia in the transit center; it can accommodate 15 people. A panel manages the referrals and admissions into the safehouse. In addition to providing physical protection, the AAH team provides psycho-social and legal assistance to victims and their dependents including coverage of legal charges for those who agree to take their case to court. The project also helps in expanding the protection space in Zambia.

In parallel, AAH runs awareness campaigns to sensitize men and boys (the “I Love My Wife” and the “Real Man” campaigns) in collaboration with the Government of Zambia, IOM, UNHCR and other UN Agencies cooperating in *Delivering as One* programming. The AAH campaigns require extensive training of community workers, volunteers and refugee communities (persons at risk of SGBV and survivors) on SGBV awareness and the SGBV legal framework. The hurdles to the sensitization programme include cultural barriers, a tendency to settle SGBV issues through traditional systems, and limited funds. However the last hurdle was overcome through the collaborations mentioned above. AAH reports that the keys to success are: 1) active and committed community mobilization; 2) collaborations; and, 3) linking SGBV programming to other similar programmes, e.g. education programmes, women’s livelihood opportunities, in the territory.



## SOCIAL PROGRAMMING IN SOUTH AFRICA – Promoting social protection

1. *South Africa provides social assistance grants to over 12,000 refugees.*
2. *Social cohesion can be achieved through community education campaigns that are carefully managed through mapping, involving stakeholders at all levels of the community and designing and adapting the programme around the particular needs of the community.*

On the basis of the constitutional rights of refugees in South Africa, the South African Social Security Agency (SASSA) has extended eligibility for all the grants they offer, with the exception of the war veterans grant, to qualifying refugees who have been documented by the Department of Home Affairs (DHA), including the fingerprints and identity card or a valid Section 24 (3) permit. As long as they maintain their status, refugees can retain grants unless they fail the means test. However, it is acknowledged that delays in acquiring the refugee status documents from DHA is problematic in providing the grants and when their status expires so shall their grants. Other difficulties in providing grants include: names on birth certificates that do not match the parents' names, income verification, language difficulties in SASSA offices and misguided expectations.

The character of the provincial administration has some bearing on accessing the grants. Of the 12,068 refugees in South Africa receiving SASSA grants, half are in the Western Cape Province by and large because the SASSA team there has good relations with the refugee centre and legal service providers. On the other hand, Limpopo Province only has 35 refugees enrolled. Most of the grants received by refugees are for childcare followed by the old age and disability grants. Sixteen million grants are disbursed to South African citizens.

The SASSA presenter said that he would like to see SASSA and UNHCR work together on: tackling fraud and insecurity; establishing partnerships between SASSA provincial offices and local partners; conducting outreach; and, encouraging refugee participation in policy development. SASSA wants to see more of the “horizontal and vertical integration between refugees and partners.”

In a different effort to expand the protection space for refugees, and specifically in response to the xenophobic attacks in 2008, the Agency for Refugee Education, Skills Training and Advocacy (ARESTA) designed a programme to address the xenophobic tendencies and biases toward the many refugees living in the Cape Flats Townships of Cape Town. ARESTA hypothesized that the root of the violence was general community member ignorance regarding refugees and asylum seekers and too often conflicts with them manifested in violence. Thus, ARESTA decided to attempt to “build social cohesion through the implementation of a community education campaign to increase tolerance for diversity and to promote peaceful co-existence between refugees and asylum seekers and their South African host community.”

ARESTA used the following methods to increase social cohesion and peace in the Cape Flats Townships: Community Profiling and Mapping Exercises; Workshops of Tolerance; Social Cohesion and Peace Building Trainings; Trainings of Peace Monitor Trainers; stakeholder lobbying; and, cultural and sporting events as well as peace marches that included refugees and host community youth.

After mapping and consultations, ARESTA decided to target adolescent and youth students (grades 5 through 12), community leaders, refugees and asylum seekers in the Cape Flats Township for their community education programmes.<sup>4</sup> Addressing the mindset of community members toward refugees and asylum seekers was a challenge. Equally challenging was opening the eyes of local leadership to the existence of xenophobia in their communities. ARESTA addressed the challenges of self-reliance, integration, and social cohesion within the refugee and asylum seeking community by referring them to ARESTA services.

ARESTA attributes the success of the community education campaigns on their initial mapping exercise which informed them on how to programme for the individual communities within the Cape Flats. Of equal importance was involving stakeholders at all levels: the host and refugee and asylum seeking community, government entities including education system officials and NGOs.

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<sup>4</sup> Although their mapping revealed that the lack of access to basic services was an issue with the refugee community, they focused on community education.

## **MAPPING AND SHARING DATA – Good data plus good communications equals good decisions**

1. *Thorough, multi-sector assessments are critical to establishing a strategy for urban refugees and aligning partnerships.*
2. *Streamlined processes negotiated with the government improve protection.*
3. *Access to data and integrity of data suffer when the ProGres database is handed over.*

UNHCR operations in Sudan have traditionally been camp based because although the Government of Sudan is a signatory to the 1951 Convention, it maintains a reservation regarding freedom of movement. In addition, urban refugees in Khartoum have long been de-prioritized despite their obvious existence in the city. Funding constraints and the absence of reliable demographic data to use for a baseline contributed to the lack of engagement. However, in 2013 an opening arose to programme for refugees in Khartoum and the decision to work together with the Government of Sudan's Committee on Refugees (COR) on a mapping or integrated population assessment in order to understand the gaps and coping mechanisms and needs of the refugee and asylum seeking populations in the city. By **better understanding the profile and assets** of this community, UNHCR Sudan hoped to have a **“robust foundation for urban decision making and programming, identify priorities and responses, and develop the multi-year Urban Refugee Strategy.”**

UNHCR Khartoum's "Urban Refugee Population Assessment" is a household survey that is a "multi-sector, mixed-method assessment (integrating different qualitative and quantitative assessment components) across all the main sectors such as legal and physical protection, livelihoods, education, health, etc." It was designed to tie to the Results Based Framework. The assessment tool was complemented by focus group discussions. It was accompanied by service mapping as well as capacity assessments of these service providers, geo-mapping of densely populated areas and a labor market assessment. The process took approximately one year to complete including the time for preparations, assessments and reporting writing. Delays due to permissions occurred. The gaps left by local assessment teams and the inability to afford modern survey tools such as tablets (iPads) that link directly to a central database were other challenges. Nevertheless, ownership for the results was enhanced through this process heavy exercise. It should be noted that more than 1,000 refugees participated in the quantitative and qualitative parts, proportionally across countries of origin, gender and age. Another key component of the assessment exercise is the "knowledge transfer" including the "report back" to the community assessed, visualization of data in the form of infographics, and multi-stakeholder workshops.<sup>5</sup>

Not unlike Sudan, the Government of Tanzania maintains an encampment policy and asylum fatigue from receiving hundreds of thousands of refugees

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<sup>5</sup> In this case the UNHCR office in Sudan built their own tool instead of adapting the tools available through UNHCR HQ.

from neighboring countries over the past two decades. Nonetheless, UNHCR and its partners were able to advocate for an opening in the asylum space in the cities of Dar es Salaam and Kigoma. The renewed cooperation is by and large a product of improved, transparent, streamlined systems for reception, prescreening, registration and referrals for assistance that support the refugee status determination (RSD) processes managed by the Ministry of Home Affairs (MHA). Prior to this streamlining effort, UNHCR and its partners interchangeably documented and referred refugees back and forth to the MHA much to the frustration of the Ministry. There was a halt to RSD from 2009 to April 2013 when RSD resumed. In 2014, UNHCR and the Government met five times in the calendar year. The current goal is to meet at least quarterly so that status is determined in 90 days. As part of this collaboration, UNHCR works with the government in trying to develop standard operating procedures and are now discussing to agree on certain technical issues to go into the basic RSD process.

In addition to streamlining reception, registration and referrals, UNHCR has become more forthcoming in its communications with the Government and shares information on the presence of refugee and asylum seekers who seek out UNHCR before approaching the MHA. There have also been enhanced capacity building and awareness raising trainings with government officials in various ministries and departments so more law enforcement agents are sensitized on the rights of refugees and asylum seekers. These efforts have led to the protection of refugees from possible detention and *refoulement*. It is also worth noting that the Government of Tanzania is now considering the establishment of their own urban refugee policy.

Data sharing and mapping is not always so straightforward and easily manageable. For instance, the Government of Mozambique exclusively controls all the registration, documentation and refugee status determination processes in Nampula, where a refugee camp is situated, 26 hours outside of Maputo, the capital city. This is the only site for registration. Unfortunately, the Government entity that runs the database, The National Institute for Assistance to Refugees (INAR) within the Ministry of Foreign Affairs, has not had a database manager on staff for two years and the quality and frequency of data-sharing has been suboptimal, resulting in gaps and data integrity issues. This begs the questions of whether ProGres is really the appropriate database format for governments and of how else UNHCR can acquire accurate data independently of the official database.

## **LEGAL ASSISTANCE – Legal assistance is necessary for more than documentation**

- 1. Additional legal assistance can help refugees, asylum seekers and persons with protection concerns in mixed migration flows to expedite integration.*
- 2. Empowering refugees to know their rights also enhances integration.*

CEMIRDE is a Catholic faith-based organization providing free legal support and assistance to migrants and refugees and asylum-seekers in Maputo. This service complements the existing system of free legal assistance the Government of Mozambique which is available to foreigners yet has serious constraints on its capacity. CEMIRDE operates within a tripartite Memorandum of Understanding with the Government of Mozambique and UNHCR.

CEMIRDE is providing legal counseling, assistance and follow-up to all refugees and asylum seekers for both judicial and administrative processes, e.g. difficulties faced at the time of opening a business or obtaining birth certificates. The objective is two-fold: enhancing the protection space for persons of concern in Maputo and supporting efforts for further local integration. For instance, CEMIRDE will accompany refugees for their application for nationality. CEMIRDE is also assisting UNHCR in its Mixed Migration response, ensuring identification of persons of concern or individuals in need of international protection within mixed migratory flows (for instance, by conducting detention screening).

Concerns for the project include funding concerns, knowledge transfer to CEMIRDE, and consistent coordination amongst all three parties – CEMIRDE, UNHCR and INAR. Additionally, detention monitoring will pose problems of coordination between CEMIRDE, INAR and the Ministry of Interior branch responsible for migration issues. The absence of identification and outreach mechanisms in Maputo city also prevent better profiling and targeting of users of the legal service. And finally, CEMIRDE only has one lawyer to cover the refugees and asylum seekers as well as migrants.

Asylum Access in Tanzania conducts “Know Your Rights Trainings” of three to five sessions for refugees and asylum seekers in Dar es Salaam, to raise their awareness about laws relevant to them and their rights. Both documented and undocumented refugees and asylum seekers over the age of 18 are welcome to participate. Some of the topics covered are: 1) who is a refugee; 2) RSD process and the institutional framework; 3) rights and obligations; 4) durable solutions; 5) realities of being refugees in Tanzania; and 6) types of residence permits, land laws, naturalization processes and other legal and administrative matters that are relevant to the population. Refugees also come to Asylum Access with contractual issues. The programme helps refugees by managing their expectations and taking proactive measures. The refugees and asylum seekers have even formed a group that wants to take positive action toward policy advocacy. Their primary goal is to assist in any way possible so that the Government of Tanzania passes the urban refugee policy. To this end, they want to prove to the

Government that they are self-reliant and will not be an encumbrance on the nation.

As many of the training participants are undocumented, it can put them in danger to bring them to the Asylum Access office all at once, therefore they are invited in smaller groups. Asylum Access pays the lawyers and trainers fees as well as a stipend for the transportation costs incurred by participants.

## **CHILD WELFARE IN SOUTH AFRICA – THE ISIBINDI MODEL – Nationally sponsored child protection**

- 1. National child welfare models and networks are well-suited to care for refugee and asylum seeking children.*
- 2. Birth registration and refugee status documentation can be a hindrance in incorporating these children in the national system.*
- 3. The Isibindi Model could potentially be copied and franchised to refugee communities in order to protect their children and provide training and employment for refugee child care workers.*

The Isibindi Model<sup>6</sup> is a child welfare model that was developed by the National Association of Child Care Workers (NACCW) in South Africa during the AIDS pandemic. NACCW recruited unemployed people, particularly women, and trained them. They worked with children and families in their communities throughout South Africa. They do home visits but apply a childcare methodology. Since then they've developed models around the programme.

The Isibindi Model was designed as a non-profit, franchise, social service model with non-negotiable principles, e.g. the providers have to be systematically trained, from the local community, etc. The Isibindi Model contributes to community development, by not only improving the skills of but also accrediting child care workers, and it also promotes women's empowerment through their mainly female workforce. Above all, the model maintains a child focus, with child care workers working children's hours: evenings, weekends and during school holidays. This is when children are the most vulnerable. They also work in gang-infested areas, especially on weekend nights. This commitment is necessary to preserve the Isibindi Model as a prevention programme with a child care focus. The objective is to keep children in their communities and stay out of residential care.

Ten years after the Isibindi Model was developed, the government recognized it should be a flagship programme supported by the Government of South Africa and subsequently requested that the Isibindi programme be scaled up. The Minister of Social Development requested 400 Isibindi programmes and 10,000 Isibindi child care workers in five years. At present, there are approximately 350 projects in every province in South Africa. Challenges for including refugee and asylum seeking children in the Isibindi Model include securing birth and identity documents, access to food, services and social security and addressing children with disabilities.

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<sup>6</sup> *Isibindi* is the Zulu word meaning courage.





### **OUTREACH CENTRES – Are they appropriate for urban areas?**

- 1. Outreach centres need to be accompanied by systematic assessments in the city.*
- 2. Outreach centres provide community empowerment opportunities in camps, yet in urban areas refugee community centres should be aligned with pre-existing community centres.*
- 3. Funding constraints interfere with the sustainability of community centres.*

Action Africa Help International (AAH) and UNHCR run four different outreach centres in areas of Lusaka that are densely populated by refugees. The centres are run by volunteers (Zambians and refugees) and function as first identification points of vulnerable cases through home and neighbourhood visits and refer cases to AAH and UNHCR. Vulnerable cases include families in need of financial support for the education of their children, unaccompanied and separated minors, refugees with high protection risks, SGBV survivors, individuals and families in need of financial assistance, medical cases, elderly, persons with disabilities, etc. The outreach centres, being easily accessible to refugees, act as a first information point and allow for referral to services and programs available in the territory. The project also links refugees to other organizations, e.g. the Great Lakes Refugee Women's Organization and the Refugee Council.

Although the outreach centres provide the base for a smooth flow of relevant information and communications and monitoring, constant capacity building and supervision of volunteers requires a heavy commitment to ensure that outreach centres work according to plan and available resources are maximized. Coordination amongst organizations is necessary to ensure transparency and accountability. Standard Operating Procedures for activities, services, and assistance provision need to be widely distributed and provide clear criteria. Most importantly, the outreach centres need to be placed in strategic areas to ensure refugees have easy access.

As a way to welcome and guide refugees residing in Addis Ababa, the Jesuit Refugee Service (JRS) established the Refugee Community Centre (RCC). Since 1996, JRS partners with UNHCR and ARRA to provide counseling services as well as recreational, educational, childcare, and sports activities at the RCC. The RCC provides refugees with access to a wide range of free services including language and computer classes, a daycare centre, a library, music, professional and life skills training, counseling, an internet café, as well as recreational activities. The Centre also hosts a cafeteria and a beauty salon run by refugees allowing some to earn extra income to complement their monthly subsistence allowance. There are now more than 80 students in the computer training programme and 120 students in the Amharic language classes. The adult education department also prepares workshops for refugees from different nationalities. In these workshops, topics like peace and conflict resolution, positive attitude building and normative ethics, HIV and sexual and gender based violence (SGBV), as well as youth and social adaptability are addressed.

Financial constraints, especially rental costs, impact the diversity of programs that the RCC can provide. Also, only one community center cannot address the needs of a community that is as dispersed as urban refugee communities usually are.

UNHCR funds a similar initiative in Bujumbura and helps to administer the CUCOR<sup>7</sup> outreach centre as part of a larger steering committee. It not only provides counseling but also reception facilities and a library. Keeping the centre staffed and financially viable are the major challenges for the CUCOR centre.

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<sup>7</sup> CUCOR is the acronym for the French name of the outreach centre, *le Centre Urbain de Conseil et Orientation des Réfugiés*.

## **OUTREACH METHODS – More often, more neighbourhoods and more data sharing**

- 1. Outreach needs to be assessed more than once a year to test assumptions even when evidence has been carefully collected.*
- 2. Interagency outreach reinforces partnerships and provides congruence and consistency in messaging.*
- 3. Peri-urban areas need to be included in outreach activities.*
- 4. Refugee outreach workers can go deeper into the communities and promote refugee agency.*
- 5. Monitoring and measuring impact needs to be developed for these models.*

When UNHCR Sudan conducted a community meeting to brief the community on the results of its integrated population assessment, they presented the priorities in the following order: livelihoods, protection, housing, and education. The consulted community corrected these findings, saying that protection is their first priority especially in regard to having documents that satisfy the Government's requirement for documentation (a "foreign number" on the ID card). As a result, UNHCR realigned their approach to the community, the priority now being protection, and learned the following:

- It takes time for community networks to become fully operational;
- The initial period of trust building can be challenging and requires facilitation, skills and patience;
- Networks should progressively evolve and diversify;
- It is an important shift from yearly, one-time engagement during participatory assessments and through beneficiary-oriented services to regular and community solutions oriented engagement;
- Careful recruitment of community network and facilitation skills is required;
- Sustainable reference person, ensuring confidentiality is necessary; and,
- Organizations provide the framework in terms of approach, structure, facilitation and tools, while content and form should be determined by community.

As part of its outreach efforts, UNHCR Nairobi improved access to UNHCR and its partners by coordinating schedules and services in order to minimize the cost and time it takes refugees and asylum seekers to reach them. UNHCR and partners work together in refugee neighbourhoods as a multi-functional team that enables them to address refugees' issues comprehensively. Messages given out by UNHCR and partners are now consistent and refugees understand that there is no need to go around to the different service providers in the hope of getting the most favourable answer or treatment.

Since 2012, HIAS Refugee Trust of Kenya has implemented a community based urban programme addressing SGBV, child protection and persons with special needs in Nairobi and its outskirts. Services are provided at three satellite offices located in the three main urban refugee-hosting neighborhoods in Nairobi and through 'outreach days' to other areas including

peri-urban areas where many refugees reside. The approach was established to increase access to services for refugees and asylum seekers and to strengthen community involvement and participation, to improve social cohesion and to establish communities of support through community driven approaches.

HIAS's programme has been successful because it engages community workers on an ongoing basis, and they are thus consistently involved in planning and reporting exercises and are a reliable source for advising on community coping strategies as well as taboos, cultural, religious or social factors that may affect programming. On occasion, the question whether the community workers are staff or community members in the eyes of the community has come to bear on their role. It has also raised questions about their employment status (employees versus volunteers with incentive payments) in regard to tax and labour laws and the official encampment policy. In any case the HIAS community workers have been successful in identifying vulnerable community members, promoting community participation in humanitarian programming, easing the access to services and enabling refugee agency within their community.

## **OUTREACH STRATEGIES – Assessments and targeting need to be carefully done**

- 1. Outreach strategies rely on careful assessments. The information from the assessments should be shared and cross-checked with that of partners.*
- 2. Regular meetings, monitoring exercises and consistent training and reinforcement of key messages need to be built into outreach programmes.*
- 3. Addressing individual vulnerability should be avoided unless it is a bridge to including households in a government system.*

One of the workshop participants, who had worked in a noteworthy outreach programme for Iraqi refugees in Damascus, Syria, was asked to present on the outreach methodology used in that operation. The outreach programme in Syria was designed to mobilize women to help identify vulnerable persons at the community level and provide a more effective response to refugees' needs. When the programme was established in 2007, it started with 8 outreach volunteers, later expanding to 45 volunteers in 2009. It provided specialized support for education, health, disabled refugees, elder care, unaccompanied children, youth, as well as psychosocial and mental health programming that included gender based violence responses. The programme eventually engaged over 200 volunteers who were active in over 30 neighborhoods in Damascus and then Aleppo.

Continuous oversight and monitoring through weekly meetings, telephone and social media communications as well as information management cross-checking contributed to the success of the programme and the integrity of services. The volunteers were meticulously screened to fit the needed profile and the Code of Conduct was both shared with them and was the basis of many reminders. Moreover, the volunteers' duties and responsibilities were clearly stated: identifying, communicating, assisting with housing, health access, and home visits.

In Kigali, based on the findings of a 2013 participatory assessment and on the fact that urban refugees in the city do not receive formal material assistance, UNHCR began targeting vulnerable households who face concerns related to housing, food provision and school fees through a new pilot programme. The same assessment revealed vulnerability for female headed households, the elderly and the chronically ill. As target groups are dispersed throughout Kigali, UNHCR works closely with refugee communities and implementing partners to collect initial or complementary information on refugees' living conditions. They then undertake protection assessments and discuss with the heads of households how they can be best assisted.

From September to December 2014, UNHCR provided financial assistance to 17 households for kick-start equipment, tools and production units allowing them to engage in self-help activities. A total of 96 individuals were assisted and an amount of 3,578 USD was disbursed. Rather than making assumptions about what refugees need in terms of assistance, UNHCR directly consults refugees and cross-checks the information they provide

through implementing partners, other members of the refugee community and random home visits. The pilot programme, as it stands, is not sustainable but were the Office to work with the government, there could be a possibility of partnership and eventual handover of the programme.

**ANNEX 1**  
**The Building Communities of Practice for Urban Refugees Workshop in Pretoria, South Africa Agenda**

Wednesday 11 February	
<b>09:00-09:30</b>	<b>Welcome, Agenda &amp; Practical Info</b> <i>Co-Facilitators</i>
<b>09:30-10:00</b>	<b>Participant Introductions</b>
<b>10:00-11:35</b>	<b><u>Keynote Speakers</u></b>  1. Clementine Awu Nkweta Salami, Regional Representative, UNHCR South Africa 2. Ewen Macleod, Head of Policy Development and Evaluation Service, UNHCR Geneva 3. Chad Wesen, Political Officer for Human Rights, U.S. Embassy Pretoria (BPRM)
<b>11:15-11:30</b>	<i>COFFEE BREAK</i>
<b>11:30-12:45</b>	<b><u>Policy Panel</u></b>  1. Annika Sjoberg, Executive Assistant, DPSM UNHCR Geneva - Alternatives to Camps 2. MaryBeth Morand, Senior Policy & Evaluation Officer, PDES UNHCR Geneva - Urban Refugee Policy 3. Preeta Law, Senior Protection Coordinator, DIP UNHCR Geneva - Community Based Protection
<b>13:00-14:00</b>	<i>LUNCH</i>
<b>14:00-14:45</b>	<b><u>South African Approaches to Livelihoods</u></b>  Sello Kgosimore and Gift Serero, Maharishi Institute - Livelihoods Training
<b>14:45-15:45</b>	<b><u>Livelihoods - Panel 1</u></b>  1. Erick Rutaihwa (CWS, TANZANIA) - Evidence-Based Livelihoods Programming 2. Sarah Larson Moldenhauer (IRC, BURUNDI) - EAŞE
<b>15:45-16:15</b>	<i>COFFEE BREAK</i>
<b>16:15-16:45</b>	<b><u>Livelihoods - Panel 2</u></b>  1. Jenny Bistoyong (UNHCR KENYA) - Lending Through KivaZip 2. Emmanuel Shangweli (TCRS, TANZANIA) - Village Community Banks (VICOBA)
<b>16:45-17:15</b>	<b><u>Livelihoods Strategies &amp; Grounding</u></b>  Laura Buffoni, Regional Local Integration Livelihood Officer (Regional Representation for West Africa, UNHCR)
<b>17:15-17:30</b>	<b>Learning Summary</b> <b>Preparation for Next Day</b>

<b>Thursday 12 February</b>	
<b>9:00- 9:20</b>	<b>Day 2 Network Exercise &amp; Facilitator's Round-Up</b>
<b>9:20- 10:20</b>	<p style="text-align: center;"><b><u>Education</u></b></p> <ol style="list-style-type: none"> <li>1. Joyce Munyao (UNHCR KENYA) - Partnerships with National Universities</li> <li>2. Cathrine Evans (UNHCR ETHIOPIA) - Mainstreaming into National Schools</li> </ol>
<b>10:20- 10:40</b>	<i>COFFEE BREAK</i>
<b>10:40- 11:40</b>	<p style="text-align: center;"><b><u>Health</u></b></p> <ol style="list-style-type: none"> <li>1. Joyce Munyao (UNHCR KENYA) - National Health Insurance Fund (NHIF)</li> <li>2. Menbere Dawit (UNHCR ETHIOPIA) - Integration into National Health Care System</li> </ol>
<b>11:40- 12:30</b>	<p style="text-align: center;"><b><u>Safehouses</u></b></p> <ol style="list-style-type: none"> <li>1. Adil Dafalla (COR, SUDAN) - Guesthouses for Medical Patients</li> <li>2. Cathrine Evans (UNHCR ETHIOPIA) - Medical Shelter for Follow-Up Care</li> <li>3. Marta Bellini and Charles Sichali (UNHCR ZAMBIA) - Safe Houses, Awareness Raising and Sensitization for SGBV</li> </ol>
<b>12:30- 13:30</b>	<i>LUNCH</i>
<b>13:30- 15:00</b>	<p style="text-align: center;"><b><u>South African Social Programming</u></b></p> <ol style="list-style-type: none"> <li>1. Mncedisi (Mr. Big) Mbatha (ARESTA) - Social Cohesion Programme</li> <li>2. John Tsalamandris (SASSA) - Social Security Fund for Refugees</li> </ol>
<b>15:00- 15:30</b>	<i>COFFEE BREAK</i>
<b>15:30- 16:30</b>	<p style="text-align: center;"><b><u>Mapping &amp; Sharing Data</u></b></p> <ol style="list-style-type: none"> <li>1. Chiara Cardoletti-Carrol (UNHCR SUDAN) - Integrated Population Assessment</li> <li>2. Rocio de Miguel (UNHCR MOZAMBIQUE) - Sharing ProGres Database with Governments</li> <li>3. Mwihaki Kinyanjui (UNHCR TANZANIA) - Registration and Referral System</li> </ol>
<b>16:30- 16:45</b>	<b>Learning Summary Preparation for Next Day</b>



Friday 13 February	
<b>9:00- 9:30</b>	<b>Day 3 Network Exercise &amp; Facilitator's Round-Up</b>
<b>9:30- 10:50</b>	<b><u>Legal Assistance</u></b>  1. Elodie Lemal (UNHCR MOZAMBIQUE) - Free Legal Assistance Programme 2. Janemary Ruhundwa (ASYLUM ACCESS, TANZANIA) - Know Your Rights Training
<b>10:50- 11:20</b>	<i>COFFEE BREAK</i>
<b>11:20- 12:00</b>	<b><u>Creating a Network for Child Protection - The Isibindi Model</u></b>  Zenuella (Zeni) Thumbadoo, Deputy Director, National Association of Child Care Workers
<b>12:00- 13:00</b>	<i>LUNCH</i>
<b>13:00- 14:00</b>	<b><u>Outreach Centres</u></b>  1. Marta Bellini and Charles Sichali (UNHCR ZAMBIA) - Four Outreach Centres + Makeni Transit Centre 2. Fanta Nifaboum (UNHCR BURUNDI) - CUCOR: Centre Urbain de Conseil et Orientation des Réfugiés 3. Endashaw Debework (JRS, ETHIOPIA) - Refugee Community Centre (RCC)
<b>14:00- 15:00</b>	<b><u>Outreach Methods</u></b>  1. Widad Mohamed Hamed (UNHCR SUDAN) - Services and Skills Mapping through Outreach 2. Anne Mwangi (HIAS, KENYA) - Multi-Functional Team and Peri-Urban Satellite Office for Outreach
<b>15:00- 15:30</b>	<i>COFFEE BREAK</i>
<b>15:30- 16:30</b>	<b><u>Outreach Strategies</u></b>  1. Zahra Mirghani (UNHCR KENYA) - Outreach Project in Syria 2. Madeleine Dendombaye Keituro (UNHCR RWANDA) - Targeted Outreach for Most Vulnerable
<b>16:30- 17:00</b>	<b>Evaluation &amp; Workshop Wrap-Up</b>



## ANNEX 2

### The *Building Communities of Practice for Urban Refugees* Workshop in Pretoria, South Africa Participant List

I. UNHCR STAFF				
	Participant Name	Title	Country	Email
1	Zahra Mirghani	Senior Regional Protection Officer (SGBV)	Kenya, RO	<a href="mailto:mirghani@unhcr.org">mirghani@unhcr.org</a>
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## II. REGIONAL PARTNERS

	Participant Name	Title	Organization	Email
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## III. PARTNERS FROM SOUTH AFRICA

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9			Department of Home Affairs (DHA), Government of South Africa	
10	John Tsalamandris	Senior Manager for Stakeholder Management and Special Projects	South African Social Security Agency (SASSA), Department of Social Development (DSD), Government of South Africa	<a href="mailto:johnntsa@sassa.gov.za">johnntsa@sassa.gov.za</a>
11	Dianne Dunkerley	Executive Manager for Grants Administration Policy Implementation and Support	South African Social Security Agency (SASSA), Department of Social Development (DSD), Government of South Africa	<a href="mailto:DianeD@sassa.gov.za">DianeD@sassa.gov.za</a>

#### IV. BPRM COORDINATORS

	Participant Name	Title	Organization	Email
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V. FACILITATORS AND COORDINATORS				
	Participant Name	Title	Organization	Email
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### **ANNEX 3**

#### **The *Building Communities of Practice for Urban Refugees* Workshop in Pretoria, South Africa Action Plans**

##### **Summary**

In an effort to promote participant engagement after the *Building Communities of Practice for Urban Refugees* Workshop for the Africa region that took place in Pretoria, South Africa from 11 to 13 February, 2015, participants were asked to develop an “Action Plan” stating at least one specific activity they plan to implement to improve urban protection and programming in his/her duty station.

The following are the submissions received from the participants, organized by country and organization, based on an Action Plan template provided (see below).

### **Urban Programming Action Plan**

**Participant Name:**

**Organization Name:**

**City:**

<b>What are you planning to do?</b>	
<b>How are you planning to do it?</b>	
<b>Who are you going to do it in partnership with?</b>	
<b>How will you monitor the activity and know if it had an impact?</b>	

## Action Plans

### **Burundi**

#### *UNHCR Bujumbura*

1. What are you planning to do?

We are planning to receive the urban refugees monthly through the central committee.

2. How are you planning to do it?

Every week we'll receive them and every two weeks we'll have a meeting together with partners, refugees and the Office.

3. Who are you going to do it in partnership with?

UNHCR Protection and Community Services.

4. How will you monitor the activity and know if it had an impact?

The progress will be discussed at our meetings exclusively with the committee, during the weekly interviews and measured using the letters sent by the refugees.



5. What are you planning to do?
  - A. Open new UNHCR reception centre for refugees.
  - B. Discuss with new partner on adding to their current activities for the host community (psycho-social counselling centre, livelihood activities, educational activities – type still to be determined, however it will be in one or two of the areas where refugees reside).
  
6. How are you planning to do it?
  - A. Discussions on-going with administrative staff and the government of moving the current centre which is not refugee friendly.
  - B. Meeting with the new partner, visit their current facilities and review the area. Information sharing with current partner JRS to be added to their community outreach programme, linkages and lessons learnt from their side which could be shared with the new partner.
  
7. Who are you going to do it in partnership with?
  - A. Not in partnership with anybody as such, however we plan to equip the new reception centre with a meeting room for the community groups, as well as with a child friendly space.
  - B. Partnership with New Life Community already implementing activities within the host community.
  
8. How will you monitor the activity and know if it had an impact?
  - A. Through discussions with the refugees and their feedback on how the new location works for them.
  - B. Through monitoring visits, number of refugees accessing the services, feedback from refugees on the services provided and through a Participatory Assessment.

#### 1. What are you planning to do?

- Continue engagement with the following government service providers to further enhance access of refugees to services:
  - Immigration Services for work permits
  - City county for business permits
  - Kenya Revenue Authority for PIN
  - Micro and small enterprise authority
- Identify opportunities for refugees in the private sector, e.g. online work opportunities, markets for refugee products. Enhance partnerships with those we have started to collaborate with, e.g. Kiva and Digital Divide Data (DDD).
- Revision of the urban strategy based on results of the recent evaluation. Emphasis on refining the M&E framework which will include developing proxy indicators.

#### 2. How are you planning to do it?

- Through bilateral discussions and multi-stakeholders forum; 3 multi-stakeholder forums and a refugee investment forum are planned.
- Identification of refugees for referrals to Kiva and DDD is ongoing. Meetings are already scheduled to ensure both parties' commitment.
- Three online job sites were identified, e.g. elance.com, guru.com, retracerebellion.com. We will try this out ourselves first then identify maybe 5 refugees to try them out, too.

#### 3. Who are you going to do it in partnership with?

Discussions and a forum with government service providers will be led by UNHCR Livelihoods and the Department of Refugee Affairs. Livelihoods working group members will be actively involved.

The Danish Refugee Council, as the implementing partner, will be leading the implementation of the online work activities.

RefugePoint and XavierProject will remain the lead in the Kiva initiative.

#### 4. How will you monitor the activity and know if it had an impact?

Access to government service will be measured by approval rate when applying for work permit, PIN and business permits, for example. Through sustained engagement, we hope to obtain these agencies' trust to enable the sharing of information. The work permit office has recently shared some information on refugee applications received and approved in the last 2 years. Requirements (whether too stringent) and time needed to obtain these will be also be looked at.

Kiva – improvement in business activities (sales, income, etc.) after loan versus how the refugee was prior to receiving a loan; number of loans taken out may indicate a refugee is doing well, allowing him to repay loan and reapply.

Online self-employment and other opportunities – number of refugees who were employed, income earned and length of employment.

#### 1. What are you planning to do?

- Mapping of urban refugees' residence location.
- Mapping of services that exist close to urban refugees' residence.
- Designation of community liaison by location on a voluntary basis.
- Train the community liaison to support community outreach.
- Integrate urban refugees in existing programs benefiting host communities.

#### 2. How are you planning to do it?

- The mapping of urban refugees' residence location will be undertaken through ProGres with collaboration of Registration staff.
- The mapping of existing services will be done through visits and consultations with implementing partners (protection, education, health) and the Urban refugee Executive Committee.
- The designation of the community liaison volunteers will be done through consultation by location, with the support of the Urban refugee Executive Committee, UNHCR Protection Staff and Protection Implementing Partner.
- Look for potential partners working with host community and establish partnership.

#### 3. Who are you going to do it in partnership with?

Protection Unit, implementing partners (education, protection, health), potential new partners and Urban Refugee Executive Committee.

#### 4. How will you monitor the activity and know if it had an impact?

A functioning network of community liaison volunteers who inform on the situation of the most vulnerable households in their locations, liaise with implementing partner and UNHCR on their community.

## **South Africa**

### ***Agency for Refugee Education, Skills Training and Advocacy (ARESTA)***

#### 1. What are you planning to do?

- Community Peace Building and Social Cohesion Workshop (CPB&SCW) for Peace Monitors.
- Workshop of Tolerance & Acceptance (WT&A) for Peace Ambassadors.

#### 2. How are you planning to do it?

- CPB&SCW: Lobby and involve Ward Councillors and the community.
- WT&A: Lobby and involve School Principals and Life Orientation teachers.

#### 3. Who are you going to do it in partnership with?

- CPB& SCW: Community, Councillors and other NGOs.
- WT&A: Principals, teachers, Representative Council of Learners and learners.
- General Stakeholder: UNHCR.

#### 4. How will you monitor the activity and know if it had an impact?

We will solicit the services of an External Evaluator.

#### 5. Where will you conduct your activities?

- Khayelitsha Sub-council 24 jurisdiction
- Ward 95; Ward 96; Ward 97 and Ward 98

### ***Jesuit Refugee Service (JRS), South Africa***

#### 1. What are you planning to do?

Introduce Maharishi Institute to our education department and organise a meeting with the aim of establishing a partnership.

#### 2. How are you planning to do it?

Writing to Maharishi and organizing a meeting.

#### 3. Who are you going to do it in partnership with?

JRS's education department.

#### 4. How will you monitor the activity and know if it had an impact?

The education team will do follow-ups with the Institute and make referrals. The minutes of the meetings and the referrals made, plus the exchanges via email, will be used to assess the progress of the partnership.

## **Sudan**

### **UNHCR Khartoum**

#### 1. What are you planning to do?

- a) To decrease the incidence of detention of persons of concern in Khartoum (adult and children).
- b) To have physical and legal space for urban refugees to do their social activities aiming to self-reliance.
- c) To ensure persons of concern's access to basic national services.

#### 2. How are you planning to do it?

- a) By strengthening registration and documentation and to advocate for providing children between 5-18 years with a separate ID card.
- b) By advocating for physical and legal space for urban refugees to do their social activities aiming to self-reliance.
- c) By having implementing partners in addition to government that cover urban services (livelihoods, education, SGBV, community based protection, disability, health and mental and psychosocial services).

#### 3. Who are you going to do it in partnership with?

- a) For registration and documentation, UNHCR has a partnership with implementing partners and the Government of Sudan's Committee on Refugees (COR).
- b) UNHCR will advocate with COR to other government authorities such as that for national security to provide space to urban refugees.
- c) UNHCR already selected implementing partners for livelihoods, education, SGBV, disability, health and mental and psychosocial services from national and international NGOs.

#### 4. How will you monitor the activity and know if it had an impact?

- a) For advocacy activities, UNHCR will lead that initiative and the following will be the impact indicators: the decrease in detention incidence, the establishment of community committees and the decrease movement of the refugees to Libya.
- b) UNHCR will monitor its implementing partners closely, by conducting monthly meetings and reports, visits to the organizations and to target refugees. The impact indicator will focus on the decrease in vulnerable cases approaching UNHCR.

#### 1. What are you planning to do?

Following a review of the report on a scoping exercise in Dar es Salaam, Morogoro and Bagamoyo, we will utilise the feedback in better informed advocacy with the authorities.

A further review of the results of the scoping exercise will be undertaken so as to inform any other surveys undertaken with any other urban refugee group in another site in order that adherence to guidelines is maintained.

A referral of persons of concern identified to be cross-referred to operational partners providing services that they may require pending any progress in the review and or articulation of an urban refugee policy in Tanzania.

#### 2. How are you planning to do it?

This will essentially entail first and foremost a desk review, followed with internal discussions with UNHCR senior management and thereafter an engagement with other stakeholders to validate the strategy approach.

Identifying from the results of the scoping exercise areas that can be worked one as initial stepping stones, e.g. advocacy to register all the asylum seekers and refugees in the cities without penalties attached to them so that they can have minimum documents confirming nature of their status, actions that would immediately benefit or relieve persons of concern in one way or another (this has already started with CWS for a few refugees).

With the understanding of where persons of concern are located, initiate a cross-reference for various services for agencies already having specific programmes that could assist the population in alleviating challenges currently encountered in access to livelihood opportunities and education for their children and access to health.

#### 3. Who are you going to do it in partnership with?

- Ministry of Home Affairs department for refugee services, and other operational partners (mainly NGOs).
- REDESO (Relief to Development Society), TCRS (Tanganyika Christian Refugee Service), and IRC (International Rescue Committee)
- WLAC (Women's Legal Aid Center), AATZ (Asylum Access Tanzania)

#### 4. How will you monitor the activity and know if it had an impact?

At the stakeholder sessions agree on modalities of feedback and information sharing, bearing in mind confidentiality concerns.



For persons of concern referred bilaterally to a specific agency then an agreement on a progress report received on a regular basis of three months intervals to be recommended.

Seeking consent for persons of concern for data and information sharing to enable actors to detail the profile of persons referred and existing challenges at the time of referral and what intervention is intended. The review on a quarterly or biannual basis will therefore help in measuring any progress made or recording any changes positive or otherwise in the condition of the persons of concern. Critical for the process will be the individual commitment of the refugees to participate in the programme to be developed.

### ***Asylum Access, Tanzania***

#### **1. What are you planning to do?**

In the effort to achieve our community legal empowerment goal i.e. “Refugees are leaders in their integration into Tanzanian society by being able to live safely and peacefully, and by contributing to the economic well-being of the host community,” Asylum Access Tanzania has planned to work with selected refugee leaders within at least two communities and make sure that they are able to create and execute a Community Action Plan that addresses the needs of their community.

#### **2. How are you planning to do it?**

Asylum Access Tanzania will achieve this plan by helping the refugee community in carefully selecting key refugee community leaders and have them participate in Asylum Access’s leadership training. The training will aim at increasing community leaders' sense of leadership, improving their ability to communicate with the team and the community, improving their problem-solving skills, ability to conduct community needs assessment, creating and implementing a community action plan based on identified needs, and evaluating a community action plan. The training will cover the concepts of leadership, team-building, problem-solving and techniques for elaborating community action plans.

After receiving the training, the leaders will engage in identifying the pressing needs of their community and come up with action plans to address the identified needs. The leaders will then lead the community in executing the plans with support from Asylum Access.

#### **3. Who are you going to do it in partnership with?**

Since this is the first time that Asylum Access Tanzania introduces this strategy, there is no partner organization we will be working with yet; however, we are happy to have our partners collaborate with the identified key refugee

leaders in the execution of their community action plans that aim at addressing the needs of refugee communities.

#### 4. How will you monitor the activity and know if it had an impact?

Asylum Access has developed and provided a leadership training curriculum that helps leaders organize their communities, identify the needs of their community, build community action plans, evaluate community action plans. Refresher trainings will continue to be provided on regular basis.

Asylum Access's Community Empowerment and Outreach Coordinator will follow up with the leaders on a monthly basis to monitor progress of the plan and offer support as needed.

Asylum Access's Community Empowerment and Outreach Coordinator will also meet with members of the community to monitor the progress and to receive feedback on the implementation and impact of the execution of the plan.

### **Activity #1**

#### 1. What are you planning to do?

Follow up and finalize a draft MoU with relevant universities that would allow the office to ensure a smoother implementation of the DAFI programme, disbursement of funds, etc.

#### 2. How are you planning to do it?

Work closely and meet regularly with UNHCR staff and local universities to agree on the terms of the MoU and finalize the agreement.

#### 3. Who are you going to do it in partnership with?

Local universities.

#### 4. How will you monitor the activity and know if it had an impact?

The impact will be measured by the number of refugees that we are able to enroll in the local universities through the agreement.

### **Activity #2**

#### 1. What are you planning to do?

Strengthen collaboration with the Ministry of Social Welfare in identifying foster accommodations for unaccompanied minors and solutions for rejected minors.

#### 2. How are you planning to do it?

Hold regular meetings with the Ministry to hear their concerns and find solutions in a collaborative fashion.

#### 3. Who are you going to do it in partnership with?

- Ministry of Social Welfare
- IOM
- Unicef

#### 4. How will you monitor the activity and know if it had an impact?

Our impact will be indicated by the agreements that we come to and the interventions that we make.

### Activity #3

#### 1. What are you planning to do?

Establish a Facebook page where all the resettled minors could keep in touch with themselves and us, as we lose track of them and therefore lose the opportunity to measure the real impact of our interventions.

#### 2. How are you planning to do it?

Create a Facebook page and disseminate it to minors that will be soon be resettled and share with those who keep in touch. Word of mouth later on will be essential.

#### 3. Who are you going to do it in partnership with?

This project would be directly implemented by UNHCR with the help of an intern.

#### 4. How will you monitor the activity and know if it had an impact?

By using the Facebook Insights to monitor the number of page likes, posts and shares.

## **ANNEX 4**

### **The *Building Communities of Practice for Urban Refugees* Workshop in Pretoria, South Africa Participant Feedback Summary**

In an effort to learn from this second experience and improve on the subsequent regional workshops, participants from the Africa regional workshop were asked to evaluate their experience and give feedback by answering the following two questions:

1. What do you think worked well?
2. What do you think could be improved?

Overall, the participants seemed satisfied with the workshop and, in particular, felt that what worked well was:

- The co-facilitation and grounding of the discussion.
- The wrap-up at the end of the panels from the subject matter experts.
- The diversity in presentations and opinions shared, especially the presentations from the organizations in South Africa, and the opportunity to learn from others' experiences.
- The presence and buy-in of senior level staff from HQ, namely the Head of the Policy Development and Evaluation Service (PDES), Mr. Ewen Macleod, and Deputy Director for the Division of International Protection (DIP), Ms. Preeta Law.
- The focus on available guidance, tools and methodologies.

Despite these positive remarks the participants felt that the workshop could have been improved by:

- Having more time to carry out the presentations, e.g. by extending the workshop, or conversely, if there had been a tighter selection of presentations.
- Making more time to discuss topics other than those on the agenda.
- Inserting sessions where they could break up into smaller groups.
- Inviting more government partners.