

CCCM Case Studies

2020



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CCCM CASE STUDIES 2020

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Foreword

The Global Camp Coordination and Camp Management (CCCM) Cluster is pleased to share with you the 2020 edition of the CCCM Case Studies.

In 2020, as we initiated the collection of case studies for this edition, the novel coronavirus (COVID-19) swept across the world and by early March, it was officially declared a pandemic by the World Health Organization (WHO). The pandemic continues to have an unprecedented and devastating global impact, with over 47 million cases and more than 1.2 million deaths worldwide by November 2020¹. The impact of the COVID-19 pandemic on global health and mobility has been unparalleled in size and scope. Governments globally responded by introducing travel and mobility restrictions to contain and reduce the spread of COVID-19². The emergence of COVID-19 and resulting restrictions have exacerbated the daily struggle of IDPs and refugees amidst the pervasive risks they face before, during and after displacement. Many camps and camp-like settings have insufficient or limited access to health services, increasing the risk of the transmission of the virus and of additional protection challenges faced by displaced populations.

Simultaneously, natural disasters, conflicts and emergencies continued to give rise to a number of large displacements that heightened the need for CCCM actors to adapt and innovate their working modalities within this increasingly complex and fluctuating setting. Collaboration and coordination with key stakeholders are more vital than ever to ensure the safety, dignity and protection of displaced populations, as well as to ensure that displaced populations are included in national pandemic preparedness and response plans. Meaningful participation and representation within this restrictive mobility environment have also become more pressing and challenging and have been at the forefront of our collective effort over the past year. Within the emerging COVID-19 situation, the Global Thematic Working Groups³ under the Global CCCM Cluster jointly hosted a series of webinars, “CCCM Tuesdays”, to strengthen and support our community of practitioners, focusing on preparedness and response to COVID-19 in CCCM. The weekly webinars provided a platform for CCCM partners to share operational examples and best practices for adaptation to the pandemic and to ensure the continued assistance and protection of displaced populations.

CCCM Case Studies 2020 provides a collection of experiences and lessons learned, with concrete examples of the delivery of efficient and timely responses and a focus on adaptation to challenges presented by the COVID-19 pandemic. This edition of the Case Studies looks at initiatives to harmonise activities and working tools among a large number of sites, develop mentorship programmes, establish remote camp management activities, promote community-led preparedness and response activities, include groups at risk as well as operationalise an area-based approach. This publication is part of our ongoing effort and global conversation to ensure coherent CCCM responses that promote accountability to affected populations, community ownership, durable solutions and strong partnerships with local partners and authorities.

CCCM Case Studies 2020 would not have been possible without close collaboration with the Working Groups of the Global CCCM Cluster, input and expertise of the CCCM Strategic Advisory Group (SAG) and Cluster Coordinators, CCCM practitioners and humanitarian partners who submitted case studies from Sub-Saharan Africa, Asia and the Middle East and North Africa Region. We sincerely thank them for their time and effort and hope that these examples contribute to further your discussions, planning and responses to displaced population in need of assistance.

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We would also like to acknowledge all CCCM and humanitarian colleagues and individuals around the globe who are working tirelessly to ensure equitable access to assistance, protection and services for displaced populations in order to improve their quality of life and dignity during displacement while seeking and advocating for durable solutions.

For comments, feedback or questions, please visit the website or contact:

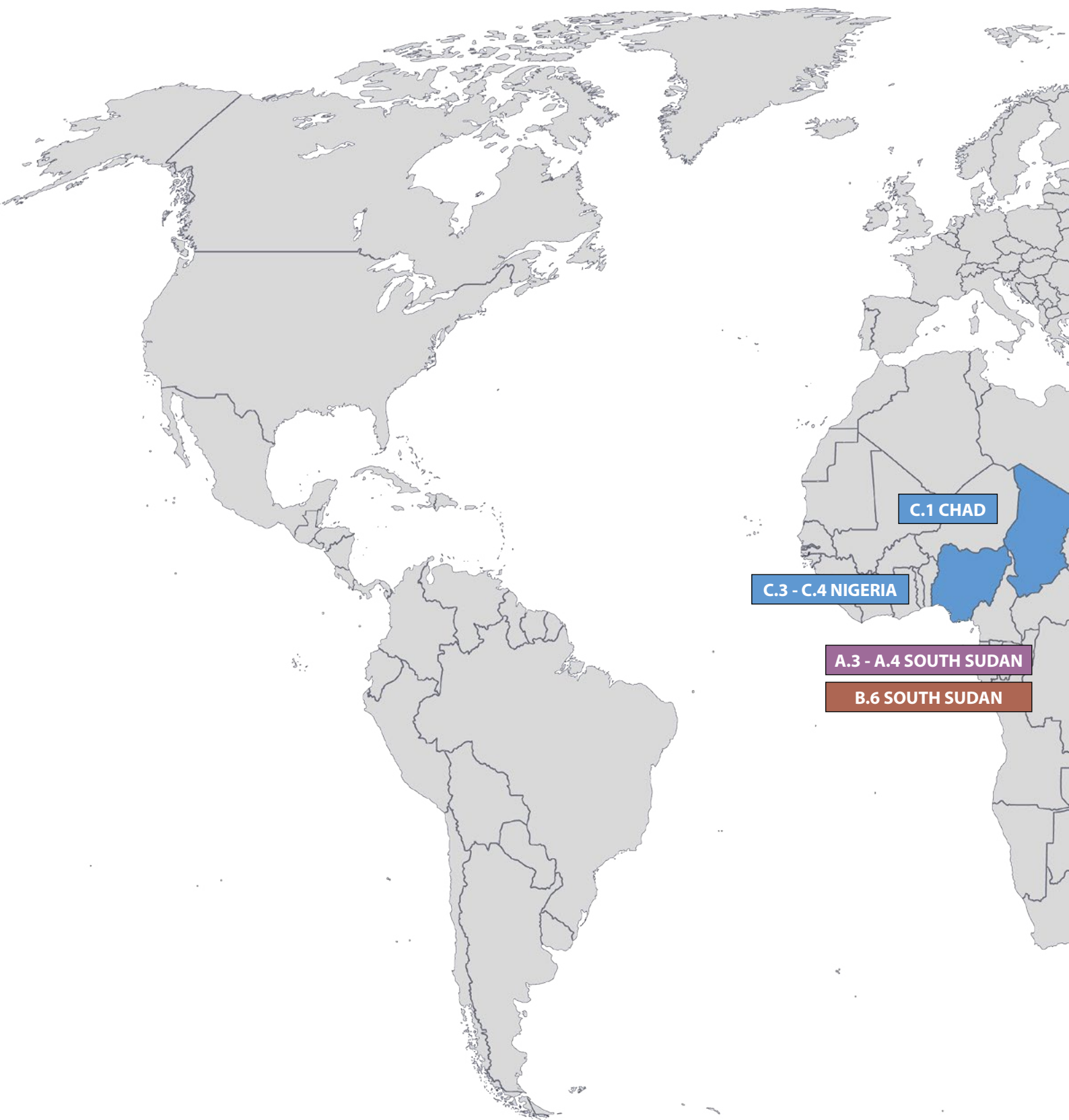
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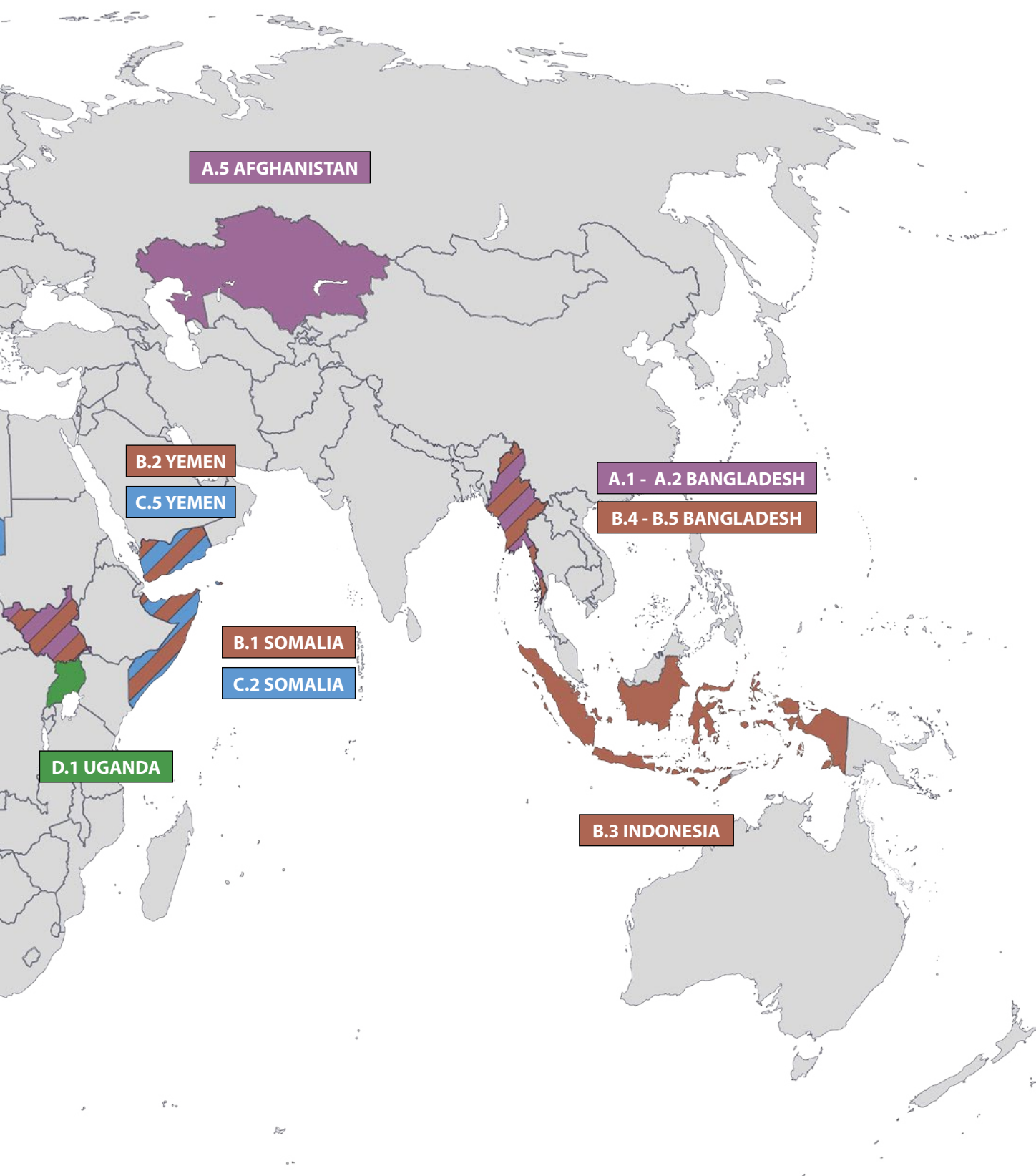
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World Map





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Keyword Matrix

THEME / CHAPTER	COUNTRY	CASE STUDY	Displaced populations*				Location			Settlement options/ scenarios			Camp life-cycle		
			Refugees	Internally displaced	Returnees (refugees/IDPs)	Others of concern (e.g. migrants)	Rural	Peri-urban	Urban	Returnees	Relocation	Dispersed (rent/hosted/spontaneous)	Communal (collective centres/planned sites/settlements/unplanned sites)	Set-up/ improvement	Care & Maintenance
A. Participation	Introduction														
	Bangladesh	A.1 Women's Participation													
	Bangladesh	A.2 Response to COVID19													
	South Sudan	A.4 Inclusion of Persons with Disabilities													
	South Sudan	A. 5 Kondial FM													
	Afghanistan	A.3 COVID-19 Communications													
B. Localisation - Capacity Building	Introduction														
	Somalia	B.1 Capacity Building to Key Stakeholders													
	Yemen	B.2 National-referral and escalation system													
	Indonesia	B.3 Online CCCM training													
	Bangladesh	B.4 Joint Capacity Sharing Initiative (CSI)													
	Bangladesh	B.5 Lighting installation													
	South Sudan	B.6 Beyond Bentiu Response													
	C. Camp Management and Coordination	Introduction													
Chad		C.1 Relocation of IDPs from Diamerom to Amma													
Somalia		C.2 Barwaqo relocation project													
Nigeria		C.3 Maffa Approach													
Nigeria		C.4 Strengthening the Protection of IDPs through Camp Coordination and Camp Management (CCCM)													
Yemen		C.5 Improving living conditions within IDP hosting sites in Yemen													
D. Environment	Introduction														
	Uganda	D.1 ReForest Project													





A. PARTICIPATION

Ensuring meaningful participation for all groups of displaced population in decision-making processes and in camp governance structures is an essential foundation of good camp management. Participation also helps in improving humanitarian response, disaster risk reduction activities, community engagement and support, contributes to Gender-Based Violence (GBV) mitigation and ultimately ensures accountability towards affected populations. Because participation is central to upholding the rights of displaced people, it is the basis of a section of the Minimum Standards for Camp Management that includes four standards. The standards for community participation and representation are: inclusive and representative governance mechanisms and structures, community participation in decision-making, information sharing with communities and access to safe and responsive feedback and complaint mechanisms.

In 2020, COVID-19 has become an unprecedented global emergency, with governments responding with restrictions and lockdowns to curb the spread of the virus. Displaced persons are particularly vulnerable to the pandemic living in high density, congested sites with limited access to information, WASH and health facilities. Since IDPs often rely on daily or informal markets for their survival, restrictions of movements have also limited their access to livelihoods opportunities and source of income. Limited land availability and infrastructures also made it challenging for camp managers to implement mitigation measures in many displacement settings. Restrictions imposed by Governments to protect public health also further restricted their movements within camps, exacerbating protection risks for women, girls, families, elderly persons and persons with disabilities.

Although women and children often form a large proportion of displaced populations living in camps or camp-like settings, their needs are not always well-represented in camp governance structures. Furthermore, persons with disabilities in displacement contexts still find themselves on the edge of society and are often stigmatized, marginalized or even live completely in hiding. Hence, camp management which has employed community engagement techniques with vulnerable groups within camp communities and built strong participation structures has an advantage in helping people to access the required resources when emergencies take unexpected turns.

When empowered and represented, displaced communities are best placed to identify risk, prioritised needs and address challenges as part of a tailored response. This chapter's case studies document how existing participation structures have responded and adapted, rising to the challenges of a global COVID-19 pandemic. In Bangladesh, Women's Committees help to reduce barriers and represent the interests and needs of women and girls, including providing critical public health messaging about COVID-19. In South Sudan, CCCM agencies used creative communication approaches to reach a broad audience with COVID-19 information, and a Community Disability Committee serves as a strong advocacy structure and communication mechanism. In Afghanistan, CCCM supported the community governance structure to communicate directly with camp management and service providers.

Participation in Displacement Working Group

Since its inception at the Global CCCM Cluster retreat in 2019, the Participation in Displacement Working Group¹ has focused to investigate participation of displaced women, girls and other groups at risk by sharing learning and best practices from various displacement contexts. Through a series of interactive webinars², topics have ranged from the role of women's committees in the refugee response in Cox's Bazar to community engagement and participation during COVID-19, presented by speakers from a variety of organizations and sectors.

Useful resources were developed by humanitarian organizations to build upon the special attention required to assist women, girls and groups at risk. Risk Communication and Community Engagement (RCCE), which is focused on getting community buy-in of critical public health information to prevent and control the spread of disease, became important to all activities during the COVID-19 pandemic.

Further information on specific resources, tools and guidance based on good practices and lessons learnt can be found in [Annex A](#)

¹ <https://ccmcluster.org/global/participation-in-Displacement-Working-Group>

² Recordings of webinars are available on the Global CCCM Cluster YouTube : <https://www.youtube.com/c/CCCMCluster/videos>



CAMP MANAGEMENT STANDARDS REFERENCE

STANDARD	INDICATOR	REMARKS	CASE STUDY REFERENCE
1.2 Site lifecycle planning Appropriate and inclusive planning ensures adequate protection and assistance are provided throughout the site lifecycle, from set up to closure.	1.2.1 Community workshops are used to develop and share contingency plans.	Given the rapid onset and scale of COVID restriction measures on IDP populations and humanitarian staff, the necessity of participation of the population from the very beginning of a response is essential and must include critical aspects of contingency planning. The covid-19 pandemic has highlighted that community engagement by an SM team cannot start after the population is already experiencing a complex emergency.	A.3 Bangladesh Women's Participation – COVID case study A.1 Afghanistan Community Governance Capacity Building case study
1.3 SMA and site management team capacity Site management teams have the operational and technical capacity to manage the site.	1.3.1 Ratio of staff (female: male) is proportional to that of the site population. 1.3.3 % of site management staff who have completed adequate training related to their role.	Size and makeup of the team must reflect the language and communication needs of the population and have a balance of skills and capacities.	A.2 Bangladesh Women's Participation – COVID case study
2.1 Governance Structures Inclusive and representative structures are accountable to and have the capacity to meet the needs of the population.	2.1.1 % of the population who feel they are represented by and through the site governance structure. 2.1.2 % of the site population who report that the site governance structures are inclusive, effective and reaching all of the displaced population.	Measuring this indicator cannot realistically be done during an emergency, however, if a site was set up well from the beginning, the governance structures are able to adapt to sudden emergencies such as the COVID-19 pandemic. During an emergency, the governance structures are then able to respond as they are designed to. The COVID-19 pandemic measures on RECC should provide some areas for critical reflection in this regard.	A.2 Bangladesh Women's Participation – COVID case study A.2 South Sudan Community Disability Committee case study A.2 Afghanistan Community Governance Capacity Building case study
2.2 Community Participation The site population is able to participate meaningfully in decision making related to the management of the site.	2.2.1 % of the site population who are satisfied with the opportunities they have to influence decisions 2.2.2 % of female committee members who feel their views are taken into account during decision making process	Inclusive governance structures include representation of and leadership by all members of the displaced community. This means that decisions are made with consideration of impacts on all members of the community.	A.2 Bangladesh Women's Participation – COVID case study A.2 South Sudan Community Disability Committee case study A.2 Afghanistan Community Governance Capacity Building case study

STANDARD	INDICATOR	REMARKS	CASE STUDY REFERENCE
2.3 Information sharing with communities Regular communication with the displaced community, host community and all other stakeholders is appropriate and relevant.	2.3.2 % of the site population who consider recent key messages appropriate. 2.3.3 Appropriate modes of dissemination are used to share key messages.	When information is regularly shared with communities, it is important to include diverse communication methods, not just written communication, to ensure that all can access key messages.	A.2 Bangladesh Women's Participation – COVID case study A.2 South Sudan Kondial FM case study
2.4 Feedback and Complaints Site populations, both displaced and host have access to safe and responsive mechanisms to handle feedback and complaints to services providers.	2.2.1 % of the site population aware of feedback and complaints mechanisms and how to access them. 2.2.2 % of complaints and feedback investigated, resolved and results fed back to the complaint within the targeted time frame.	Feedback and complaint mechanisms are critical ways that all members of the community can communicate directly with service providers and receive a response to their needs. The mechanisms must be accessible to all members of the community.	A.2 Bangladesh Women's Participation case study A.2 South Sudan Community Disability Committee case study
3.1 A safe and secure environment All residents and services providers live in a dignified environment that is safe and secure from violence and harm.	3.1.1 % of risk mitigation actions from safety audits directly integrated into site maintenance and improvements (or addressed with site maintenance activities).	Inclusive leadership and participation from all groups within the displaced community means that there are pathways to communicate with site management and/or service providers about risks or concerns in the environment.	A.2 South Sudan Community Disability Committee case study A.2 Afghanistan Community Governance Capacity Building case study

BANGLADESH



CONTEXT

The largest Rohingya influx into Bangladesh began on the 25th of August 2017, with a massive influx of more than 745,000¹ Rohingyas fleeing violence and serious human rights abuses from Rakhine State, Myanmar. However, multiple waves of Rohingyas have moved from Rakhine State to Cox's Bazar in Bangladesh. The earliest influx was recorded in 1942 with 20,000 Rohingyas who fled to Bengal (Bangladesh in pre-partition India)². Therefore, the refugees displaced in 2017 settled in Ukhiya and Teknaf sub-districts, where they live alongside host communities as well as Rohingyas who had been displaced years or decades ago. Including all of the different refugee flows, as of May 2020³ there were over 860,000 refugees in Cox's Bazar district.

Many of the displaced population are women and girls, who make up 52% of the population⁴. Prior to the August 2017 influx, an estimated 19% of families were believed to be living in female-headed households; it is most likely that this figure has only increased. An estimated 16% of the Rohingya are single mothers who have lost their husbands to violence in Myanmar or to migration in search of livelihoods for survival⁵. Gender-Based Violence (GBV) is prevalent in displacement, with women and girls targeted for a range of abuses linked to poverty and economic dependency. The reports of GBV incidents in Cox's Bazar have been high, with women and girls reporting weekly of being exposed to severe forms of sexual violence. Violence continues even after women and girls have fled their homes in Myanmar⁶, with high number of the GBV reports coming from survivors of rape in Myanmar⁷.

The high density of camps and poor living conditions expose families to numerous protection concerns. Moreover, security and cultural constraints limit access to life-saving assistance. The Rohingyas continue to face immense challenges in Bangladesh, where the lack of a clear legal and policy framework pertaining to refugee protection leaves them vulnerable to harm, abuse

and exploitation and protection risks. The Rohingyas are being hosted across 34 camp settlement types, including collective sites, collective sites with host communities, and informal sites. Leadership and governance structures among refugees have been ad hoc due to the chaotic influx in 2017 and they continue to face challenges with poor infrastructure and limited access to water, food, firewood, land, sanitation facilities, schools and labour opportunities⁸.

As populations did not arrive in the camps together, new geographically based leadership structures emerged with *Majhis*⁹, who are Rohingya leaders appointed by the Bangladesh Army to play key roles. The Government-appointed Camp in Charges (CiC), who are responsible for the camp administration, have increasingly exercised quasi-judicial authority in addressing civil documentation matters and disputes among the Rohingyas in the camps. With no gender and diversity representation in the system, in some cases the *Majhis* have been exerting their influence within the camp and with different actors and often do not reflect the needs from the population¹⁰. *Majhis* deal with the day-to-day issues of the inhabitants on their blocks and were charged with distributing aid to those living in their block. This system unfortunately has created an unnecessary divide between the refugee and humanitarian communities, with the *Majhis* in a 'buffer' role. This hinders the direct and meaningful participation of the population in decisions affecting their lives and impedes women's voices in decision-making on crucial issues affecting the Rohingyas¹¹. Results from a baseline assessment¹² revealed that the *Majhis* reported to be content in their leadership roles and did not face barriers in making decisions for the camp population. However, decisions were being 'made for women, as they see men as decision makers'. The baseline assessment found that *Majhis* in all locations specified that women could participate in camp life by 'forming groups to talk about their needs and by making small decisions'¹³.

PROTECTION RISKS

Women and girls have been exposed to protection risks due to a wide-range of contributing factors including: poor living conditions in the camps, limited basic resources, lack of income generating activities, insufficient lighting and gender segregated toilets and bathing facilities in the camps, distance to water points, absence of security patrolling during the night and restricted movement overall. Many of these risks have shown to lead to harmful coping mechanisms such as child marriage, survival sex, trafficking, and other forms of GBV¹⁴. Furthermore, women's movement in camps has been restricted due to multiple cultural and religious imperatives¹⁵: upholding of *purdah*¹⁶ (where women must be accompanied by a male family member), fear of getting lost, leaving their children

alone¹⁷, and feeling afraid of due to lack of signs and lighting¹⁸. As a result, women and girls are less likely to report their needs and access humanitarian assistance, have been underrepresented and excluded.

With the protection risks faced by Rohingyas and the barriers to women's participation, the case studies are focused on reducing the barriers faced by women and girls by creating a network of women's committees and support groups, representing the interest and needs of women and girls to ensure equitable access to life-saving services and information. In 2020, this included providing critical public health messaging about COVID-19.

¹ UN OCHA. Rohingya Refugee Crisis. Retrieved from: <https://www.unocha.org/rohingya-refugee-crisis>

² ACAPS Review: Rohingya Influx Since 1978. Accessible here: https://reliefweb.int/sites/reliefweb.int/files/resources/20171211_acaps_rohingya_historical_review_0.pdf

³ According to IOM's Needs and Population Monitoring

⁴ JRP Bangladesh.

⁵ JRP Bangladesh.

⁶ JRP Bangladesh.

⁷ Humanitarian Response Plan Bangladesh (HRP Bangladesh), IOM, Inter Sector Coordination Group, October 2017.

⁸ WPP Bangladesh Learning Report

⁹ The Majhi system is a system of Rohingya community leaders that existed before the community arrived in Cox's Bazar. However, the Majhi system does not reflect a participatory process being appointed by the Bangladesh army and in majority of cases and lacks representation and accountability to the Rohingyas.

¹⁰ Protection Sector Working Group: Protection Considerations on the Majhi System

¹¹ Protection Sector Working Group: Protection Considerations on the Majhi System

¹² As part of the Women's Participation Project rollout, a baseline study was conducted to identify numerous barriers to women's engagement in camp management, participation in community decision-making processes and role in the public sphere.

¹³ In group discussions with female leaders in Leda and Unchiprang, majhis were accused of being dishonest, 'keeping tokens for themselves', or 'asking for benefits from the people they help, not being neutral'. In Balukhali no such accusations were made, although one group of women declared to be 'afraid to go see the majhi at his house alone, as the community might think she would stay in bed with him', posing the question of this practice happening, where majhis exchange help for sexual favors.

¹⁴ WPP Pilot Learning Report

¹⁵ UNHCR 14/01/2010, MSF 03/2002

¹⁶ the practice of keeping women separate from and preventing contact or communication with men they are not related to

¹⁷ OXFAM 22/11/17

¹⁸ UNHCR 2011

BANGLADESH

WOMEN'S PARTICIPATION IN CAMP MANAGEMENT: ROHINGYA REFUGEE RESPONSE EXPERIENCE PART 1: FORMATION OF THE WOMEN'S COMMITTEE

Project location	Leda and Alikhali (Camps 24 and 25) Teknaf, Cox's Bazar, Bangladesh
Project duration	January 2018 - September 2020 (33 months)
# Targeted by project	Total: 110 women (Rohingya and host communities) <ul style="list-style-type: none"> 97 Rohingya women (including 20 women with disabilities) 13 women from Host community
CCCM coordination mechanism	Site Management Site Development (SMSD) Sector



Summary

In 2018, the Women's Participation Project (WPP) was piloted in Leda camp, Cox's Bazar, Bangladesh. As part of the project rollout, a baseline study was conducted to identify the numerous barriers to women's engagement in camp management, level of participation in community decision-making processes and women's role in the public sphere. Based on the findings and the pilot phase, membership to the Women's Committee was expanded in 2019 to include women and adolescent girls with disabilities, promoting their engagement in daily activities in the camp, disaster preparedness and response as well as in livelihood programming.



WOMEN'S PARTICIPATION PROJECT OVERVIEW AND OBJECTIVES

The Women's Participation Project (WPP) was piloted in 2018 in Leda and Alikhali Camps, Nhila Union under the sub-district of Teknaf, Cox's Bazar. The objective of the project is to mitigate and reduce the risks of GBV through the promotion of women's participation and representation in governance structures in the camps. As part of the roll-out, a baseline assessment was conducted in Balukhali Makeshift, Leda Makeshift and Unchiprang.

The baseline assessment mapped existing governance structures in the camps and learned how groups at risk participate in camp life. It also examined the barriers and opportunities to increasing women's participation in camp life and explored strategies to facilitate this. The assessment found that women do not have direct access to information, were not represented in the recognised leadership structures and that important decisions were made by male leaders at locations where women do not have access or feel unsafe. To address this, SMSD held in-depth discussions and consultations with both male and female members of the community, particularly

with religious leaders. This dialogue on the barriers to participation identified in the assessment and how women can be engaged in a manner that respects cultural and religious practices. Through this, the community's perception began to shift, and it was agreed among themselves to organize a Women's Committee.

The Women's Committee was formally launched in September 2018 and was recognized by the community and the CiC. The primary objectives of the Women's Committee are to: increase representation of women and adolescent girls within the camp governance structures, strengthen representation of women and girls in daily decision-making activities, enable women and girls to share information about their needs and concerns, and to improve access to information about services and support available to them. The members of the committee are responsible for representing the interests of women and girls in a fair and impartial way, and their participation is completely voluntary.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

The profiles of the Leda and Alikhali camps have drawn interest due to their complexity. The population living in the camp is a mix of the Rohingyas who arrived between 1991 and 2016, those who arrived

during the 2017 influx and the host community. Teknaf is situated in an area associated with many risks and hazards like natural disasters, kidnappings and human trafficking¹.

SITE MANAGEMENT / CCCM ACTIVITIES

The IOM Site Management and Site Development (SMSD) teams have designed activities tailored to different age, gender and inclusion needs to encourage community participation to support the expression of women and girls' views, interests and collective action taken to contribute to solutions and reduce vulnerabilities faced by groups at risk. The Women's Participation Project (WPP) became the model to enhancing participation of women and adolescent girls, with the focus to allow women to identify and lead the activities that matters to them, which was integrated to the core activities of SMSD including coordination, operations, community engagement and communication with the communities. The committee developed project concepts like tree plantation and

homestead gardening, camp clean up, addressing the safety risks with the help of SMSD, developing systems for queueing at the water points with the support from WASH technical team, advocating for safe access for Persons with Disabilities (PwD), multi hazard emergency preparedness and engagement in COVID-19 awareness raising. Being the only formalized all women group, the Women's Committee receives many requests to participate in assessment exercises, conversation around improving services and programming as well as capacity building initiatives. This project has been supported through multi-layer capacity development, participatory mechanisms, and emerging leadership roles in the community.

KEY ACHIEVEMENTS

The implementing agency's Site Management and Site Development (SMSD) teams aim to encourage community participation to support the expression of women's and girls' views, to take collective action towards solutions and to reduce vulnerabilities faced by groups at risk. This project has been supported through multi-layer capacity development, participatory mechanisms, and emerging leadership roles in the community.

1. Formation of Women's Committee

To begin this process, SMSD and Protection teams mapped existing women's groups and initiated a call in the community for nominations to participate in the Women's Committee based on their neighbourhood (Para). Through consultations with the nominated women, the teams finalised the committee's Terms of Reference (TOR) structure. The Committee is organized in sectors to ensure each Para has a focal point as well as the overall camp level sector focal point. SMSD and Protection teams adapted the skills and capacity assessment tool from the Women's Participation Toolkit² to conduct interviews with women to assign sectoral roles.

The community is familiar with the sector approach, so they know who to contact.

The women on the committee made a specific request to establish a quota system to balance representation among three different groups³ that the community and stakeholders agreed on. Finally, 110 women leaders were selected from 10 Paras, including 97 Rohingya women and 13 women from the host community, of whom 20 were women with a disability.

2. Increased access to information

Through the Feedback and Information Centre (FIC), the community has direct and equal access to information. The Women's Committee shares information provides feedback and logs in the complaints they receive from their communities as well as the gaps they identify during service monitoring. Women's proactive role in visiting the FIC has been essential as it feeds into the Inter-Agency Complaints and Feedback Mechanism (IACFM) and systematically records any issues and concerns for referral and advocacy. This is also one of the entry points for Protection in dealing with reported GBV cases.

3. Capacity Development of Rohingya Women by Women

110 Women's Committee members completed the capacity development program in 2018 which included Induction to Site Management and an interactive training module on Women's Empowerment, Participation and Leadership. The aim of the training was to enhance women's leadership and decision-making skills at the individual, household and community levels with the long-term goal to enhance gender equality, equity and women's empowerment. The women have continued to be engaged in camp activities and are supported with thematic trainings on Protection concepts, Protection Mainstreaming and Community Engagement. The committee members have also been involved in trainings on emergency preparedness and response, cyclone preparedness, first aid and fire safety⁴. In 2020, the engagement and formation of the Women's Committee has been replicated in other camps and most of newly organized groups in the camps like the Disaster Management Unit (DMU), the Dead Body Management (DBM) now have female membership to encourage the participation of women and girls.



Access to Information - IdeasBox activity

4. Self-Reliance Building through Women's Income Generating Support (WINGS) Project

In 2019, the implementing agency partnered with an NGO on the Women's Income Generating Support (WINGS) Project, in which 110 women from Rohingya and host communities received skills training and livelihood assets in three phases. This activity aimed to promote social cohesion and establish connection between the Rohingya and host communities. During vocational training, the women learnt to prepare different kinds of snacks⁵ from trainers who were food service professionals from the host community. This was followed by a training on the basics of starting up businesses, with guidance on concepts such as profit, savings, investments and more. During the final phase, the women received a package of assets which included a double burner cooker, LPG gas, utensils, wooden table, glass display rack and ingredients to start their own business.

The WPP supported the women enrolled in WINGS with cash for training. Each participant received BDT350 (USD4.10) per day for five days of attendance to compensate for missing other income-generating activities. WPP also provided transportation and caregiver support, as this was one of the barriers to participation that surfaced during consultations. The 110 trained women became trainers to other women and girls' support groups, and they were provided with printed cookbooks and video materials from WINGS. The materials were designed to be accessible for persons with seeing and hearing impairments, allowing persons with disabilities to participate in the activities. In 2020, the WINGS project has expanded its support to two other camps using the same model, with 400 women from the Rohingya and host communities selected for participation.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Women's participation is a shared responsibility, thus Site Management coordinated with other sectors to address the needs of the community, especially the needs of women and groups at risk. To achieve this objective, the close coordination between SMSD, Protection, Transition and Recovery and other key stakeholders⁶ was paramount. Additionally, the Women's Committee has contributed to improving the access to and quality of services in the camps due to collaboration, information sharing and inclusive programming.

The Women's Participation Project (WPP) became the model of enhancing participation of women and adolescent girls, with

the focus to allow women to identify and lead the activities that matter to them. This was integrated in the core activities of SMSD including *coordination, operations, community engagement and communication with communities*. The committee developed project concepts like: tree plantation and homestead gardening, camp clean up, addressing safety risks with the help of SMSD, developing systems for queueing at the water points with the support from the WASH technical team, advocating for safe access for Persons with Disabilities (PwD), multi-hazard emergency preparedness and engagement in COVID-19 awareness raising.

KEY ACHIEVEMENTS OF PROJECT

1. The Women's Committee was formally launched in September 2018, where 110 women leaders were recognized by the community and the CiC. The primary objective of the Women's Committee is to increase representation of women and adolescent girls within the camp governance structures.
2. The establishment of the Feedback and Information Centre (FIC), where the Women's Committee has been playing a proactive role in visiting and consulting with CCCM staff on the FIC.
3. 110 women on the Women's Committee have been trained on Site Management, Women's Leadership, Participation, Empowerment and core Protection concepts.
4. The Women's Committee has been on the forefront of cyclone and fire preparedness, including yearly training

and disseminating key messages through community engagement.

5. Through coordination between CCCM, Transition and Recovery and an NGO partner, the Women's Income Generating Support (WINGS) Project was supported. In this project, 110 women from Rohingya and host communities received skills training and livelihood assets and replicated this training with the community.
6. In 2020, WPP has expanded its support to two other camps using the same Women's Committee model with 400 women from the Rohingya and host communities selected. In addition, most newly organized groups now have female membership to encourage the participation of women and girls.

CHALLENGES

1. Due to the scale of the Rohingya Response, the basic needs of women, girls and groups at risk were sidelined during the onset of the emergency. Resources were overstretched and could not meet the overwhelming needs of the community, which resulted in poor programming.
2. With some Rohingya women still showing signs of stress and trauma during the first year of the project, the CCCM teams had to be sensitive to needs of the community by developing the project through participatory approach. This allowed women to voice their concerns and ensure they were heard as the projects evolved.
3. The Disability Inclusion Working Group was not very active in the camps where WPP was implemented, which limited the capacity of the team to engage with women with disabilities in 2018. The collaboration with Protection teams played an essential role in highlighting disability inclusion in the project, though it was a challenge to sustain the daily support needed by persons with disabilities. This challenge was addressed with a thorough assessment when planning interventions, done through engagement with a specialized agency to assist with the needs of persons with disabilities.
4. It was a challenge to recruit female staff who understood and believed in women's participation. Bangladeshi women have a similar conservative culture to the Rohingya community. To address this challenge, women's capacity was built through a series of trainings along with subsequent coaching and shadowing to equip the staff.

LESSONS LEARNED AND RECOMMENDATIONS

1. Promote community representation of women and girls as early as possible in the response

Organizing the Women's Committee as part of the community representation structure in Rohingya camps was challenging because the Office of the Refugee Relief and Repatriation Commissioner (RRRC) does not recognize any formal governance structure except the appointed male Majhis. The assessments and surveys completed at the beginning of WPP were designed to capture the broader needs of the population and found that women were underrepresented.

If a Women's Committee had been established in the early phase of the response to represent the needs of women and girls, this could have contributed meaningfully to the analysis and program design at the onset of the response⁷. There are still gaps in services in the camps which could contribute to insecurity and GBV, such as unsegregated latrines which women do not feel safe using. The Women's Committee works with the SMSD and Protection sectors in monitoring the gaps through safety audits and service monitoring, and this has helped humanitarian actors to address the gaps. The WPP framework has been instrumental in this process in creating an inclusive environment for men, women, boys, and girls, with activities designed to address barriers and understand opportunities in a holistic manner through an engaging and participatory process.

2. Access to information contributed to participation in decision-making

Female community members relied heavily on male family members to receive information on decisions that impacted

them. The lack of a formal mechanism to inform women affected all underrepresented groups, including adolescent girls and persons with disabilities. In 2017, the Complaints and Feedback Mechanism (CFM) was established to address this need.

The CFM encouraged participation, information sharing, and transparency. To ensure its success, the way the system was developed and designed was essential. It required consideration of the functional process, the physical structure and accessibility of the Feedback and Information Centre and how the received feedback is responded to, especially for urgent referrals from groups at risk. The platform offered an opportunity to women and girls to utilise the mechanism in raising their concerns. As more people become aware of the CFM, the number of protection-related concerns rose, resulting in SM and Protection staff located at the space to attend to the Protection concerns faster.

3. The capacity of women and girls to take on leadership roles increased through skill and confidence development

Due to social and religious norms, Rohingya women were not used to taking up leadership roles. For women, meaningful participation means understanding their rights, learning basic life skills and being aware of what they can do to support individual or family immediate needs and contribute to the entire community's wellbeing. Building the capacity of women and girls was crucial to develop leadership skills and build the confidence of women and girls to participate in the decision-making processes in the camp life.

¹ ACAPS Rohingya Crisis: Host Communities Review https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/assessments/180131_host_communities.pdf

² Accessible at <https://womenindisplacement.org>

³ Rohingya who arrived before 2017, Rohingya who arrived in or after 2017, and women from the host community

⁴ carried out by American Red Cross with Bangladesh Red Crescent Society (BDRCS), Bangladesh Fire Service and Civil Defence

⁵ The ingredients and utensils necessary for the learning process were provided to the group

⁶ Handicap International (HI), Christian Blind Mission (CBM), Centre for Disability in Development (CDD), Bangladesh Fire Service & Civil Defence (FSCD), Cyclone Preparedness Program (CPP), American Red Cross, ICCO Cooperation

⁷ <https://www2.unwomen.org/-/media/field%20office%20easia/docs/publications/2017/10/gender-advocacy-paper-for-rohingya-refugee-crisis-response-in-bangladesh-r10.pdf?la=en&vs=2521>

⁸ <https://womenindisplacement.org/index.php/bangladesh>

⁹ <https://www.iom.int/news/un-migration-agency-helps-rohingya-women-organize-bangladesh-camps>

¹⁰ <https://www.icco-cooperation.org/en/news/women-as-drivers-of-social-change/>

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BANGLADESH

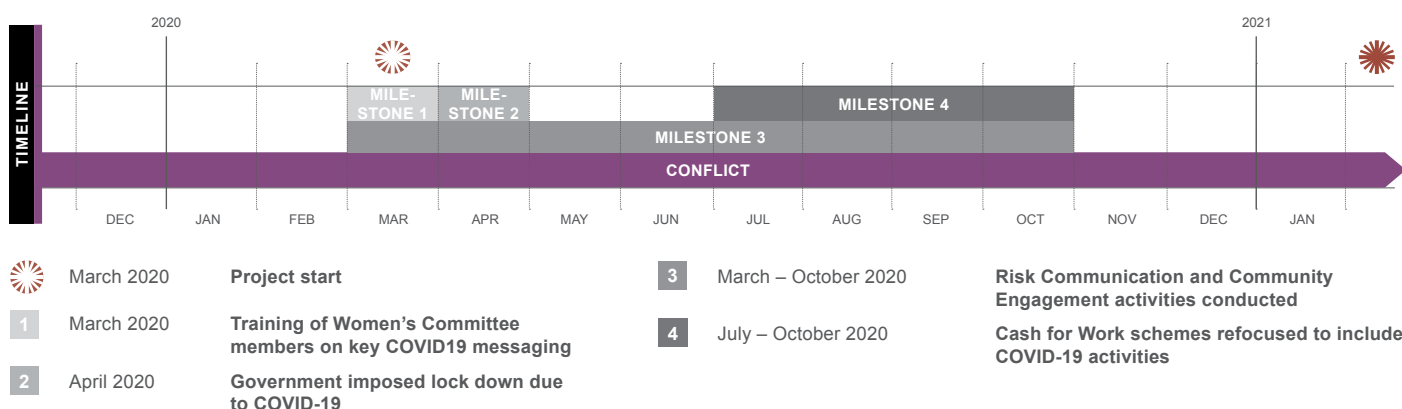
WOMEN'S PARTICIPATION IN CAMP MANAGEMENT: ROHINGYA REFUGEE RESPONSE EXPERIENCE PART 2: WOMEN'S COMITEE RESPONSE TO COVID-19

Project location	Leda and Alikhali (Camps 24 and 25) Teknaf, Cox's Bazar, Bangladesh
Project duration	January 2018 - September 2020 (33 months)
# Targeted by project	Total: 110 women (Rohingya and host communities) <ul style="list-style-type: none"> 97 Rohingya women (including 20 women with disabilities) 13 women from Host community
CCCM coordination mechanism	Site Management Site Development (SMSD) Sector



Summary

In 2020, the Women's Participation Project (WPP) continued to evolve with the Women's Committee members playing key roles in their community in relation to the current COVID-19 health response, along with their regular engagement in camp management activities.



Covid-19 awareness session

WOMEN'S PARTICIPATION PROJECT OVERVIEW AND OBJECTIVES

The main objective of the Women's Participation Project (WPP) is to mitigate and reduce the risks of GBV through promoting women's participation in representation and governance structures in the camps. At the peak of the COVID-19 pandemic in April 2020, the Government of Bangladesh imposed lockdown measures which

resulted in most humanitarian actors not having access to the camps. The Women's Committee supported Site Management and Site Development (SMSD) with remote management, service monitoring and referrals, taking the lead in COVID-19 response in four camps¹ in Teknaf.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

See Women's Participation in Camp Management Part 1: Formation of the Women's Committee for additional information

CCCM ACTIVITIES

Affected populations are central to Site Management and Site Development (SMSD) programming, especially the marginalized and at-risk groups. The WPP became the model of enhancing participation of women and adolescent girls with a focus on allowing women to identify and lead the activities that matter to them. In 2020, this included engaging in COVID-19 awareness raising. Recently, with most humanitarian actors unable to access the camps due to COVID-19, the Women's Committee supported SMSD in remote management, service monitoring and referrals.

The COVID-19 pandemic has impacted the living situation and personal circumstances of the displaced persons living in camps and camp-like settings, which made it difficult to implement mitigation measures. The need to adapt programming to these new realities was crucial, and the necessity of involving the affected population, particularly those with unique vulnerabilities, in the overall humanitarian response to the virus emerged as an overarching goal. The modalities and activities under the WPP were reoriented during this period to redirect efforts towards preparing and responding to the most urgent needs of the COVID-19 response. Additionally, the project has expanded its support to two other camps using the same model in 2020, and 200 Rohingya women and 200 host community women have been selected for the project.

Site Management (SM), Transition and Recovery Division (TRD) and Protection, with generous funding support from the Republic of Korea, worked together to mitigate the impact of COVID-19 in the community, especially with the drastic reduction of humanitarian programming and as a result of the pandemic. The four month restriction put in place by the Government of Bangladesh exacerbated the already vulnerable situation of the community. Health and Site Management teams worked together to provide Training of Trainers (ToT) to the Women's Committee on public health measures and key COVID-19 messaging, which they disseminated to their respective communities. The women

conducted sessions with small groups of women and girls, observing physical distancing and wearing cloth face masks. As of June 2020, the committee has reached out to over 700 women and girls. The Women's Committee also assisted women infected with COVID-19 by counselling them and ensuring they were aware of the services available to them.

The Women's Committee is at the forefront of the Risk Communication and Community Engagement (RCCE) activities in the camp during this period. 379 women across the four camps in Teknaf were trained and engaged in awareness raising on COVID-19, monsoon/cyclone preparedness and fire safety key messaging. Through their awareness raising, they reached a total of 85,000 people from March to October 2020.

SMSD launched the Interactive Voice Response (IVR), which allowed women and girls to receive information and ask questions through this platform. SMSD disseminated key messages through IVR, radio listening programs and multimedia communication to ensure wider reach of information. With COVID-19 restrictions on movement, it was crucial to ensure that women and girls still had access to public health information.

Cash-for-Work (CFW) activities focused on mobilising women and girls around service monitoring, social and COVID-19 related activities, monsoon season preparedness, enhancing the women's leadership and psychosocial support capacity. From July to October 2020, 1,565 Rohingya women benefitted from the CFW scheme, and 600 Bangladeshi women received unconditional cash grants. This shift of resources from regular programming to cash-based interventions aimed to help vulnerable families meet their immediate needs. It is important to note that Protection Sector highlighted an increase in reported criminal activities, intimate partner violence and gender-based violence due to absence of income. The need for CFW was validated by the Complaints and Feedback Mechanism (CFM) reports.



Women's Committee Training



Induction to SM

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Women's Participation is a shared responsibility; thus, Close coordination between Site Management, Protection, Transition and Recovery and other key stakeholders is paramount to achieving the

objectives. See *Women's Participation in Camp Management Part 1: Formation of the Women's Committee* for additional information

CHALLENGES

With a one year project duration and activity suspended for almost six months due to the pandemic, the initial project activities plan could not be implemented. The Site Management/CCCM team requested reprogramming from the donor, which allowed for the adjustment of the priorities of the project to the COVID-19 response to shift for more emphasis on Health and WASH.

Other challenges faced by the Women's Committee in their activities due to COVID-19 were:

1. Changing the mindset of the community not to stigmatize those that tested positive

At the initial stages, the community shunned individuals who had tested positive, sought treatment and finally tested negative, including one Women's Committee member who contracted the disease. It took many awareness sessions conducted by the committee members, community health workers and site management to convince the community that those who sought tested negative could not spread the virus or were not being punished by Allah due to a certain wrong they had done.

2. Debunking beliefs/myths/rumors related to COVID

There were a lot of beliefs, myths and rumours related to COVID-19 in the camps that had no scientific basis. For example, it was believed that those who contracted the disease were not religious and were being punished by God. Another rumour in the community was about the building of the Isolation and Treatment Centre (ITC). Community people thought that if one is affected by coronavirus, the patient will be buried there. To help address these rumours, SM teams with the Women Committee arranged ITC visits for members of the community and stakeholders.

It therefore took a lot of time and many awareness sessions to convince the community that washing hands, wearing masks and physical distancing were ways to control the spread of COVID-19.

3. Trainings were not able to quickly adapt to the changing context

The Women's Committee members received trainings from Health actors on general symptoms of COVID-19, home care, and Infection Prevention and Control (IPC) measures. However, these trainings were not able to quickly adapt to the changing environment and therefore the women had to improvise to tackle certain challenges, such as debunking myths, that were not part of the training.

4. WASH issue particularly on Water scarcity in the camps

Water is scarce at the camps and health measures like handwashing were challenging as oftentimes the available water was preserved for home consumption. Handwashing points installed by WASH did not cover the whole camp as they were installed in common areas like community centres, schools, and market areas.

5. Limited interaction while conducting awareness sessions

Due to social distancing, awareness session attendance was limited to about 4 - 7 individuals and the sessions were done door to door. The Women's Committee felt that they were not able to reach as many households as they would have wished.

6. Limited number of partners in the camps

When the pandemic broke out, some partners were not available in the camp and some services stopped. Registration was held off, therefore getting services became a challenge. Limited presence of camp actors like WASH and other service providers proved to be a challenge.

7. Difficulty in wearing face masks and maintaining physical distancing

The COVID-19 preventive measures of wearing a face mask and physical distancing were difficult as not everyone has a mask, and it is very hard to maintain physical distancing in the cramped spaces in the camp. Mask distribution came at a later stage and they were not available to cover everyone. Therefore, conducting the awareness sessions posed a risk to both the presenter and the community as sometimes not everyone wore a mask when coming to the sessions.

8. Restrictions on physical movement

Home quarantine has not worked efficiently, as WASH facilities are limited so those contacts under home quarantine will still share facilities with others in the community. This poses a challenge and increases the risk of the spread of the disease. During the initial stages, the CIC ordered for certain blocks that had individuals who were infected to be closed. This was a challenge as some could not access certain services or get the required assistance. Movement in and out of the camp was also restricted, especially during the festive season, yet there were rumours that those spreading the disease were from other areas outside the camp or even some were NGO workers.



Women's leadership training



WPP community centre



Women's Committee - Camp 24 Leda



Food production training

LESSONS LEARNED AND RECOMMENDATIONS

1. The suspension of activities during the lockdown measures imposed by the Government of Bangladesh made it difficult for humanitarian agencies to access the camp population. However, the Women's Committee displayed their resilience, and undertook activities in the absence of some humanitarian agencies to help keep the camps in order.
2. The pandemic showed that in the establishment of any governance structure, formal or informal, to promote participation, ownership is ultimately crucial. Having the Women's Committee established before the pandemic was a key factor. This appreciation will reinforce the advocacy to establish a Women's Committee as an interim solution until the government endorses the formal community representation.
3. The Women's Committee requested additional training on COVID-19 and Health to ensure that they can respond to the community's needs in a timely manner. Additionally, it was found that tailored awareness sessions were needed to address specific challenges such as debunking myths and encouraging the community to seek medical assistance when sick.
4. As the Women's Committee was on the forefront of the COVID-19 response in Teknaf, they felt they were at higher risk of exposure to the virus and requested that PPE materials be provided to them and other community first responders.
5. The Women's Participation Project should be a multi-year programme, to keep the momentum of the project and ensure sustainability. A phased approach to implementation is recommended to produce a meaningful impact.

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SOUTH SUDAN



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CONTEXT

South Sudan is a country affected by years of prolonged conflict, displacement, hunger, and other vulnerabilities, including a lack of basic infrastructure and essential services. The number of displaced stands at just under 4 million: 1.6 million people are displaced internally while 2.2 million people are refugees, primarily in the neighbouring countries of Sudan, Uganda, Ethiopia, Kenya and the Democratic Republic of the Congo. While there has been a lull in hostilities connected to the national conflict, localized violence has persisted throughout different parts of the country, and humanitarian needs remain critically high. During the conflict, thousands of displaced persons fled to the United Nations bases seeking safety and security; these bases transformed into Protection of Civilians (PoC) sites under the protection of the UN Mission in South Sudan (UNMISS). Formal IDP camps were constructed inside or adjacent to the bases and outfitted with emergency humanitarian shelter and infrastructure. Wau in Western Bahr el Ghazal has been the location of massive conflict-induced displacement since September 2016. The Wau PoC is a site for civilian IDPs from the national-level armed conflict, as well as a host site for IDPs displaced by localized violence in neighbouring areas. Residents of the Wau PoC, as well as the nearby site of Hai Masna, originate from areas in Wau, Raja, and Jur River counties.

Another PoC site is located in Bentiu in Unity State, which was established in December 2013 and is the largest PoC site in South Sudan. As of October 2020, approx. 131,000 individuals are active beneficiaries in the site. With the onset of COVID-19 and its accompanying measures and restrictions, the most significant impact has been reduced mobility. However, this has not been the case in the Bentiu PoC site. For several reasons there has continued to be regular movement into and from the site to surrounding

locations. Some reasons are the absence of lockdown restrictions on the Bentiu PoC residents and school closures, resulting in the increase in movement of children/youth exiting the site to support their families by performing livelihood tasks such as domestic activities and farming. Also, there has been cross-border movement of new arrivals, who are arriving mostly from neighbouring Sudan to join their families in the PoC site. In October 2020, an average of 12,000 individuals were recorded entering and approx. 12,600 individuals recorded exiting the site. There was also an increase in intended permanent exits between February and May 2020 to locations within Unity State, with many heading to Leer, Mayendit and Koch counties.

While national level political conflict has largely dissipated, IDPs in Bentiu PoC continue to rely on UNMISS protection due to the effects of ongoing intercommunal clashes and other incidences of insecurity, as well as the lack of basic infrastructure and access to core services in their areas of origin. However, in July 2020, UNMISS announced that it intended to start a process of handing over the PoC sites in the country. The sites will transition to IDP camps under the management of the national government and will continue to benefit from humanitarian assistance. In addition, the South Sudan National Police Service will assume responsibility for law and order in the IDP camps. UNMISS has withdrawn its troops and police from the PoC sites in Bor and Wau (which have successfully transitioned) and will gradually do the same in other sites, including Bentiu in 2021. This has, however, increased population mobility as people are concerned with potential insecurity following the withdrawal of the UN Police. Therefore, the need for shelter solutions in rural and urban areas receiving PoC residents is increasing.

PROTECTION RISKS

The protection risks identified in the Bentiu PoC in relation to COVID-19 are the reluctance of IDPs to be tested or isolated by the COVID-19 rapid response team (citing that the virus is not real) and cultural norms/customs that promote greetings involving handshakes, kisses and eating/drinking together, etc. Congestion in the PoC is also a major risk as it makes it difficult to practice the measures on preventing COVID-19, especially social distancing. Following the transition of the Wau PoC site, several protection concerns related to security, access to justice and rule of law emerged. COVID-19 restrictions have limited access to health facilities, leaving IDPs exposed to various infectious diseases; for example, measles outbreaks were recorded in Wau in 2020. In addition, some IDPs were evicted from the camp and their shelters were destroyed to discourage them from entering and staying in the camp over COVID-19 fears.

As a result of the COVID-19 pandemic, both Wau and Bentiu PoC sites present a worsened mental health situation for the population, and limited mental health services are available, in particular for persons with pre-existing mental health problems. Also, some families are relying on negative coping mechanisms such as child labour and early marriage to remediate the economic effects of the pandemic. Other risks include disruption to both commercial and humanitarian assistance supply chains, and finally worsened cases of food insecurity.

¹ Displacement Site Flow Monitoring (DSFM)

² <https://peacekeeping.un.org/en/un-protection-of-civilians-sites-begin-transitioning-to-conventional-displacement-camps>

³ South Sudan 2020 HRP and HNO



SOUTH SUDAN

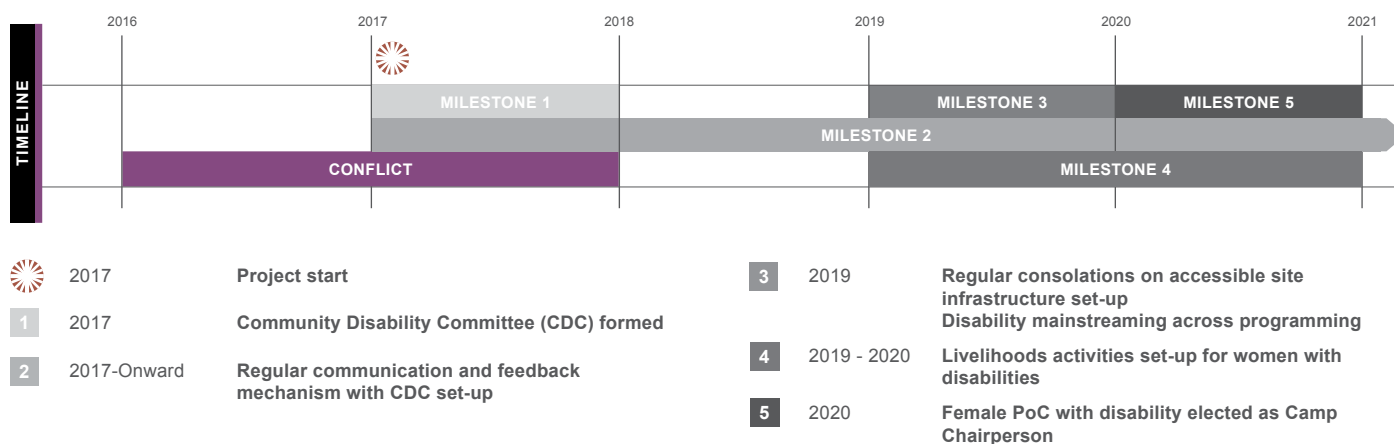
CAPACITY BUILDING, COMMUNICATIONS WITH COMMUNITIES (CWC) INCLUSION OF PERSON WITH DISABILITIES IN SITE IMPROVEMENTS

Cause of displacement	Conflict
Date of event causing displacement	25 August 2017 - Present
People displaced	8,939 individuals (as of December 2020. Source: IOM DTM) ¹ Countrywide: 1.6 million (Source: HRP 2020; COVID Addendum – June 2020) ²
Project location	Wau Protection of Civilians (PoC) Site (now renamed to Naivasha IDP camp), Wau County, Western Bahr el Ghazal
Project duration	2016 - Ongoing
# Targeted by project	N/A; IDPs with disabilities
CCCM coordination mechanism	Community Coordination Mechanism



Summary

The Community Disability Committee (CDC) is the primary governance and advocacy structure for IDPs with disabilities living in the Wau Protection of Civilians (PoC) site in South Sudan. Since arising as a community-based advocacy group for persons with disabilities in 2016-2017, CCCM has provided support to the committee in the form of consistent engagement, training for members, and facilitating regular elections to support changes in leadership. The CDC has become the most critical point for Camp Management and humanitarian partners to engage with IDPs with disabilities, serving as a forum for crucial information-sharing about the concerns and specific needs of persons with disabilities living in the site.



OVERVIEW OF THE COMMUNITY DISABILITY COMMITTEE

The Community Disability Committee (CDC) is a 13-person representative body inside the Wau Protection of Civilians (PoC) site and the key governance and advocacy structure through which persons with disabilities voice their concerns and communicate critical feedback to CCCM and other humanitarian partners. Emerging initially as a community-based advocacy and solidarity group founded by persons living with conflict-related physical disabilities, the committee has evolved to incorporate regular changes in leadership, the participation of women, and the inclusion of IDPs with a broader range of disabilities, including intellectual disabilities, through the engagement and support of Camp Management. The foundation of the committee came at the same time as the establishment of the PoC.

South Sudan was in the midst of a civil war in 2016/2017, and the violence left many with conflict-inflicted injuries and enduring disabilities from armed conflict, land mines, and disease. The founding members of the CDC saw that many of their fellow persons with disabilities were unable to access humanitarian services, had difficulty making a dignified livelihood, and suffered from stigmatisation and marginalisation. To respond to these challenges, they formed the advocacy group. Today, the 13 representatives are selected in a caucus-style election every six months, in which all IDPs who self-identify as persons with disabilities are encouraged to attend a town hall meeting. Once the selection is completed, one member is chosen to sit as the representative for persons with disabilities on the Community Leadership Committee (CLC), the primary governance body representing the entire IDP community across the site in Wau.

OVERVIEW AND OBJECTIVES OF THE CDC

The overall objective of the CDC is to forge a specific communication pathway to hear and address the concerns of IDPs with disabilities. The CDC collects feedback on the technical aspects of humanitarian programming and provides a forum for consulting persons with disabilities on decisions that may affect their lives and well-being. CCCM aimed to address the information-sharing gap between humanitarians and persons with disabilities through this recurrent

Communication with Communities (CwC) mechanism. Building the capacity of IDPs with disabilities through trainings and enhancing their participation in decision-making was also an overarching objective of this initiative. The CDC often supports CCCM in identifying beneficiaries using vulnerability criteria, which includes women, widows, single mothers, women with disabilities or with mobility issues, and older persons.

PROTECTION RISKS FACED BY PERSONS WITH DISABILITIES

Stigmatisation of persons with disabilities has been prominent in South Sudan, and varies in severity depending on the type of disability and the community. There are areas in South Sudan where the perception of persons with disabilities is heavily influenced by cultural beliefs that those with disabilities are cursed, or their parents sinned.

Some persons with disabilities have to rely heavily on the support of their caretakers to access humanitarian assistance. Most of the time that caretaker is a family member, however there are reports of family members taking rations for the persons with disabilities under their care, only giving them a small percentage of what they would be entitled to. Persons without family caretakers need to hire assistance to help them collect aid and guide them around the site, which would require payments in the form of reduced rations (for example, a cup of millet or half a bag of rice for assistance). These are some examples of the structural taxing that persons with disabilities can face in sites.

Beyond assistance, discrimination also impacts the access of persons with disabilities to humanitarian services available in the camp. For example, it has been reported that persons with disabilities were excluded from joining the community watch group. The CCCM team has been working to ensure that persons with disabilities willing to participate are included in the mobilisation and guard activities, while keeping in mind the Do No Harm principle and avoiding creating additional risks and further stigma and hinderance.

These attitudinal barriers are compounded with the environmental barriers persons with disabilities may experience in their daily life in Wau PoC. These barriers include access to basic infrastructure such as latrines and bathing facilities, which are not always adapted to their requirements, as well as the lack of specialized services and difficulties in accessing much needed assistive devices.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

The Wau PoC (now known as the Naivasha IDP camp) hosted civilian refugees from the national-level armed conflict and localized violence. The CCCM engineering team observed that Wau PoC was the most densely populated PoC in South Sudan, with shelters tightly packed together, extremely narrow roads, and drainage that overlapped the roads and foot pathways. Looking at the degree of

challenges and the fact that there was a strong community-based partner with the Community Disability Committee, it was evident that this initiative should be piloted in Wau. The CCCM team carried out additional work in Bentiu and Malakal PoC sites based on the successes and lessons learnt from the implementation in Wau.

CCCM ACTIVITIES

CCCM provides trainings to the committee members and holds a regular meeting every Tuesday, in which the CDC can raise issues of concern and provide feedback on ongoing programming. As a result of these standing meetings, CCCM and other humanitarian partners have been able to develop consultative processes to provide critical and much-needed interventions for persons with disabilities living in the site. For example, in response to concerns raised by the CDC about inaccessible infrastructure in the site, CCCM staff developed prototypes of upgraded bridges in consultation with CDC members. Persons with disabilities were invited to test out the prototype and provide direct feedback to the engineer responsible for the construction before making and implementing the final product.

The choice of locations of the accessible infrastructures, such as latrines, are also decided jointly between CCCM teams and CDC representatives. This process of engagement, consultation and testing was replicated in similar interventions and has been proven as a best practice for accessibility upgrades inside the PoC. Building on the experience working with persons with disabilities through the Committee over the past several years, CCCM staff have become more adept at integrating the specific needs and concerns of IDPs with disabilities into new programming.

In the most recent election cycle for PoC governance, a female IDP living with a disability stood for open election and was chosen as the Camp Chairperson, the highest PoC office. Having this person in office elevated many issues relating to persons with disabilities into mainstream discussions and the agenda of the leadership committee, especially physical accessibility challenges in the site. This demonstrated that supporting persons with disabilities to reach leadership positions beyond those provided in quotas and disability-specific committees is not only relevant but a necessary aim in ensuring an inclusive and representative structure.

Moreover, the Women's Participation Project (WPP) in Wau PoC has been a highlight in including persons with disabilities. The WPP is a livelihoods initiative for IDP women to develop small-scale businesses and enhance their leadership capabilities and business savvy through trainings and other skills-building activities. The inclusion of women with disabilities has been a key aspect of the initiative since its inception in 2019. With the onset of the COVID-19 pandemic, the initiative's focus shifted to reusable face mask production. A total of 29 women participated in the production of non-medical face masks, out of which eleven were women with disabilities. Participants received training and successfully produced thousands of masks to the benefit of other IDPs across the Wau PoC as well as a nearby site.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

CCCM's engagement with the CDC has improved overall disability and protection mainstreaming across programming and has contributed to the inclusion of women with disabilities in the Women's Participation Project. In recent round of elections within the CDC and the Community Leadership Committee, there has been more engagement from persons with disabilities in terms of their participation as block leaders, camp chair lady and the other advocacy and community governance positions. Persons with disabilities are becoming more active in those positions and are more accepted by the community, contributing to the reduction of stigma and discrimination in the PoC population.

There have been tangible benefits with the increased accessibility of facilities in the site, such as bridges that are easier to cross. This is due to the CCCM engineering team going through the process of prototyping, consultation with community and engagement. The infrastructure benefits not only persons with disabilities but the wider community.

There has been positive pressure on advocacy and camp management to engage more with protection actors and to do more service monitoring as it relates to persons with disabilities. Persons with disabilities assert their rights and entitlements more, have been more vocal in the leadership committee meetings and are active in ensuring that they are included and consulted in humanitarian activities.

KEY ACHIEVEMENTS OF PROJECT

1. Regularized communication with and feedback collection from IDPs with disabilities through the Community Disability Committee.
2. Development of consultative procedures for site infrastructure upgrades, including accessible bridges, latrines, shelter rehabilitation and site planning.
3. Prioritization of persons with disabilities during regular site activities, such as general food distribution.
4. Establishment of a standing forum for leaders with disabilities to meet and engage one other regularly and to share sensitive concerns.
5. Greater inclusion of women with disabilities, and inclusion of women in livelihoods activities.
6. Awareness and knowledge among CCCM and other humanitarian staff of the specific requirements of IDPs with disabilities, and improved disability mainstreaming across programming.



CHALLENGES

1. The emergence of the COVID-19 pandemic posed a challenge to the regular engagement of the committee. Their weekly meetings had to be moved to bi-weekly and a new location in order to accommodate social distancing requirements, and staff and humanitarian actors had limited access to the site.
2. Moreover, restrictions on land availability have ensured that congestion remains in Wau PoC, which significantly limits the capacity of CCCM and humanitarian partners to respond to the full range of accessibility and other needs communicated by the CDC.
3. Groups at risk, specifically persons with disabilities, have limited access to livelihoods opportunities, making it difficult for them to gain external livelihoods. To respond to this, the CCCM teams have been building upon women's empowerment programmes such as the Women's Participation Project to ensure inclusion of persons with disabilities in livelihood and income-generating activities.

LESSONS LEARNED AND RECOMMENDATIONS

1. Having a stand-alone group or coordination mechanism for CCCM to specifically to engage the needs of persons with disabilities is instrumental in ensuring inclusive programming and accountability to affected populations. It also prevents the concerns of persons with disabilities, or persons with disabilities themselves, from being excluded and discriminated against in the broader community.
2. From the CDC, it was necessary to facilitate integration with other governance mechanisms that hold decision-making power. For example, in the CDC in Wau PoC, one leader is selected to sit on the broader Community Leadership Committee for this purpose.
3. The need for persons with disabilities to have equal representation and communication with CCCM and humanitarian partners is necessary to address stigma and discrimination that persists within the broader IDP community.
4. The long-term efforts of the CDC and CCCM teams in sensitising the community for persons with disabilities to be accepted more in the site is important, and can be done through equal representation and inclusion in camp governance structures, such as the Community Disability Committee, Women's Committees and the Community Leadership Committee.



¹ <https://dtm.iom.int/reports/south-sudan-%E2%80%94-wau-poc-aa-and-masna-collective-centre-population-count-june-2020>

² https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/southsudan_covid19_hrp_addendum.pdf

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Acknowledgements

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SOUTH SUDAN

COMMUNICATIONS WITH COMMUNITIES (CWC)

Cause of displacement	Conflict
People displaced	111,766 individuals¹
Project location	Bentiu Protection of Civilians (PoC) Site, Rubkona County, Unity, South Sudan
Project duration	Ongoing
# Targeted by project	111,766 (IDPs)
CCCM coordination mechanism	CCCM Cluster



Summary

The CCCM program worked with the Kondial FM radio talk show and conducted weekly live radio talk shows covering COVID-19 prevention guidelines and responding and debunking rumours that were actively discussed among community members. The program acted as a tool to empower and encourage civic engagement among a diverse set of individuals inside Bentiu PoC, and also included weekly feedback and listening groups so that community members could give direct input and opinions through phone and SMS.



May 2020

Project start

3

Weekly/
monthly

Regular COVID-19 rumour collection through talk show call ins

1

May 21, 2020

Camp management team's COVID-19 talk show aired on Kondial FM

4

Thursday,
every week

Weekly Camp management talk shows

2

Immediately after
during and after
radio talk showsFeedback provision during talk shows to
debunk myths and rumours

5

Weekly

Awareness raising talk shows



PROJECT OVERVIEW AND OBJECTIVES

The COVID-19 pandemic has significantly impacted the humanitarian operations inside and outside the Protection of Civilians (PoC) sites in South Sudan, and has fuelled a surge in rumours, myths, and misinformation regarding the diagnosis, prevention, and cure of the virus. This spread of misinformation promoted practices that in fact increased the spread of the virus and contributed to increased protection risks in the PoC sites. In order to address these issues within the changed environment, the CCCM agency adjusted its traditional modalities of sharing information with IDPs to rely more heavily on loudspeaker and radio communications and less heavily on in-person communal gatherings. However, some in-person meetings continued at reduced numbers, respecting social distancing and hygiene guidelines.

The overall objective of CCCM during this crisis was to engage in communication about risk while maintaining safety for staff and IDPs. A series of Focus Group discussions (FGDs) on COVID-19 infection, prevention, and control were held to establish common platforms for collecting relevant information and disseminating verified public health information on COVID-19. One of the platforms which proved to be an effective and significant source of information for the population in Bentiu PoC were the talk shows on Kondial FM, a humanitarian radio station inside the Bentiu PoC². Kondial FM was able to reach community members who are unable

to read information, education and communication (IEC) materials and messages posted on notice boards, including populations with visual and mobility impairments. While more work is needed to ensure greater access to radios within Bentiu PoC, the radio programmes were a significant platform to establish two-way communication with community members.

Kondial 97.2 FM aired as a Communication and Community Engagement (CCE) program. The program acted as a tool to empower and encourage civic engagement among a diverse set of individuals inside Bentiu PoC. The shared feedback from listeners set the agenda for humanitarian actors and the government, covering all communities inside and outside camp. In addition, Kondial FM aired weekly feedback and listening groups, where community members³ could give direct input and opinions through phone and SMS.

Kondial FM was an effective tool to share approved health guidance and inform the community of best practices of preventing and slowing the spread of COVID-19 in South Sudan. It also was able to capture and debunk rumours, misinformation and misperceptions, as well as provide a platform for raising questions and providing feedback.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Kondial FM is available throughout Bentiu PoC and its environs. It reaches the total population in and outside the PoC, which is 111,

766 individuals⁴. However, practical access is limited to those with radios and/or access to radios.

CCCM ACTIVITIES

The CCCM teams worked with the Kondial FM radio talk show and conducted weekly live radio talk shows, which were attended by two CCCM staff, one male and one female. The program aimed at sensitizing the PoC population on COVID-19 prevention guidelines, responding to and debunking rumours that were actively discussed among community members. Through these weekly shows, CCCM staff also attended to community inquiries related to COVID-19. For example, a radio talk show was organized and attended by CCCM on May 21, 2020⁵. Topics discussed during the talk show included COVID-19 preventive measures, the protection issue of children playing around WASH facilities, and the issue of vandalism.

The talk shows brought several observations into view:

- Most callers were aware of the COVID-19 virus and preventive measures but highlighted the challenges to change their cultural norms of greetings and eating traditions.
- Some community members believed the rumours that the virus only affects certain groups of people.
- Complaints were made about community members not adhering to the precautionary and preventive measures, such as still gathering in tea stalls and restaurants.

To clarify and debunk rumours, CCCM teams shared the below information with the callers and listeners:

- COVID-19 can infect everyone, regardless of gender, race, age, and whether or not one lives in a hot or cold place.
- Reminders on essential COVID-19 preventive measures, including frequent hand washing with water using soap, maintaining social/physical distancing at all times, avoiding crowded places or group eating during the pandemic, avoiding touching your eyes, nose, and mouth and cough/sneeze into your elbow or tissue.



WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Close coordination among the CCCM cluster, CCCM implementing agencies and Kondial FM was essential and allowed Camp Management to broadcast clear and simple messages about COVID-19 prevention and answer feedback and questions. These

efforts were complemented by CCCM engagement with community leaders and through targeting gathering places such as religious spaces and markets for frequent and recurrent sensitization about COVID-19.

KEY ACHIEVEMENTS

1. The project utilised the well-known community radio station, Kondial 97.2 FM, to broadcast Camp Management radio talk shows, which allowed the community to call in to share thoughts and concerns.
2. Information shared during talk shows included topics selected by Camp Management, such as reminding community members to take ownership of facilities in the PoC and ensure that they are not vandalized, and ensuring that drainages are clean and children are not playing around water ponds as part of rainy season preparedness.
3. The CM agency was able to share information and reminders of COVID-19 preventive measures and debunk COVID-19 rumours, such as that the virus only infects people of a certain size or weight, and the virus cannot infect black people and/or only affects white people. Other variations on this rumour are that the virus only infects the wealthy, or those in government, or those who have the means to travel.

CHALLENGES

1. Limited access to radio sets by PoC community members

Most community members do not have access to personal radios and receive the information and news through their block leaders with access to radio. This communication method occasionally led to misinformation or misunderstandings.

2. Mobile network connectivity

The mobile network reception was unstable, preventing community members from calling in during the talk show to ask questions or share their views.

3. Inconsistency of talk-show and messaging scheme with PoC residents daily schedule

Talk shows and messaging coincided with IDPs' daily schedule, and messages were aired when most IDPs were engaged in livelihood activities or chores. This made them miss the opportunity to contribute and share their thoughts through calls during the talk show.





LESSONS LEARNED AND RECOMMENDATIONS

1. Focus group discussions showed that the use of radio to reach out to communities in a COVID-19 context was an effective communication method.
2. The majority of respondents⁶ indicated that radio was a major information source, and they preferred information to be shared on the radio in Nuer and Arabic in addition to door-to-door sensitization. Most of the community members trusted information coming from the radio.
3. Considering the level of illiteracy within PoC population, messaging through Kondial FM has proven efficient in delivering information to members of the population who may not be able to read IEC materials and messages posted on notice boards, and also to those with visual and mobility impairments. It is a crucial tool for expanding the accessibility of messaging.
4. Information-sharing and consulting with the community at all levels of the response is critical. Early sharing of information with IDPs helped them to make informed decisions. Common activities to support information sharing and the collection of feedback, such as radio programs, have been a major platform to reach out to community members within a short period.
5. There is a need to support households with portable radios in the PoC, which will enable CCCM and other service providers to increase their reach to community members on important issues in a short period of time through radio programming. One solution is to establish a Camp Management Radio/Podcast office/desk where Kondial FM can be aired all day, messaging and talk show schedules can be posted and IDPs can listen to messaging or make calls through mobiles stationed at this office/desk/point.

¹ PoC population count as of May 2020 provided by IOM DTM

² as cited by women and youth groups through the FGDs <https://southsudan.iom.int/sites/default/files/CCCM%20Q2%20Report.pdf>

³ https://internews.org/sites/default/files/2020-10/20200911_InternewsHIS_ebulletin.pdf

⁴ as above

⁵ https://internews.org/sites/default/files/2020-10/20200911_InternewsHIS_ebulletin.pdf

⁶ CCCM teams conducted a total of 11 FGDs with different age and gender groups in April 2020, where community members were asked on how they get their information about COVID-19

Acknowledgements

Internews, Kondial FM, IOM CCCM

AFGHANISTAN



CONTEXT

Plagued now by conflict for 40 years, Afghanistan has faced challenges with safety, security and natural disasters. Every one of the cross-cutting problems identified in the 2020 Global Humanitarian Overview¹ are currently affecting the people of Afghanistan. About 93 per cent of the population (35 million people) are living below the set international poverty line of 2 dollars per day. Out of this population, only 11.1 million people will receive humanitarian assistance, and many remain outside of the scope of the Humanitarian Response Plan. Ongoing conflict has led to displaced populations with rapidly increasing numbers of returnees and IDPs. 2020 recorded about 500,000 displaced people and 570,000 returnees. Around two-thirds of displaced households (65 per cent) reside in collective centres, open space, makeshift shelters, tents and poor transitional shelters that do not protect them².

High internal displacement, weak health, water and sanitation infrastructure, shrinking household incomes, and food insecurity are all challenges that Afghan people face on a daily basis, but now added to this are the overwhelming needs caused by COVID-19. About 2.8 million people have needs that are directly related to COVID-19 concerning their type of shelter and their inability to practice physical distancing and access sufficient priority household items and health and WASH facilities. The COVID-19 pandemic has not only exacerbated the existing humanitarian and development needs in the country, but has created new challenges that directly affect humanitarian response. The Afghan population consists

mainly of workers in the informal economy who are particularly vulnerable to the economic impacts of COVID-19, from lockdowns to physical distancing measures. COVID-19 compounds economic problems characterised by low productivity and spikes in food prices due to border closures and disruptions to supply chains.

Between January and May 2020, more than 39,000 people have been affected by floods, landslides, and other natural disasters. More than 75,000 individuals fled their homes due to conflict. In urban areas like Kabul, the impact is critical. The influx of thousands of people throughout the years into the city has caused the city infrastructure to be severely strained and not able to meet the rising needs. While displaced people continue to trickle into the city as a result of surrounding conflict, there has been a significant increase in the number of people who are being forcibly deported from various countries through flights into Kabul, a practice which has raised much concern and is currently the subject of government negotiations and dialogue. Nearly 16,000 people have been deported from Turkey, 25,000 returnees from Pakistan and 430,000 returnees from Iran driven by the country's declining economy as well as deportations from other European countries. These returns contribute to escalating the crisis in Kabul. While most of the returning population have found living conditions with the resident population, thousands of returnees and IDPs still live in makeshift shelters without hygienic conditions and limited water access.

PROTECTION RISKS

The protection risks identified are displacement, cross border movement and disruption in livelihoods and income generation. Inability to access services such as health, education, shelter and WASH facilities pose additional risk. Women and children are disproportionately affected by Afghanistan's humanitarian crisis. In 2020, children were affected by persistent violence and mental health problems with grave consequences for their development, as well as limited access to education and healthcare services. Women and girls are subjected to high rates of violence (whether sexual, physical or psychological), child marriage and forced domestic labour. IDPs are susceptible to the harsh weather conditions, limited household supplies, absence of centralised services and mental health or psychosocial issues.

Large numbers of people (including IDPs, returnees and host communities) are at heightened risk of widespread transmission of COVID-19. Returnees often reside in informal settlements with limited access to basic services and insecure land tenure. Moreover, Persons with Disabilities face negative stigma, discrimination and lack of access to services and livelihoods, which keeps them in a vicious cycle of isolation and poverty and makes it difficult for the person to compete in the job market. They are also exposed to increased risk of family separation, loss of assistive and mobility devices, and difficulties with accessing information.

¹ <https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/gho-2020.pdf>

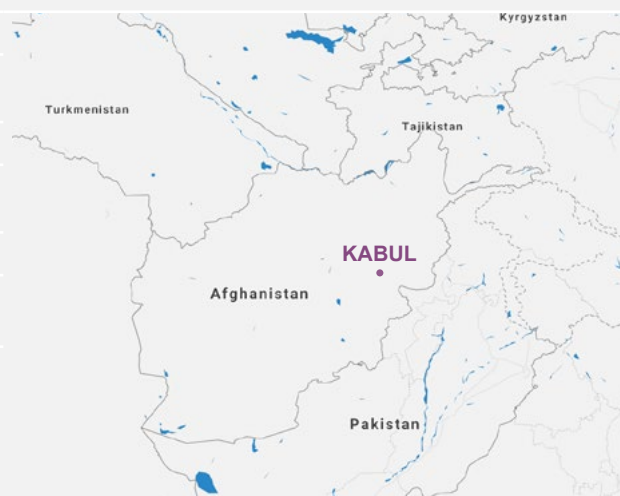
² REACH Initiative, WOA Assessment, 2019



AFGHANISTAN

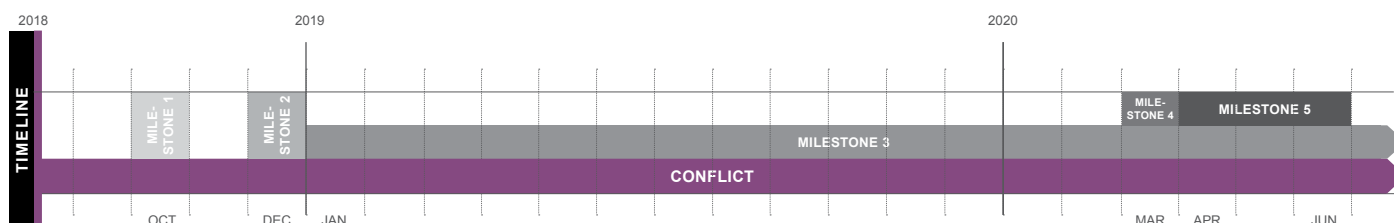
COMMUNITY GOVERNANCE CAPACITY BUILDING

Cause of displacement	Conflict
Date of event causing displacement	25 August 2017 - Present
People displaced	9,960 individuals
Project location	PD 22, Hussain khail, Kabul, Afghanistan
Project duration	12 months
# Targeted by project	2,225 individuals (90% IDPs, 10% HC)
CCCM coordination mechanism	<ul style="list-style-type: none"> Community Centers NRC CM Community representative structure Strategic partnership with service providers and clusters



Summary

Through this project, Camp Management supported the community in setting up a governance structure and established two-way communication and a referral pathway. The IDP committees communicated directly with the CM agency and service providers via coordination meetings that gave committee members the ability to discuss needs, gaps, and solutions. The governance structure prioritized women's participation through dedicated women committees.



- | | | | |
|--|---|--|---|
| <p>1 10, Oct 2018</p> <p>2 09, Dec, 2018
13, Dec, 2018
16, Dec, 2018</p> | <p>Community Centre set up consisted of a process of selection of location at a good distance from the settlements.</p> <p>Committee teams' election by community:</p> <ol style="list-style-type: none"> 1. CCCM Community Centre Information shared 2. Committee members' Roles & Responsibilities discussed 3. Election committees on different days. 4. On Election day community residents and candidates gathered. 5. Candidates were voted on, winners (male and female) announced. | <p>3 2019- onwards</p> <p>4 March, 2020</p> <p>5 April- June 2020</p> | <p>Localised coordination meetings set-up in the community centres.</p> <p>Covid-19 pandemic movement restrictions in Kabul.</p> <p>Localised coordination and referral continued over online platforms and mobile phones.</p> |
|--|---|--|---|

PROJECT OVERVIEW AND OBJECTIVES

The displaced population of the informal settlement of Hussein Khail already faced many challenges with access to potable water, education services and health clinics prior to the Covid-19 pandemic. These challenges were further increased by the pandemic, as residents had to walk miles to the public hospital, presenting many risks particularly to women and girls. A majority of the IDP families were unable to pay for transportation costs or afford to go to private clinic and hospitals.

With these gaps in lifesaving information and access to services, the CCCM agency worked with women, men, girls, and boys of the displacement-affected communities to address their concerns and build their capacity and enhance their participation in decision-making roles. This project supported the community in setting up a governance structure through an electoral process and established a two-way communication pathway for the identification and referral of vulnerable persons in need of assistance. In addition, the project's inclusive and participatory method supported community capacity building, coordination and referral mechanisms to health clinics and other essential services.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Hussain Khail informal settlement is one of the Kabul Informal Settlements (KIS) located in PD22 in Kabul Province, Afghanistan. Since 2017, there are almost 1,200 households (9,960 individuals) living in the area, encompassing both Pashtun and Tajik ethnicities. Most of the population fled to Kabul due to conflict in their areas of origin. Due to their seasonal movement and the resource availability in the settlement the number of IDPs living in Hussain Khail fluctuated significantly.

The program used an area-based approach, due to its urban location and complex population consisting of IDPs/ returnees and vulnerable resident community. CCCM teams followed the Urban Displacement and Out of Camps (UDOC) approach in targeting by neighbourhoods according to:

- high numbers and density of returnees and/or IDPs in the area,
- significant gaps in humanitarian assistance in the neighbourhood,
- CCCM staff ability to access the area.

CCCM ACTIVITIES

Considering the out-of-camp context and complex character of displaced population, the programme included several interconnected interventions:

1. Provision of information and two-way communication

The displaced population received information on humanitarian assistance through CCCM outreach teams and information sessions at the Community Centre located in the neighbourhood. Additionally, service directories were regularly updated with current list of service providers.

The access to information was especially important with the emergence of the COVID-19 pandemic in March 2020 when restrictions on movements made it difficult for humanitarian actors to access the site. The Community Centre had to close for two weeks; however, it was equipped with all essential information. Two-way communication between the community, CCCM teams and service providers was established through mobile phones. The committee members monitored the COVID-19 situation and informed the CCCM teams of the communities needs. Committee members were coached by the CCCM outreach team on how to respond and address the fast-developing situation.

2. Community mobilisation and capacity-building for social cohesion

A community representative structure was established in the Hussain Khail settlement, encompassing both male and female members through an electoral, participatory, and consultative process. CCCM outreach teams trained the committee members on coordination, right to participation and accountability. The committee members were actively participating in CCCM activities and attend regular meetings in the Community Centre.

To respond to the gaps and protection risks identified by the community, a coordination meeting between a specialised NGO¹ and community committee members was facilitated by the CCCM

team. The committee members explained the challenges faced by the IDP community, particularly in terms of accessing health services. The NGO conducted an initial area assessment at Hussain Khail informal settlement and set-up a mobile health clinic services in the settlement to respond to the needs of the displaced population. With the emergence of the COVID-19 pandemic, the mobile health clinic reoriented their priorities to raising awareness on preventive measures and treatment centres and distributing hygiene kits to the most vulnerable families in the informal settlement.

3. Enhancing Women's Participation

Consultations with the community identified that women and girls' movements and awareness of lifesaving information and rights were significantly restricted due to cultural barriers and lack of representation of women in decision-making roles. In response, CCCM teams engaged with women and girls living in Hussain Khail neighbourhood to raise awareness of their rights and build trust within the female community. By using female community mobilizers, trusted relationships were established, and the Community Centre became a 'safe space' for women to express their needs, challenges and to feel listened to by the female committee members. These discussions allowed the CCCM teams to target specific protection risks identified by the resident women. To ensure that women felt safe at the Community Centre, male and female members of the committee met in separate meeting rooms. Additionally, on days when the female members met no male staff or community mobilisers were present at the centre. This allowed women to openly express themselves and to build close relationships with other female community members.

Once trust was established, women's participation in the Community Centre activities and committees increased. This was not without challenges due to perceived gender roles of women. However, through the continued CCCM agency's engagement, women's participation remained high and is a key achievement of this program.

4. Referrals and community-based protection

Prior to establishing a community referral system, the CCCM teams and IDP committees were trained on protection and how to identify problems and gaps in the community. The community teams received these trainings in the Community Centre and learnt from community-based case studies. With the participation of IDP committees, the CCCM teams were able to identify active organisations and service providers who had capacity to work in Hussain Khail site.

The CCCM team contacted the identified organisations to hold a coordination meeting with the participation of CCCM community teams and IDP committees. This gave the IDP committees the opportunity to voice their concerns directly to organisations that could help respond. Through this coordination meeting, the organisations agreed to accept referrals directly from the community. As a result of this process, an effective and safe referral pathway was established.

5. Inclusive and localised coordination and advocacy to improve quantity and quality of assistance and progress towards durable solutions

The CCCM agency issued introduction letters to other organisations explaining that the Community Representative Committee is a recognised and trained community structure. The coordination meetings with the service providers and committee members at the Community Centre continued on a regular basis in order to discuss needs, gaps and solutions. This helped to build trust between the committee and service providers, and further allowed the committee members to access services and make urgent referrals, such as referrals for medical and health issues.

The Community Centre fortunately reopened after a brief closure due to COVID-19 once it was equipped with hand sanitisers, face masks and cleaning materials. However, due to restrictions, the coordination meetings were adapted to online platforms, ensuring that the meetings could still take place between CCCM teams, service providers and the committee. Through these calls, modalities and referrals were discussed as well, which allowed for successful interventions by humanitarian actors. Once the transmission levels of the virus reduced, the CCCM agency was allowed back into the site and could support the community directly and ensure the Community Centre continued operating normally.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The success of the project hinged on setting up a functional coordination mechanism between the CCCM agency, service providers and the community elected committee structure. Therefore, coordination and accountability to the affected population were key aspects of this project.

Once the committee was established, the next step taken by the CCCM teams was to coordinate with service providers, humanitarian actors, and the community, building relationships and trust to ensure that the community referral mechanism would be successful. This proved to be especially important during the COVID-19 pandemic in referring urgent cases and coordinating on services needed by the community.

The Community Centre and the committee were established prior to the pandemic, which enabled smooth coordination between the stakeholders and the committees to address urgent COVID-19 needs remotely. This could not have been done if these community mechanisms were not present. Through this community coordination mechanism, any emergency could be addressed through the information present in the Community Centre (emergency numbers, service providers contact list, contacts of CCCM teams). These structures allowed the community to address the challenges of the pandemic in a prompt manner. Moreover, through the coordination structures, the committees were trained on COVID-19, public health services and who to contact if there was a case identified in the community.



Case Registration



KEY ACHIEVEMENTS

1. Awareness about COVID-19 and service providers was disseminated to over 700 households.
2. 100 individuals were referred to various service providers for food assistance, health care, education, legal assistance, and livelihoods assistance.
3. 13 committees (6 females and 7 males) including 72 individuals received capacity building trainings.
4. Coordination meetings were successfully organised and conducted with different organisations and the community,

which were adapted to the online platform 'Zoom' to ensure continued engagement and coordination during the COVID-19 pandemic.

In these meetings, the agenda discussed included Introduction of IDP committee, organisations and their activities, community members' problem sharing and referral of urgent cases.

5. Enhancing women's participation in the site by ensuring that 50% of participants in the community committee structure are women.

CHALLENGES

- Limited resource availability compared to the level needs of the displaced communities.
- Rejection of some referrals and interventions, for example those concerning shelter, latrines, and water, due to land ownership by government².
- Influential people limiting women's participation in different project activities in the settlement.
- Lack of follow up by service providers on referred cases.
- Expensive transportation costs for community members who follow up on their needs with service providers.
- Lack of interest and participation by government entities.



Coordination Meeting

LESSONS LEARNED AND RECOMMENDATIONS

- **Allocation of more transportation funds** in terms of supporting community committee members, specifically in identifying and meeting local service providers.
- **Increase coordination interventions and activities with authorities** to ensure durable solutions.
- **Encourage government involvement.**
- It was essential **to have the community centre and committee established** prior the pandemic, as trust relationships were already established. This allowed the coordination efforts to continue through remote and online means.

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Acknowledgements

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 Mate Bagossy

¹ Organisation of Human Welfare (OHW) is a non for profit, non government organization established in 2007 and based in Kabul. http://www.ohw.org.af/who_we_are.html

² According to law Afghanistan does not allow NGOs to use the government land for their intervention.



B. CAPACITY BUILDING

Since its inception in 2015, one of the main responsibilities of the Global Camp Coordination and Camp Management (CCCM) Cluster has been to **build the competencies of CCCM stakeholders working in field operations**. A considerable amount of time, energy and resources has been invested to improve the quality of interagency CCCM responses and ensure effective coordination and management of CCCM operations.

Fifteen years on, capacitating and empowering Cluster Coordinators, Camp Managers, and national authorities to respond to the assistance and protection needs of displaced persons living in camps and camp-like settings remains crucial.

In 2020, COVID-19 accelerated cluster partners' approaches to learning with new and innovative methods. Online learning and Zoom trainings became the norm in order to provide support to teams taking on new roles and trying to reach a wider range of stakeholders, individuals, and organizations. Capacity efforts in 2020 aimed to support local NGOs and national authority counterparts, who are frequently the first responders to CCCM operations as they act in the role of de facto camp managers during sudden onset disasters and in hard-to-reach areas.

The CCCM Cluster and partners each rose to this challenge in different ways.

In Somalia, capacity building initiatives focused on strengthening new coordination fora and was key in obtaining the buy-in of local authorities on the added value of mobile CCCM activities. In Yemen, the Referral and Escalation System (RES) provided a formalized way to address gaps that cannot be resolved at site level as part of an CCCM area-based approach. In Indonesia, the first online CCCM localization training was piloted with national NGOs and the Ministry of Social Affairs over a period of six weeks. In Bangladesh, an agency focused on technical capacity building and trained refugee and host community members in solar light installation and maintenance. Another initiative in Bangladesh established a training platform to facilitate training of government site management staff using context specific material.

Global CCCM Cluster Capacity Development Working Group

The aim of the Capacity Development Working Group (CDWG) is to exchange views on adapting, delivering and improving operational capacity in CCCM according to the Global CCCM Cluster mandate and strategy, which prioritizes the predictable, timely, effective and quality management and coordination of camps and camp-like settings in response to humanitarian crises. The objective of the Capacity Development Working Group is to facilitate exchange among trainers on learning needs, best approaches, new resources and tested methods with focus on strengthening CCCM operational capacity, coordination, and tools. In addition, the CDWG is a forum for driving the Global CCCM Cluster to develop new capacity building initiatives, exchange information and knowledge around CCCM learning initiatives, as well as provide linkages to learning initiatives from other Clusters.

Localization

While the Global CCCM Cluster has yet to arrive upon a set definition for localization, the World Humanitarian Summit in 2016 has broadly described it as "finding more support and funding tools to local and national responders" and for humanitarian action to be "as local as possible, as international as necessary". The lead agencies of the Global CCCM Cluster alongside its main Strategic Advisory Group (SAG) members were among the agencies that signed onto this ambitious commitment. The aim is to improve the quality of assistance by using the strong relationship of the local organizations with the local context, politics, and culture, thus better serving the affected people while also reducing the transactional costs.

CAMP MANAGEMENT STANDARDS REFERENCE

STANDARD	INDICATOR	REMARKS	CASE STUDY REFERENCE
1.3 SMA and site management team capacity Site management teams have the operational and technical capacity to manage the site.	1.3.3 % of site management staff who have completed adequate training related to their role.	Site management teams need to be supported by organizations to receive core CCCM training in the minimum topics of core CCCM training (roles and responsibilities, participation, providing information and listening back, coordination, site improvement and site closure.) In circumstances where field staff are not trained, the sector lead should appoint support to help them implement the minimum standards for camp management through capacity building. Local NGOs have proved to be successful site managers. Where access to the site population is granted, and its overall acceptance is achieved, this can be a favorable option.	B.1 Somalia Providing CCCM support to communities and key stakeholders B.5 Bangladesh Joint Capacity Sharing Initiative
3.2 An appropriate environment All site residents have an environment that is physically, socially and culturally appropriate.	3.2.1 There is an agreed site plan developed with community involvement and appropriate technical expertise that meets the needs of all groups in the displaced population.	The role of site managers and their teams in planning sites or site improvements is to ensure that all stakeholders, including the site population and host communities, participate in developing the site plan.	B.4 Bangladesh Light for Rohingya
4.1 Site coordination Services are coordinated to meet the needs of the displaced and host populations.	4.1.1 Coordination meetings include all stakeholders or stakeholder groups	In non-camp settings, the exchange of information will be between a broader range of stakeholders including local authorities. In these circumstances, the role of the site management team will be to support site/area-level coordination by convening and connecting various stakeholders, including community members (both displaced and host communities), and the strengthen/establish communication and coordination mechanism(s).	B.2 Yemen CCCM Referral and Escalation System
5.1 Transition to a new SMA and site management team Site populations continue to receive appropriate and timely support and service provision during site management transition periods.	5.1.1 % of the site population who are satisfied with services provided during transition periods.	Incoming SMAs may be humanitarian organizations, government authorities (local or national) or community groups. It is crucial to build capacity and provide technical support and overlap between senior staff and new agency staff coming in to complete activities and consultations.	B.5 Bangladesh Joint Capacity Sharing Initiative

SOMALIA



CONTEXT

Since the onset of the Somali Civil War in 1991, a result of colonial divisions and the eventual breakdown of the democratic government, Somalia is drowning under a sea of conflict and violence championed by radical groups, struggling to take control of the different regions. This has raised a lot of concern as more and more civilian populations are killed or displaced. In addition, disasters mainly triggered by drought and flooding have aggravated food insecurity and also contributed to past and current displacement in Somalia. Till date, over 2.6 million IDPs were recorded in Somalia and over 750,000 Somali refugees remain in neighboring countries (Kenya, Yemen and Ethiopia).

Conflict and violence increased sharply in Somalia by mid-2020 and triggered significant new displacement caused by conflict and natural disaster, larger than the total displacement recorded for the whole of 2019. A major conflict incident took place in Gedo in the southern state of Jubaland, where the outbreak of new conflict led to 56,000 displacements between February and March 2020.

between April and May Flooding triggered 505,000¹ new displacements with approximately a quarter of IDPs living in the IDP sites displaced for a second time. This was followed by the Tropical Cyclone Gati devastating parts of Somalia in November 2020 and resulted in flash flooding in Puntland's Bari region.

The 2020 rainfalls in East Africa, also created the conditions for a severe locust infestation that posed a significant threat to food production and agriculture in Somalia and other surrounding countries. Most of the Somali population depend on agriculture for their livelihoods, and those whose crops were destroyed were forced to move in search of assistance and other channels of livelihood. Drought triggered significantly fewer displacements than in previous years, at around 5,000 and Bushfires in Galgaduud region also led to 4,000 displacements in June, mostly of pastoralists whose traditional grazing areas were burnt.

The humanitarian situation in Somalia is weak and with the arrival of the Covid-19 pandemic the country faces a new threat. Almost half of Somalia's confirmed Covid-19 cases as of July 2020 were recorded in the Banadir region, which hosts about 500,000 IDPs in

around 700 informal settlements. Movement limitations and loss of livelihood are expected to lead to a decrease in remittances, which are an essential source of income for many IDPs. In Somalia, about 40 per cent of the population receives remittances from relatives and friends abroad. A survey conducted in displacement sites in Mogadishu found that more than 65 percent of IDPs identified inflation as one of the main impacts of Covid-19 on their daily lives, as prices for food and services skyrocketed. The pandemic has also impeded efforts to carry out durable solution initiatives in Somalia as human and financial resources have been redirected to respond to floods and other challenges.

In Somaliland, persistent and complex series of natural and manmade humanitarian crises are drivers to displacement. According to the FSNAU- FEWS NET- Post Gu Technical release in September 2019, more than 650,000 people were at risk of crisis or worse (IPC Phase 3 or higher) through to December 2019. This increase of people in these phases is testament to the impact of underperforming rains and the drought like conditions which are leading to displacement. This trend is present in all five regions of Somaliland: Awdal, Woqooyi Galbeed, Togdheer, Saanaag and Sool.

Tension and occasional clashes between Somaliland and Puntland over the contested Sool and Sanaag regions has led to displacement of more than 1,000 households to nearby locations in 2019. According to reports from Puntland's Humanitarian Affairs and Disaster Management Agency, the situation remains tense and hostilities could resume anytime. Most of the primary IDP settlements are in Crisis or Stressed in the presence of humanitarian assistance. Conditions for IDPs are likely to deteriorate unless humanitarian support is scaled-up. Camp Coordination and Camp Management is a relatively new approach for key stakeholders in Somaliland, including government officials and humanitarian agencies. CCCM projects funded and implemented in 2019 will help target 16 informal sites in Hargeisa and 3 informal sites in Sanaag and facilitate and support the establishment of effective coordination, information management, site management and equitable service delivery to IDPs in Somaliland.

PROTECTION RISKS

A number of serious protection risks persist in the country, including attacks against civilians and gender-based violence (GBV). Vulnerable groups include women, children, people with disabilities, older persons and members of marginalized groups are among those who are particularly vulnerable. Girls in internally displaced person (IDP) camps are exposed to early or forced marriage as a coping mechanism. School closures have impacted child development and access to education. Many IDPs whose

homes have been damaged or destroyed face the prospect of prolonged displacement. Forced evictions are also one of the main triggers of secondary displacement in the country. IDPs living in rented accommodation are exposed to a heightened risk of eviction. Blocked roads from flooding in and around towns, prevent access to affected populations who need emergency shelter, food, clean water, sanitation and health services. Covid-19 and inadequate health facilities have led to an increase in mortality.

¹ 2020 Mid-year update



SOMALIA

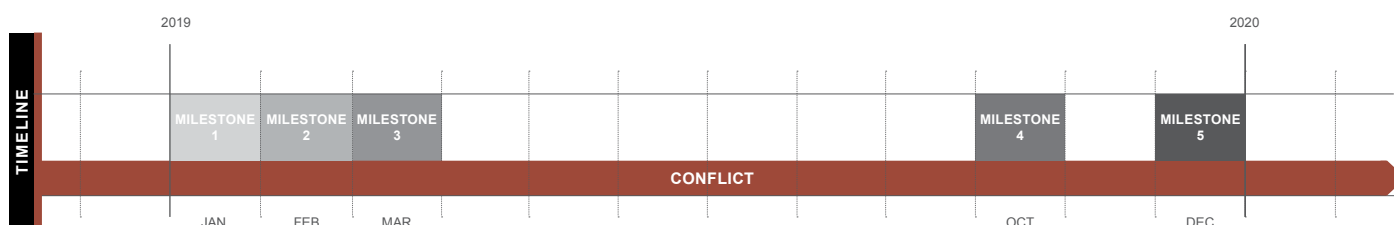
PROVIDING CCCM SUPPORT TO COMMUNITIES AND KEY STAKEHOLDERS IN SOMALILAND

Cause of displacement	Drought / Insecurity
People displaced	2,6 million (Somalia)
Project location	Hargeisa (Woqooyi Galbeed), El Afweyn (Sanaag), Burao (Togdheer), Erigavo (Sanaag), Ainabo (Sool)
Project duration	12 months
# Targeted by project	70,296 individuals (Hargeisa), 7,176 individuals (El Afweyn)
CCCM coordination mechanism	<ul style="list-style-type: none"> • CCCM National Cluster Somalia • CCCM Sector Somaliland (Sub National Cluster reporting to the Somalia CCCM National Cluster)



Summary

Following the activation of the CCCM Sector in Somaliland, capacity building initiatives targeting local authorities, displaced communities and humanitarian partners were developed to introduce stakeholders to the newly activated sector. The initiatives aimed to improve stakeholders' knowledge of the roles and responsibilities of actors involved in CCCM responses. The initiatives contributed to enhanced coordination and provided quality assistance and protection to the displaced communities living in urban sites.



- 1 January 2019 **CCCM activities rolled out in Hargeisa**
- 2 February 2019 **Started reporting on CCCM activities to the Protection Sector Partner**
- 3 March 2019 **Conducted a CCCM training for NDRA**

- 4 October 2019 **Established the CCCM Sector for Somaliland**
- 5 December 2019 **Conducted trainings and workshops in Burco, Ainabo, Erigavo and El Afweyn to strengthen the newly established coordination fora**



PROJECT OVERVIEW AND OBJECTIVES

The capacity building initiatives aimed at strengthening the newly established coordination fora for relevant stakeholders in order to contribute to a more informative response to IDP needs. This was driven by the need to enhance coordination and scale up humanitarian support across internally displaced persons (IDP) settlements in Somaliland and followed the formal activation of the Somaliland CCCM Sector, a sub-national cluster reporting to the Somalia CCCM Cluster. The capacity building initiatives

were created in order to develop shared understanding of camp management roles and responsibilities, Accountability to Affected Population (AAP), coordination and information management in camps and camp-like settings to ensure improvement in service provision. Through the capacity building trainings, stakeholders gained a robust knowledge of site management and coordination necessary to safeguard participation and access to assistance and protection for the displaced population.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

In 2019, CCCM interventions across Somalia and Somaliland¹ supported vulnerable displaced populations living in informal settlements in Somaliland. To identify the areas to prioritize for interventions, the Somalia CCCM Cluster consulted partners and accessed existing assessments, secondary data sources and available District Site Assessments. In addition, an annually produced information management product² consisting of maps of informal sites was used to assign district priority scores based on indicators agreed with the Cluster.

To determine prioritized intervention within the districts, assessments were conducted in coordination with the local authorities. Through this process, Hargeisa and El Afweyn districts were selected. Hargeisa district is the area of Somaliland with the largest displacement caseload. The sites targeted in Hargeisa were urban sites with a mixed caseload of long-term displacement and new arrivals. El Afweyn is a district in Sanaag, an underserved area,

where displacement is triggered by drought and inter-clan conflict in the area.

In these districts:

1. 16 informal IDP sites in Hargeisa were targeted with a total of 70,296 individuals participating,
2. 3 informal IDP sites in El Afweyn were targeted with a total of 7,176 individuals participating,
3. 45 representatives from the local authorities³ and 60 partners from humanitarian organizations were targeted through a series of workshops and trainings following the Global CCCM Cluster training package⁴, which was contextualized and adapted. This capacity building aimed to strengthen coordination for the newly established CCCM sector as well as regional and district level coordination.

CCCM ACTIVITIES

Due to the nature of displacement in Somaliland, a mobile CCCM approach for site monitoring was tailored to both the country and local levels. Key activities when launching the mobile approach included the development of a training regime to strengthen the national response along with regular capacity building at site level. Site level capacity building included local stakeholders such as humanitarian partners and relevant government actors⁵ of Burao, Ainabo, Erigavo and El-Afweyn. These capacity building events were the first in these districts and complemented trainings previously conducted for National Displacement and Refugee Agency (NDRA) personnel and humanitarian partners in the capital of Hargeisa in March 2019.

Each training lasted three days and included modules such as Introduction to CCCM, Coordination and Information Management, Support to Community Participation, Communication with Communities (CwC) and Accountability to Affected Populations (AAP). The trainings were contextualized to suit the Somaliland coordination scenarios and mechanisms, and included explanation of CCCM Cluster Terms of Reference and the introduction of CCCM Cluster-endorsed reporting tools and reports, from the region/district to the Hargeisa main coordination hub. These reports capture key information on displacement in the districts, displacement trends and key updates on service provision, gaps and priority needs stated by the community.

With the introduction of the reporting initiative in the districts, the CCCM Cluster - for the first time since its activation - received bi-monthly reports⁶ on key displacement issues from the districts

with no dedicated camp management agency. It included updates on population movements, population needs and participation. The reporting enhanced coordination and information sharing at regional and district level, improving field responses in displacement sites across Somaliland.

Three full-day workshops were organized for partners and service providers active within 3 areas. The workshops raised awareness on the establishment of CCCM in Somaliland and strengthened information sharing on displacement and displaced population needs from the district level to the Hargeisa coordination hub. The workshops focused on introducing CCCM to field-based humanitarian partners and service providers and exploring the function of the CCCM Sector in Somaliland, including roles and responsibilities, lines of communications and available information management tools.

CCCM intervention significantly improved safety and security in sites through site maintenance and site improvement activities. In addition, a safety audit workshop was organized for local authorities, humanitarian partners and camp management committee members to discuss findings from the Hargeisa safety audit conducted in 2019. It strengthened the capacity of the stakeholders and supported their concrete action plans to reduce GBV risks and vulnerabilities in the sites. In an effort to improve site safety and security, solar lights were installed to provide dusk to dawn lighting, which allows the residents to move freely at night, make use of latrines and wash stations and keep small shops open late into the night.

¹ Somaliland is a self-independent state of Somalia that is recognized as an autonomous region consisting of five regions, i.e. Togdheer, Sanaag, Sool, Woqooyi Galbeed and Awdal with Hargeisa as its capital city. It is situated in the northern part of Somalia bordering the republic of Djibouti to the West and Puntland State to the East. Additional information available at: <https://www.sheltercluster.org/hub/somaliland>

² by REACH INITIATIVE

³ Local Authorities from El Afweyn (Sanaag) and Hargeisa. These locations were chosen in coordination with UNHCR as sector lead and NDRA, the national displacement agency, as they

present the highest numbers of displaced individuals in Somaliland

⁴ Topics included Humanitarian Principles, Roles and Responsibilities in CCCM, Protection Mainstreaming, Information Management and Coordination, Community Participation and Communicating with Communities

⁵ Staff of humanitarian organizations intervening in displacement sites, NDRA (National Displacement and Refugee Agency) staff, staff from local municipality offices

⁶ The Somalia CCCM Cluster received information from partners, and reports were taken and adapted to support NDRA personnel working in Burao, Ainabo, Erigavo and El Afweyn

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The CCCM Sector in Somaliland is led jointly by CCCM partners and the Somali National Government. The CCCM Sector acts as a subnational cluster for CCCM in Somalia and is crucial part of the Inter-Sector Coordination Mechanism.

Community participation, community engagement and Communication with Communities were put at the center of all intervention. CCCM partners worked closely with all IDP stakeholders to enhance coordination and improve protection and

assistance at site level. Camp managers, who are central to effective site management, were trained on different topics, including coordination, sustainable leadership, ability to take responsibility for the continued management of the sites and ensuring knowledge remains in the community beyond the timeline of the intervention. This allows for positive outcomes to be achieved and to take root and grow for the benefit of the target communities.

KEY ACHIEVEMENTS

- Established and strengthened coordination mechanisms for the whole of Somaliland through training and capacity building initiatives.
- Built the capacity of IDP stakeholders, including camp management committees, local authorities and humanitarian partners.
- Improved site safety and security through site maintenance and site improvements.
- Improved information management through service delivery monitoring and development and circulation of information management products.
- Promoted the participation of the affected population through site-level coordination meetings, casual labor, Communication with Communities, trainings and data collection.

CHALLENGES

- Due to limited funding, it was not possible to expand the capacity building activities to Awdal region and other crucial districts for the displacement response in Somaliland.
- Limited funding also limited the presence of CCCM actors to only certain areas of the country.
- Strategic and technical capacity building initiatives must also be accompanied by practical and day to day project management capacity building in order to support the localization process.





LESSONS LEARNED AND RECOMMENDATIONS

- **Capacity building initiatives are key** to obtain the buy in of local authorities on the added value of CCCM activities.
- **Strengthening coordination at the site and area levels** goes hand in hand with building the capacity of key stakeholders, including the camp population, local authorities and other humanitarian partners.
- The localization process must be designed based on **comprehensive and long term strategies for building capacities** at the local level.

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Acknowledgements

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YEMEN



CONTEXT

Yemen has commonly been described as the largest humanitarian crisis in the world, with over 24 million people in need of humanitarian assistance. Political instability and the rise of insurgent groups since 2015 has submerged the country in violent attacks and military clashes. Civilian populations are caught in the middle and over 100,000 people have died in combat. The government has been unable to provide public services such as water, electricity, and fuel to effectively respond to the growing humanitarian crisis. Consequences of the war include mass displacement, disruption to livelihoods and damage to housing, land and property. Since the beginning of the conflict, an estimated 4.3 million people have fled their homes, including approximately 3.3 million people who remain displaced and 1 million returnees. Approximately 6.7 million people need emergency shelter or essential household items, including IDPs, host communities and returnees¹.

In 2020, 171,954 IDPs and 10,788 returnees were recorded, with a majority (49 per cent) living in urban and rural settlements. The governorate of Marib counts the highest number of displaced households (12,828). There are over 1,600 informal and spontaneous IDP hosting sites and no formal camps in Yemen. Conflict (82%) and natural disasters (13%) have caused most displacements, particularly in Marib, Al Hudaydah, Al Dhale'e, Tiaz, Al Jawf, and Hadramaut governorates². Other factors such as economic conditions, health and COVID-19 have caused the remaining 5% of displacements. Yemen was also hit with unprecedented flooding in

2020, which left thousands of people homeless and impacted IDP sites.

With the emergence of COVID-19, Yemen is presented with another situation that has shown to already worsen the current humanitarian crisis. Some of the major consequences of the pandemic are restricted humanitarian access to vulnerable populations and limited access to services and facilities such as health facilities. Although migration has significantly declined since the onset of the pandemic, from January to October 2020 an estimated 34,160 migrants arrived in Yemen, 13,895 Yemenis returned from the Kingdom of Saudi Arabia, and another 266 Yemenis returned from the Horn of Africa. The migrants were coming primarily from Ethiopia (93%) and Somalia (7%), with 88% of those tracked heading for Saudi Arabia and 12% towards Yemen. Lack of economic opportunity, political instability and/or environmental degradation are cited as the main reasons for migrating with the intent to cross irregularly into Saudi Arabia.

Famine and food insecurity are also major concerns in Yemen. Over 230 districts are reportedly food insecure and more than half the country's population are hungry and malnourished, especially children (2.1 million) and pregnant or lactating mothers (1.2 million)³. Families mostly depend on food assistance as their livelihoods have been disrupted by the conflict.

PROTECTION RISKS

IDPs continue to be killed and injured by landmines and unexploded ordnance contaminated areas. The damage and closure of schools and hospitals have disrupted access to education and health services, leaving children vulnerable. Vulnerable groups, including children, women, girls, the elderly, IDPs and marginalized people suffer from destroyed livelihoods, limited income opportunities and reduced ability to purchase food and other necessities. Despite ongoing humanitarian assistance, food insecurity remains a major risk as over 20 million Yemenis are food insecure, with many suffering from malnutrition and hunger. Sanitation and clean water are in short supply, and, coupled with poor access to health services, the potential of a disease outbreak (COVID-19 and cholera) in the settlements has significantly risen.

Women and girls are especially exposed to protection risks due to a wide range of contributing factors linked to their displacement, poverty and economic dependency. Gender-Based Violence (GBV) is prevalent in the IDP displacement sites, with women and girls being targeted for a range of abuses. An increase of GBV incidents can be linked to an increase of negative coping mechanisms, for instance, parents having to resort to child marriage to protect girls from sexual harassment and abuse.

In Yemen, gaps in services can now be escalated through the Referral and Escalation System (RES). Because the CCCM response in Yemen takes an area-based approach, the RES provides a way for decentralized sites to escalate gaps up through the inter-agency levels of coordination for resolution.

¹ [Yemen Crisis Overview](#) | OCHA (unocha.org)

² Displacement Tracking Matrix IOM (Yemen 2020) <https://dtm.iom.int/yemen>

³ [Humanitarian Response Plan Yemen](#) (Extension June to December 2020)



YEMEN

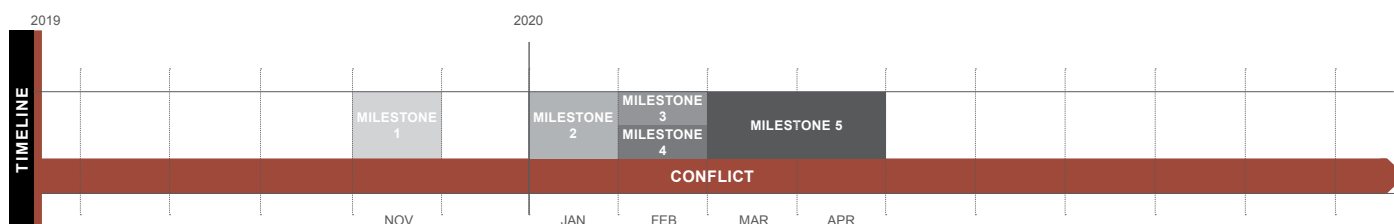
CCCM REFERRAL AND ESCALATION SYSTEM (RES)

Cause of displacement	Conflict
People displaced	3,6 million
Project location	Yemen, country wide
Project duration	On-going
# Targeted by project	1 million individuals
CCCM coordination mechanism	National and Sub-National Cluster Coordination; area-based Coordination



Summary

The Referral and Escalation System (RES) was developed to ensure the logging and tracking of site level multi-sector assistance gaps until their resolution and to fulfil the roles and responsibilities of each coordination structure. To this effect, the system offers greater Accountability to Affected Populations (AAP) and emphasizes the need for localised coordination by decentralising engagement at area level.



- 1 November 2019 Concept of RES discussed with partners
- 2 January 2020 Concept paper approved by Cluster
- 3 February 2020 Online system technically initiated

- 4 February 2020 Area-Based Approach agreed with CCCM Cluster partners and presented to OCHA
- 5 March - April 2020 RES System in testing phase and trainings held



Area coordinaton meeting with key stakeholders - West Coast 2019



Coordination meeting with the area coordinator (SDF) and administration authorities (SCMCHA) - Al-Bayda 2021

PROJECT OVERVIEW AND OBJECTIVES

Following the Camp Coordination and Camp Management (CCCM) Cluster's core mandate of improving living conditions during displacement and ensuring assistance and protection of IDPs at hosting sites, the CCCM Cluster in Yemen has established a Referral and Escalation System (RES) through which response gaps are raised and tracked at different coordination structures. The aim of this system is to log and track site level multi-sector assistance gaps until their resolution, and to enforce the roles and

responsibilities of each coordination structure. The RES aims to be established country-wide and utilized by CCCM partners in all sites in Yemen. The Referral and Escalation System is rolled out through an online database¹ that allows logging of referrals, escalation to a higher coordination structure, and tracking of gap determination progress. This system is utilized only when a site level issue cannot be resolved by the CCCM partner through site level coordination as part of their regular programmatic activities.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

The targeting for the RES was based on districts rather than sites due to the area-based nature of CCCM activities in Yemen. Although the project is focused on assisting IDPs, service upgrades, such as

access to potable water, take place on a municipal scale, therefore also providing a benefit to the host community.

CCCM ACTIVITIES

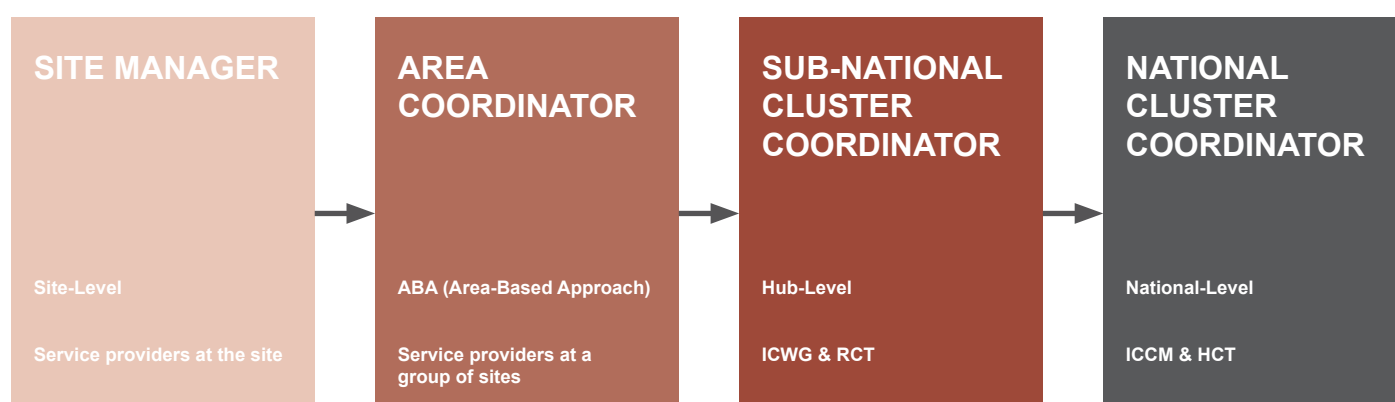
Once a gap is identified and verified, but unable to be resolved at site level, the Site Management and CCCM partner, as the first coordination structure, is responsible for mobilizing response at the site level. If all response coordination attempts fail, the site manager focal point must submit a referral of the gap using the Cluster's Referral and Escalation Database. In the database, she/he will have to input general information about the site location, focal point contact information, information about the gap and coordination attempts made. Each gap is categorized by the sector, relevant Sphere standard and urgency. Each gap's urgency is assessed individually by the site manager, who should indicate the population most affected and the timeframe needed to respond. In most cases, a minimum of two coordination meetings/attempts are needed before escalating to the next coordination structure. This triggers the RES activation.

Referral and Escalation System (RES) Activation

Where the site is part of a cluster of sites coordinated through an area-based approach, the Area Coordinator acts as the second

response mobilizer; thus, they are the first level of referral. The Area Coordinator oversees site management and coordination at a cluster of sites level with a larger number of service providers. Therefore, the role of the Area Coordinator in this case is to coordinate interagency efforts to respond to the gap by mobilizing a sectoral service provider at another site within the area that may have the resources and capacity to respond to the gap.

In the absence of an Area Coordinator or if Area Coordinator's attempts could not be realized, the gap is referred/escalated to the CCCM Sub-National Cluster Coordinator (SNCC). The SNCC can use coordination structures and platforms at the hub level to call for appropriate response. These platforms are the Inter-Cluster Working Group (ICWG) and the Regional Coordination Team (RCT). If all attempts to mobilize response failed up to the Sub-National level, the gap is then finally escalated to the National Cluster Coordination Team (CCT). This team must coordinate with the Inter-Cluster Coordination Mechanism (ICCM) to resolve the gap/issue referred. Depending on the urgency and national capacity, the National Cluster Team can also escalate the referral to the Humanitarian Country Team (HCT).



Referral Flowchart Coordination Structures

¹ The online database is not accessible externally, however the Referral and Escalation Platform is accessible at: <https://rescccm.org/ReferralActions.aspx?id=612>

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Coordination plays a key role in ensuring the Referral and Escalation System. For this system to be functional, an area-based approach was implemented promoting a needs-based minimum standard of service provision across IDP sites and surrounding areas. These minimum standards were defined in partnership with the communities living in these areas. The defined areas are smaller than a coordination hub, and larger than a single IDP hosting site. The aim of activating the coordination and area-based approach for the RES was to improve integrated response to needs by mobilising

and linking partners within an area informed by analysis of minimum standards and community and local authority feedback. Coordinating through the area-based approach also facilitates local integration of IDPs through community-led initiatives; addresses Housing, Land and Property issues; identifies return parameters; facilitates coordination of services to sites without a CCCM partner and lastly facilitates access to localized, more granular levels of coordination.

KEY ACHIEVEMENTS

1. Activation of the Area-Based Approach and a more decentralized coordination structure, with additional subnational coordinators in place at a smaller geographical area.
2. Comprehensive area service mapping was conducted.
3. Implementation of data collection activities.
4. Activation of the RES, which is a multi-sectoral needs identification and area coordination system.
5. Service delivery monitoring and developing area-level referral mechanisms through institutional capacity building.
6. Facilitation of regular area coordination and information

sharing meetings in order to promote best system practices among partners, to identify challenges faced by partners, and to engage with and support partners in the implementation of system activities. These activities ensured the functionality of the Referral and Escalation System in Yemen, through which gaps identified are solved in a quicker and more organized approach.

7. Successful community engagement for self-organized, community-led projects, complaint and feedback mechanisms and community cohesion initiatives.
8. Monitoring and implementation of the system through Cluster strategy training and capacity building of partners.

CHALLENGES

1. The system requires a solid platform that can be supported with or without Internet access. The technology of the online platform needed to be adapted to the needs of the RES.
2. While piloting the system, it required a significant number of technical revisions. As this is an online system to be used for referrals from the field, Information Management colleagues

and CCCM partners at the field-level needed to be in constant contact for revisions during the testing phase.

3. The development of the coordination structure to ensure the system functions requires decentralization and commitment from CCCM partners.



Area-based approach to distribution for beneficiaries from different sites in the Sanaa area - Sanaa 2021



Area-wide cleaning campaign organized by the Area coordinator in Sanaa - Sanaa 2021

LESSONS LEARNED AND RECOMMENDATIONS

- RES has shown to be a useful system in **identifying and ensuring unresolved gaps** are tracked and addressed in a timely manner.
- Through the process of setting up the system, it offered an opportunity for **greater partner engagement at local level** and supported capacity-building initiatives with local stakeholders.
- The RES allows for **better accountability towards beneficiaries** in camp and camp-like settings, particularly for groups at risk.
- This system provides a platform where **gaps are addressed at a timely manner** and provides gaps and protection analysis that can be further discussed at the inter-cluster level.

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Acknowledgements

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INDONESIA



CONTEXT

Described as a “supermarket of disasters”, Indonesia also has faced multiple natural events that have endangered lives, displaced people and destroyed property in the last decade, from tsunamis to slow-onset disasters resulting in thousands of deaths and missing people. The Indonesian archipelago is highly prone to volcanic eruptions, earthquakes, tsunamis, floods and landslides. High exposure to natural hazards, coupled with rapid urbanisation and low coping capacity leaves populations vulnerable to disasters and leads to large numbers of new displacements every year.

In the last five years alone, disaster events have on average destroyed or damaged more than 100,000 houses annually and have affected or displaced more than 24 million people. In September 2018, a series of earthquakes struck Indonesia’s Central Sulawesi province, the strongest a 7.4M earthquake only 10 km deep and with its epicentre close to the Provincial Capital, Palu. 2,227 deaths were recorded with 164,626 people displaced¹. In 2018 and 2019 there was a combined count of 6,340 natural disaster events with over 16 million displaced and affected people. Since these events, over 1 million children and their families have been reached with critical humanitarian assistance. Conflict and violence in the Papua region also led to 23,000 new displacements.

In addition, Indonesia is a country that is strategically located between the Indian and Pacific oceans, making it a transit route for migrants, refugees and asylum seekers fleeing conflict and natural disasters. Indonesia continues to face challenges associated with cross-border entries and monitoring population flows.

Its vast coastline of about 34,000 miles in length is difficult to properly monitor and people are able to cross undetected by local authorities. Asylum seekers from Vietnam, Myanmar, Afghanistan, Pakistan and Sri Lanka use these entry routes into Indonesia. There have also been frequent arrivals of the Rohingya by boat from Myanmar, where they face violence and persecution. The most significant influx of Rohingya occurred during the 2015 Andaman Sea crisis, when thousands were stranded at sea and were helped by local Indonesian fishermen. The influx of asylum seekers has significantly impacted the ability of the national government to accommodate these new arrivals and ensure that they are provided with housing or shelter facilities, access to services and livelihoods.

As experience in large-scale disasters grew, the Indonesian national government made significant changes to policies in disaster management and emergency response. Policies on migration, IDPs and coordination systems have been developed to proactively manage the aftermath of disaster. Since 2014, Indonesia has adopted a cluster system approach to improve coordination, harmonisation as well as effectiveness and efficiency in disaster response. The Ministry of Social Affairs (MoSA), the Ministry of Public Works and Public Housing (PUPR), the National Management Disaster Agency (BNPB) and humanitarian agencies (UN agencies and NGOs) all contribute to response and disaster management. The main obstacle in relation to coordination is the lack of synergy between the different agencies, which often results in overlapping authorities and issues in executing disaster response.

PROTECTION RISKS

Vulnerable groups in Indonesia include the elderly, people with disabilities and asylum seekers with limited livelihoods opportunities. Underage marriage, as well as insufficient feedback mechanisms and referral systems for protection against sexual exploitation and abuse (PSEA), are critical issues in Central Sulawesi². Significant gaps exist in the availability of safe spaces for women and vulnerable groups in the community.

The COVID-19 pandemic has only worsened the situation and reduced access to much needed services and infrastructure. It is

estimated that an additional 5.9 million to 8.5 million people will become poor due to COVID-19. It has also further exacerbated the risk of Gender-Based Violence.

The Indonesia case study focuses on **localisation through capacity building**. The CCCM Capacity Building Initiative is the first step in engaging with local NGOs about CCCM activities, and the trainings are additionally a platform for forging connections among Government, NGO and UN partners.

¹ OCHA Humanitarian Snapshot Central Sulawesi December 2018

² Gender Protection Analysis in the CRS Central Sulawesi Response, December 2018



INDONESIA

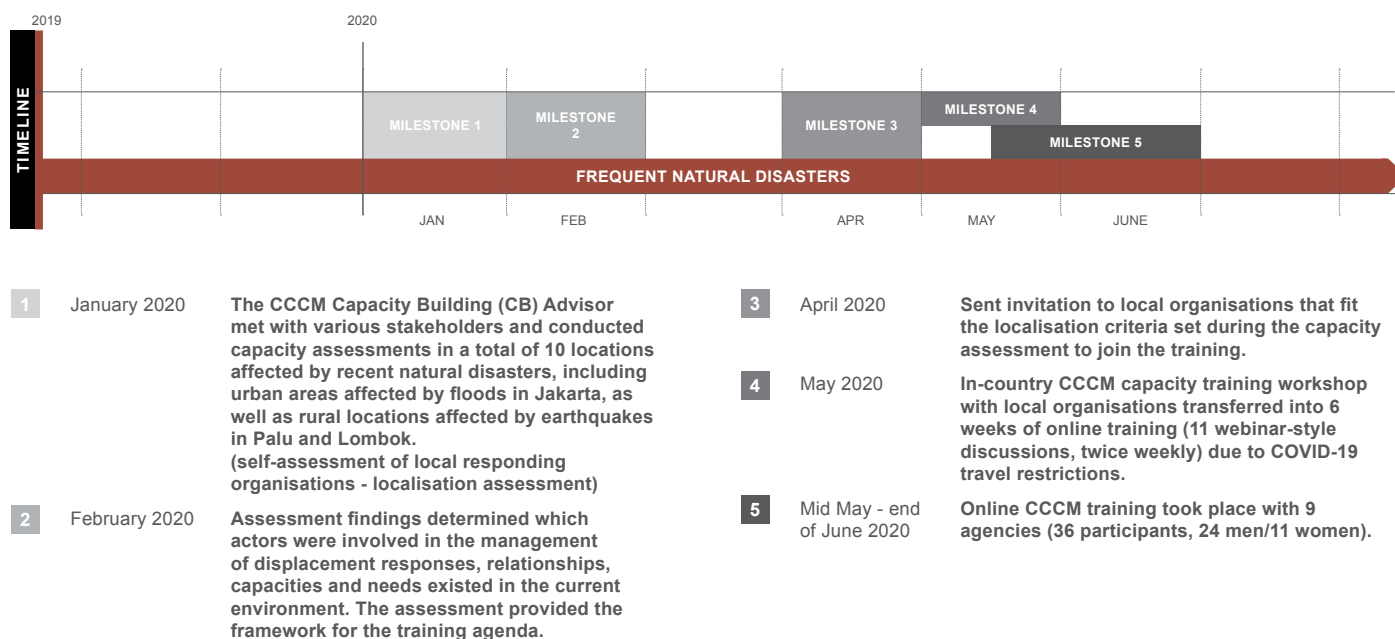
CCCM CAPACITY BUILDING OF LOCAL ORGANISATIONS TO ENHANCE LOCALISATION

Cause of displacement	Frequent natural disasters
People displaced	Refugee/stateless caseload ¹
Project location	Indonesia
Project duration	October 2019 - ongoing
# Targeted by project	9 National NGOs and civil society/faith-based voluntary groups
CCCM coordination mechanism	National Cluster of Displacement and Protection, with 8 sub-Clusters (Shelter, WASH, CCCM, Protection) adopt and contextualise at the sub-national level.



Summary

Localisation is a needed strategy in the Indonesia context as assessments and consultations found that there are gaps in understanding CCCM at a local level. Despite strong national disaster management, local actors often respond on an ad-hoc basis without a clear division of roles and responsibilities. As a first step, the CCCM Capacity Building Initiative used training as a platform to build local knowledge as well as to forge connections among Government, NGO and UN partners.



LOCALISATION IN CCCM

Over the past several years, the Clusters have been encouraged to find ways to incorporate localisation approaches in their country-level strategies. Cluster coordinators, however, have signaled that they lack the tools and knowledge on how to implement the localisation agenda in their respective Clusters to its fullest potential.

The CCCM Cluster has a unique opportunity to further refine the discussion on localisation. When the World Humanitarian Summit in 2016 sent out a call for humanitarian action to be ‘as local as possible, as international as necessary’, and to improve the efficiency and effectiveness of international humanitarian aid, 18 donor countries and 16 international aid organisations and international non-governmental organisations (INGOs)² agreed to improve the efficiency and effectiveness of international humanitarian aid.

The lead agencies of the CCCM Cluster, along with its Strategic Advisory Group (SAG) member organisations, were some of the agencies that signed onto this ambitious commitment. They agreed to global aggregated targets of at least 25 per cent of humanitarian funding to local and national responders. The aim was to improve the quality of assistance by leveraging the strong relationships of local organisations within the local circumstances, politics and culture, thus better serving the affected people while also reducing the transactional costs.

Using the same signatory motivation, several governments have localised their cluster systems. Indonesia, Bangladesh, Nepal and the Philippines have established their own national cluster coordination systems, with government authorities leading different core capacities of CCCM leadership and response.

While praiseworthy, the national efforts have also left gaps in the CCCM approach to localisation: policy and administrative procedures, site level management responsibilities and inter-camp coordination have incomplete division of roles and responsibilities. This has resulted in unknown impacts on the protection and assistance for displaced persons during emergencies. The CCCM agency is attempting to analyse this issue and has embarked on a pilot project in Indonesia to develop tools and capacity building strategies to assist in localisation processes.

The initiative described in this case study is one of the capacity building efforts to strengthen localisation from 2020, which is still a work in progress. The case study considers the first phase actions, capturing the activities and lessons learned from three perspectives – NGOs, UN agencies and the Government Cluster – in order to point towards broader lessons learnt on the broad topic of capacity building and localisation in CCCM.

BACKGROUND

Indonesia is one of the most disaster-prone countries in the world. Given its geographic positioning on the ‘ring of fire’, Indonesia is susceptible to a range of natural disasters including floods, landslides, tsunamis, volcanoes, and earthquakes. Given Indonesia’s susceptibility to natural disasters, it is imperative that the humanitarian agencies in the country are able to respond in an effective and timely manner when emergencies occur.

Efforts to localise CCCM in Indonesia, including mainstreaming GBV prevention and response measures, started in early January 2020³ when a Global CCCM Capacity Building (CB) Advisor met with various stakeholders and conducted capacity assessments in locations affected by recent natural disasters. These included urban areas affected by floods in Jakarta, as well as rural locations affected by earthquakes in Palu and Lombok⁴. The assessment findings mapped the roles of the different actors involved in the management of displacement responses, the types of the actors’ responsibilities and the existing capacities and needs.

The assessments highlighted the great variations of response arrangement, coordination mechanisms and capacities in different locations in Indonesia. Disaster management in Indonesia has changed dramatically since the 2004 Aceh Tsunami and 2014 Jogjakarta Earthquake. There is now a robust disaster management law and associated disaster management systems in place. Despite the strong disaster response systems at the national level, the division of roles and responsibilities at the local level remains defined on an ad-hoc basis, with key functions fulfilled by a variety of actors with varying capacities. Most key functions appeared

fragile, with support to referrals ranking as the weakest function. The coordination mechanism changes in different disaster responses, placing different government agencies in charge of the response. Discussions with authorities and other stakeholders also revealed that there is no shared understanding of what “localisation” means. The concept of localisation is often perceived as nationalisation. National authorities see the topic of localisation as an issue primarily affecting subnational levels of coordination. Clarity over the division of roles and responsibilities at the local level is still in the process of finding permanent structure, and actors identify the role they could play based on the situation on the field, which often changes many times, particularly at the site level.

Results from both assessments and consultations indicate that there is a need for multi-layered localisation strategies to build more coherent and sustainable mechanisms to respond to disaster-induced displacement. Significant investment would be required in disaster preparedness activities combining the development of local response frameworks with targeted capacity building activities to enable each designated actor to fulfill their role, from site level activities to sub-national coordination systems. Beyond the standardisation of operating procedures and response tools, there is a need to look at the interaction between the authorities, NGOs and civil society/community-based organisations to build strong partnerships, requiring significant and long-term investments.

While not providing a full humanitarian overview, the assessment findings enabled the team to identify trends for the development of a localisation strategy and adaptation ideas of capacity building

¹ Indonesia is not a signatory to 1951 refugee convention.

² IASC Grand Bargain signatories

³ Following an initial scoping mission carried out by the Global CCCM Cluster Coordinator.

⁴ See separate assessment mission report and findings.

activities to support the adoption of a more effective CCCM response. The CCCM response set-up, mechanism and capacities could be decided by national government or sub-national government, depending on the scale of disaster and local government capacity. The national NGO capacity to respond also varied based on the resources that are available within the organisations. In some cases the NGOs were able to fill in the gaps when the government assistance was not available or was delayed. Funding could be sourced from private voluntary funds or institutional funding through donors.

In Indonesia, the concept of camp management has not been clearly defined yet, and is mixed with disaster response in general. As a result, there were no dedicated resources allocated to specifically target and support the implementation of camp management activities at site level in past large-scale emergencies.

The National Cluster framework in Indonesia was adopted in 2014 and it is government-led by the National Disaster Management Agency (NDMA), known as BNPB (Badan Nasional Penanggulangan Bencana). The Cluster has consistently proved that it is able to

provide best practices, coordination and participatory disaster response that allows both government and non-governmental actors to work together. At the national level, the Cluster was arranged based on its national disaster management architecture with 8 national clusters: Search and Rescue, Logistics, Infrastructure and Facilities, Health, Early Recovery, Economy, Education and Displacement and Protection. CCCM is represented at sub-cluster level and falls under the National Cluster of Displacement and Protection (KLASNAS PP), led by the Ministry of Social Affairs under the Directorate of Social Protection for Disaster Affected People. Additional sub-clusters are Shelter, WASH, Protection from GBV, Protection for People with Disabilities, Elderly and Other Groups with High Vulnerability, Psychosocial Support and Security. This unique configuration could itself be considered "localised".

The international CCCM agency co-chairs the National Cluster of Displacement and Protection as well as the CCCM Sub-Cluster alongside the National Ministry of Social Affairs. This coordination structure is contextualised at the sub-national level based on the scale of disaster and is merged with the sub-national coordination mechanism.

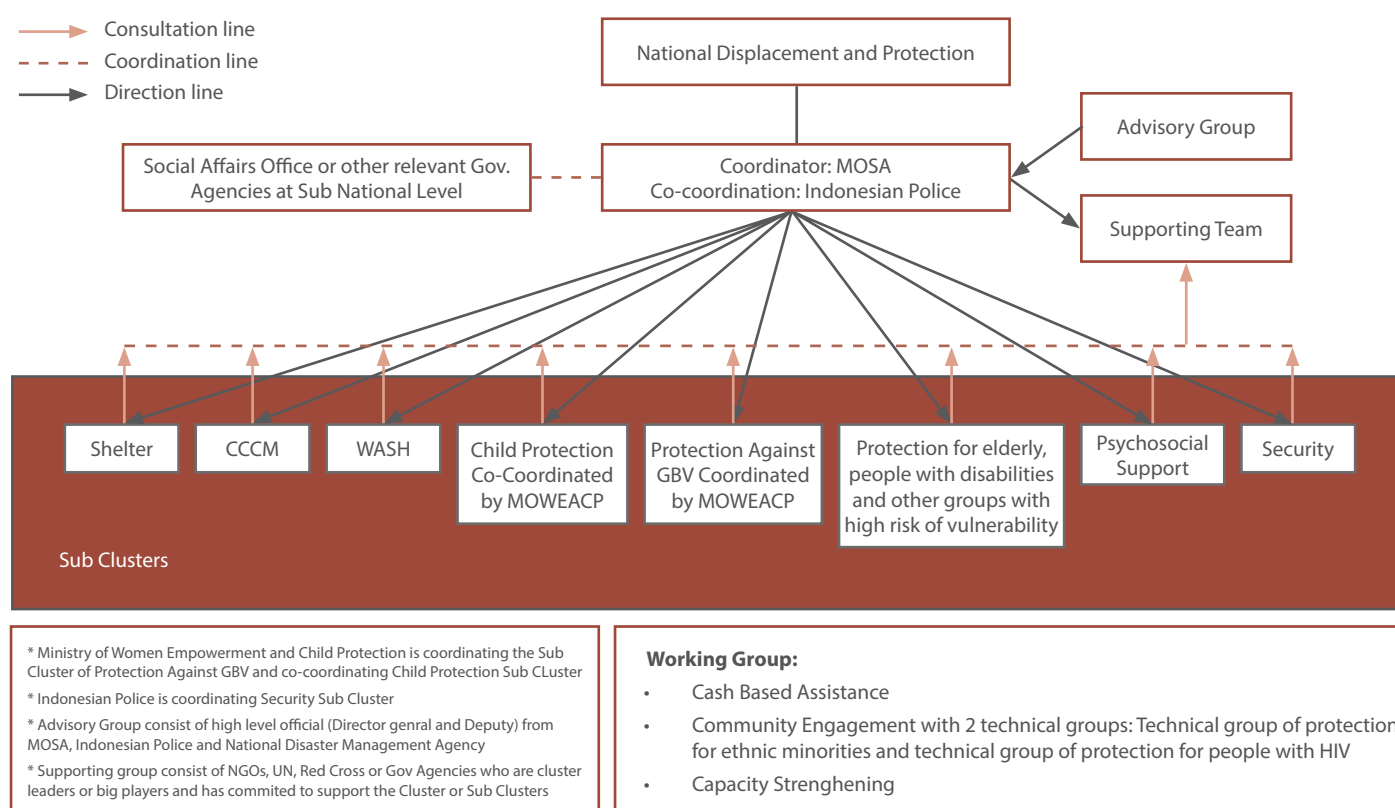


Diagram 1: Position of CCCM Sub-Cluster under National Cluster for Displacement and Protection (KLASNAS PP)

A CASE STUDY WITH THREE PERSPECTIVES

PERSPECTIVE 1: GLOBAL CCCM CAPACITY BUILDING INITIATIVE

Building upon the assessment findings and consultations, several needs were highlighted:

- A multi-layered localisation strategy to build a more coherent and sustainable mechanism to respond to disaster-induced displacement.
- A local response framework and significant investment for disaster preparedness activities. This should include: pre-identifying roles and responsibilities in case of crisis, actors who can fulfil these functions and targeted capacity building activities to enable each designated actor to fulfil their role, from site level activities to sub-national coordination systems.
- Standardisation of operating procedures and response tools.
- A closer analysis of the interaction between the authorities, NGOs and civil society/community-based organisations, as well as significant and long-term investments into building strong partnerships between the authorities and NGOs and civil organisations.

In order to introduce the concept of CCCM to local NGOs, the Global CCCM Cluster Capacity Building Advisor planned an in-country capacity building workshop with key actors at the end of March 2020. However, due to the COVID-19 outbreak and subsequent movement restrictions, the workshop was reorganised and adapted to online training.

The training targeted local NGOs with a strong possibility to implement programming at site level and complied with several other criteria: experience with large disasters in Indonesia in the past; acceptance by the community; knowledge of Sphere standards; in-house capacity development, training and mentoring; ability to scale up activities in high risk areas; financial accountability and Human Resources; several office locations; working as part of interagency networks; strategic leadership; PSEA reporting / policy in place; past training on CCCM.

The training was conducted over several weeks in Bahasa and English simultaneously. Overall, it aimed to increase the capacity of key stakeholders at national and sub-national levels to deliver humanitarian assistance in a more dignifying manner to the affected population as well as to enhance localised action and expertise, mitigate the risk of Gender-Based Violence (GBV) in the displacement settings and promote the importance of durable solutions and the Camp Management Cycle. Each module addressed key learnings of Camp Management, such as:

- Camp management covers a wide range of site typologies, but many lessons overlap between the different typologies;

- Better camp management comes from a combination of 'hard' and 'soft' skills that need to be identified and purposefully worked toward in humanitarian work/ disaster response;
- Participation is a valuable aspect of camp management and forms the foundation of site-level work. Recognising this, camp management agencies will work with a wide range of stakeholders and each site is likely to be different;
- Gender-based violence is a particular challenge in displacement settings, and appointed camp management agencies have a unique responsibility to prevent and mitigate GBV through their presence at a site;
- Standardised tools are a way of building the capacity of different focal agencies working at site level and raising the quality of response by the CCCM Sub-Cluster;
- Preparedness for emergencies can never be total, however, some guidelines can help teams know what to do in certain emergencies.

In organising the first online Camp Management training, it was essential to design a simplified conversational course. Participants and trainers needed to share information about the Indonesian emergency system and at the same time instructors needed to relate the theory of CCCM in ways that could be easily relatable. A blended learning programme was designed for participants to engage over the course of six weeks, consisting of 11 webinar-style discussions held twice weekly with offline assignments. Each webinar was supplemented by a pre-course reading and a short group task, representing 36 learning hours in total.

During the course, participants were also encouraged to engage with the facilitators with discussion on actual issues they are currently facing on the ground with the ongoing disasters occurring in Indonesia. A total of 36 participants (24 men, 12 women) from non-governmental and civil society organisations participated. The trainings needed to be delivered in Bahasa Indonesia, so a new method of delivery and facilitation had to be invented. WhatsApp messages provided live simultaneous translation from Bahasa to English, and live subtitle functions were installed on Microsoft Teams accounts. Taking advantage of the travel restrictions, a broad training team was assembled, including former staff from Indonesia Ministry of Social Affairs who successfully completed Global CCCM ToT in 2019 who participated from Australia, and a Deputy Chief of Mission in South Sudan, who is an Indonesian national and CCCM expert. Each training session took days to prepare, going back and forth between the Global CCCM Capacity Building Advisor as materials were translated and contextualised.

KEY ACHIEVEMENTS

- Field assessments showed a real need for further engagement with national NGOs in CCCM, particularly in capacity building so a shared understanding could be developed.
- A strong training team from the Government and UN

complemented the approach for CCCM.

- The training has increased the awareness of key issues such as community participation, durable solutions and GBV in camp setting, which are critical to build a stronger CCCM response.

CHALLENGES

- Online learning can be a successful method; however, it requires a lot of follow up.
- Building tools, using examples and having trainers from the local context and in local language is essential.

- Meeting people prior to the training helped to build relationships and keep commitments strong, but more is needed to maintain this.

PERSPECTIVE 2: NATIONAL NGO (HUMAN INITIATIVE)⁵

Human Initiative (HI) was a participant in the CCCM training and provided their perspectives on the CCCM training and shifts in programming that they took as a result of their participation and learning.

Established in December 1999 in response to civil unrest in Indonesia and officially registered as an NGO with Special Consultative Status with the United Nations, the vision of Human Initiative is 'to become a trustworthy world-class organization in establishing self-reliance'. Since 2004, Human Initiative has focused on managing humanitarian programming, with the mission of:

1. Utilising emergency, recovery and empowerment programmes to upgrade the quality and self-reliance of beneficiaries;
2. Carrying out research, capacity building and development strategies to strengthen the agency of civil societies to provide alternative and innovative solutions to protracted humanitarian crisis;
3. Building an effective, innovative and accountable organisational capacity and competency which is oriented to quality of services and
4. Developing advocacy programmes promoting equity and equality at local and national levels.

With their rich background experience in responding to disasters at the local level, HI has successfully gained insight from the training on how to transform their organisation from service delivery based into focusing on supporting the CCCM activities. The first step in transforming the organisation is to conduct an internal assessment to see which capacities should be increased to support CCCM activities in the future. This shift means it will be essential to educate HI's donors on the importance of CCCM as well to explain why it is essential for HI to shift its focus to mainstreaming CCCM in Indonesia. To ensure CCCM core concepts and foundations were mainstreamed throughout HI, the staff members who attend the capacity building trainings duplicated the lessons learnt with other staff in HI, to not only enhance their individual capacity, but also the organisation's capacity. Moreover, HI has adapted their code of conduct based on SPHERE standards, and they now have a more comprehensive understanding of the CCCM Standards, which they would like to use as a reference for their organisation.

HI was working on multiple responses in Indonesia, including in

Balaroa, Sulawesi and in Aceh with boat arrivals of Rohingya from Bangladesh. Prior to attending the CCCM training in May 2020, HI internally discussed the responsibility of the organisation for camp management in Indonesia. CCCM responsibility usually falls on the state: in this case, the government of Indonesia with support from the CCCM Cluster Co-leads. However, given Indonesia's diversity, with two hundred different cultures and languages, it would be challenging for a non-local organisation to implement CCCM. Localisation and building the capacity of local NGOs engaged in camp management were identified as an important aspects of CCCM in Indonesia. Through this, organisations would be equipped with the skills needed to respond to disasters and/or crises which require camp management expertise.

From the CCCM trainings, HI staffs' capacity was improved, particularly in the implementation of their projects in Balaroa and Aceh. By combining the training with the situation that they faced on the ground, participants recognised the necessity of having a strategic exit plan/durable solution as part of the management of the camps.

In reflecting on the CCCM induction training, a participant in a post training interview shared:

"I have increased capacity to improve my projects in Balaroa because the situation that you provided in the CCCM training is very related to my project. In Balaroa, there are more than 200 families still living in camps one and a half years after the disaster. We have to find a solution for them because the camp situation is not a permanent solution for the beneficiaries. In our opinion the camp solution is only the last solution that we have to provide to the community."

For the response in Aceh, it was important to coordinate between UN organisations and NGOs and consult with the arriving Rohingya to understand their needs through a focus-group discussion. The discussion identified that setting up a local committee would ensure that the needs of the community are heard, particularly on the living conditions. This committee was set up with a representative from each family and ensured the number of men and women in the committee was balanced. Through consultations, families were either supported with rent donations or shelter construction to address their concerns regarding their living conditions.



KEY ACHIEVEMENTS

- The training has brought a comprehensive knowledge and understanding of camp management that could be applied directly into practice in Balaroa and Aceh.
- The timing of the training coincided with the implementation of the HI shelter programme in Palu. It has contributed to the smooth running of the programme, where the main output is to move the IDPS from camps to safer, more comfortable and dignified shelters. This is closely related to the shelter closure strategy discussed at the CCCM training.
- The training provided insight for HI's future on how to better coordinate CCCM through the Sub-Cluster.
- The training series reinforced important topics related to humanitarian response such as humanitarian principles, GBV mitigation etc.
- HI was able to build new networks through participants in the training, which enabled them to share experience, good practices and challenges in managing camps.

CHALLENGES

- Language could be a barrier for some participants who were not confident using English as a primary language.
- A joint project would be beneficial to put the learning process in practice as a CCCM community and would allow the knowledge to be transferred to the field level.
- Holding the training virtually was a challenge, especially when participants were still adapting to using online platforms for training. Moreover, with most of the participants doing the training part-time, it was a bit difficult to focus and put aside workloads.
- There is a lack of clarity of the CCCM framework within Indonesia and the mandate for an organisation to implement CCCM or to be a camp management agency.
- The humanitarian context in Indonesia is mostly caused by disasters, which do not require large and long-term camp management. This is different from conflict settings, so more contextualisation was needed.

PERSPECTIVE 3: INDONESIA GOVERNMENT

The Indonesia Government has been trying to encourage a formal endorsement between UN agencies, NGOs and the government. Moreover, the Indonesian Government recognises the importance of the role local organisations play in CCCM and advocates for building their capacity. The CCCM Sub-Cluster should be used in more strategic manner, particularly in coordination. The Sub-Cluster could conduct regular meetings to establish CCCM communities at the country level as well as to identify potential key actors that could take CCCM roles in order to improve predictability of future disaster responses. The Sub-Cluster could also be a platform to build dialogue among CCCM actors, particularly from government agencies, so that they could have a clearer vision of how to place the government agencies into different roles to support CCCM without changing the current structure.

Information management is also another key issue that could be addressed within the CCCM Sub-Cluster to provide more accurate data, particularly about service delivery within the camp. Moreover, the CCCM Sub-Cluster could work together with other Sub-Clusters, for example with the Protection Against GBV Sub-Cluster to ensure that there are coordinated actions in addressing GBV issues in camp settings.

For the CCCM training, a government representative who was trained on CCCM assisted in facilitating the trainings. The CCCM training ignited a discussion amongst the participants from local NGOs that collaboration and coordination is needed in responding to disasters, as well as capacity building of their staff members and the community. The process of localisation is not easy, and adapting and contextualising this training to a village or township level to involve more local actors will be long.

A difference is noticeable after the training was conducted. Before the CCCM training, most organisations were unaware of the specific role played by CCCM, particularly in responding to a disaster and what constitutes a camp management agency. After the training, the participants were well aware of the distinction and how to localise CCCM not only within their organisations, but in Indonesia based on the capacities and resources that are available. The NGOs

have smaller branches of their organisations at the village level, and they used their knowledge from the training to disseminate the change of perspectives within their own networks. The trainer from the Ministry of Social Affairs has provided coaching and support to these organisations to help them facilitate localisation and capacity building efforts.

The CCCM training was delivered in a simplified and conversational manner to allow for building relationships and networking. The trainer from the Ministry of Social Affairs enabled and drove the networking between the participants and the local organisations, and allowed for bridging connections with new contacts met through the training. Forging the connections and relationships between the local organisations was important to strengthen trust as well as understand the role and capacity of each organisation. This will help with collaboration and coordination in the future for CCCM. In the Indonesia context, informal relationships are a significant factor to develop coordination into a more structured and formal form. In addition, reflecting on the few last disasters in Indonesia (particularly Sulteng and NTB), the spirit within the government to work collaboratively with non-government actors is evolving. This is a good momentum that should be captured to foster localisation by strengthening capacity at the local level.

The process of having this capacity building efforts to support localisation is essential in the bigger picture, particularly in engaging with local actors and understanding the culture and context. Understanding the power relations between the local organisations, UN agencies and the government is important, particularly to promote a people-centred approach in decision making from response to recovery. During this decision-making process, there are many different perspectives from the different stakeholders about what kind of assistance is needed and should be prioritised, the process and how to address the recovery of areas affected by disaster or crisis. Having the viewpoints of all stakeholders from the government down to the villages and communities is essential in localisation. Additional engagement with communities on the ground would provide valid information on the reality of how the disaster or crisis has affected the community.

⁵ Human Initiative's website



KEY ACHIEVEMENTS

- CCCM training has provided a platform that created a dialogue between the subnational and local non-government organisations about their potential to support CCCM activities in the future to support the government.
- The training has encouraged participants to build more discussion with key government agencies towards building a CCCM mechanism in Indonesia, including the roles and responsibilities of CCCM agencies as well as legal standing to support their work.
- Some concrete actions to foster localisation were achieved, such as the translation of some materials (GBV Pocket Guide), and guidelines on camp management for the Indonesia context.

CHALLENGES

- The training has opened many ideas and discussion on how to put the CCCM concept into practice for the Indonesia context, however, it requires a commitment from organisations to take the lead, oversee the process and support the concrete actions.
- There is a need for a strong team of trainers from the Indonesian Government and UN partners.
- Continuous engagement with some key stakeholders is necessary in order to keep the momentum, and it should be done in more structured manner.
- More advocacy is still required for all the key government actors to agree on a common perception of CCCM in Indonesia and formalise it.



LESSONS LEARNED (INCLUDING ALL THREE PERSPECTIVES)

- This training was only the tip of the iceberg. Without **dedicated staff capacity and continuous support**, the impact made through the initial training will not be absorbed by either the cluster system or participants involved from the various NGOs.
- Despite strong disaster response systems at the national level, the division of roles and responsibilities at the local level **remains defined on an ad-hoc basis**, with key functions fulfilled by a variety of actors with very different capacities; most key functions appeared fragile, and difficult to scale and predict.
- Discussions with authorities and other stakeholders revealed that **there is no shared understanding of what “localisation” means** and how it should be translated in implementation.
- National authorities see the topic of localisation as an issue primarily affecting subnational levels of coordination, and there is an **overall lack of clarity over the division of roles and responsibilities at the local level**. Actors struggle to identify the role they could play, particularly at the site level.
- It is a challenge to have an **agreed framework on localisation in camp management** by all actors, including the national and subnational authorities, local NGOs, UN agencies and donors.



ANNEX COURSE OVERVIEW

READING ASSIGNMENTS	ONLINE SESSIONS	TOPIC	REFLECTION
CM Toolkit pg. 22-37	MAY 15	Introduction to the course	Photos of different types of camps
IDMC Grid 2019 report	MAY 19	Displacement Overview: Global and Indonesia	Needs of the displaced
CM Standards	MAY 22	Humanitarian Standards including Camp Management	Service Mapping
CM Toolkit pg 42-46	MAY 29	Site Management Agencies (Commitment 1)	Team organigram
CM Toolkit pg 53-55, 63-64	JUNE 2	Representation	Ways to engage representatives
CM Toolkit pg 47-50	JUNE 5	Service Monitoring	3W and Site Monitoring template
CM Toolkit pg 312-325	JUNE 9	Site Environment	Safety Audit
CM Toolkit pg 208-227	JUNE 12	Site Closure	Checklist
Peer generated	JUNE 16	Question/Answer	Day in the life of...
😊	JUNE 19	Action Planning	Agency specific
	JULY / AUGUST	Follow up evaluations	Interview questions

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Acknowledgements

Andjar Radite
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INDONESIA

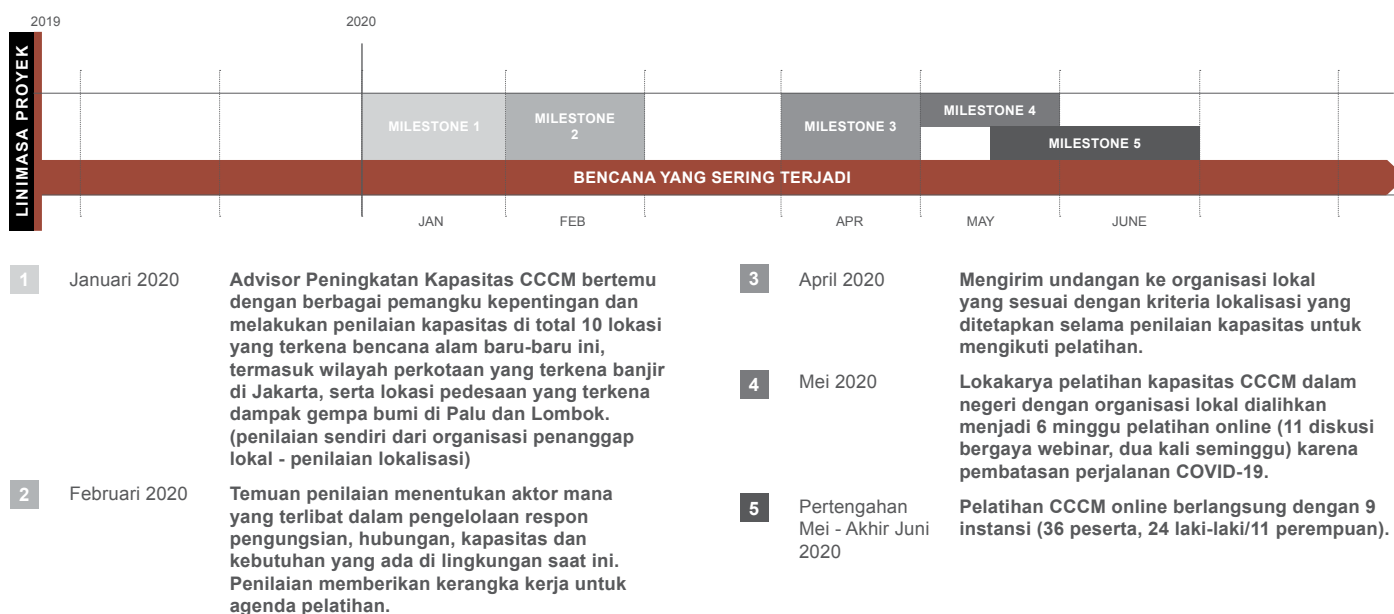
PENINGKATAN KAPASITAS ORGANISASI LOKAL PERIHAL KOORDINASI DAN MANAJEMEN TEMPAT PENGUNGSIAN (KMTP/CCCM)

Penyebab Pengungsian	Bencana yang sering terjadi
Pengungsi	Pengungsi/kasus tanpa kewarganegaraan ¹
Lokasi Proyek	Indonesia
Durasi	Oktber 2019 – sekarang
# Target Proyek	9 Organisasi non-pemerintah dan masyarakat sipil /kelompok kerelawanan berbasis agama
Mekanisme Koordinasi CCCM	Klaster Nasional Pengungsian dan Perlindungan, dengan sub klaster (Shelter, WASH, CCCM, Perlindungan) mengadopsi dan mengkontekstualisasikan di tingkat subnasional.



Ringkasan

Lokalisasi adalah strategi yang diperlukan dalam konteks Indonesia karena berdasarkan penilaian dan konsultasi ditemukan bahwa ada kesenjangan dalam memahami CCCM di tingkat lokal. Terlepas dari manajemen bencana nasional yang kuat, para pelaku lokal seringkali merespons secara ad-hoc tanpa pembagian peran dan tanggung jawab yang jelas. Sebagai langkah pertama, Inisiatif Pengembangan Kapasitas CCCM menggunakan pelatihan sebagai platform untuk membangun pengetahuan lokal serta untuk menjalin hubungan antara Pemerintah, LSM dan mitra PBB.



IKHTISAR AND TUJUAN PROYEK

Selama beberapa tahun terakhir, klaster telah didorong untuk menemukan cara untuk memasukkan pendekatan lokalisasi dalam strategi di level negara. Namun, koordinator klaster telah mengisyaratkan bahwa mereka kekurangan alat dan pengetahuan tentang bagaimana mengimplementasikan agenda lokalisasi di masing-masing klaster secara maksimal.

Klaster CCCM² memiliki kesempatan unik untuk lebih menyempurnakan diskusi tentang lokalisasi. Saat Konfrensi Tingkat Tinggi Kemanusiaan Dunia pada tahun 2016 menyerukan aksi kemanusiaan untuk menjadi '*as local as possible, as international as necessary*',³ 18 negara donor dan 16 organisasi bantuan internasional dan organisasi non-pemerintah internasional (INGO)⁴ sepakat untuk meningkatkan efisiensi dan efektivitas bantuan kemanusiaan internasional.

Badan utama klaster CCCM, bersama dengan organisasi anggota Kelompok Penasihat Strategi⁵, adalah beberapa lembaga yang menandatangani komitmen ambisius tersebut. Mereka menyetujui target agregat global yang mana setidaknya 25 persen dari dana kemanusiaan diberikan untuk responden lokal dan nasional. Tujuannya adalah untuk meningkatkan kualitas bantuan dengan memanfaatkan hubungan yang kuat dari organisasi lokal dalam situasi, politik dan budaya lokal, sehingga dapat menyediakan layanan yang lebih baik untuk orang-orang yang terdampak, sementara itu juga mengurangi biaya transaksi.

Dengan motivasi penandatanganan yang sama, beberapa pemerintah telah melokalisasi sistem klaster mereka. Indonesia, Bangladesh, Nepal dan Filipina merupakan negara yang telah membentuk sistem koordinasi klaster nasional, dengan otoritas pemerintah untuk memimpin kapasitas inti yang berbeda dalam kepemimpinan dan respons CCCM.

Meskipun patut dipuji, upaya nasional juga telah meninggalkan celah dalam lokalisasi pendekatan CCCM yaitu prosedur kebijakan dan administrasi, tanggung jawab manajemen tingkat lokasi dan koordinasi yang tidak selesai antar tempat pengungsian dalam pembagian peran dan tanggung jawab. Hal ini mengakibatkan dampak yang tidak diketahui pada perlindungan dan bantuan bagi pengungsi selama keadaan darurat. Lembaga CCCM sedang mencoba untuk menganalisis masalah ini dan telah memulai proyek percontohan di Indonesia untuk mengembangkan alat dan strategi pengembangan kapasitas untuk membantu proses lokalisasi.

Inisiatif yang dijelaskan dalam studi kasus ini merupakan salah satu upaya peningkatan kapasitas untuk memperkuat lokalisasi semenjak tahun 2020 dan masih dalam proses. Studi kasus ini mempertimbangkan tindakan fase pertama yaitu mempelajari kegiatan dan pembelajaran dari tiga perspektif - LSM, PBB dan Klaster Pemerintah - untuk menunjukkan pembelajaran yang lebih luas tentang topik pengembangan kapasitas dan lokalisasi di CCCM.

PEMELIHAN PENERIMA MANFAAT DAN TARGET GEOGRAFIS:

Indonesia merupakan salah satu negara yang paling rawan bencana di dunia. Mengingat posisi geografisnya yang berada di 'cincin api', Indonesia rentan terhadap berbagai bencana alam termasuk banjir, tanah longsor, tsunami, gunung berapi, dan gempa bumi.

Mengingat kerentanan Indonesia terhadap bencana alam, sangat penting untuk lembaga-lembaga kemanusiaan di negara ini dapat merespons secara efektif dan tepat waktu ketika keadaan darurat bencana terjadi.

AKTIVITAS CCCM

Upaya untuk melokalisasi CCCM di Indonesia, termasuk mengarusutamakan tindakan pencegahan dan penanggulangan Kekerasan Berbasis Gender (KBG), dimulai pada awal Januari 2020 ketika Penasihat Pengembangan Kapasitas CCCM Global bertemu dengan berbagai pemangku kepentingan dan melakukan penilaian kapasitas di lokasi yang terdampak bencana alam baru-baru ini. Lokasi tersebut termasuk daerah perkotaan yang terkena banjir di Jakarta, serta lokasi pedesaan yang terdampak gempa bumi di Palu dan Lombok. Temuan penilaian memetakan peran berbagai pelaku yang terlibat dalam pengelolaan tanggap darurat untuk pengungsian, jenis tanggung jawabnya dan kapasitas serta kebutuhan yang ada.

Penilaian tersebut menyoroti variasi dari pengaturan respon, mekanisme koordinasi dan kapasitas di berbagai lokasi di Indonesia. Penanggulangan bencana di Indonesia telah berubah secara dramatis sejak Tsunami Aceh tahun 2004 dan Gempa Jogjakarta tahun 2014. Saat ini telah tersedia Undang - Undang Penanggulangan Bencana yang solid dan sistem manajemen bencana yang terkait. Terlepas dari sistem tanggap bencana yang kuat di tingkat nasional, pembagian peran dan tanggung jawab di tingkat lokal tetap dilaksanakan secara ad-hoc, dengan

berbagai fungsi utama yang dipenuhi oleh beragam pelaku dengan kapasitas yang beragam pula. Sebagian besar fungsi utama masih tampak rapuh, dengan dukungan untuk rujukan bertingkat sebagai fungsi terlemah. Mekanisme koordinasi berubah dalam proses tanggap darurat di berbagai bencana, menempatkan lembaga pemerintah yang berbeda pula untuk bertanggung jawab atas tanggap darurat tersebut. Diskusi dengan pihak berwenang dan pemangku kepentingan lainnya juga mengungkapkan bahwa tidak ada pemahaman bersama tentang apa yang dimaksud dengan "lokalisasi". Konsep lokalisasi sering kali dianggap sebagai proses nasionalisasi. Otoritas nasional melihat topik lokalisasi sebagai masalah utama yang mempengaruhi koordinasi di tingkat sub-nasional. Kejelasan pembagian peran dan tanggung jawab di tingkat lokal masih dalam proses menemukan struktur permanen dan berbagai pihak mengidentifikasi peran yang dapat mereka mainkan berdasarkan situasi di lapangan, yang mana sering kali berubah.

Hasil dari penilaian dan konsultasi menunjukkan bahwa ada kebutuhan akan strategi lokalisasi diberbagai lapisan untuk membangun mekanisme yang lebih koheren dan berkelanjutan untuk menanggapi pengungsian akibat bencana. Investasi

¹ Indonesia tidak menandatangani Konvensi Pengungsi 1951

² Camp Coordination and Camp Management = Koordinasi Manajemen Tempat Pengungsian

³ Bertindak secara lokal sebisa mungkin, bertindak secara internasional seperlunya'

⁴ IASC Grand Bargain signatories

⁵ Strategic Advisory Group (SAG)

yang signifikan akan dibutuhkan dalam kegiatan kesiapsiagaan bencana yang menggabungkan pengembangan kerangka kerja tanggap darurat di tingkat lokal dengan kegiatan peningkatan kapasitas yang ditargetkan. Di luar standarisasi prosedur operasi dan perangkat tanggap bencana, ada kebutuhan untuk melihat interaksi antara pihak berwenang, LSM dan organisasi masyarakat/ masyarakat sipil untuk membangun kemitraan yang kuat, yang membutuhkan investasi yang signifikan dan berjangka panjang.

Meskipun tidak memberikan gambaran kegiatan kemanusiaan yang lengkap, temuan penilaian memungkinkan tim untuk mengidentifikasi kecenderungan pengembangan strategi lokalisasi dan ide adaptasi dari kegiatan pengembangan kapasitas untuk mendukung penerapan respons CCCM yang lebih efektif. Pengaturan, mekanisme dan kapasitas respons CCCM dapat diputuskan oleh pemerintah pusat atau pemerintah daerah, tergantung pada skala bencana dan kapasitas pemerintah daerah. Kapasitas LSM nasional untuk merespons juga bervariasi berdasarkan sumber daya yang tersedia di dalam organisasi. Dalam beberapa kasus, LSM mampu mengisi kekosongan ketika bantuan pemerintah tidak tersedia atau tertunda. Pendanaan dapat bersumber dari dana sukarela swasta atau pendanaan institusional melalui donor.

Di Indonesia, konsep manajemen tempat pengungsian belum didefinisikan secara jelas, dan bercampur dengan tanggap darurat bencana pada umumnya. Akibatnya, tidak ada sumber daya

husus yang dialokasikan untuk menargetkan dan mendukung pelaksanaan kegiatan manajemen tempat pengungsian di titik lokasi dalam keadaan darurat berskala besar di masa lalu.

Kerangka Klaster Nasional di Indonesia diadopsi pada tahun 2014 dan dipimpin oleh pemerintah yaitu Badan Nasional Penanggulangan Bencana (BNPB). Klaster tersebut secara konsisten membuktikan mampu memberikan praktik baik, koordinasi dan tanggap bencana yang partisipatif yang memungkinkan pelaku pemerintah dan non-pemerintah untuk bekerja sama. Di tingkat nasional, klaster disusun berdasarkan arsitektur penanggulangan bencana nasional dengan 8 klaster nasional: Pencarian and Penyelamatan, Logistik, Sarana dan Prasarana, Kesehatan, Pemulihan Dini, Ekonomi, Pengusian Perlindungan. CCCM terwakili di tingkat sub klaster dan berada di bawah Klaster Nasional Pengungsian dan Perlindungan (KLASNAS PP) yang dipimpin oleh Kementerian Sosial di bawah Direktorat Perlindungan Sosial Korban Bencana Alam. Sub klaster tambahan adalah Shelter, WASH, Perlindungan dari KBG, Perlindungan Penyandang Disabilitas, Lansia dan Kelompok Lain dengan Kerentanan Tinggi, Dukungan Psikososial dan Keamanan. Konfigurasi unik ini dapat dianggap sebagai "terlokalisasi".

Badan CCCM mengetuai Klaster Pengungsian dan Perlindungan Nasional serta Sub Klaster CCCM bersama Kementerian Sosial. Struktur koordinasi ini dikontekstualisasikan di tingkat sub nasional berdasarkan skala bencana dan digabungkan dengan mekanisme koordinasi sub nasional.

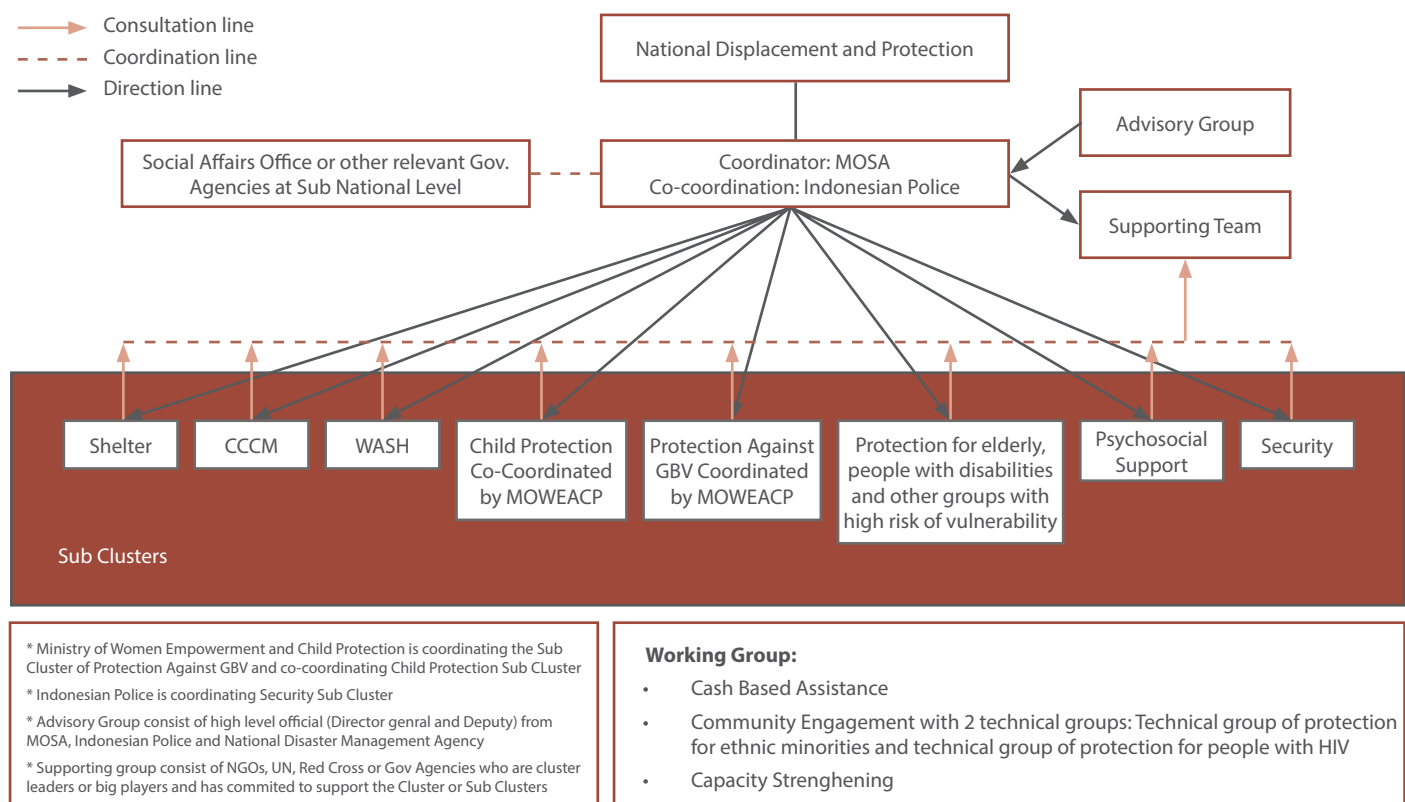


Diagram 1: Kedudukan Sub Klaster CCCM di bawah Klaster Nasional Pengungsian dan Perlindungan (KLASNAS PP)

SEBUAH STUDI KASUS DENGAN TIGA PERSPEKTIF

PERSPEKTIF 1: INSIATIF PENGEMBANGAN KAPASITAS CCCM GLOBAL

Berdasarkan temuan penilaian dan konsultasi, beberapa kebutuhan disoroti yaitu,

- Sebuah strategi pelokalan diberbagai lapisan untuk membangun mekanisme yang lebih koheren dan berkelanjutan untuk menanggapi pengungsian akibat bencana.
- Sebuah kerangka tanggap darurat lokal dan investasi yang signifikan untuk kegiatan kesiapsiagaan bencana. Ini harus mencakup: pra-identifikasi peran dan tanggung jawab jika terjadi krisis, aktor yang dapat memenuhi fungsi-fungsi tersebut dan kegiatan peningkatan kapasitas yang ditargetkan untuk memungkinkan setiap aktor yang ditunjuk untuk memenuhi peran mereka, dari kegiatan tingkat lokasi hingga sistem koordinasi sub-nasional.
- Sebuah standarisasi prosedur operasi dan perangkat tanggap darurat respon.
- Sebuah analisis yang lebih dekat tentang interaksi antara pihak berwenang, LSM dan masyarakat sipil/organisasi berbasis masyarakat, serta investasi yang signifikan dan berjangka panjang untuk membangun kemitraan yang kuat antara pihak berwenang dan LSM dan organisasi sipil.

Dalam usaha memperkenalkan konsep CCCM kepada LSM lokal, Penasihat Pengembangan Kapasitas Klaster CCCM Global merencanakan lokakarya peningkatan kapasitas di dalam negeri dengan para aktor kunci pada akhir Maret 2020. Namun, karena wabah COVID-19 dan pembatasan pergerakan selanjutnya, lokakarya direorganisasi dan disesuaikan dengan pelatihan online.

Pelatihan tersebut menargetkan LSM lokal yang memiliki kemungkinan besar untuk mengimplementasikan program di tingkat lokasi dan memenuhi beberapa kriteria lain: pengalaman dengan bencana besar di Indonesia di masa lalu; penerimaan oleh masyarakat; pengetahuan tentang standar SPHERE; pengembangan kapasitas internal, pelatihan dan pendampingan; kemampuan untuk meningkatkan aktivitas di area berisiko tinggi; akuntabilitas keuangan dan sumber daya manusia; beberapa lokasi kantor; bekerja sebagai bagian dari jaringan antarlembaga; kepemimpinan strategis; Pelaporan/kebijakan PSEA⁶ telah tersedia; pelatihan sebelumnya tentang CCCM.

Pelatihan dilakukan selama beberapa minggu dalam Bahasa Indonesia dan Bahasa Inggris secara bersamaan. Secara keseluruhan, hal ini bertujuan untuk meningkatkan kapasitas pemangku kepentingan utama di tingkat nasional dan sub-nasional untuk memberikan bantuan kemanusiaan dengan cara yang lebih bermartabat kepada penduduk yang terkena dampak. Serta untuk meningkatkan tindakan dan keahlian lokal, mengurangi risiko Kekerasan Berbasis Gender (KBG) dalam pengaturan pengungsian dan mempromosikan pentingnya solusi jangka panjang dan Siklus Manajemen Tempat Pengungsian. Setiap modul membahas pembelajaran utama Manajemen Tempat Pengungsian, seperti:

- Manajemen tempat pengungsian mencakup berbagai tipologi lokasi, tetapi banyak pelajaran yang tumpang tindih antara tipologi yang berbeda;

- Manajemen tempat pengungsian yang lebih baik berasal dari kombinasi keterampilan 'teknis' dan 'nonteknis' yang perlu diidentifikasi dan dikerjakan dengan tujuan dalam pekerjaan kemanusiaan/tanggap bencana;
- Partisipasi adalah aspek yang berharga dari manajemen tempat pengungsian dan membentuk dasar dari pekerjaan di tingkat lokasi. Menyadari hal ini, lembaga manajemen tempat pengungsian akan bekerja dengan berbagai pemangku kepentingan dan setiap lokasi kemungkinan akan berbeda;
- Kekerasan berbasis gender merupakan tantangan khusus dalam manajemen tempat pengungsian, dan lembaga yang ditunjuk untuk mengelola pengungsian memiliki tanggung jawab yang unik untuk mencegah dan mengurangi KBG melalui kehadiran mereka di sebuah lokasi pengungsian;
- Standarisasi perangkat adalah cara untuk membangun kapasitas berbagai lembaga yang fokus bekerja di tingkat lokasi pengungsian dan meningkatkan kualitas tanggap darurat oleh Sub Klaster CCCM;
- Kesiapsiagaan untuk keadaan darurat tidak pernah dapat dilaksanakan secara total, namun, beberapa pedoman dapat membantu tim mengetahui apa yang harus dilakukan dalam keadaan darurat tertentu.

Dalam proses menyelenggarakan pelatihan Manajemen Tempat Pengungsian online pertama, penting untuk merancang percakapan yang disederhanakan. Peserta dan pelatih perlu berbagi informasi tentang sistem darurat Indonesia dan pada saat yang sama instruktur perlu menghubungkan teori CCCM dengan cara yang mudah dipahami. Program pembelajaran campuran dirancang agar peserta dapat terlibat selama enam minggu, terdiri dari 11 diskusi yang dilaksanakan secara webinar yang diadakan dua kali seminggu dengan tugas offline. Setiap webinar dilengkapi dengan pembacaan pra-kursus dan tugas kelompok singkat, yang mewakili total 36 jam pembelajaran.

Selama proses pelatihan, peserta juga didorong untuk terlibat dengan fasilitator melalui diskusi tentang isu-isu aktual yang mereka hadapi di lapangan dengan bencana yang sedang terjadi di Indonesia. Sebanyak 36 peserta (24 laki-laki, 12 perempuan) dari lembaga swadaya masyarakat dan masyarakat sipil berpartisipasi. Pelatihan perlu disampaikan dalam Bahasa Indonesia, sehingga metode penyampaian dan fasilitasi yang baru harus ditemukan. Pesan WhatsApp menyediakan terjemahan simultan langsung dari Bahasa Indonesia ke Bahasa Inggris, dan fungsi penerjemah langsung diinstal pada akun Microsoft Teams. Memanfaatkan pembatasan perjalanan, dewan tim pelatih dibentuk, termasuk mantan staf Kementerian Sosial Indonesia yang berhasil menyelesaikan Global CCCM Training of Trainer pada tahun 2019 yang berpartisipasi dari Australia, dan Wakil Kepala Misi di Sudan Selatan, yang berkewarganegaraan Indonesia dan merupakan ahli CCCM. Setiap sesi pelatihan membutuhkan waktu sehari-hari untuk mempersiapkan, bolak-balik antara Penasihat Pengembangan Kapasitas CCCM Global saat materi diterjemahkan dan dikontekstualisasikan.

⁶ Policy and Response to Sexual Exploitation and Abuse

PENCAPAIAN UTAMA

- Kajian lapangan menunjukkan kebutuhan nyata untuk keterlibatan lebih lanjut dengan LSM nasional di CCCM, khususnya dalam pengembangan kapasitas sehingga pemahaman bersama dapat dikembangkan.
- Tim pelatih yang kuat dari Pemerintah dan PBB melengkapi pendekatan CCCM.
- Pelatihan tersebut telah meningkatkan kesadaran akan isu-isu kunci seperti partisipasi masyarakat, solusi yang tahan lama dan KBG dalam pengaturan tempat pengungsian, yang sangat penting untuk membangun respon CCCM yang lebih kuat.

TANTANGAN

- Pembelajaran online bisa menjadi metode yang sukses namun membutuhkan banyak tindak lanjut.
- Membangun pedoman, menggunakan contoh, memiliki pelatih dari konteks lokal dan dalam disampaikan dalam bahasa lokal sangatlah penting.
- Bertemu dengan peserta lain sebelum pelatihan membantu membangun hubungan dan menjaga komitmen tetap kuat, tetapi dibutuhkan hal yang lebih banyak untuk mempertahankannya.

PERSPEKTIF 2: ORGANISASI NON-PEMERINTAH NASIOBAL (HUMAN INITIATIVE)⁷

Human Initiative (HI) menjadi peserta pelatihan CCCM dan memberikan perspektif mereka tentang pelatihan CCCM dan melakukan pergeseran dalam pelaksanaan program mereka sebagai hasil dari partisipasi dan pembelajaran dalam pelatihan CCCM.

Didirikan pada bulan Desember 1999 sebagai tanggapan atas kerusuhan sipil di Indonesia dan secara resmi terdaftar sebagai LSM dengan Status Konsultatif Khusus di Perserikatan Bangsa-Bangsa, visi Human Initiative adalah 'menjadi organisasi kelas dunia yang dapat dipercaya dalam membangun kemandirian'.

Sejak tahun 2004, Human Initiative berfokus pada pengelolaan program kemanusiaan, dengan misi:

1. Memanfaatkan program kedaruratan, pemulihan dan pemberdayaan untuk meningkatkan kualitas dan kemandirian penerima manfaat;
2. Melaksanakan penelitian, pengembangan kapasitas dan strategi pengembangan untuk memperkuat lembaga masyarakat sipil untuk memberikan solusi alternatif dan inovatif untuk krisis kemanusiaan yang berkepanjangan;
3. Membangun kapasitas dan kompetensi organisasi yang efektif, inovatif dan akuntabel yang berorientasi pada mutu pelayanan dan
4. Mengembangkan program advokasi yang mempromosikan kesetaraan dan kesetaraan di tingkat lokal dan nasional.

Dengan latar belakang pengalaman yang kaya dalam menanggapi bencana di tingkat lokal, HI telah berhasil memperoleh wawasan dari pelatihan tentang bagaimana mengubah organisasi mereka dari pemberian layanan menjadi fokus pada mendukung kegiatan CCCM. Langkah pertama dalam mentransformasi organisasi adalah melakukan penilaian internal untuk melihat kapasitas apa yang harus ditingkatkan untuk mendukung kegiatan CCCM di masa depan. Pergeseran ini berarti penting untuk mendidik para donor HI tentang pentingnya CCCM serta menjelaskan mengapa penting bagi HI untuk mengalihkan fokusnya ke pengarusutamaan CCCM di Indonesia. Untuk memastikan konsep inti dan fondasi CCCM diurusutamakan di seluruh HI, anggota staf yang menghadiri pelatihan peningkatan kapasitas mengadakan pelajaran yang didapat dengan staf lain di HI, untuk tidak hanya meningkatkan kapasitas individu mereka, tetapi juga kapasitas organisasi. Selain itu, HI telah mengadaptasi kode etik mereka berdasarkan standar SPHERE, dan mereka sekarang memiliki pemahaman yang lebih komprehensif tentang Standar CCCM, yang ingin mereka gunakan sebagai referensi untuk organisasi mereka.

Saat ini HI mengerjakan berbagai tanggap darurat di Indonesia, termasuk di Balaroa, Sulawesi Tengah dan di Aceh dengan kedatangan kapal Rohingya dari Bangladesh. Sebelum mengikuti pelatihan CCCM pada Mei 2020, HI secara internal membahas tanggung jawab organisasi dengan manajemen tempat pengungsian di Indonesia. Tanggung jawab CCCM biasanya berada pada negara: dalam hal ini, pemerintah Indonesia dengan dukungan dari Co-lead Klaster CCCM. Namun, mengingat keragaman Indonesia, dengan dua ratus budaya dan bahasa yang berbeda, akan menjadi tantangan bagi organisasi non-lokal untuk menerapkan CCCM. Lokalisasi dan peningkatan kapasitas LSM lokal yang terlibat dalam pengelolaan tempat pengungsian diidentifikasi sebagai aspek penting CCCM di Indonesia. Melalui ini, organisasi akan dilengkapi dengan keterampilan yang dibutuhkan untuk melakukan tanggap bencana dan/atau krisis yang membutuhkan keahlian manajemen tempat pengungsian.

Setelah mengikuti pelatihan CCCM, kapasitas staf HI meningkat, terutama dalam pelaksanaan proyek mereka di Balaroa dan Aceh. Dengan menggabungkan pelatihan dengan situasi yang mereka hadapi di lapangan, para peserta menyadari perlunya memiliki exit plan/solusi jangka panjang sebagai bagian dari manajemen tempat pengungsian.

Dalam merefleksikan pelatihan induksi CCCM, seorang peserta dalam wawancara pasca pelatihan berbagi:

"Saya telah meningkatkan kapasitas untuk meningkatkan proyek saya di Balaroa karena situasi yang anda bahas dalam pelatihan CCCM sangat terkait dengan proyek saya. Di Balaroa, ada lebih dari 200 keluarga yang masih tinggal di tempat pengungsian satu setengah tahun setelah bencana. Kita harus mencari solusi untuk mereka karena situasi pengungsian bukanlah solusi permanen bagi penerima manfaat. Menurut kami solusi tempat pengungsian hanyalah solusi terakhir yang harus kami berikan kepada masyarakat."

Untuk respon di Aceh, penting untuk berkoordinasi antara organisasi PBB dan LSM dan berkonsultasi dengan Rohingya yang datang untuk memahami kebutuhan mereka melalui diskusi kelompok terfokus. Diskusi tersebut mengidentifikasi bahwa pembentukan komite lokal akan memastikan bahwa kebutuhan masyarakat didengar, terutama mengenai kondisi kehidupan. Komite ini dibentuk dengan perwakilan dari masing-masing keluarga dan memastikan jumlah pria dan wanita dalam komite seimbang. Melalui konsultasi, keluarga didukung dengan sumbangan sewa atau pembangunan tempat tinggal untuk mengatasi kekhawatiran mereka mengenai kondisi kehidupan mereka.



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PENCAPAIAN UTAMA

- Pelatihan telah memberikan pengetahuan dan pemahaman yang komprehensif tentang manajemen tempat pengungsian yang dapat diterapkan secara langsung di Balaroa dan Aceh.
- Waktu pelatihan bertepatan dengan pelaksanaan program shelter HI di Palu. Hal ini telah berkontribusi pada kelancaran program, di mana output utamanya adalah memindahkan pengungsi dari pengungsian ke tempat penampungan yang lebih aman, nyaman dan bermartabat. Hal ini terkait erat dengan strategi penutupan shelter yang dibahas pada pelatihan CCCM.
- Pelatihan ini memberikan wawasan untuk masa depan HI tentang bagaimana koordinasi CCCM yang lebih baik melalui sub-klastor.
- Rangkaian pelatihan ini memperkuat topik-topik penting terkait dengan respon kemanusiaan seperti prinsip-prinsip kemanusiaan, mitigasi KBG, dan lainnya.
- HI mampu membangun jaringan baru melalui peserta pelatihan, yang memungkinkan mereka untuk berbagi pengalaman, praktik baik dan tantangan dalam mengelola tempat pengungsian.

TANTANGAN

- Bahasa dapat menjadi kendala bagi sebagian peserta yang tidak percaya diri menggunakan Bahasa Inggris sebagai bahasa utama.
- Sebuah proyek bersama akan bermanfaat untuk mempraktekkan proses pembelajaran sebagai komunitas CCCM dan akan memungkinkan pengetahuan untuk ditransfer ke tingkat lapangan.
- Menyelenggarakan pelatihan secara virtual merupakan tantangan, terutama ketika peserta masih beradaptasi menggunakan media online untuk pelatihan. Selain itu, dengan sebagian besar peserta melakukan pelatihan secara paruh waktu, agak sulit untuk peserta fokus dan mengesampingkan beban kerja mereka.
- Konteks kemanusiaan di Indonesia sebagian besar disebabkan oleh bencana, yang tidak memerlukan manajemen tempat pengungsian yang besar dan jangka panjang.



© IOM

⁷ Human Initiative's website

PERSPEKTIF 3: PEMERINTAH INDONESIA

Pemerintah Indonesia telah berusaha untuk mendorong dukungan formal antara badan-badan PBB, LSM dan pemerintah. Selain itu, Pemerintah Indonesia menyadari pentingnya peran organisasi lokal dalam CCCM dan menganjurkan untuk membangun kapasitas mereka. Sub Klaster CCCM harus digunakan secara lebih strategis, terutama dalam koordinasi. Sub Klaster dapat melakukan pertemuan rutin untuk membentuk komunitas CCCM di tingkat negara serta untuk mengidentifikasi aktor kunci potensial yang dapat mengambil peran CCCM untuk meningkatkan prediktabilitas respon bencana di masa depan. Sub klaster juga dapat menjadi wadah untuk membangun dialog antar aktor CCCM, terutama dari instansi pemerintah, sehingga mereka dapat memiliki visi yang lebih jelas tentang bagaimana menempatkan instansi pemerintah dalam peran yang berbeda untuk mendukung CCCM tanpa mengubah struktur saat ini.

Manajemen informasi juga merupakan masalah utama lain yang dapat ditangani dalam Sub Klaster CCCM untuk menyediakan data yang lebih akurat, terutama tentang pemberian layanan di tempat pengungsian. Selain itu, Sub Klaster CCCM dapat bekerja sama dengan sub klaster lain, misalnya dengan Sub Kluster Perlindungan Terhadap KBG untuk memastikan bahwa ada tindakan yang terkoordinasi dalam menangani masalah KBG di lingkungan tempat pengungsian.

Untuk pelatihan CCCM, perwakilan pemerintah yang dilatih tentang CCCM membantu memfasilitasi pelatihan. Pelatihan CCCM memicu diskusi di antara para peserta dari LSM lokal bahwa kolaborasi dan koordinasi diperlukan dalam menangani bencana, serta peningkatan kapasitas anggota staf mereka dan masyarakat. Proses pelokalan tidak mudah, dan mengadaptasi serta mengontekstualisasikan pelatihan ini ke tingkat desa atau kota untuk melibatkan lebih banyak aktor lokal akan memakan waktu lama.

Perbedaan terlihat setelah pelatihan dilakukan. Sebelum pelatihan CCCM, sebagian besar organisasi tidak menyadari peran khusus yang dimainkan oleh CCCM, khususnya dalam menangani bencana dan apa yang dimaksud dengan lembaga manajemen tempat pengungsian. Setelah pelatihan, para peserta lebih menyadari perbedaan dan bagaimana melokalisasi CCCM tidak hanya dalam organisasi mereka, tetapi juga di Indonesia berdasarkan kapasitas dan sumber daya yang tersedia. LSM memiliki cabang organisasi

yang lebih kecil di tingkat desa, dan mereka menggunakan pengetahuan mereka dari pelatihan untuk menyebarluaskan perubahan perspektif dalam jaringan mereka sendiri. Pelatih dari Kementerian Sosial telah memberikan pembinaan dan dukungan kepada organisasi-organisasi ini untuk membantu mereka memfasilitasi upaya lokalisasi dan peningkatan kapasitas.

Pelatihan CCCM disampaikan dengan cara percakapan yang sederhana untuk memungkinkan membangun hubungan dan jaringan. Pelatih dari Kementerian Sosial mengaktifkan dan mendorong jaringan antara peserta dan organisasi lokal, dan memungkinkan untuk menjembatani hubungan dengan kontak baru yang ditemui melalui pelatihan. Menjalin hubungan dan relasi antar organisasi lokal penting untuk memperkuat kepercayaan serta memahami peran dan kapasitas masing-masing organisasi. Ini akan membantu kolaborasi dan koordinasi di masa depan untuk CCCM. Dalam konteks Indonesia, hubungan informal merupakan faktor penting untuk mengembangkan koordinasi ke dalam bentuk yang lebih terstruktur dan formal. Selain itu, bercermin pada beberapa bencana terakhir di Indonesia (khususnya Sulawesi Tengah dan Nusa Tenggara Barat), semangat dalam pemerintah untuk bekerja sama dengan aktor non-pemerintah berkembang. Ini adalah momentum yang baik yang harus ditangkap untuk mendorong lokalisasi dengan memperkuat kapasitas di tingkat lokal.

Proses memiliki upaya peningkatan kapasitas untuk mendukung lokalisasi ini sangat penting dalam gambaran yang lebih besar, terutama dalam melibatkan aktor lokal dan memahami budaya dan konteksnya. Memahami relasi kuasa antara organisasi lokal, badan-badan PBB dan pemerintah adalah penting, terutama untuk mempromosikan pendekatan yang berpusat pada masyarakat dalam pengambilan keputusan mulai dari tanggap darurat hingga pemulihan. Selama proses pengambilan keputusan ini, ada banyak perspektif berbeda dari para pemangku kepentingan yang berbeda tentang jenis bantuan apa yang dibutuhkan dan harus diprioritaskan, prosesnya dan bagaimana menangani pemulihan daerah yang terkena bencana atau krisis. Memiliki sudut pandang semua pemangku kepentingan mulai dari pemerintah hingga desa dan masyarakat sangat penting dalam pelokalan. Keterlibatan tambahan dengan masyarakat di lapangan akan memberikan informasi yang valid tentang realitas bagaimana bencana atau krisis telah mempengaruhi masyarakat.

PENCAPAIAN UTAMA

- Pelatihan CCCM telah menyediakan platform yang menciptakan dialog antara organisasi non-pemerintah sub nasional dan lokal tentang potensi mereka untuk mendukung kegiatan CCCM di masa depan untuk mendukung pemerintah.
- Pelatihan telah mendorong peserta untuk membangun lebih banyak diskusi dengan lembaga-lembaga kunci pemerintah untuk membangun mekanisme CCCM di Indonesia, termasuk peran dan tanggung jawab lembaga CCCM serta kedudukan hukum untuk mendukung pekerjaan mereka.
- Beberapa tindakan nyata untuk mendorong lokalisasi tercapai, seperti terjemahan beberapa materi (Buku Saku KBG) dan Standar Minimum Manajemen Tempat Pengungsian untuk konteks Indonesia.

TANTANGAN

- Pelatihan telah membuka banyak ide dan diskusi tentang bagaimana menerapkan konsep CCCM dalam konteks Indonesia, namun membutuhkan komitmen dari organisasi untuk memimpin, mengawasi proses dan mendukung tindakan nyata.
- Dibutuhkan tim pelatih yang tangguh dari Pemerintah Indonesia dan mitra PBB.
- Keterlibatan berkelanjutan dengan beberapa pemangku kepentingan utama diperlukan untuk menjaga momentum, dan harus dilakukan dengan cara yang lebih terstruktur.
- Dibutuhkan lebih banyak advokasi kepada semua aktor kunci pemerintah untuk menyepakati persepsi bersama tentang CCCM di Indonesia dan memformalkannya.

PEMBELAJARAN DAN REKOMENDASI (TERMASUK DARI KETIGA PERSPEKTIF)

- Pelatihan ini hanyalah puncak gunung es. Tanpa **kapasitas staf yang berdedikasi dan dukungan yang berkelanjutan**, dampak yang diperoleh melalui pelatihan awal tidak akan terserap baik oleh sistem klaster maupun peserta yang terlibat dari berbagai LSM.
- Otoritas nasional melihat topik lokalisasi sebagai masalah yang terutama mempengaruhi tingkat koordinasi sub nasional, dan **ada ketidakjelasan secara menyeluruh mengenai pembagian peran dan tanggung jawab di tingkat lokal**. Para aktor berjuang untuk mengidentifikasi peran yang dapat mereka mainkan, terutama di tingkat situs.

ANNEX GAMBARAN UMUM PELATIHAN

BACAAN WAJIB SEBELUM SESI	JADWAL SESI ONLINE	TOPIK	REFLEKSI (UPLOAD KE TEAMS)
Camp Management Toolkit 2015 (Eng.) hal. 22-37	MEI 15	Pengantar Pelatihan	Foto berbagai tempat pengungsian di Indonesia
Laporan IDMC Grid 2019	MEI 19	Tinjauan pengungsian: Dunia dan Indonesia	Kebutuhan pengungsi
Standar di Tempat Pengungsian	MEI 22	Standar Kemanusiaan termasuk Manajemen Tempat pengungsian	Pemetaan Layanan
Camp Management Toolkit 2015 (Eng.) hal. 42-46	MEI 29	Lembaga Manajemen Tempat pengungsian (Komitmen 1)	Organigram tim KMTP
Camp Management Toolkit 2015 (Eng.) hal. 53-55, 63-64	JUNI 2	Keterwakilan	Cara-cara untuk melibatkan perwakilan masyarakat
Camp Management Toolkit 2015 (Eng.) hal. 47-50	JUNI 5	Pemantauan Layanan	Dokumen 3W dan template pemantauan tempat pengungsian
Camp Management Toolkit 2015 (Eng.) hal. 312-325	JUNI 9	Lingkungan Tempat Pengungsian	Audit Keamanan dan Keselamatan
Camp Management Toolkit 2015 (Eng.) hal. 208-227	JUNI 12	Penutupan Tempat Pengungsian	Checklist penutupan tempat pengungsian
Input dari peserta	JUNI 16	Pertanyaan/Jawaban	Kehidupan keseharian di...
😊	JUNI 19	Rencana Aksi	Spesifik lembaga
	JULI / AGUSTUS	Evaluasi dan tindak lanjut	Pertanyaan Interview

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BANGLADESH



CONTEXT

The Rohingya of Myanmar have faced decades of systematic discrimination and targeted violence from military and radical group attacks. A major conflict that took place across the townships of northern Rakhine in Myanmar in 2017 involved burnt down villages, rape and killings and led to the rapid influx of Rohingya refugees fleeing persecution. This resulted in the spontaneous establishment of more than thirty sites or informal settlements in Bangladesh. Cox's Bazar is the largest of those refugee sites¹, and the Rohingya refugee population in the areas of Ukhiya-Kutupalong and Teknaf have reached over 900,000 individuals².

The settlement sites resulted in the creation of what can be described as mini-cities, growing from temporary sites to permanent places, with some refugees having been born and raised in camps. These unprecedented sites unfortunately lack the basic infrastructure and necessities to meet the requirements of the growing Rohingya population, as more and more refugees arrived. The newly settled sites faced ongoing challenges due to the initial lack of time to scale up site planning, the high density of households and the risk of natural hazards. In addition is the complexity of providing basic needs and protection in a coordinated manner, and ensuring access to services for all Rohingya women, girls, men and boys.

716,915 Rohingya arrivals have been recorded since 2017, with 1.2 million Rohingya refugees and host community members in need of humanitarian assistance³. In response to the needs of Rohingya refugees, the humanitarian community is working to strengthen security and social cohesion between Rohingya refugees and the host communities in Bangladesh. The Rohingya refugees are reliant on humanitarian assistance for their basic needs as they are not allowed to work outside of the camps and can only work in the camp through cash for work programs for a limited number of hours per month. Among many other challenges Rohingya refugees face,

several acts of violence, especially towards women and children at night, have been reported. In this context, humanitarian agencies have initiated various solutions to increase long term safety and empowerment of Rohingyas refugees based on a strong collaboration with host communities and local authorities.

To ensure the presence of national authorities and to support operations, the government of Bangladesh rapidly mobilized senior civil servants from various ministerial bodies to act as Site Administrators in the form of the Camp-in-Charge (CiC) and Assistant Camp-in-Charge (ACiC) in the spontaneous sites that the Rohingya refugees populated. Capacity building initiatives were necessary to ensure that local authorities and entities could begin taking on site management responsibilities. However, local authorities and local NGOs face several significant structural limitations considering the size of sites, number of Rohingya women, girls, men and boys, and the complexity of needs. Most of the local structures had not been exposed to humanitarian operations or ever received specific sector trainings prior to their deployment to the sites. The Site Administrators were also limited in numbers, often responsible for multiple sites, and especially early on after the Rohingya influx there was high turnover of CiC staff, making it difficult to institutionalize and transfer the knowledge they had acquired.

Moving forward, the Government of Bangladesh, in close collaboration with humanitarian actors, aims to meet critical needs of the refugees, such as food security, health care and water access, nationalize site coordination and management to the extent possible and employ over 300 additional staff who will be based in sites along with CiCs and ACiCs. In preparation for the nationalization process, humanitarian partners have a shared responsibility to create conditions conducive for a successful transition that does not impact the quality or continuity of site management services.

PROTECTION RISKS

Protection remains a significant concern in the Rohingya sites with human trafficking affecting most of the population groups. Women and girls face conflict-related sexual and physical violence, sexual harassment in public places and poor access to quality health care services. Child protection issues such as early child marriage and access to education are predominant. Many of the Rohingya refugees face multiple barriers in accessing livelihood opportunities and remain dependent on humanitarian assistance. Cyclones, monsoons and bad weather conditions cause damage to shelters and site infrastructure, leaving people homeless and forced to stay in undignified and unsafe living spaces. As more and more Rohingya refugees arrive from Myanmar, sites become overcrowded and congested, preventing physical distancing, and thus enabling the spread of diseases such as COVID-19.

Lack of adequate household-level and communal area lighting

is a key security concerns for camp inhabitants, including the elderly, women and girls, people with disabilities and men. Lack of adequate lighting in the camps results in increased GBV risks for women and girls, risk of accidents, and fear of using waterpoints and latrines at night. It increases the inaccessibility of services for people with disabilities, who already face significant limitations in navigating their day to day lives in and around the camps.

One of the case studies focuses on the issue of lighting. In Ghumdhum and Balukhali camps, camp residents and members of the host community were trained in how to install and maintain solar lighting to address associated protection concerns. Meanwhile, the second case study looks at capacity building with Government of Bangladesh site management staff through a suite of contextualized trainings on core CCCM, Protection and Gender Mainstreaming topics.

¹ by December 2018

² The New Humanitarian | [The Rohingya: Tracking the history of today's refugee crisis](#)

³ IOM Bangladesh: [Rohingya Humanitarian Crisis Response External Situation Report](#) December 2020-January 2021.



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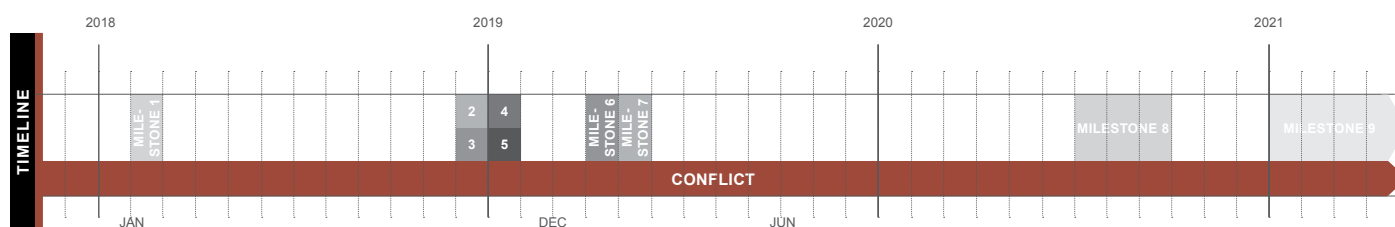
LIGHT FOR ROHINGYA: TRAINING, INSTALLATION AND MAINTENANCE OF SUSTAINABLE LIGHTING INSTALLATIONS

Cause of displacement	Conflict
People displaced	865,000 as of May 2020 ¹
Project location	Ghumdhum and Balukhali camps in Cox's Bazar, Bangladesh
Project duration	22 months
# Targeted by project	8,000 (indirect)
CCCM coordination mechanism	Site Management and Site Development (SMSD) Sector



Summary

“Light for Rohingya” is an innovative model that aimed to establish sustainable lighting provision to support safer access to hygiene and water installations for women and girls in the Cox's Bazar refugee camps. Training was offered to Rohingya refugees and host community members to gain valuable technical skills to install, maintain and fix electrical lighting devices.



- February 2018 Needs assessments
- December 2018 Designed solution: identification of partners, beneficiaries, priority
- December 2018 Partnership agreements
- January 2019 Finalisation of education training materials
- January 2019 Arrival of equipment in-country

- April 2019 Completed theoretical and hands-on practical training
- May 2019 Inspection of installations
- Q3-2020 Impact study (pending sanitary conditions evolution)
- 2021 Duplication of the project (pending sanitary conditions evolution)



PROJECT OVERVIEW AND OBJECTIVES

The project focused on the installation of external lighting around latrines and water wells as part of the overall efforts to create a safer environment for women and girls in Ghumdhum and Balukhali camps. It aimed to contribute to GBV risk reduction for women and

girls. The project included technical training on the installation, maintenance and repair of lighting devices to ensure long-term well-maintained equipment, as well as developed entrepreneurial activities for the refugee and local communities.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

A lighting needs assessment was conducted by the implementing agency in collaboration with the Camp in Charge (elected as the Bangladeshi representative in the camp) to identify the priority zones within the camps for the project. The targeting was based on the general reported level of insecurity, reported GBV incidents and lack of lighting around communal wells and latrine blocks. As the success of the project relied on the ability of the beneficiaries to install, maintain and repair the electrical materials themselves,

it was critical to select trainees for the technical training who were most likely to use their newly gained technical skill in the future. Therefore, the selection of the trainees was based on several requirements, including a target age group between 14 and 30 years old, a basic education and basic Bengali language skills. In addition to the refugee participants, trainees from the poor socio-economic group of the surrounding host community were included.

CCCM ACTIVITIES

The implementing agency worked closely with UN site management agencies to understand the context, constraints, legal requirements and other related programmes. The implementing organization worked closely with their local partner organisation and the site managers to identify the priority areas, the beneficiaries and the training participants. The project activities contained the following components:

1. Solar light installation: Solar lighting materials (75 Solar Street Lamps and 52 Solar Home Systems) were installed in 127 areas of the camp, which provide lighting in and around nearby latrines and water wells.
2. Training on installation, maintenance and repair of electrical devices: A 10-day training programme consisting of theoretical and hands-on practical training was developed and built the capacities of 22 Rohingya and Bengali trainees. The training programme included modules on Street Light and Solar Home Systems (SHS); charge controller and panel inclination; voltage drop; watt, voltage and intensity; series and parallel connection; wiring and corrective maintenance; calculation for solar power; recycling of components and entrepreneurship. To facilitate exchanges, the trainings, while conducted in English, were translated into Bengali and Rohingya languages.
3. Monitoring of installed lights: Monitoring information for all installed street lamps and solar power systems was collected according to formats shared by solar lighting suppliers. This was done on a monthly basis to ensure adequate functionality and maintenance if lights were faulty or damaged by adverse weather conditions.
4. Distribution of individual lamps: 704 Solar Individual Kits were distributed and 1,054 households benefitted. The households were selected following the results of the lighting needs assessment conducted in coordination with site management.
5. Mentorship and support with job hunting procedures: Trainees were mentored and guided by the local partners for two years after completion of the training in solar light installation and entrepreneurship. Bi-weekly meetings were conducted with trainees to assist them to find income-generating opportunities. Trainees who had successfully completed the technical training were supported in CV writing and networking to find possible job opportunities with international organisations present in the camps, camp authorities and small businesses. The project took the opportunity to support the young trainees in establishing a network for potential future job opportunities.

¹ IOM Needs and Population Monitoring Portal



WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

From the beginning of the project, a steering committee composed of all stakeholders was established. The steering committee was kept informed of project progress, constraints and delays that

were encountered in the field, which made it possible to adapt the implementation schedule and remain flexible within the constraints of the COVID-19 context.

KEY ACHIEVEMENTS

- The project promoted sustainable practices by procuring sustainable solar lighting materials and enabling beneficiaries to maintain and repair various types of electrical materials which would have been otherwise thrown away.
- The Rohingya and Bengali trainees installed all electrical equipment themselves under the trainer's supervision, fostering ownership of the installation.
- The Rohingya and Bengali trainees maintained and repaired all equipment without further humanitarian support throughout the project period. They used their newly acquired skills to create income either through entrepreneurship/setting up their own business or being hired by other international organisations in the camp on lighting issues. Two Rohingya trainees have been engaged in regular maintenance of solar lights at WASH points.
- Training the two communities (Rohingya and Bengali) together was a real success. They were able to collaborate closely to complete the training programme and worked together without any difficulties.
- In January 2020, the implementing agency received the Zayed Sustainability Prize for the «Energy» category based on the project's successful social innovation and replicability in similar camp settings. Plans are currently underway to expand the lighting project to other IDP or refugee camps.



CHALLENGES

- Access to the sites was challenging due to delays to obtain project permissions during the country's election period.
- Customs clearance procedures and timeframes were also impacted by the restricted access and difficulty in obtaining permits.
- Labour laws and refugee management as well as local rules hindered some of the project activities. Specifically, Rohingya refugees do not have permission to work in Bangladesh and they cannot leave their area within the camp. Foreigners are also restricted, and have limited access to the sites and a requirement to leave before sunset. This limited the intervention's expected outcomes of the training.

Camp Area	Solar Street Lamp	Solar Home System for Toilets	Solar Individual Kit
C-6	3	-	-
C-7	13	14	554
C-8E	9	-	-
C-8W	33	28	150
C-17	11	-	-
C-18	3	10	-
C-20	3	-	-
Total	75	52	704

For Solar Street Lamps, Solar Home Systems, Solar Individual Kits the documentation is available upon request



© Electriciens sans frontières

LESSONS LEARNED AND RECOMMENDATIONS

- The strong and reliable collaboration between various project partners was established and was crucial to success, in particular the **collaboration with local partners and the private sector**. Constructing the project with local actors helped to take into account the actual needs, objectives and constraints on the ground (climate, culture, regulations) while also helping to identify competencies and possible income-generating activities. Working with the private sector contributed to business development activities.
- Training of local field technicians was a sustainable practice that **fostered empowerment and created income generating activities for the trainees**. For example, some trainees were hired as technicians with humanitarian organisations. Trained refugees living in the sites are able to safely maintain and repair the electrical installations within their areas and can support their neighbourhoods.
- It is essential to have all training and educational materials **adapted and translated** in the local languages from the beginning of the training.
- Sustainable solar lighting materials need to be provided to ensure **long lasting usage**. The quality of the equipment should have a sufficient product lifetime in line with the expected lifetime of the camp. Equipment must also be tried and tested, and must be repairable and dismountable.
- Establishing a **contingency budget** that can mitigate unforeseen delays or events was critical for completing the project successfully.

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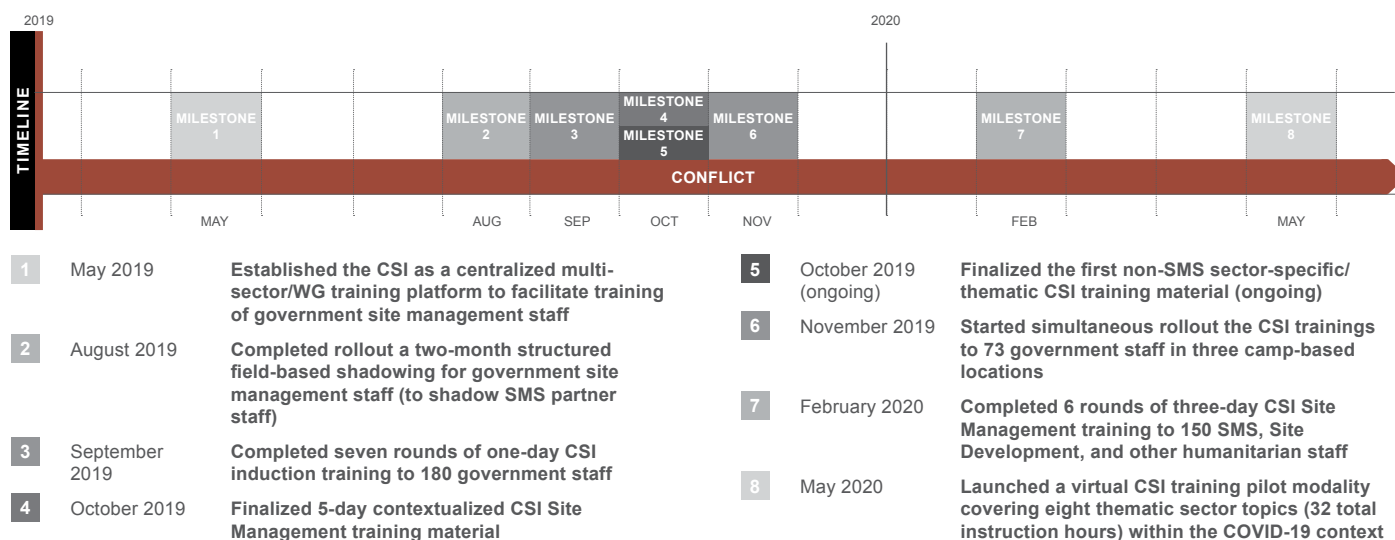
JOINT CAPACITY SHARING INITIATIVE (CSI) - A MULTI-SECTOR AND INTER-AGENCY LEARNING AND SKILLS TRANSFER PLATFORM

Cause of displacement	Conflict
People displaced	Approx. 900,000 refugees
Project location	Cox's Bazar, Bangladesh
Project duration	anticipated 3 years+
# Targeted by project	300 Government Site Management Staff 200+ Humanitarian Staff
CCCM coordination mechanism	Site Management and Site Development (SMSD) Sector



Summary

The Capacity Sharing Initiative (CSI) is a comprehensive, multi-sectoral and inter-agency skills transfer and learning platform coordinated through the Site Management and Site Development (SMSD) Sector. The Initiative systematizes and channels humanitarian actors' expertise to newly recruited government of Bangladesh site management staff. The CSI aims to ensure Rohingya refugees have access to adequate and equitable humanitarian assistance in line with technical standards, best practices and guiding principles by increasing the knowledge and operational skill set of government site management staff.



Learning to use toolkit

PROJECT OVERVIEW AND OBJECTIVES

The CSI project is ongoing and part of a long-term strategy; however, within the case study period it aimed to:

1. Ensure refugees have access to humanitarian assistance in line with technical standards and principles by increasing the knowledge and operational skill set of government site management staff across the Rohingya sites.
2. Establish and institutionalize a multi-sector training approach built on one centralized platform and coordination mechanism through the SMSD Sector that capacitates government site management staff to effectively support coordination of refugee assistance.
3. Standardize and harmonize the development of a teaching modality for multi-sector training materials and operational reference tools for government site management staff.

In May 2019, the CSI was established as a centralized multi-sector/working group (WG) training platform to facilitate training of government site management staff. It consisted of several elements,

including the core induction training, a series of specialized sector/working group trainings, a three-day CSI Site Management training and structured field-based shadowing for government site management staff. The platform also procured and distributed various CSI/Camp-in-Charge (CiC) Support Staff training materials.

The CSI training methodology is based on interactive use of scenarios, role playing and participant presentations to be context specific and appropriate for the CiCs and Assistant Camp-in-Charges (ACiCs). All trainings were facilitated in Bangla by national trainers using dual projectors and two screens so participants could see visual slides in both English and Bangla. As most government staff resided near camps, the trainings were held in camp-based venues, allowing field day exercises to be included. Using appropriate language is a critical aspect of the CSI, often consisting of technical humanitarian terminology from English to Bangla for each sector's modular package.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

The CSI project is primarily targeting government site management staff, and it is later expanding to humanitarian staff working within

Rohingya refugee sites in Cox's Bazar, Bangladesh.

CCCM ACTIVITIES

The CSI training commenced with a 1-day core induction training that trained 180 staff, including CiC Support Staff, office guards and cleaners. This was then followed by a series of specialized sector/working group trainings over a span of 13 days (65 hours), some of which integrated field activity. Out of the 36 training modules, 11 were on Site Management, 6 on the Protection Legal Framework and Coordination, 3 on Community-based Protection, 3 on Communicating with Communities, 6 on Gender Mainstreaming, 3 on Natural Hazards and 4 Disaster Risk Reduction (DRR).

In addition to the trainings, a field-based shadowing program facilitated by Site Management Support (SMS) partners using the "Observation" Shadowing Framework was initiated. It facilitated 73 CiC Support Staff consisting of 21 Care and Maintenance Officers, 17 Information Management Assistants and 35 Community Mobilization Assistants to shadow experienced SMS partners and to be orientated on camp operations, humanitarian assistance and ways of working through "hands on" experiences.

While the impetus for the CSI was to target government site management staff, the CSI is a flexible training framework, using

the newly developed training material for national humanitarian staff and community representatives as well. Training of Trainers (ToT) training was delivered to national humanitarian staff in various international organizations. These consisted of a 4 day Site Management training for 24 national staff, a half day Gender Mainstreaming training for 2 national staff and a 1 day DRR training for 6 national staff. In addition, a 3 day Site management training was also delivered to 152 humanitarian staff who were primarily site management and site development (SMSD) staff and a half day Site Management and Community Representation training was delivered to 49 elected refugee representatives.

Various CSI/CiC Support Staff materials for visibility were procured and distributed, including Camp Management toolkits and pre-loaded USB sticks with CSI training materials. CiC reflective vests and backpacks were distributed to guards at CiC offices. The CSI also tasked each sector with developing their own pre- and post-test evaluation to evaluate knowledge transfer, but this was later cancelled due to limited amount of available training time.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Although one SM agency led the CSI, developed the contextualized SM training material and oversaw implementation and coordination with stakeholders, all SM partners contributed towards its operationalization and jointly facilitated trainings. The SMSD Sector coordinated the CSI Technical Working Group and represented

the CSI externally, advocating for support from other sectors, government and donors. A mixed CSI Technical Working Group (TWG) was established with SMS, Protection and Gender partners to review and provide feedback, ensuring protection and gender mainstreaming were integrated within all content.

¹ Somaliland is a self-independent state of Somalia that is recognized as an autonomous region consisting of five regions, i.e. Togdheer, Sanaag, Sool, Woqooyi Galbeed and Awdal with Hargeisa as its capital city. It is situated in the northern part of Somalia bordering the republic of Djibouti to the West and Puntland State to the East. Additional information available at: <https://www.sheltercluster.org/hub/somaliland>

² by REACH INITIATIVE

³ Local Authorities from El Afweyn (Sanaag) and Hargeisa. These locations were chosen in coordination with UNHCR as sector lead and NDRA, the national displacement agency, as they

present the highest numbers of displaced individuals in Somaliland

⁴ Topics included Humanitarian Principles, Roles and Responsibilities in CCCM, Protection Mainstreaming, Information Management and Coordination, Community Participation and Communicating with Communities

⁵ Staff of humanitarian organizations intervening in displacement sites, NDRA (National Displacement and Refugee Agency) staff, staff from local municipality offices

⁶ The Somalia CCCM Cluster received information from partners, and reports were taken and adapted to support NDRA personnel working in Burao, Ainabo, Erigavo and El Afweyn

KEY ACHIEVEMENTS

- There was effective collaboration and cooperation both within the SMSD Sector and with other sectors; this is reflected in the "one team" approach taken by SM partners.
- Sectors built upon their respective expertise and established effective synergies. For example, quarterly roundtable meetings of all Technical Experts and CiC Staff were facilitated to share experiences, encourage harmonization, discuss challenges, and identify potential solutions/lessons learned.

CHALLENGES

- Ensuring sufficient time for translation of training material from English to Bangla, and ensuring time for a final review of Bangla version by sector specialists.
- Training time was reduced due to extended travel time to reach camp-based training venue.
- Due to time constraints, pre- and post-tests for each training module were not implemented; thus, the project could not measure impact and skills transfer.
- CSI aimed to use an interactive and dynamic training methodology to maximize learning, but facilitators often reverted to lecturing, which limited participant engagement.



Group Activity with Government Staff



Gender power walk

LESSONS LEARNED AND RECOMMENDATIONS

- **Ensure a lead agency with dedicated staff and financial support:** Sufficient capacity development bandwidth, expert staffing and financial resources are required by all sector secretariats and/or sector partners to lead capacity building activities for their respective sectors. Contextualisation, engagement with stakeholders and coordinated of the rollout are essential.
- **Delay initial output to focus on multi-sector buy-in:** The long term aims of the CSI required repeated engagement and presentations to gain the participation of all sector coordinators, partners and government representatives. This process was lengthy and required continued attention, especially due to staff turnover.
- **Ensure translation support and dual language use:** The translation cycle needed about three weeks to submit, draft initial translation and quality check with technical feedback. Using appropriate language was critical for the success of the project.
- **Integrated flexibility (targeting multiple stakeholders and virtual modality):** The CSI remained flexible, and with limited access to the camps during the COVID-19 response, the material was easily modified for virtual use by replacing group activities with Question and Answer activities.
- **Prioritizing a national Training of Trainers (ToT) pool:** It is recommended to continue the ongoing delivery of ToTs to expand the cadre of national trainers, and to deliver refresher ToTs to continue strengthening the skill set of existing facilitators.

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SOUTH SUDAN



CONTEXT

South Sudan continues to experience large-scale humanitarian crisis, including protracted and new displacement despite the signing of the peace agreement on the 22nd of February 2020 to end the prolonged conflict. While the overall security situation has improved, 2019 and 2020 have seen increasing intercommunal clashes, localised violence and rising tensions in the Protection of Civilian (PoCs) sites secured by UNMISS.

An estimated 1.6 million people are internally displaced in South Sudan, the majority of whom live in informal settlements across the country in urban, peri-urban or hard to reach locations¹. The remaining population of IDPs lives in Protection of Civilians (PoC) sites or collective sites.

The coordination amongst humanitarian agencies outside of PoC sites in South Sudan has been less standardised, risking duplication

or gaps in services. In addition, there is a real disconnect between the displacement-affected communities and humanitarian actors due to lack of existing data on these informal locations, lack of presence of a coordination mechanism and communication and access difficulties due to insecurity and poor infrastructure.

The need for greater oversight of the situation of displaced populations outside of the PoCs who need access to services led to the formation of the Bentiu Roving CCCM team. Assessments were conducted by key partners in four counties (Mayom, Rubkona, Guit and Koch) to understand the population of the displaced people living in spontaneous settlements, informal IDP sites and within the host community, and to gather evidence about challenges to access basic humanitarian services including access to food, clean water and proper health care.

PROTECTION RISKS

Lack of access to humanitarian agencies by remote communities affected by displacement: Across displacement sites in Mayom, Rubkona, Guit and Koch counties, households in informal settlements, spontaneous sites or non-camp settings face challenges in ensuring their right to life with dignity. In addition, many have limited access to basic services due to their location, lack of local support systems, discrimination by host communities or irregular humanitarian services linked to access impediments. Humanitarian agencies have highlighted the need to access more remote communities through integrated missions with protection, camp coordination and camp management (CCCM), gender-based violence (GBV), and even food security and livelihoods (FSL) teams to address these challenges.

Lack of safety and security: Instability and intercommunal conflict continue despite the 2020 peace agreement. Due to violence in the form of cattle raiding, looting of properties and revenge killing, the physical safety of IDPs, returnees and host community members remains fragile. Incidents of violence continue to occur, with many casualties reported. In this regard, the CCCM team continues to closely monitor the situation in different areas and gather timely information that will be used for advocacy for the protection of civilians.

The South Sudan case study focuses on a **roving, area-based CCCM approach** focused on reaching IDPs living in temporary locations outside of formal camps with service provision and access to information.

¹ South Sudan Humanitarian Needs Overview 2021

SOUTH SUDAN

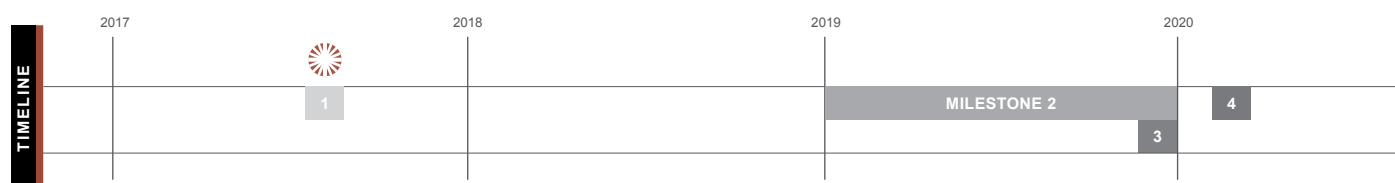
BEYOND BENTIU RESPONSE

Cause of displacement	Conflict and natural disaster
People displaced	1.6 million people displaced in South Sudan
Project location	Unity State, South Sudan
Project duration	2017 – ongoing (3 years)
# Targeted by project	67,224 (IDPs, returnees, and host community members)
CCCM coordination mechanism	National CCCM Cluster and Sub-national CCCM Cluster



Summary

Through an area-based, roving approach across four counties in Unity State, South Sudan, humanitarian partners support IDPs displaced by conflict, disease and food insecurity and returnees. Through this approach, CCCM partners target displaced persons who stay in temporary locations outside of formal camps or with the host community and lack both adequate information and coordinated service provision. The Beyond Bentiu Response (BBR) project addresses these challenges in hard-to-reach areas in the unique context of South Sudan.



-  2017 **Project start**
-  August 2017 The pilot project was initiated within the identified BBR locations.
-  2019 A brief transition plan was developed to provide structure and planning for IDPs in specific sites, such as the collective centres in Bentiu and Rubkona. In addition, formal monitoring of returnees was established, and support to the existing team on IDP returnees in Rubkona, Mayom, Koch town and Mir-Mir was enhanced.
-  December 2019 The roving CCCM team established a daily presence in Koch County to enhance the coordination and collection of information amongst the communities and service providers.
-  February 2020 Expansion of its information management activities in hard-to-reach areas by introducing mobile information desks along the static ones to circulate information to the community.



Training of community leaders on CCCM and participation, Bentiu town, November 2020



Partners and community leaders coordination meeting, Koch December, 2020

PROJECT OVERVIEW AND OBJECTIVES

Across the four counties in Unity State (Mayom, Rubkona, Guit and Koch), households in informal settlements, spontaneous sites, or non-camp settings face limited access to basic services. Barriers include their location, lack of local support systems, discrimination by host communities or irregular humanitarian services. Moreover, instability and inter-communal conflicts in these areas threaten the physical safety of IDPs, returnees and host community members.

To respond to these challenges, the Beyond Bentiu Response (BBR) project aims to ensure that humanitarian assistance in out-of-camp displacement is coordinated amongst humanitarian actors on the

basis of need to support a more coordinated, dignified and 'do no harm' response. This is done through quality information collection and assessments. Accountability to Affected Populations (AAP) ensures that communities affected by displacement are actively participating in services provided to them, with stakeholders held accountable. The pilot BBR project aimed to increase the amount and quality of information gathered and to identify gaps in key services within the identified locations to ensure that informed humanitarian response in out-of-camp settings is implemented by a range of actors to support displacement-affected communities.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Four counties in Unity State, South Sudan were identified for an area-based approach (ABA): Mayom, Rubkona, Guit, and Koch. While there are some collective centers in key towns in the Beyond Bentiu Response (BBR) counties, there are no camps and

no other 'camp-like settings' inhabited by only internally displaced populations (IDPs). Instead, the targeted locations are in general towns or villages where populations are a mixture of IDPs, recent returnees and host community members.

CCCM ACTIVITIES

Community Participation and Communication

Community Participation and Communication (CPC) activities are those which the CCCM team carries out with direct engagement with communities and local authorities. This approach, based on extensive experience across South Sudan and the region, is specifically designed to improve the involvement of affected populations in humanitarian response by ensuring that information on needs at the site level is accurate and comparable. The approach also promotes local ownership of the management and coordination of humanitarian assistance in displacement-affected locations. This approach ultimately provides a more locally owned, accountable and cost-effective way of coordinating humanitarian assistance.

Within the four counties identified in Unity State, key activities include monthly coordination meetings between community leaders and service providers, which are currently taking place in eight locations. Additionally, community leadership training on CCCM was conducted alongside Community Participation and Communication (CPC) activities to strengthen each location's leadership to properly coordinate issues raised by their communities. This has been effective since the beginning of the project. Although some of the leadership structures had dwindled, they were re-activated in coordination with the local authorities and strengthened through capacity building. To understand the level of the knowledge gained by community leaders through trainings and other capacity-building activities, the roving CCCM team developed a 'Capacity Assessment of Community Leadership Structures' tool to capture both an assessment of the community leadership at that moment and to also identify what training topics the leadership requests.

Monitoring, Assessments, and Information Management

For partners operating across the four counties, the roving CCCM team took on the information manager's role. The different activities defined the kind of information management run by the roving CCCM team, from daily activities to quarterly exercises. Information was collected through static and mobile complaints and feedback desks that also served as information desks. All the complaints brought to these desks are recorded and entered into a database managed by the team to refer cases to relevant partners, follow up and record information for future reference. Daily service monitoring was conducted in Bentiu and Rubkona collective sites, where any critical cases observed or reported were immediately referred to relevant partners.

Additionally, the roving CCCM team conducted multi-sector needs assessments using the Risk Assessment Site Profile (RASP) tool at BBR locations and new areas of interest. The purpose of the assessment is to identify needs and gaps in service provision for partners who may be operating in the location or planning to implement an intervention. Following each assessment, the CCCM team produced a report using infographics/factsheets¹ shared with the CCCM Cluster focal point and OCHA for broader dissemination to key partners. The service mapping included in these factsheets covers each humanitarian sector and all four counties, providing the 3W reporting, and is shared with all partners on a monthly basis.

To provide evidence for planning transition options for IDPs in collective centres in Bentiu and Rubkona, a headcount exercise was conducted in both sites. The exercise is segregated by age and gender, and the following factsheet was shared with the Cluster focal point to help partners operating or planning interventions in the two locations.

With the developing context, formal monitoring of returnees was established to support the existing returnee team. This work is carried out by CCCM outreach workers, who track returnee arrivals and carry out questionnaires and focus-group discussions (FGDs) with returnees to collect information on countries of asylum, intentions, next destination, the reason for return, basic needs and vulnerabilities. Based on this information, the CCCM team produces bi-weekly summaries, which are shared with CCCM partners and the Solutions Working Group (SWG) for advocacy purposes.

¹ South Sudan: Beyond Bentiu Response Humanitarian Service Map, October 2019

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

In 2019, there was an increase in the need for coordination and advocacy with other agencies and stakeholders. More agencies moved into BBR locations² and an increased number of returnees and increased population size in these locations added to the complex situation. Coordination and advocacy activities have therefore been scaled up, with the roving CCCM team establishing a daily presence in Koch County to enhance the coordination and collection of information amongst communities and service

providers. The roving CCCM team is a member of the sub-national CCCM Cluster and engages directly with other members for coordination of activities and exchange/sharing of experiences. Moreover, the team engages with other Clusters through the Inter-Cluster Coordination Group (ICCG) at the state level for advocacy and information sharing, alongside engagement with the national CCCM Cluster and other coordination forums.

KEY ACHIEVEMENTS

1. The roving CCCM team reached and assessed hard-to-reach areas where humanitarian presence was limited. The team was able to identify multi-sectoral needs and flag them to partners present at the field or state level using the RASP tool and other assessments, produce timely reliable information for the service providers and advocate for scale-up of response.
2. Population movement in Bentiu and Rubkona collective sites was monitored through a headcount exercise conducted by the roving CCCM team on a quarterly basis.
3. Monthly coordination meetings have been initiated between service providers and community leaders in all out-of-camp settings. Through these meetings, the participation of affected communities in humanitarian programming has been enhanced as they are brought closer to the planning process, communicating with communities has been more effective and humanitarian actors are held accountable.
4. Through its capacity-building approach to support self-governance structures, the roving CCCM team continues to support eleven committees across Unity State, providing tailored training modules and continuous coaching.
5. The introduction of mobile information desks along with the static ones enabled the roving CCCM team to circulate information to the community, identify needs and gaps and ensure the reference of needs to relevant actors.

CHALLENGES

1. Most of the locations are inaccessible during the rainy season due to bad road conditions. To continue collecting information in these locations, the roving CCCM team has strengthened communication channels with partners on the ground, deep-field focal points and local authorities. In addition, when feasible and applicable, the team hires CCCM staff from those locations to ensure year-round access.
2. Gathering data on populations and beneficiary numbers is complex as the IDP population is usually mixed with the host community, making it difficult to conduct disaggregated headcounts.
3. Advocating for remote and hard-to-reach communities is challenging. Often, other agencies cannot access the communities with the most appropriate support due to lack of funding and priorities. This sometimes affects the active engagement of the communities in CCCM activities.
4. Female participation in the existing, traditional and organic leadership structures is limited and often regulated by cultural norms³. To overcome this challenge, the CCCM team will continue its effort to enhance women's representation in these structures through continuous training on participation and the importance of inclusion of women, regular coaching and engagement with women's committees and groups.



XXX



Partners and community leaders coordination meeting, Koch, March 2021

LESSONS LEARNED AND RECOMMENDATIONS

1. Regular in-person communication with the self-governance structures in hard-to-reach areas **is not feasible during the rainy season** as the team is not able to physically reach these locations. Finding alternative ways to keep in communication with these communities is one of the project's key learnings. The roving CCCM team developed a monitoring tool through which community representatives can record gaps in services and needs of the population and share them once there is humanitarian presence on the ground. The roving CCCM team trained the community representatives on this tool. However, this modality has not been very effective as the information is delayed in reaching the team due to road inaccessibility, which therefore also delays any response from humanitarian actors.
2. Through proper planning and engagement with other teams, such as Protection and other actors representing different sectors externally, **effective inter-sectoral assessments were conducted**. This was a holistic needs assessment of the communities, and the results were presented to the Inter-Cluster Coordination Group (ICCG) for advocacy to the respective Clusters to respond to needs identified.
3. Due to the roving approach's nature, **continuous on-ground monitoring is not possible in hard-to-reach locations** outside Bentiu and Rubkona town. To mitigate this, the CCCM team used a Rapid Assessment Site Prioritisation (RASP) tool to make decisions around the priority level of a location to inform how frequently visits should be made.
4. By working in out-of-camp settings, both peri-urban and rural, in a roving approach, the CCCM team is able to cover a much larger area and **support a more significant number of displacement-affected communities** in Unity State.

² Due to lower security threats, improved road conditions and donor interest.

³ The roving CCCM team does not create new community leadership structures but works with the ones that the team identifies in each location.

Contact & Acknowledgements

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C. CAMP MANAGEMENT AND COORDINATION

The Camp Coordination and Camp Management (CCCM) sector works to ensure equitable access to assistance, protection and services for internally displaced persons (IDPs) living in displacement sites to improve their quality of life and dignity during displacement while seeking and advocating for durable solutions. The search for durable solutions is a complex, often lengthy process, that must take place as a concerted effort throughout the camp lifecycle and **involve multiple actors such as governments, international organisations, NGOs and most importantly, the affected community.** Processes to support a durable solution must be inclusive and involve all members of the displaced population, including women, children, persons with special needs and other vulnerable populations.

The role of CCCM actors in the process towards durable solutions is vital, starting on day one of camp-life cycle. The **Minimum Standards for Camp Management** on Exit and Closure, aimed towards coordinated and consultative process that mitigate impacts on residual site populations. The standards are applicable for camp administrator, and at both response coordination level and site management level. Camp Management Agencies work with displaced population to ensure their intentions, challenges and concerns are heard and integrated into the planning for durable solutions.

The case studies presented in this chapter highlighted how CCCM agencies in Chad, Somalia, and Nigeria supported displaced populations through relocation, returns and integration processes, as well as sustaining care and maintenance phase in Yemen. These studies showcase the application of targeted methods to ensure the needs and priorities of the affected populations are met.

In Chad, the CCCM Cluster coordinated at both national and regional levels to address the heightened security situation in Diamerom, which hosts sites for the displaced population. The case study outlines the voluntary relocation of IDPs to a site in Amma, identified to be safer and to have livelihood opportunities, in Lake Chad Basin. In line with the **Minimum Standards for Camp Management**, key stakeholders coordinated through the multi-sectoral Lake Chad Inter-Cluster Coordination Group to meet the needs of both

displaced and host populations. This demonstrates the importance of collaboration and coordination, which can encourage long-term planning and advocacy on the needs of the affected populations. Similarly, the case study from Somalia highlights CCCM's work with local authorities and partners to support displaced people to have better living conditions and livelihood opportunities that could lead to local integration where they decide to stay. Once durable solutions options have been identified, CCCM supports displaced people to access information on these options through developing effective communication strategies and information campaigns, organising go and see visits, or advocating for improved services in the area of return, relocation or integration.

In Nigeria, CCCM partners were able to bring in actors from outside of the humanitarian response with improved coordination methods, using an inter-sectoral approach with relevant stakeholders. The case studies explore how, through CCCM monitoring in camps, host communities and areas of return, protection issues were identified, interventions planned and implemented in close collaboration with national authorities, the affected communities and other humanitarian stakeholders. The case studies from Nigeria highlight the importance of a multi-sectoral approach, allowing for one harmonised model for community engagement, governance and peacebuilding. This model is based on close collaboration and support from local governance structures and state services, and it uses community-based and area-based approaches to conflict resolution and to encourage and develop a stakeholders' dialogue platform aimed at achieving common goals between IDP and host communities. The Yemen case study demonstrates how CCCM interventions ensured that essential services were present in critical IDP sites as a step towards ensuring dignity during displacement. CCCM interventions included community engagement, protection mainstreaming and multi-sectoral referrals, as well as active coordination with humanitarian partners. IDP needs across sectors are identified through regular assessments and establishing and maintaining national and local coordination structures is key to ensuring services that meet the needs of those most affected by the conflict in Yemen and adhere to national and international standards.

CAMP MANAGEMENT STANDARDS REFERENCE

STANDARD	INDICATOR	REMARKS	CASE STUDY REFERENCE
1.2 Site lifecycle planning Appropriate and inclusive planning ensures adequate protection and assistance are provided throughout the site lifecycle, from set-up to closure.	1.2.2 Site management action plans and contingency plans are updated.	While sites are often set up with the expectation that they will be short term, planning should always aim for longer-term needs, expansion and unexpected eventualities.	C.2 Somalia The Barwaaqo Relocation Project
4.1 Site coordination Services are coordinated to meet the needs of the displaced and host populations	4.1.1 Coordination meetings include all stakeholders or stakeholder groups. 4.1.2 Coordination meetings include representatives of the displaced and or host community.	It may not seem relevant to invite long term planners or development actors to site management meetings, but doing so may be one of the best ways to encourage long term planning related to the topic of durable solutions. Hearing first hand from the population themselves during these coordination forums will , reinforce the advocacy messages on behalf of the populations, which is critical when working with durable solutions partners.	C.1 Chad Relocation of IDPs from Diamerom to Amma C. 3 Nigeria Humanitarian-Development-Peace Nexus Initiative C. 4 Nigeria Strengthening the Protection of IDPs through Camp Coordination and Camp Management (CCCM) C. 5 Yemen Improving living conditions within IDP hosting sites
4.2 Site service assessment, monitoring and reporting The site population's needs are monitored and reported through established systems.	4.2.3 % of site population who are able to express their informed desire for return, integration or resettlement. 4.2.4 % of the site population who are aware of where to access information on options for durable solutions.	SMAs need to have a leading role in what information is being collected in the site to be informed and highlight the gaps, needs and capacities of the population. Focus groups can reveal a wealth of detailed information and deep insight.	C.1 Chad Relocation of IDPs from Diamerom to Amma C.2 Somalia The Barwaaqo Relocation Project C.5 Yemen Improving living conditions within IDP hosting sites
5.2 Planned closure Site closure takes place in a planned and consultative manner, and its impact on any residual site populations is mitigated.	5.2.1 % of service providing organization that adopt and provide input to closure and plans (target 100%). 5.2.2 Feedback and complaints mechanisms are maintained throughout the closure process. 5.2.3 % of protection and security issues related to closure that are reported and referred.	The closure of sites hosting IDPs must align with any government plans for IDP movement, the restitution of the land and any other administrative issues.	C.1 Chad Relocation of IDPs from Diamerom to Amma C.2 Somalia The Barwaaqo Relocation Project C.4 Nigeria Strengthening the Protection of IDPs through Camp Coordination and Camp Management (CCCM)

CHAD



CONTEXT

For many years, the Lake Chad region has been going through a serious security situation due to constant attacks and counterattacks between the non-state armed groups, Boko Haram and Chadian Defense Forces. Lake Chad is surrounded by four countries: Chad, Cameroon, Niger and Nigeria. It is located on the central part of the Sahel but is primarily within Chadian territory. The lake is known for its rich agriculture, pastoralism and fishing. Boko Haram has taken advantage of the geography of the lake by seeking refuge on its numerous islands.

The situation in Chad requires special attention as Chadian defence forces seeking to regain control of these islands clash with militants, leaving civilians in their wake as collateral damage. Attacks have been recorded all around Bohoma, more precisely in the department of Foulï. Many of these attacks on military posts and villages are characterised by killings (of civilians, defence forces and militant groups), suicide bombings, damage to property and abductions, especially of women. In March 2020, the Bohoma area (regularly hit by Boko Haram incursions) was declared an "operation zone" by the Chadian Government. This was followed by a state of emergency in the departments of Foulï and Kaya and request for the population of Chadian villages along the Chad, Niger and Nigeria borders to "move immediately inside the country".

Consequently, according to OCHA, 6.4 million people in Chad required humanitarian assistance in 2020¹. Food insecurity remains prevalent, and about 4.5 million out of Chad's total population reportedly face this challenge. In addition, the clashes have intensified hostilities between communities and made community-level conflict management difficult. Some communities have been stigmatised (such as the Buduma ethnic group) because they are suspected of conspiring with Boko Haram. Neighbouring countries Nigeria, Cameroon and Niger are also affected by violence and conflict from Boko Haram, and this has resulted in an influx of refugees and asylum seekers into Chad. An estimated 473,000 refugees from these countries were recorded in Chad in 2020. Due to a lack of resources and infrastructure, the Chadian government's

capacity to support displaced people is limited.

A large number of forced movements caused by conflict in northern Chad has been observed as more and more people flee their villages to escape violence caused by armed groups in the Lake Chad region. Displacement of civilian populations from their villages and National Guards from their bases to other locations has only increased. The local authorities, afraid of unexpected attacks that could endanger the displaced populations, made a request to the humanitarian community to relocate them to safe sites. Currently, over 236,000 IDPs and 690,000 host population members are in need. From January to March 2020 alone, approximately 205 protection incidents were reported in the Province of Lake Chad. According to protection monitoring reports carried out in IDP sites or in host communities, 85% of the victims are IDPs, who suffer from arbitrary arrests and detentions (especially for persons without civilian documentation), physical assault and illegal taxation.

Migrant flows recorded since the start of 2020 are 66 per cent higher than those observed during the previous year due to a sharp increase in outgoing and incoming flows. Most of the travellers came from Chad, predominantly from the provinces of Mayo-Kebbi Est (10%), Mayo-Kebbi Ouest (9%) and Ouaddaï (8%). The main country of departure for travellers outside of Chad was Cameroon (18%). Chad was the intended final destination of more than half of the travellers (55%), followed by Cameroon (32%) and Libya (12%)². Most recently, Chad also acts as a transit and departure country for migrant flows moving towards Libya and potentially further to Europe. The reasons for travel were economic (mainly to carry out business activities or to seek employment or a livelihood), for further education or vocational training and to join their families. The COVID-19 pandemic, however, impacted the movements of travellers passing through Chad. The first government mobility restriction measure was put in place in mid-March 2020 and it had an immediate impact on the incoming flows recorded. However, the easing of restrictive measures in June 2020 resulted in a rise in migration flows.

PROTECTION RISKS

Many protection risks were identified in Chad, such as uncontrolled population movements and the feeling of insecurity. IDPs flee regularly to safe communities, resulting in an increase in population density and secondary forced displacement. People with disabilities and the elderly are at high risk of being abandoned during precipitated population movements. Women and children are the most vulnerable as there is a lack of access to secure shelters, basic social services and humanitarian assistance. Women and girls are exposed to rape, sexual assault and other forms of gender-based violence. Food insecurity and malnutrition in children is predominant, a direct impact of the disruptions in food supply chains from natural hazards (such as floods). COVID-19 is more likely to spread where there are uncontrolled movements and

flows, resulting in health emergencies affecting local populations, refugees, and internally displaced people. Also, there is fear and stigmatisation associated with certain ethnic groups suspected of colluding with armed groups or of being infected with COVID-19 by host communities, and this hinders their access to humanitarian assistance. Militarised roadside checks have led to reduced access to basic health services, especially at night and for pregnant women.

In the Chad case study, key stakeholders coordinated through the inter-sectoral Lake Chad Inter-Cluster Coordination Group to address protection concerns and work towards the durable solution of **voluntary relocation of IDPs to a safer site with access to livelihood opportunities**.

¹ Chad | Situation Reports (unocha.org)

² IOM DTM Chad : Flow Monitoring Report: Impacts of COVID-19 on travellers across Chad, October-December 2020

CHAD

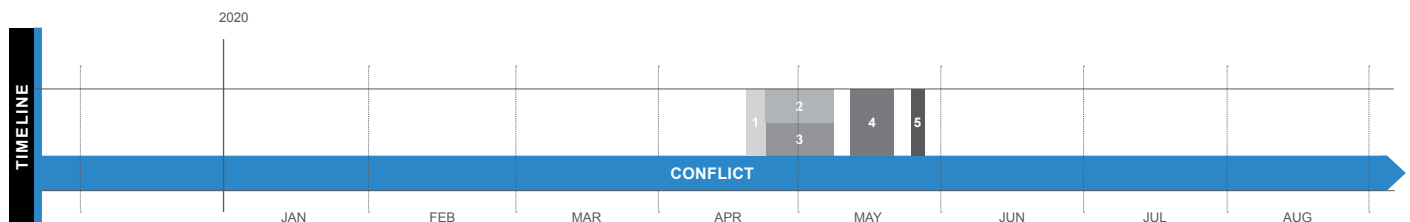
RELOCATION OF IDPS FROM DIAMEROM TO AMMA INSECURITY DUE TO THE WAR BETWEEN CHADIAN DEFENCE FORCE AND BOKO HARAM REBEL GROUP OPERATING IN THE LAKE CHAD PROVINCE

Cause of displacement	Conflict
People displaced	236,426 IDPs in Lake Chad Province (up to April 2020)
Project location	Chad, Lake Chad Province, Diameron and Amma site
Project duration	2 months (21 April 2020 – 27 May 2020)
# Targeted by project	30,000 IDPs
CCCM coordination mechanism	The CCCM Cluster at national level and the CCCM Sub-Cluster at regional were involved in the operation



Summary

Following discussions with the Lake Chad Inter-Cluster Coordination Group (ICCG) about the security situation in Diamerom site, humanitarian actors and local authorities proposed voluntary relocation of IDPs to a safer location. Through the coordination of multiple stakeholders, including the displaced community, 12,634 IDPs relocated to Amma, an established site with access to livelihoods opportunities, and were supported with humanitarian assistance in their new location.



- 21 to 24 April 2020 **Preparation for the relocation process to Amma**
- 24 to 10 May 2020 **Installation plan of IDPs in Amma site developed**
- 24 to 10 May 2020 **Organisation of multisectoral assistance with all partners**

- 13 to 23 May 2020 **Relocation and assistance to IDPs**
- 26 to 27 May 2020 **Post relocation monitoring of needs and gaps**



Assistance



Discussions with Foul's prefect

PROJECT OVERVIEW AND OBJECTIVES

The Chad relocation project aimed to protect displaced persons living in insecure sites through providing basic assistance to people relocated voluntarily from the Diamerom site to Amma site. The project also provided opportunities for IDPs to gain income by developing agriculture and livestock activities in the Lake Chad Basin. In Chad, the implemented CCCM approach was remote and mobile. However, with the security situation in Diamerom and the plan for the relocation to Amma, the Lake Chad Inter-Cluster Coordination Group (ICCG) advocated for full camp management and administration in Amma. In early 2020, the first inter-agency coordination meeting took place in Liwa, with humanitarian actors and local authorities discussing the humanitarian situation of the recent influx of displaced persons fleeing the combat zone. Over 20,000 newly displaced persons had fled and were residing in 11 sites in Diamerom and Toboro, with reports of significant needs for WASH, food, protection and essential household needs.

After discussions, the local authorities in Chad announced the decision to relocate the IDPs from Diamerom to Amma, whereafter a second inter-agency coordination meeting and mission was conducted with additional stakeholders¹ at the Diamerom site. The objective of this meeting and mission was to inform IDPs about the relocation process to the new site in Amma, and to ensure that authorities were aware of the voluntary nature of the operation while taking into account the vulnerabilities of certain categories of people during the relocation. During this mission, local authorities based in Diamerom as well as key informants from the displaced population were involved in focus group discussions through rapid assessment groups. Following the Protection Cluster's questionnaire guide, these focus groups consisted of women, youth, and children².



Logistics

¹ SUNHCR, UNICEF, UNDSS, COOPI, CRT, APSELPA and OCHA

² OCHA CHAD Situation Report, 24 Apr 2020

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

As the security situation in Diamerom is fragile, Amma was targeted for the relocation of displaced people residing in in Diamerom with the aim of ensuring the protection and security of IDPs. The Amma site, located 30 kilometres from Diamerom and 20 kilometres from

Liwa, has already been hosting around 2,000 IDPs since 2017. Through the Lake Chad ICCG, humanitarian partners recommended that assistance be focused on the Amma site in order to improve access to basic services and essential food supplies for two months.

CCCM ACTIVITIES

1. Relocation process

To ensure that all stakeholders respected and adhered to core humanitarian principles for the relocation project, the local authorities were trained and sensitised by CCCM partners on Protection and Humanitarian Principles, ensuring that the relocation followed a voluntary-based approach. The authorities trained in the Lake Chad province included local administrative authorities such as governors, prefects and sub-prefects, traditional authorities such as canton chiefs and local leaders from the displaced community as well as the security forces in the region. As the relocation project was implemented during the COVID-19 pandemic, the relocation process, particularly transportation for the displaced population, respected prevention measures such as physical distancing between persons.

2. Installation plan of IDPs in Amma site

The local government took a leadership role and coordinated logistics and security aspects while humanitarian and cluster partners took the lead in ensuring that the relocation was done on a voluntary basis and in mediating peaceful coexistence with the existing IDPs living in Amma. The Lake Chad ICCG ensured that the relocation was in accordance to protection standards and COVID-19 preventative measures. This was done through awareness-raising sessions with local authorities and the provision of more than 30 handwashing stations and soap. CCCM partners coordinated to organise the plots where latrines and water points were to be set in Amma, to oversee the construction of reception hangars and emergency shelters as well as to engage with the community to sensitise them on the facilities and COVID-19 preventive measures. Moreover, CCCM partners distributed essential Non-Food Items (NFI) to the households relocated to Amma.

In Amma, WASH and other humanitarian actors continued their efforts to provide drinking water to the displaced despite difficulties related to the high conductivity of the water on the site. Humanitarian partners explored opportunities to support agricultural and livestock activities as way to increase the population's self-reliance and increase the water access within the site.

While factors still remain for those IDPs choosing not to relocate to Amma, humanitarian partners have been addressing these gaps and ensuring that IDPs are assisted with essential needs in Diamerom. Because the relocation is voluntary, IDPs can decide if they would like to relocate to the sites in Amma, particularly given the high security risks in Diamerom.

3. Organisation of multisectoral assistance with all partners

In the sites in Amma and Diamerom, CCCM partners carried out a needs assessment prior to the relocation of the IDPs. This assessment showed that in both sites, IDPs had various humanitarian needs such as shelter, NFI, food, WASH and latrines. They also needed sensitisation on the security issues in Diamerom as well as information from the government on the transfer to the Amma site and why it was identified as a safer area than Diamerom. To address these needs, CCCM partners and local NGOs mobilised to provide assistance. This was coordinated by the CCCM/Shelter Cluster, with the support of OCHA.

4. Post-monitoring of relocated IDPs

Once the first phase of the IDP relocation from Diamerom to Amma was completed, the ICCG conducted a post-monitoring assessment, which found that many IDPs had chosen to stay in Diamerom instead of relocating. To address this, an inter-agency assessment took place to get an accurate number of IDPs who chose not to relocate and understand why they had rejected the pilot relocation initiated by local authorities and supported by humanitarian partners. The assessment found that the main contributing factor for the rejection of relocation was economic opportunity linked to the presence of a large market in Diamerom and the availability of agricultural land as well as grazing and fishing space around the site. Humanitarian partners worked on planning interventions to address this economic need, beginning with the registration of 11,135 displaced persons³ by the CCCM/Shelter sub-cluster. This helped in identifying households in need of NFI and food distribution in Diamerom.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

All humanitarian actors were engaged in the relocation project and responded to the needs of the displaced population. The coordination was done at different levels: Sub-Cluster, Cluster, inter-cluster (as through the ICCG) and Humanitarian Country Team (HCT). The government was involved and played a significant role throughout the levels. The humanitarian actors were engaged particularly as they were involved in different meetings with the sectors on the relocation project. Through coordination, the humanitarian partners were able to provide essential services and assistance.

The Lake Province Inter-Cluster Coordination Group was already established and was recently regrouped by the CCCM/Shelter/ NFI, Food Security, Health, Protection and WASH sub-clusters, and coordinated by the OCHA Field Office in Baga Sola. The local government was involved throughout the process of relocation to Amma, which included providing transportation for the relocation of IDPs, as well as taking the lead in coordination with humanitarian partners and the Chadian Defence Force to ensure the security of IDPs during the relocation process. With the cluster partners working on the relocation in a collaborative manner, the IDPs relocated to Amma received the assistance they required to meet their basic needs.

KEY ACHIEVEMENTS

1. Amma site was prepared for the voluntary relocation of IDPs from Diamerom.
2. 12,634 IDPs were successfully relocated and supported with multisectoral assistance.
3. Gaps were identified by IDPs through a participatory process, which allowed humanitarian partners to address their needs and equip the sites in Amma for additional relocation.
4. The relocation allowed for advocacy for additional funding through a CERF funding request to address the remaining gaps in Amma and Diamerom.

CHALLENGES

1. All required resources were not available before the beginning of the project due to the security risks, and consequently the needs were partially covered⁴.
2. Some humanitarian partners made commitments to support and assist with the relocation, however, due to their internal procurement procedures, they were not able to fulfil their commitment.
3. The IDPs still living in Diamerom have remaining protection needs and continue to require humanitarian intervention.
4. The humanitarian response was focused on the site in Diamerom for the relocation project, which required additional support. This meant the needs in other existing IDP sites did not receive as much attention and intervention.

LESSONS LEARNED AND RECOMMENDATIONS

1. The relocation project was well coordinated, and it was important to have the **meaningful participation of all partners involved**.
2. The Humanitarian Coordinator **mobilised all UN agencies to support the project**, and follow up was done regularly based on the feedback from the ICCG.
3. The CCCM Cluster collaborated with the Protection Cluster and the local authorities to **sensitise the population about voluntary relocation to Amma and on COVID-19 prevention** from multiple sources.
4. It is important to have a **warehouse with available contingency stock** in place, particularly if there is a risk of transportation delays that could affect the project.



Amma site

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Acknowledgements

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³ OCHA CHAD Situation Report, 22 July 2020

⁴ WASH (25%); Shelter/NFI (54%); Food security (50%); Health (40%) and Protection (15%)

SOMALIA



CONTEXT

In Somalia, over 2.6 million¹ IDPs have been displaced by conflict, insecurity and drought, and are currently living in about 2,000 IDP sites across the country. The majority of these sites are informal settlements on private land in urban areas. In 2020, the Protection and Return Monitoring Network (PRMN) reported 1.3 million new displacements in Somalia, a number surpassing the 770,000 new displacements recorded in 2019 and a contributing factor in Somalia's highly accelerated rate of urbanisation.

Baidoa, which serves as the interim capital of South West State in Somalia, currently accommodates one of the largest populations of displaced people within the country. As of March 2020, it hosted 483 IDP sites with 55,005 displaced households, with numbers continuing to grow due to conflict, environmental causes and lack of livelihood opportunities. Insecurity has led to many families fleeing from rural villages in Bay and Bakool to live in self-settled camps. In Baidoa alone, 255,427 people are in need of humanitarian assistance.

Land disputes remain one of the major causes of armed violence both at individual and inter-community levels. Congested cities with weak urban systems are struggling to cope as the complex interplay between natural hazards, conflict and insecurity continues to drive mass displacements across the country. In addition, the exclusion and marginalisation of people coming from commonly discriminated-against groups (refugees, IDPs, asylum seekers) continues to be a priority concern as they lack support networks in the areas of displacement or residence. The vast majority of IDPs in need are considered marginalised groups, particularly in Dollow, Kismayo, Mogadishu and Baidoa.

Many IDPs live under the threat of eviction due to living in settlements that were spontaneously established on private land, and they have no options for adequate relocation to areas with land tenure security. The evictions represent a constant risk for vulnerable communities, including displaced populations living in collective settlements and other urban poor living in densely

populated areas. Baidoa has the highest number of people at high risk of eviction. The constant fear of being forcefully removed from their dwellings, and having their belongings destroyed in the process, has a profound effect on IDPs' ability to plan their lives in a more sustainable manner. Furthermore, evictions expose people to various forms of exploitation, disrupts livelihoods and creates both psychological and physical perils to those inhabiting IDP sites. As of April 2020², of the 483 IDP sites in Baidoa, 166 sites either did not have written land agreements, were relying on tenuous verbal agreements with landowners or were facing an imminent threat of eviction. IDP households are forced to uproot and re-establish their lives in new settlements as often as every month.

Moreover, precariously settled, unplanned sites pose numerous protection, hygiene and safety concerns that ultimately threaten the lives of residents of such settlements. In order to provide a solution for IDP households at risk of eviction, humanitarian partners, together with the Baidoa municipality, developed a public IDP site with improved access to services and an enhanced planning system to curtail safety risks. Multiple stakeholders held consultations with affected IDP communities to determine how the humanitarian community could best assist in creating a strong basis for durable solutions. The issue of security became a topic of debate between government officials and relocation stakeholders. Some believed that the creation of a planned settlement 5 kilometers away from Baidoa would create a viable target for Al-Shabab, and therefore would require a comprehensive military presence. However, others pondered that an enhanced military presence would in fact increase the likelihood of a potential attack. Through mediation and recommendations forged by the District Commissioner, it was agreed that the new site should function in a normal manner without heightened military presence. Protection risk assessments were carried out with the IDPs in Baidoa and focused on the planned relocation of IDPs to the reallocated public site. The outcome revealed that IDPs had a positive attitude towards the relocation exercise.

PROTECTION RISKS

Forced evictions remain among the most severe and prevalent protection threats in Somalia, representing both a cause and a multiplier of displacement. The persistent prevalence of evictions, combined with the limited availability of land for local integration or resettlement, has presented a substantial challenge for IDPs. Likewise, as returning to areas of origin remains challenging due to ongoing conflict and loss of livelihoods, IDPs continue to rely on humanitarian aid and are unable to re-establish their lives outside of displacement sites. Access to Housing, Land and Property (HLP) is one of the key challenges for returnees, refugees and asylum seekers that further hinders reintegration and local integration prospects.

Already displaced populations are highly vulnerable due to social exclusion, and they are often minority groups of women and children. People with disabilities face a higher prevalence of discrimination, marginalisation and violence. Most IDP sites

are overcrowded and lack basic infrastructure, with poor living conditions and overstretched services. Loss of livelihoods for women and men increases the burden of care and the transfer of economic responsibilities to children and adolescent girls and boys. A rapid assessment carried out in Baidoa reported that children are often sent away as household help or labourers to earn a living, which exposes them to sexual violence, abuse and exploitation. Girls and boys remain particularly exposed to protection risks, such as violence, including GBV, armed group recruitment, exploitation and neglect.

In the Somalia case study, IDPs and vulnerable host community members living in precarious conditions in Baidoa had to option to voluntarily relocate to Barwaaqo, a newly established public site. The relocation was based on a multi-sectoral response to support the relocated households, and stakeholders included government, humanitarian, and development actors.

¹ Humanitarian Needs Overview, Somalia, January 2021

² Norwegian Refugee Council. *Case Study for Cash-Based Owner-Driven Shelter Response in Baidoa*.

SOMALIA

THE BARWAAQO RELOCATION PROJECT

Cause of displacement Conflict and environmental factors

People displaced 351,169 individuals are displaced within Baidoa, Somalia

Project location Baidoa, South West State, Somalia

Project duration Project began in **July 2018** and is **ongoing**: As the project is comprised of multiple phases, the project is currently ongoing with the second phase of relocation expected in July 2020.

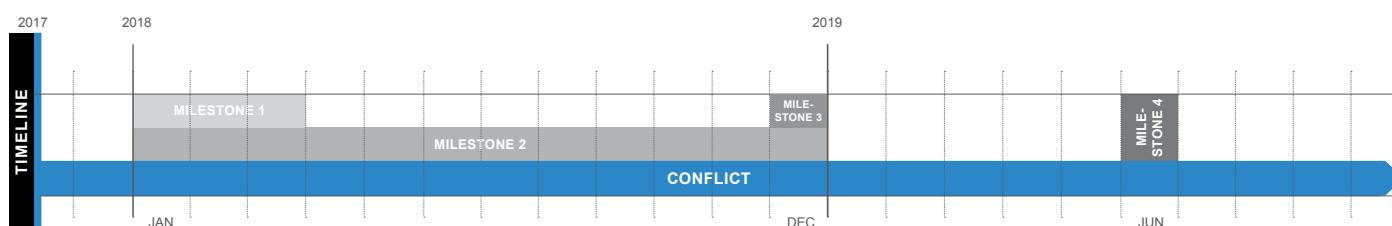
Targeted by project 1,000 households were relocated

CCCM coordination mechanism CCCM coordination has been supported at both the sub-national level in South West State and the national level. A taskforce was created for this activity chaired by the CCCM Cluster and featuring members from local government, respective cluster representatives and humanitarian stakeholders.



Summary

This project underlines the salient CCCM theme of continued engagement with durable solutions partners and is an attempt to achieve durable solutions through specific coordination spearheaded by the CCCM Cluster. Through articulating a practical durable solutions concept that is supported by the government and institutional donors, there is optimism for further long-term housing solutions for vulnerable displaced individuals. As a result, this project exemplifies successes under the themes of transition and durable solutions.



1 Early 2018

The municipality of Baidoa called a meeting with partners to discuss the possible development of a public site where IDPs who were facing eviction could relocate. The space included 306 hectares of land, enough to accommodate 4,000 IDP households.

2 2018

The Relocation Taskforce was established, including the following stakeholders from the Ministry of Humanitarian Affairs and Disaster Management: representatives of each Cluster, 4 UN agencies, 2 international and 2 national NGOs, durable solutions partners, key line ministries, the Mayor of Baidoa, the Governor of South West State and the Commissioner for IDPs and Returnees.

3 December 2018

The site plan for Barwaaqo was drafted and endorsed by the Relocation Taskforce with the District Commissioner and Governor officially opening the project. The Standard Operating Procedure for relocation was drafted and endorsed by Taskforce members to be used as the guiding document.

4 June 2019

The first relocation of IDPs commenced. Within a week, 1,000 (930 IDP and 70 host communities) registered families from 15 IDP sites and vulnerable host community sites were relocated to the new site.

PROJECT OVERVIEW AND OBJECTIVES

The Barwaaqo Relocation Project aimed at responding to the urgent issue of precariously settled internally displaced persons (IDPs) in Baidoa through providing secured tenure and access to sustainable services for IDPs who voluntarily relocated to Barwaaqo in southwestern Gedo region of Somalia. The project looks to voluntarily relocate IDPs out of congested settlements facing

perennial threats of eviction and into adequately spaced plots of land. The relocation project is a multi-sectoral integrated response that has critical government buy-in, and it focuses on addressing the immediate needs of vulnerable IDPs at risk of eviction through solutions that are integrated into the long-term urban expansion plan of Baidoa City.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Tens of thousands of IDPs residing in Baidoa live with a constant threat of eviction. While some displaced groups manage to purchase small plots of land around the outskirts of the town, many live on private land without secure tenure agreements, and lack access to the knowledge and support required to negotiate their rights. Given that, the Barwaaqo Relocation Project targeted IDPs residing in settlements in Baidoa facing the threat of eviction.

To ensure fair and transparent beneficiary selection, IDPs were targeted through the Eviction Risk Tracker managed by Housing, Land and Property (HLP) partners. In 2019, HLP and CCCM partners in Somalia conducted eviction risk assessments across all sites in Baidoa, which revealed that of the 391 IDP sites in Baidoa, 49 of them were categorised as 'High-Risk'. The assessment also found that of the high-risk sites, 15 sites expressed interest in relocation.

CCCM ACTIVITIES

CCCM partners developed a Community Engagement Workplan through engagement with the community and key stakeholders. In early 2020, a series of discussions and community consultations were held with the local IDP leaders selected from 48 IDP camps that were at risk of eviction. The 48 IDP leaders, which included 23 female leaders, were consulted on the findings from the evictions assessments, the current eviction threat faced by sites and the reason the IDP sites were selected to be relocated to the public site in Barwaaqo. More importantly, the IDP leaders were engaged to communicate key messages about the new site, specifically:

- Services available at the site;
- Infrastructure available at the site: security stations, a school, a health centre, water and latrines and solar security lighting at night;
- Plot measurements;
- Areas for market sites and mosques.

During the consultations, some of the leaders from Holwadaag, Isha and Berdaale settlements indicated that they will relocate to Barwaaqo once the southern public site was developed. Some leaders requested to be given more time to consult with their IDP communities about relocation. However, those from Horseed settlement, which is closer to the developed northern site, agreed and welcomed the plan for relocation, stating that they would be ready to relocate once the essential services are completed. At the site level, community mobilisation and engagement were conducted by CCCM partners for households that were to be relocated in the first phase of the exercise. The mobilisation narrowed down on the specific 15 IDP sites that were facing an imminent eviction threat. In these sites, a total of 600 families were met at each individual household and were informed of the relocation processes. These families were given the opportunity to raise concerns, give feedback to CCCM partners and receive advice on concerns about the relocation.



Government officials assist in unloading of the belongings of IDPs that are moving to the new site, Somalia 2019



IOM staff from the Shelter and Non-Food Item (S-NFI) unit providing assistance on Shelter construction, Somalia 2019

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The success of this project centred on the effectiveness of coordination with a diverse range of stakeholders that may not traditionally fall within the CCCM Cluster's structure. Therefore, the establishment of the Relocation Taskforce allowed for a separate forum for these stakeholders to provide updates and

voice recommendations based on the forecasted relocation plan. Likewise, the advent of the Taskforce encouraged stakeholders from other important sectors, such as Protection and Shelter, to boost engagement with government focal points, assuring that all segments of the relocation plan were understood and developed.

KEY ACHIEVEMENTS

1. In 2020, successful Community Engagement and mobilisation by CCCM partners was conducted at a household-level on relocation process, with a total of 600 families engaged.
2. Site development for Barwaaqo was completed. After the first phase of the relocation started, 930 registered households from 15 IDP sites facing eviction were relocated to the new site in 2019. Additionally, 70 families were relocated from vulnerable households in the host community, to make a grand total of 1,000 families that moved to the new site.
3. CCCM established an information centre with a Complaint and Feedback Mechanism (CFM) in place so that the residents can directly reach out with any feedback regarding services in the site.
4. Upon arrival, the households received Cash-Based Intervention (CBI) in form of commodity vouchers to acquire the shelter materials that they needed to build their new homes, as well as conditional cash transfers upon successful completion of the shelters.
5. The relocating households received training on how to construct shelters, and during the relocation, CCCM staff were on the ground to support the shelter construction of 150 of the most vulnerable households¹.

CHALLENGES

1. There were postponements of the project during the regional presidential election of the South West State in December 2018. The Baidoa District Commissioner (DC)/Mayor and the overall Baidoa local authorities bought into the project, but a new DC was named for Baidoa town, which put relocation activities on hold for some time.
2. Some members of the host communities claimed the land donated by government to the relocation also had too many shortcomings. This issue was addressed by local authorities led by the IDP commissioner, the mayor of Baidoa and CCCM partners.
3. Insecurity in the region was a challenge to the relocation process given that the relocation area was out of town.
4. There was a lack of enough heavy machinery for site development work. For example, in Baidoa there is one grader to clear the road, which meant that if this tractor was working elsewhere, no vendor could be engaged. This led to delays of site work completion.
5. More than 1,000 households have the need for relocation, which was challenging and led to strictly adhering to the criteria for household selection of those at very high risk of eviction. This expectation was promoted, which needed additional community engagement.
6. At the initial stages of mapping, there were a lot of pledges received from stakeholders. However, when the site development work began, most activities had to be undertaken by the project lead, such as WASH, Health, CCCM and Site Development activities.

LESSONS LEARNED AND RECOMMENDATIONS

- Government ownership was key**, and as this project was developed due to a request of support from the government, they took pride in ensuring the project was a success. The government leadership eased a lot of issues, especially with land.
- Involvement of all stakeholders, including **government, humanitarian and development actors and Clusters**, from the initial planning stages of the site planning was critical in ensuring minimum standards were met.
- The **formation of the Taskforce** as part of the project was indispensable for the success of the relocation, as this was where all the decisions were made. The Taskforce had sub-sectors that required specialised technical expertise, such as protection, which included an HLP sub-group and security sub-group. The Taskforce also followed up on issues of land grabbing and protection risk assessments.
- Multi-sectoral integrated response from emergency and durable solutions** was an important basis for the project. This involvement allowed the project to maintain strong funding to transition from the initial relocation of families to a long-term durable solutions initiative. The Baidoa relocation was a good example of how the humanitarian-development nexus can be successful.
- Community engagement** was also key, given that the area was far from town and relatively new. The Taskforce arranged 'go and see' visits and constant information sharing. Addressing concerns of the beneficiaries ensured that IDPs made an informed decision.
- Through assessments, it has been learned that **IDPs who have been relocated to the new site enjoy, without discrimination, an adequate standard of living**. This includes, at a minimum, shelter, health care, food, water and other means of survival.
- The relocation project successfully **protected IDPs at risk of unlawful evictions** in Baidoa.
- There was a **clear government responsibility for supporting IDPs** throughout the project. Local authorities in particular should be empowered to facilitate engagement between the humanitarian community and IDPs. This keeps the government engaged and accountable.
- To prevent relocated families from selling their land after relocation, the project ensured that residents knew that the plot is allocated to them and that **they will have full ownership after 2 years**, whereafter the local municipality will issue title deeds.



A drone shot from the relocation site in Baidoa, Somalia 2019

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Acknowledgements

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¹ IOM Somalia Relocates Nearly 7,000 Internally Displaced Persons Facing Eviction, 3/09/2021

NIGERIA



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CONTEXT

Nigeria has been experiencing an increase of internally displaced persons since the beginning of conflict in 2009. Displacement is a result of violent insurgencies by armed organised groups attacking villages, killing people, abducting women and girls and using children as human bombs. States such as Borno, Bauchi, Taraba, Gombe, Yobe and Adamawa have been the most affected. The government has carried out military operations to defend and take back control of its territories, and to free and rescue the trapped civilians in these areas. As a result of these Armed Organised Group (AOG) attacks and military operations, the situation quickly escalated into a humanitarian crisis in 2015 due to the large number of internally displaced civilians who were in urgent need of protection and lifesaving assistance.

Ten years of unending insurgency has taken a heavy toll on the government's infrastructure and capabilities to meet the demands of its affected population. At the beginning of 2020, 7.9 million people in north-east Nigeria were in need of urgent assistance, and that number has risen to 10.6 million due to the COVID-19 pandemic. The estimated number of IDPs identified in conflict-affected north-eastern states of Adamawa, Bauchi, Borno, Gombe, Taraba and Yobe was 2,144,135 (44,361 households). The most conflict-affected state, Borno, hosts the highest number of IDPs with 1,595,817 displaced persons. Borno is now home to 73 per cent of all IDPs in north-east Nigeria, followed by Adamawa with 10 per cent and Yobe with 7 per cent.

The movement of IDPs is mostly seen from one Local Government Area (LGA) to another. 70 per cent of IDPs are displaced to an LGA other than their LGA of origin, and 30 per cent of IDPs are displaced within their LGA of origin. Continued insecurity and insurgency, poor living conditions in locations of origin, fear of attacks and movement to access land for farming are reasons for the increased mobility in the region. The majority of IDPs (57 per cent) are living with host communities, and the remainder (43 per cent) are residing in camps and camp-like settings. Out of the six affected states, Borno continues to be the only state in which the number of people residing in camps and camp-like settings (55 per cent) is higher than the number of individuals living with host communities. Assessments conducted in IDP camps in the BAY states (Borno, Adamawa and Yobe) indicate that one in four of the camps, which host 430,000 IDPs, is highly congested with per capita space of less than 15m². In addition, Borno State has nine international porous land border connections with Cameroon, Chad and Niger, which results in spontaneous returns of refugees from these neighbouring countries.

According to the 2020 Humanitarian Needs Overview, 35 per cent of health facilities in Borno, Adamawa and Yobe States were damaged as a result of conflict. There has also been a significant disruption of essential health services for children and other vulnerable groups living in inaccessible areas. Around 4.7 million people need humanitarian support, the majority of whom are living in Borno State, which is most affected by the conflict in north-east Nigeria.

PROTECTION RISKS

The protection risks identified in Nigeria are varied and include: weakened health systems, multiple disease outbreaks, high population concentration in specific urban centres, loss of livelihoods and lack of access to safe potable water and sanitation infrastructure. Vulnerable groups such as the elderly, persons with disabilities, children, men and women also face several potential risks. A considerable number of women and girls have been subjected to child marriage, risk of gender-based violence and psychological violence. Displaced children living in insecure areas face malnutrition and the risk of abduction for recruitment in the armed groups. School closures, one of the major impacts of COVID-19, has affected about 400,000 internally displaced children living in IDP camps and host communities. Lack of livelihood options for the elderly, the sick and persons with disabilities is also a major issue and creates dependency on food assistance. These risks are only compounded by climate-related events such as flooding during the rainy season and disease outbreaks such as measles and malaria. IDPs, returnees, refugees and host community members

living in overcrowded camps and camp-like settings in the BAY states are exposed to food insecurity and poor sanitary infrastructures, and they are at a high risk for COVID-19. A prominent protection risk faced by the population in north-east Nigeria is from Organised Armed Groups (OAG). The OAG infiltration of camps has led IDPs to abandon their shelters to squat with other family members or friends in other zones. Often these infiltrated zones are located at the end of the camps due to flooding in other zones during rainy seasons, so they are an entry point for the OAGs when they attack the camp. Moreover, infiltration of the camp by OAGs is often for the purpose of looting.

One of the Nigeria case studies is based on a project in Mafa, an underserved LGA. In Mafa, **humanitarian and development partners came together in a Nexus approach** to address the needs of both IDP and host communities. Meanwhile, the second case study focuses on the **protection needs of residents relocated to extension areas** in camps in Borno State.

¹ OCHA Nigeria

² DTM Nigeria North East Zone | Displacement Report Round 34 (November 2020)

³ Humanitarian Needs Overview, Nigeria

NIGERIA

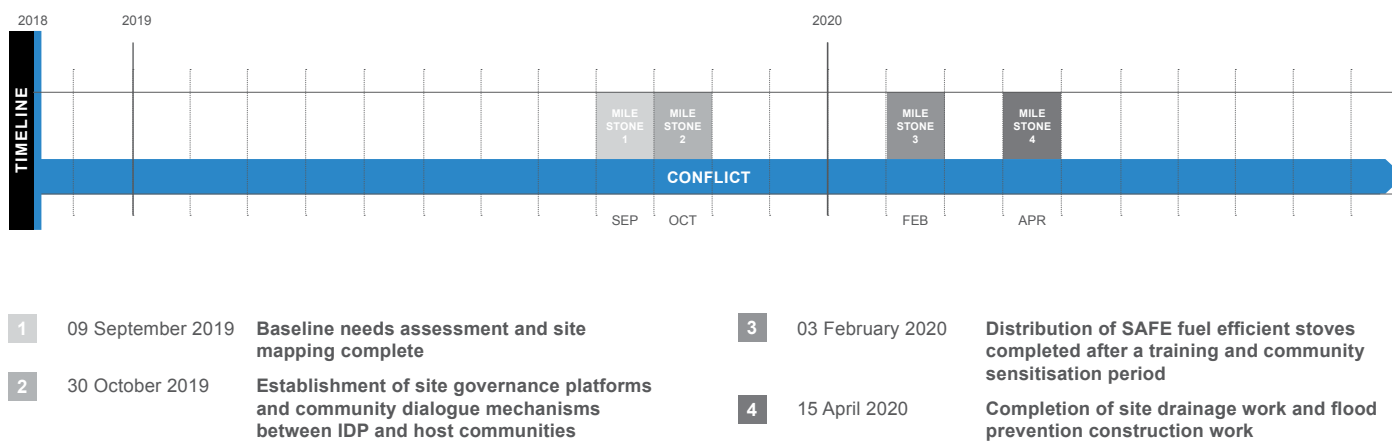
HUMANITARIAN-DEVELOPMENT-PEACE NEXUS INITIATIVE TO BUILD COORDINATION IN MAFA, NORTH-EAST NIGERIA COORDINATION

Cause of displacement	Conflict
People displaced	1.9 million (estimated by UNOCHA)
Project location	Mafa Local Government Area, Borno state, Nigeria
Project duration	10 months (01/08/2019 – 30/06/2020)
# Targeted by project	13,500 people
CCCM coordination mechanism	Regional CCCM Sector for North-east Nigeria



Summary

Mafa had been underserved by the humanitarian community for some time, with relatively few partners operating there. This created the opportunity to implement a strategy for engagement that allows for a more holistic approach to address the needs of both the IDP and host communities. Three implementing agencies partnered up to pilot a cohesive Humanitarian-Development-Peace Nexus approach to respond to challenges in the relations between host and IDP communities.



PROJECT OVERVIEW AND OBJECTIVES

The strategy for community engagement and coordination was developed through a joint analysis conducted by three Humanitarian-Development-Peace Nexus actors, with the aim to deliver a more holistic approach that addressed the needs of both IDP and host communities and led to better inter-community dialogue. The approach consisted of addressing the critical emergency needs of both IDP and host communities, allowing for the establishment of one harmonised model for community engagement, governance and peacebuilding in Mafa Town and the reinforcement of Local Governance and State public services.

Mafa Town was identified as one of the few areas where the Nexus approach could be effectively implemented, based on the strength of local operational coordination. The town hosts the Government

Girls' Arabic Secondary School (GGASS) Camp, which was established in 2017 in response to an influx of IDPs from surrounding areas who sought to escape the growing threat posed by the conflict in Borno state. But while Mafa is only a 40 minute drive from Maiduguri, the capital and biggest city in Borno state, few humanitarian actors were operating in the town, which provided a fertile ground for the initiative. This initiative's main aims are to use a multi-sectoral approach to solve site-specific needs of the community, in this case in GGAS, using community- and area-based approaches to conflict resolution and to encourage and develop a stakeholder dialogue platform aimed towards achieving common goals between IDP and host communities.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Nigeria was selected as a pilot country for unrolling the Humanitarian-Development-Peace Nexus Initiative. Through a joint analysis of transversal risks, needs and limitations that was carried out in Borno State, Mafa Town was identified as one of the few areas where the Nexus approach could be developed, designed

and effectively implemented, based on the strength of local operational coordination. Moreover, the Mafa Government Girls' Arabic Secondary School (GGASS) Camp presented an opportunity for a coordinated approach, linking Humanitarian, Development and Peace initiatives.

CCCM ACTIVITIES

In addition to the standard CCCM activities, the most notable addition this project brought about was increased coordination with actors who did not necessarily work directly in the camp. The peacebuilding actor in the consortium organised coordination meetings between relevant host community and IDP community leaders, as well as humanitarian, government and military actors. These meetings were organised monthly with all stakeholders present. These monthly Local Government Area (LGA) coordination meetings increased the flow of information among all participants and stakeholders. This meant that the whole community in the town is more aware of the different issues faced by different sections of the population, and it provided a platform for different groups to be able to work together to resolve challenges. It enabled community leaders and humanitarian actors to gain a greater understanding of the local security context. Further, it enabled humanitarian actors to share information about upcoming activities, to contextualise them, and to gather feedback. For example, during the beginning of the COVID-19 outbreak, discussions were held on the installation

of handwashing stations at key locations throughout the camp, and host community leaders requested similar support in key transit areas in the host community.

A Stakeholder's Dialogue Platform was developed as a community governance platform and led by an International Non-Governmental Organisation (INGO) to bring together all stakeholders for Mafa coordination. This platform served as a forum for discussions to foster peaceful co-existence between the civil-military groups and also between the host and camp communities. Members of this platform included security forces such as the army, police, Civil Defence, National Drug Law Enforcement Agency (NDLEA) and Civilian Joint Task Force (CJTF); all partner representatives; camp leadership representatives and the host community leadership and government representatives including the Bulamas District Head and local government chairman. The main topics discussed in the Platform were community-led initiatives, sanctions to societal nuisance, needs and gaps, multisectoral approaches to solving issues and conflict resolution.



FES

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The approach has proven to be relevant and appropriate, especially in areas where communities are underserved by humanitarian actors. Having a peacebuilding partner has been key. That was the mechanism that allowed partners to link the provision of immediate humanitarian assistance with longer-term relationship

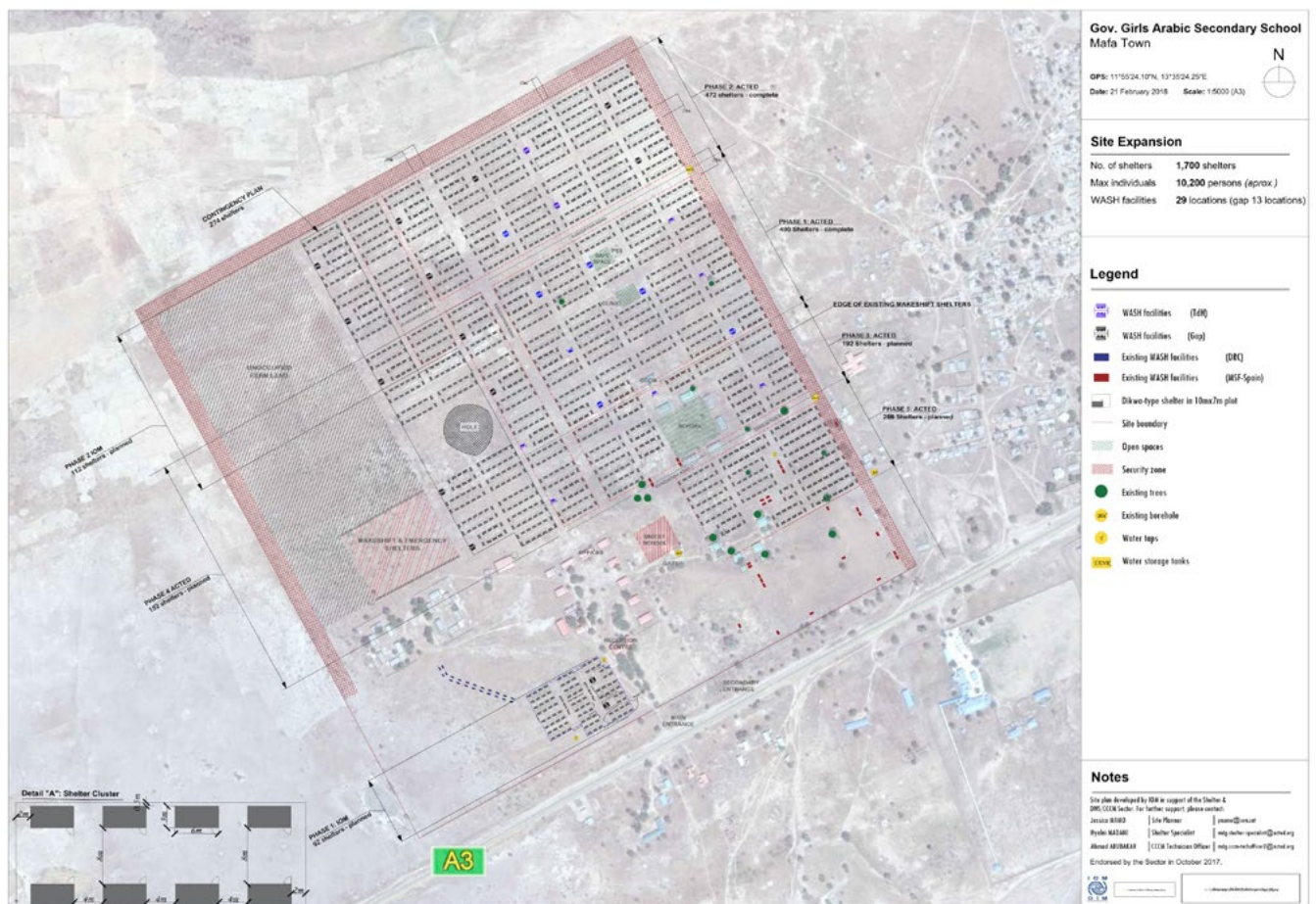
building and community engagement. A future consortium where it was just partners providing direct assistance would not be so relevant, and this is a good example of an adapted Humanitarian-Development-Peace Nexus approach that is tailored to the specific context in Mafa.

KEY ACHIEVEMENTS

1. The project reduced friction between IDP camp residents and the host community in Mafa. For example, there was a misconception in the host community that camp residents are more favoured for in-kind food distribution, and the camp residents perceived that the host community was favoured, especially in regards to the host community's access to livelihood programmes. This caused some friction between the communities, however, the issue was raised during one of the coordination and an in-depth explanation and a better understanding was given to both communities. The coordination meetings were also able to address similar misconceptions surrounding water points.
2. Common ground was identified among stakeholders and relationships were strengthened through sharing success stories to assist other communities within the LGA.
3. The community gained awareness of their ability to be proactive in finding solutions within their own capabilities, and then seeking assistance only when needed.
4. There was a combined effort to bring the presence of government agency SEMA (State Emergency Management Agency) to the location in Mafa.

CHALLENGES

1. There was a lack of access to the site due to security threats or vehicular restrictions.
2. Regular staff turnover in key positions was a challenge.
3. There was no designated focal point or consortium coordinator to provide leadership and direction to the three partners.



Mafa camp map



FES training

LESSONS LEARNED AND RECOMMENDATIONS

1. Employing a **multisectoral approach to common issues** yielded better results.
2. Joint coordination **reduced duplication** of activities in the field.
3. The combined effort had more impact on the community because **all partners passed the same message to the community**, which emphasised the seriousness of issues. For example, all partners relayed the same messaging on COVID-19.
4. It is recommended to **notify field staff early** into such a partnership in the future so that an early combined kick-off can be held at field level.
5. **Dialogue between host communities and IDP communities** has been key to the success of the project.

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Acknowledgements

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NIGERIA

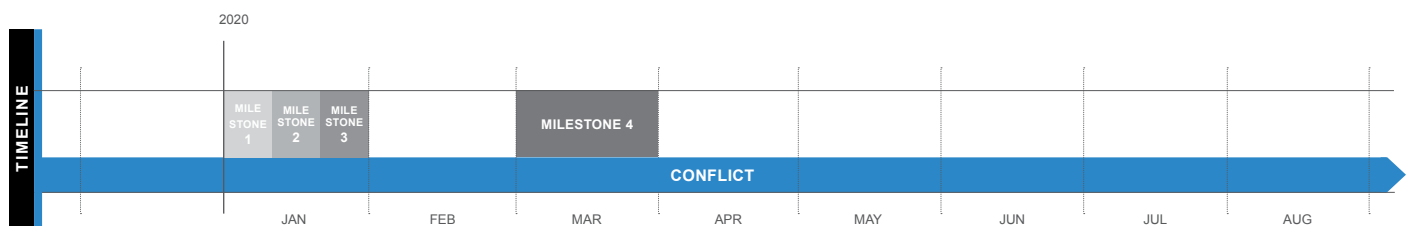
STRENGTHENING THE PROTECTION OF IDPS THROUGH CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

Cause of displacement	Insurgency/Armed Opposition Group (AoG) attacks
People displaced	1.9 million (estimated by UNOCHA)
Project location	Banki, Damasak, Monguno and Ngala
Project duration	12 months
# Targeted by project	329,395 people
CCCM coordination mechanism	Through the national coordination agency (NEMA/SEMA)



Summary

The main objective of this project is to improve the protection of affected people of concern, restore human dignity and reduce suffering and disruption of Nigerian populations living in the 4 targeted local government areas (LGAs) through Camp Coordination and Camp Management (CCCM) services.



1	January 2020	Coordination	3	January 2020	Flood and fire response
2	January 2020	Decongestion	4	March 2020	COVID-19 mainstreaming / outbreak response



training session for comm volunteers



UNHCR Graduation of Livelihood Beneficiaries

PROJECT OVERVIEW AND OBJECTIVES

This project is part of a wider IDP relocation venture undertaken in two earmarked extension areas in camps (Banki and Ngala) by humanitarian and UN agencies in collaboration with the State Government through its Ministry of Reconstruction, Rehabilitation and Resettlement (MRRR). This project takes an inter-sectoral approach through coordination with relevant stakeholders, with the aim to increase and strengthen protection of affected persons living in the camps, camp-like settings and within host communities within the targeted areas. A holistic CCCM, Shelter and Non-Food Item (NFI) strategy promoted community participation and capacity building in order to contribute towards durable solutions. Therefore, through monitoring activity in camps, host communities and areas of return, protection issues were identified and interventions planned and implemented in close collaboration with national authorities, the affected communities and other humanitarian stakeholders.

Lack of access to basic assistance and justice systems, risk of gender-based violence (GBV) and flood/fire risks are some of the gaps and protection risks faced by internally displaced persons in Nigeria. Moreover, persons with disabilities are often at heightened risk,

with limited access to services and assistance due to inadequate disabled-friendly programming that does not give adequate considerations to the needs of persons with disabilities. This is particularly the case for persons without caregivers. Persons with disabilities face systematic exclusion from services, lack of access to targeted information and are excluded from decision-making roles within their communities. Boko Haram attacks on camps and camp-like settings have become more frequent during both the day and night, increasing the challenges to address protection risks. In addition, governmental-initiated returns from the camps to home villages have not been able to be in line with the Kampala Convention¹, increasing the risk of secondary displacement.

The project provided and distributed shelter materials to respond to the immediate needs of IDPs and returnees and facilitated the access to durable shelter solutions in transition towards recovery and integration. The project promoted community self-management and self-reliance. In close coordination with protection partners and service providers, the project gave particular attention to making services equitably available and accessible for persons with disabilities.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

This project targets IDPs, refugees, returnees and host community members living in Ngala, Banki, Damasak and Monguno camps, focusing on the affected population in these four local government areas (LGAs) in Borno state, with a total population of 354,000 individuals. These LGAs were targeted due to their location among the crisis-affected areas. They are inaccessible by road due to the security situation, making military escorts necessary.

The selection of beneficiaries for relocation within these areas was based on a vulnerability and protection scale with a focus on female-, child- and elderly-headed households. Additional selection criteria included households with high dependency and extremely poor living conditions living in locations outside the target areas. This was done to ensure that essential services met minimum standards across all sectors, with careful consideration of community participation.



Monitoring food distribution

¹ African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention)

CCCM ACTIVITIES

Coordination and Advocacy

The CCCM agencies set up a coordination mechanism to provide avenues to find solutions to challenges and barriers in the provision of health, NFI, shelter, cooking fuel and WASH services. Monitoring activity in camps, host communities and areas of return provided information to identify service gaps and allowed interventions to be planned and implemented in close collaboration with national authorities, the affected communities and other humanitarian stakeholders/sectors. The CCCM agencies supported the other sectors in seeking longer-term solutions, upholding CCCM and SPHERE standards and the rights and dignity of affected populations. Activities included monitoring during general food and NFI distributions, sector assessments, as well as area-wide sensitisation and awareness campaigns.

Information Management

Information Management tools were developed by CCCM agencies to gather and share data, information and analysis for coordination, decision-making and advocacy with government counterparts, the communities and other humanitarian stakeholders/sectors.

Sensitisation and Awareness

Awareness and sensitisation campaigns were organised and conducted on the risk of COVID-19, fire safety and prevention and general information on access to services.

Capacity building and building of community-based structures

Capacity building activities of CCCM staff, community volunteers and camp communities on service delivery and protection mainstreaming were rolled out. Capacity building activities with camp communities gave opportunities to learn new skills and incorporate the community committees into daily life.

Complaint and Feedback Mechanisms/Referrals

A protection help desk was established to improve the effectiveness of response by humanitarian actors to community member's complaints and feedback and ensured that urgent protection incidents such as GBV were referred to the appropriate protection actors.

Focus-Group Discussions

Regular Focus Group Discussions were set up to learn the community's opinions on designated topics, and to guide and formulate future action. Topics discussed included access to services, living conditions of the elderly and specific protection risks faced by groups within the communities.

Site Monitoring & Maintenance

CCCM agencies conducted needs assessments and monitoring activities within the displacement sites. Damages to camp facilities were assessed and care and maintenance activities conducted. These included Cash for Work activities for flood mitigation, drainage clearance and shelter construction, as well as latrines and bathing facilities that are safely accessible by persons with disabilities.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

Security threats were the major impediment in the response in Borno State, however, through the government-led coordination and deployment of more security forces, an enhanced enabling environment was set up for the access of coordinated humanitarian assistance. The government-led coordination facilitated the provision of food, health, shelter, protection, NFI and cash interventions in the four target areas.

The CCCM/Shelter/NFI Sector adopted the government-led coordination pattern in north-eastern Nigeria. Through this coordination mechanism, the sectors built a strong relationship with government counterparts and supported the advocacy for protection and services, complementing the 2020 Decongestion Strategy spearheaded by the CCCM, Shelter and NFI Sector.

KEY ACHIEVEMENTS

1. 3,500 households were targeted for relocation under this project in Monguno, Banki and Ngala. 2,000 households have voluntarily relocated. The remaining 1,500 households are part of ongoing relocation.
2. Overall, the community has embraced the project, and has stressed the need for other services, such as WASH, to be in place before the relocation process takes effect.
3. 1,501 households that were victims of fire incidence were supported with temporary shelter and NFI kits.
4. A Temporary Entry Point Screening Centre was established in Banki for the self-isolation of incoming new arrivals to avoid the spread COVID-19.

CHALLENGES

1. Congestion and overcrowding in camps are the main challenges, with a lack of safe space for camp expansion as a result of growing security risks. This has resulted in families having to share shelters with relatives, contributing to an increase in health risks, particularly within the COVID-19 context, and minimised livelihood opportunities.
2. Protracted crisis has led to multiple displacements in the affected communities.
3. Lack of proper hygiene and potable drinking water has created various health risks in the local communities.
4. There were inadequate NFI kits to support the people in need.
5. There were inadequate shelter kits to support the re-enforcement of dilapidated shelters.

LESSONS LEARNED AND RECOMMENDATIONS

1. This project recommends **continued advocacy** for more resources to meet the growing humanitarian needs and logistical support from the government to improve security, both of lives and of property.
2. It is important to **ensure a sustainable supply of energy** by promoting sustainable natural resource management, sustainable bioenergy production such as briquette production and promotion of fuel-saving cooking practices and fuel-efficient technologies for cooking and livelihood activities.
3. **Establish standard secondary health centres in deep field locations.** Health partners provided limited basic and primary health care. The few secondary health care providers have halted their services due to border closures in cities of neighbouring country Cameroon due to COVID-19.
4. Establish a **standard education system** for children.
5. Establish an **active and functional legal system** in the deep field for human rights protection.



Community participation in flood mitigation

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YEMEN



CONTEXT

The humanitarian crisis in Yemen remains the worst in the world, driven by conflict, widespread poverty, disease, economic collapse and the breakdown of public institutions and services. Since the conflict escalated in March 2015, the country has been in turmoil, with millions of people becoming food insecure, ill and extremely vulnerable. About 24.1 million (80 per cent) of the population across Yemen requires some form of humanitarian assistance and protection. This amounts to more people in need of humanitarian aid than any other country in the world.

Conflict has caused more than 110,000 casualties, with about 10% of them being civilians, and has displaced 3.6 million people from their homes. Although the number of air strikes and civilian deaths has dropped sharply since 2019, fighting has intensified and expanded during the first months of 2020. More than 81,420 people have been displaced from January to June 2020. Al Dhale'e Governorate has been one of the regions of Yemen severely impacted by the protracted conflict. About 80% of the governorate's population are in need of humanitarian assistance. Malnutrition and food insecurity is prevalent, and Al Dhale'e also reportedly has limited health care facilities. Humanitarian actors are trying to ensure that basic services in accordance with humanitarian standards are present in IDP hosting sites. These services include Shelter and WASH infrastructure, protection mainstreaming and multi-sectoral referrals, as well as active coordination with humanitarian partners for interventions at targeted sites.

Other challenges that Yemen faced in 2020 were the unprecedented flooding that devastated southern communities and increased the spread of diseases including cholera, dengue and malaria. The country experienced the worst cholera outbreak in modern times three years ago, and Yemen is currently on the brink of famine. Humanitarian partners have been working with communities and health facilities to provide preventative care and treatment to help combat malnutrition in over 330,000 children. However, delivering humanitarian assistance remains challenging because supply chains are cut off due to roadblocks imposed in the country. Roadblocks also limit access to cities and towns with hospitals and other essential services.

The COVID-19 pandemic counts as one of the many threats facing Yemen. It has been present since March 2020 and has spread rapidly across the country. As of October 2020, Yemen reported 2,064 confirmed COVID-19 infections with 600 deaths, however, low testing capacity undermines these numbers. Sanitation and clean water are in short supply and over two-thirds of Yemenis require support to meet their basic water, sanitation, and hygiene needs. The combination of extreme vulnerabilities and limited health care facilities puts Yemen at exceptional risk. A direct impact of the pandemic was the rise in burial activities and high mortality rates in the Aden governorate. Steps to mitigate and address COVID-19 are being scaled up to prevent the virus from spreading further.

PROTECTION RISKS

The major protection risks identified are gender-based violence (GBV) and lack of access to basic services. Women, children and persons with disabilities are at heightened risk from conflict and the consequent loss of heads of households, family separation and breakdown of community structures. The damage and closure of schools and hospitals has disrupted access to education and health services. Children in Yemen suffer from acute malnutrition and food insecurity. IDPs face exacerbated threat of COVID-19 in displacement sites due to congestion, overcrowding, limited

mitigation measures and inadequate shelter facilities. Yemen has also experienced excessive mortality rates in the past year spurred by the lack of health care facilities and dwindling humanitarian aid.

The Yemen case study discusses CCCM activities undertaken by the Site Management and Coordination focal point in Aden and Al Dhale'e governorates to **improve living conditions in displacement sites, identify and address eviction concerns and ensure that newly established transitional sites are culturally appropriate.**

¹ Islamic Relief, *Yemen: Supporting 13 million people amidst a humanitarian crisis*, 26 Mar 2021

² IOM DTM *Yemen: Rapid Displacement Tracking Update* (24 to 30 May 2020)

³ IOM DTM *Yemen: Rapid Displacement Tracking (RDT)*, Reporting Period: 10-16 May 2020

⁴ *Excess mortality during the COVID-19 pandemic in Aden governorate, Yemen: a geo-spatial and statistical analysis*, 29 Oct 2020

YEMEN

IMPROVING LIVING CONDITIONS WITHIN IDP HOSTING SITES IN YEMEN

Cause of displacement Conflict

Project location

Al Dhalee governorate: districts of Al Dhalee, Al Husain and Qatabah

Aden governorate: districts of Al Buraiqeh, Al Mansura, Al Mualla, Al-Shikh, Othman, Craiter, Dar Sad and Khur Maksar

Project duration 24 months

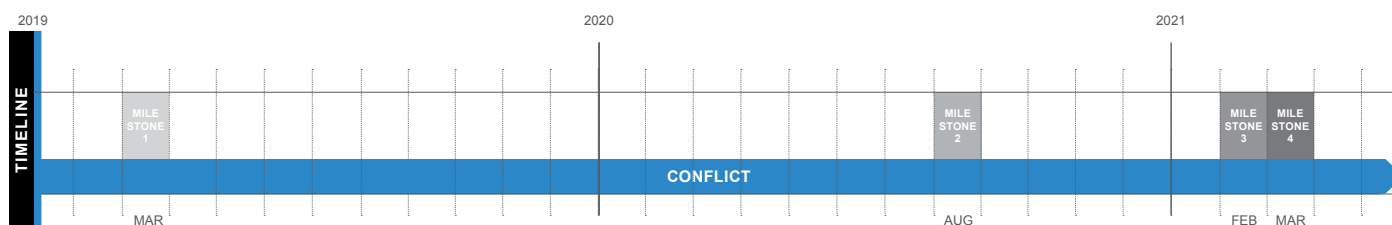
Targeted by project 18,961 households

CCCM coordination mechanism National CCCM Cluster



Summary

The Site Management and Coordination (SMC) focal point for 54 sites (16,856 people) in the governorates of Aden and Al Dhale'e conducted regular assessments of the needs across sectors and coordinated assistance provision with relevant partners and clusters. The agency developed self-governance structures in the sites through the election of community committees and coordinated with national authorities to address new arising issues, such as eviction threats. To complement its CCCM activities, the lead agency directly implemented WASH and Shelter/NFI activities in the most vulnerable sites identified.



- | | | | | | |
|---|-------------|---|---|---------------|---|
| 1 | March 2019 | Start of the project | 3 | February 2021 | Completion of 168 transitional shelter units in Aden and 118 transitional shelters and 250 emergency shelters in Al Dhale'e |
| 2 | August 2020 | Completion of CCCM, Protection Principles, WASH & Shelter training for 160 community committee members in Aden and Al Dhale'e | 4 | March 2021 | End of Project |



PROJECT OVERVIEW AND OBJECTIVES

The main objective of this project was to ensure that basic services are present in critical IDP hosting sites, adhering to national and international standards, to respond to the needs of those most affected by the conflict in Yemen. This includes ensuring that services across all sectors are available in the sites, as well as advocating for any gaps that may remain unmet. The CCCM interventions also

aim at increasing the capacity and dignity of the displaced persons by establishing gender-balanced community committees elected by site residents, reception services for new arrivals, Shelter and WASH infrastructure, protection mainstreaming and multi-sectoral referrals, as well as active coordination with humanitarian partners for interventions at targeted sites.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Based on population and vulnerability criteria along with needs identified with WASH and Shelter partners as part of a technical assessment, 18,961 households across 57 sites in the governorates

of Aden and Al Dhale'e were targeted for WASH and Shelter activities through Site Management and Coordination (SMC) focal point.

CCCM ACTIVITIES

In response to emerging displacement trends in Yemen, camp management uses dynamic approaches including mobile response, CCCM mentoring and support to local authorities and classic on-site camp management, adapting assistance provided to a variety of camp and out of camp displacement settings. With displaced persons living in informal sites, CCCM partners engage through mobile teams that monitor the humanitarian situation in each site on a weekly basis. This takes place through direct coordination with the site focal points or remotely through a 'light' approach when the site is not accessible.

The project aims to address CCCM concerns through:

1. Strengthening coordination and communication with site focal points and site residents,
2. Implementing a Complaints and Feedback Response Mechanism (CFRM),
3. Establishing an interagency referral system, specifically with protection and health services, and
4. Ensuring all WASH and Shelter facilities are accessible and equipped with lighting systems.

1. Coordination with Site Focal Points and Residents

In every site under the management of the SMC focal point, community consultations were conducted to discuss the roles and responsibilities of the site committee. Each committee was then elected by the residents of the site and included both men and women, establishing a gender-balanced community committee in each site. A total of 428 IDPs were elected as committee members across the sites in Aden and Al Dhale'e, with 45% female representation in Al Dhale'e and 48% in Aden. The community committees proved to be efficient in independently organising meetings to address issues in their communities. For example, in Medina Sakania site in Al Dhale'e, the committee organised meetings with the site residents following an eviction threat in order to successfully address the issue.

In both governorates, the SMC focal point coordinated and conducted CCCM, Protection, WASH and Shelter trainings for site committee members in July and August 2020. During the first training in Al Dhale'e, only 4 women were able to attend out of 80 participants as the training required that the participants be literate. To address this, the SMC focal point delivered a second training for non-literate members in December 2020, in which most participants were women. The participants reported feeling empowered and were more comfortable engaging with the community. They also reported this was the first time they had ever received such training and expressed interest in additional trainings in the future to increase their capacities.

2. Complaints and Feedback Response Mechanism (CFRM)

Complaints and Feedback Response Mechanisms (CFRM) were established through the installation of CFRM boxes in each site, through which the site residents can share complaints. The CFRMs were established based on the principles of respect, confidentiality and neutrality. Through this mechanism, all complaints are taken seriously and followed up with a response as quickly as possible. To ensure that the mechanism is easily accessible, the CFRM is adapted to Yemen considering the local context and culture, as well as the risks faced by the displaced population. Protection-related complaints are referred to Protection partners working in the site, following information protection procedures.

3. Interagency Referral System:

One of the largest issues faced by the IDPs are eviction threats and forced evictions. Across both governorates, IDP sites are located on private land, and with the increased economic crisis affecting the country, many landowners are looking to rehabilitate their land and buildings for livelihood purposes, leading to regular eviction threats. To address this, CCCM partners actively engage with Protection partners in the sites, as well as with the Protection Cluster and Executive Unit for IDPs (ExU) to coordinate and negotiate for IDPs to be allowed to stay on the land or to negotiate time for the ExU to locate a site for relocation.

Additionally, there are unknown amounts of explosive ordnance in sites, posing serious risk for IDPs residing there, particularly children. To respond to this, CCCM partners coordinated with a specialised agency to conduct Explosive Ordnance Risk Education (EORE) sessions in the IDP sites and safely remove unexploded ordnance.

4. Accessibility of WASH and Shelter Facilities

Through coordination with the Yemen Displacement Response (YDR) Consortium, the SMC focal point implemented WASH and Shelter activities, responding to the most critical needs across the sites. The agency engaged the community and adapted the response to the context of each site's HLP situation. Several rounds of focus group discussions were conducted with men and women to ensure full adequacy of the shelter design, WASH facilities and planning in order to build the two transitional sites in Aden. Following the consultations, the SMC focal point revised the designs to move the kitchen closer to the shelters and implement household-level latrines instead of communal ones in order to align with the community's cultural practices. As a result, the shelters and services provided in the sites have been well received by the community, and women and girls have full access to WASH facilities. Moreover, solar lights were installed where the latrines were located to increase women and girls' access to them during the night.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The Site Management and Coordination focal agency organised monthly area-based coordination meetings with local authorities and humanitarian actors in Al Dhale'e and Aden districts. Coordination took place at two levels: governorate level and directly at the site level. However, the meetings have been suspended since November 2019 due to reluctance from the authorities. In order

to ensure coordination of services was taking place, the SMC focal point adapted to coordinate through bilateral meetings as well as sectoral coordination meetings at the governorate level organised by relevant Clusters. In Al Dhale'e governorate, the SMC focal point has been co-chairing a bi-weekly coordination meeting, which allows for effectively raising gaps and vulnerabilities identified in the sites.

KEY ACHIEVEMENTS

1. The SMC focal point has built a strong network with the organisations working in the sites through regular meetings and engagement. This helped to ensure effective information flow and enabled a regularly updated overview of the assistance provided and gaps remaining across all sites.
2. Throughout the implementation of shelter activities, the SMC focal point ensured meaningful community consultations were conducted so that the feedback from the communities was considered at all stages.
3. Identified gaps, such as water shortage and protection risks, were addressed in a timely manner through coordination with Clusters and humanitarian partners.
4. In both governorates, the SMC focal point conducted CCCM, Protection and WASH/Shelter trainings for site committee members throughout 2020.
5. Throughout the IDP sites in Al Dhale'e and Aden governorates, CCCM partners ensured SPHERE standards were met.
6. The SMC focal point has established a stable and independent governance system in the IDP sites, enabling the IDPs to organise themselves and report on issues and needs in the sites. This was enhanced through the training of committee members, including a training developed to target non-literate females in Al Dhale'e, ensuring the effectiveness of both female and male site committee members.

CHALLENGES

1. Implementing prevention and mitigation measures to combat COVID-19 was a challenge in displacement sites. To address this, community consultations were held to share essential information on the prevention measures for COVID-19, and handwashing stations were installed across all sites, along with additional water trucking and soap bars.
2. The SMC focal point's area-based coordination meetings with all humanitarian and local actors has been blocked by the local authorities, who requested the mandate to coordinate the humanitarian agencies. Coordination had to be adapted to regular bilateral meetings and sectoral coordination meetings at governorate level.
3. CCCM partners often face issues in identifying other agencies with the capacity to cover identified gaps. Gaps that could not be addressed through regular coordination are reported at the consortium level, where additional advocacy is conducted.
4. Across both governorates, several security incidents led to the halt of activities. In Al Dhale'e, in four security incidents military groups destroyed shelters and threatened eviction. Following this, the SMC focal point engaged with relevant actors and authorities to ensure the safe continuation of activities in the site. Similarly, during the rehabilitation of a well in Naqil al Shay, the construction was destroyed by a military group due to land ownership issues. The SMC focal point was not able to complete the rehabilitation but was able to identify an alternate solution to provide water to the site.





© ACTED

LESSONS LEARNED AND RECOMMENDATIONS

1. In a context of site expansions and a highly volatile security environment, CCCM has developed a **flexible monitoring and coordination methodology** which has been able to maintain communication and coordination with the focal points of all sites in all circumstances. In accessible areas, CCCM uses a regular monitoring approach with in-person field visits, and in sites that are not easily accessible, CCCM uses a 'light' approach with phone and video calls to the site focal points to collect the relevant information.
2. With reduced availability of funds, humanitarian agencies providing services to IDPs are reducing their operations to only assist the most vulnerable, given them **less flexibility to respond to unforeseen needs**. For example, the governorates of Aden and Al Dhale'e are facing unanticipated flooding during the rainy season that heavily impacts the most vulnerable households living in informal settlements.
3. The SMC focal point has faced difficulties in identifying partners to provide affected households with shelter repair kits and other basic commodities in response to the flooding. As a lesson learnt, CCCM has included **prepositioning Shelter and NFI materials** as part of new projects in order to quickly respond to unforeseen shocks affecting IDPs in formal and informal settlements.

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D. ENVIRONMENT

The dynamic of environment and sustainability with humanitarian response is twofold: the environment impacts a humanitarian response and humanitarian response can affect the environment. Displaced persons often settle in environmentally marginal locations in host countries, where the demands on the ecosystem from migration influxes are outpacing planning that could prevent excess environmental degradation. In many host sites for displaced people, vegetation cover has been greatly depleted to accommodate the population, and land-use conversion from forest cover to agricultural production is prevalent. Environmental deterioration affects both displaced and host populations, inhibiting their capabilities and resilience in different ways, including livelihoods, impacts on health, an increase in changes in weather and other dimensions of their well-being. Moreover, competition over scarce natural resources, such as firewood, water and grazing land has the potential to generate animosity and occasionally to spark friction or conflict between displaced and host communities.

Environmental degradation can be long-lasting and difficult to reverse. Displaced populations lack access to energy sources, and in particular clean, sustainable, reliable and affordable resources. According to estimates by the Moving Energy Initiative, some 85% of displaced populations in camps burn biomass such as firewood for cooking, and around 97% have limited or no access to electricity¹. In situations where firewood is the main source of fuel, the competition for dwindling natural resources has frequently been the cause of tension between displaced and host communities, and also has a negative impact on the local ecosystems. At the socioeconomic level, access to sustainable household energy supports social cohesion in environments with scarce resources. Additionally, degraded environmental conditions and altered ecosystems due to climate change can drive displacement, with more people living in disaster-prone areas. According to UNCHR, 59.5 million people are situated in 'climate change hotspots' globally, facing the risk of secondary or repeated displacement due to natural hazards and the effects of climate change². Moreover, the Internal Displacement Monitoring Centre's (IDMC) 2015 Global Estimates report states that "since 2008, an average of 26.4 million people per year have been displaced from their homes by disasters brought on by natural hazards"³.

Humanitarian programming that addresses environmental degradation from the early phases can address and divert a number of challenges and bring positive results, such as addressing underlying environmental issues that may have contributed to the crisis and reducing the risk of recurrence. Programming can also protect livelihoods by safeguarding the natural resources on which they depend, improve communities' health and safety by reducing pollution and waste and reduce the potential for conflict over scarce resources at local level. Humanitarian planning can protect displaced and host populations and the environment from future hazards through mitigation activities, building back better. Moreover, addressing environmental considerations early in programming can reverse or slow trends that have led to

deforestation, desertification and pollution, thereby supporting community resilience, biodiversity, food security and economic development⁴.

The **Core Humanitarian Standard (CHS) Commitments 3, 6 and 9⁵** are essential for environmental considerations and should be considered in response contexts. Effective coordination and responsible management and use of resources can lead to common solutions and result in improved lives and livelihoods, particularly in regions with a fragile ecology and economic poverty. These tend to be the regions that are at higher risk of natural disasters. Consulting and involving local environmental authorities and organisations can highlight key issues that heavily impact the community, including environmental sensitivities, availability of natural resources, environmental hazards and land tenure rights. Moreover, rapid environmental impact assessments with the participation of both displaced and host communities can help determine environmental risks and mitigation measures that should be in place as early as possible. A thorough analysis of the links between environmental factors and protection is needed in humanitarian programming as a step towards mitigation.

At a minimum, humanitarian response should not contribute to unsustainable management of natural resources or the occurrence of environmental emergencies. The environment bears the potential or actual unintended negative effects of humanitarian activities that may compromise people's safety, dignity and rights. The location and planning of the site for a displaced population has critical impacts on the health and protection of the population, and CCCM partners have the responsibility of managing daily activities, ensuring participation and developing relationships with the host community. Camps are often set up with the expectation that they will be short-term, however, planning should always aim for long-term needs and unexpected possibilities. National authorities are responsible for this allocation of land, and, with CCCM partners and cluster lead agencies, for ensuring that all actions taken during the camp lifecycle are comprehensive, inclusive, well-coordinated and uphold the rights of the displaced population.

The **Minimum Standards for Camp Management**, in line with CHS Commitment 1⁶, aims to address the environmental challenges faced in CCCM contexts. Under the heading of Site Environment⁷, two standards guide CCCM partners in implementing effective humanitarian response to assess environment risks alongside wider assessments and situational analyses to avoid exacerbating local vulnerabilities. Particularly in contexts where natural disasters or environmental degradation affect both displaced and host communities, it is essential for CCCM partners to ensure coordination and collaboration with national and local authorities and jointly lead programmes in addressing crucial environment challenges such as deforestation. Successful collaboration with national and local authorities is demonstrated in the Uganda context, where the Government of Uganda and humanitarian partners coordinated closely in implementing the "ReForest Project" to support energy resources in all refugee-hosting sites across the country.



CAMP MANAGEMENT STANDARDS REFERENCE

STANDARD	INDICATOR	REMARKS	CASE STUDY REFERENCE
3.1 A safe and secure environment All site residents and service providers live in a dignified environment that is safe and secure from harm or violence.	3.1.1 % of recommended mitigation actions from safety audit directly integrated into site maintenance and improvement plans (or addressed with site maintenance activities).	Safety audits are a tool designed to give SMAs and service providers an understanding of how all groups (including those at risk such as adolescents, older people and people with specific needs) feel about their safety and security when using site facilities during both day and night.	D.1 Uganda The ReForest Project
3.2 A safe and secure environment An appropriate environment. All site residents have an environment that is physically, socially and culturally appropriate.	3.2.1 There is an agreed site plan developed with community involvement and appropriate technical expertise that meets the needs of all groups in the displaced population. 3.2.2 % of the site population, including host communities, indicating that the site reflects their needs, safety and priorities.	The role of site managers and their teams in planning sites or site improvements is to ensure that all stakeholders, including the site population and host communities, participate in developing the site plan. Site managers support site residents and host communities to influence site planning and site improvement decision-making through participatory methods such as assessment, consultative meetings, focus group discussions and go-and-see visits. People with specific needs and marginalised groups should be consulted to make sure the site plan reflects and addresses their needs.	D.1 Uganda The ReForest Project

¹ Energy in situations of displacement. Global Plan of Action for Sustainable Energy Solutions in Situations of Displacement (GPA). Moving Energy Initiative.

² Global Strategy for Sustainable Energy: A UNHCR Strategy 2019 – 2024. UNHCR.

³ Global Estimates 2015: People displaced by disasters. IDMC.

⁴ Sphere Thematic Sheet 1: Reducing environmental impact in humanitarian response. Sphere.

⁵ CHS Commitment 3: Communities and people affected by crisis can expect: That they are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian

action. CHS Commitment 6: Communities and people affected by crisis can expect: Coordinated, complementary assistance. CHS Commitment 9: Communities and people affected by crisis can expect: That the organisations assisting them are managing resources effectively, efficiently and ethically.

⁶ CHS Commitment 1: Communities and people affected by crisis can expect: Assistance appropriate and relevant to their needs.

⁷ Minimum Standards for Camp Management

UGANDA



CONTEXT

Uganda is one of the largest refugee-hosting countries in Africa, hosting over 1.4 million refugees fleeing war, violence and persecution in South Sudan, Democratic Republic of Congo (DRC) and Burundi, making up 3.6% of the country's total population of 39 million¹. The refugees are often settled in areas that are environmentally marginal, sensitive or both, where the demands on the ecosystem from rapid refugee influxes has outpaced planning and implementation of remedial measures². The vegetation cover has been greatly depleted in most refugee-hosting areas, and conversion of the land from forest to agricultural production is prevalent in all the refugee-hosting areas.

There are twelve refugee-hosting sites in Uganda, including Kampala, where the settlements have resulted in severe impacts on the environment and natural resources. Examples include deforestation for fuel wood and timber poles for construction, clearance of trees for construction and cultivation as well as mining and bush burning, especially in the host communities to prepare their gardens for cultivation. Refugees and the host community are dependent on natural resources to meet their basic needs for cooking energy, materials for shelter construction and agricultural land, and some refugees also generate income by selling biomass and non-wood forest products. In addition to environmental degradation, competition over diminishing natural resources contributes to tension and disrupts the peaceful co-existence between refugee and host communities.

Addressing these environmental issues have not been fully integrated into programming, and the current humanitarian response focuses largely on short-term interventions³. In 2019, the Office of the Prime Minister (OPM) and partners declared environmental protection and restoration a major priority and a key humanitarian-development nexus issue in the Uganda Refugee Response⁴.

In UNHCR's Ugandan Response and Recovery Plan for 2019-2020, energy and environment have been given a priority section which lays out plans to implement environment and natural resource protection and restoration while promoting green livelihoods⁵. Through this, action plans and forest resource management plans will be developed for each refugee-hosting sub- or micro-catchment area with the aim of planting or naturally regenerating a minimum ratio of 20 trees per refugee per year. The trees will be maintained in both refugee and host communities using incentivised approaches. The need to mainstream energy, the environment and climate-resilient interventions into each sector has been identified as a way forward in humanitarian programming, where climate-smart agriculture such as agroforestry and sustainable construction value chains can be enhanced and prioritised⁶.

In 2019, UNHCR and the Office of the Prime Minister (OPM)⁷, in coordination with key stakeholders such as humanitarian partners and government counterparts working in the refugee operation, conducted a National Participatory Assessment. This assessment, which was conducted in all 12 refugee-hosting districts and involved the participation of the host and refugee communities, identified challenges, capacities, protection risks and proposed solutions in the Uganda refugee response context. Refugees across the settlements shared that environmental and energy-related challenges are among the most important issues affecting their daily lives. They recognise that they are highly dependent on the environment for most of the resources they use in their daily life, such as firewood for energy, which they reported is the primary source of energy for most refugee families. Additional natural resources include timber for construction and grass for building shelters and grazing.

PROTECTION RISKS

In the National Participatory Assessment, refugee women and men have reported several challenges in accessing energy for domestic use. In most of the settlements, the long distances to collect natural resources and unaffordability of energy sources have been reported to be the leading challenge in accessing energy, with reported exposure to violence as a protection risk. Violence was also identified as a challenge in accessing firewood, noting that women and children are especially at risk of exposure to violence such as gender-based violence (GBV) and hostility from the host community. As women and girls are often responsible for firewood collection, they are vulnerable to attacks from wild animals such as snakes as well as exposure to GBV.

Some challenges, particularly the exposure to violence, have been linked to existing conflicts between refugees and host communities. Members of the host community report often feeling that refugees

use communal resources to the detriment of the host community. Shared resources that are a source of competition and conflict include water points, grass and firewood.

Additional shared environmental challenges around collecting firewood include deforestation and a rise in strong winds and flooding. Through the assessment, refugees and members of the host community acknowledged that they contribute to the environmental problems and want a more efficient and low-cost source of energy to replace the reliance on firewood.

The case study for Uganda is focused on the ReForest Project, which includes planting fast-growing tree seedlings and protecting existing forests. These resources will allow both refugee and host communities improved access to energy resources as well as sustainable livelihoods opportunities.

¹ UNHCR Uganda Response and Recovery Plan (2019 – 2020)

² Uganda: Water and Environmental Refugee Response Plan (2019 – 2022)

³ as highlighted in a recent report by Duguma, 2019

⁴ UNHCR Representation in Uganda, 2019

⁵ UNHCR, 2019a: 45

⁶ UNHCR, 2019a: 45

⁷ Full report

UGANDA

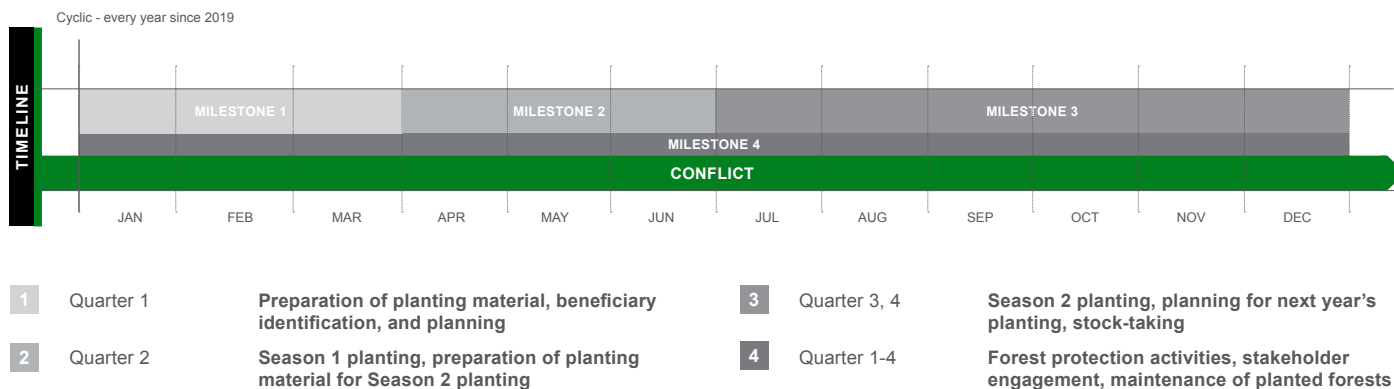
“REFUGEE REFORESTATION PROJECT”

Cause of displacement	Armed Conflict
People displaced	1,470,858 (as of March 2021)
Project location	12 districts: Yumbe (236,718); Adjumani (219,644), Madi Okollo & Terego (192,171); Isingiro (146,690); Kikuube (126,454); Kyegegwa (124,712); Obongi (124,106); Kampala (91,223); Kamwenge (76,303); Kiryandongo (71,554); Lamwo (55,574); Koboko (5,709) ^{1,2}
Project duration	Open, phased in 12-month cycles
# Targeted by project	1,470,858 refugees indeterminate number of host community members
CCCM coordination mechanism	UNHCR (Source of funding and Oversight), National Forest Authority - NFA (Seedling Production and Technical Support), Ministry of Water & Environment - MWE through the Forest Sector Support Department – FSSD (Technical Support & Oversight), District Local Governments – DLG through the District Forest Services – DFS (Stakeholder Mobilisation & Monitoring), Implementing Partners namely DCA, LWF and Nsamizi Training Institute (Beneficiary Outreach and Identification, Field Extension & Implementation), Office of the Prime Minister – OPM (Oversight).



Summary

In response to increasing environmental degradation in refugee-hosting areas of Uganda, the ReForest Project was designed to protect existing forests and promote tree seedling planting. ReForest is a long-term, sustainable project that incorporates forest monitoring, maintenance and protection. Through this project, both refugee and host communities are able to benefit from improved access to energy resources and increased socio-economic inclusion.



PROJECT OVERVIEW AND OBJECTIVES

In order to address the urgent need for sustainable management of biomass sources of energy in Uganda, a new initiative was conceived in 2019 to establish pilot bamboo plantations and nurseries. Bamboo has the potential to provide a sustainable supply of biomass for the production of fuel briquettes as well as other uses. Thus, the Refugee Forestation Project – “ReForest” – was born.

The ReForest Project is anchored to Outcome 2 of Uganda’s Water and Environment Sector Environment Refugee Response Plan (WESRRP) 2019, which aims for a “restored, conserved and protected environment and natural resources for existing and degraded

situations.” The design of the ReForest Project ensures compatibility and continuity with existing frameworks for sustainability and complementarity of interventions. In addition, it aims at protecting natural forests and wetlands in refugee-hosting areas, restoring degraded forest areas and promoting planting of multi-purpose tree species in both refugee and host communities. Moreover, the project strengthens preparedness for increased or potential new refugee flows and facilitates solutions to protracted refugee situations through the sustainable socio-economic inclusion of refugees in their host country.

SELECTION OF BENEFICIARIES AND GEOGRAPHICAL TARGETING

Increasing environmental degradation in refugee-hosting areas in Uganda has become a major obstacle to effectively sustaining the refugee-hosting model. The most visible and immediate impact of the environmental degradation has been loss of forest cover and vegetation in refugee-hosting areas. 20% of total refugee income in Uganda is spent on energy. Refugees have limited access to expensive, low quality energy, which has serious impacts on the health and safety of the displaced populations and the environment: 15 million trees were felled in Adjumani Refugee settlement alone in 2018. Because of the energy poverty faced by the refugee community, negative coping mechanisms such as skipping and/or undercooking meals and selling food rations to purchase firewood

or charcoal are prevalent. It is estimated that households in refugee settlements spend up to US\$4 million annually buying firewood. 30% of that total amount is purchased and the rest is collected freely, however, these “free” sources are declining by the day.

In 2019, the Government of Uganda and humanitarian partners declared environmental protection and restoration a key humanitarian-development nexus issue in the Uganda Refugee Response. To address the environmental degradation, refugee-hosting areas in all 12 districts across Uganda that have been most heavily affected by deforestation were targeted for the ReForest Project.



Biogas plant construction in a school in Kyangwali to reduce firewood use for cooking

¹ Arranged in order of number of refugees hosted

² [Uganda Comprehensive Refugee Response Portal](#)

THE REFOREST ACTIVITIES

The initial pilot project included establishing bamboo demonstration sites in three districts³ in or near Central Forest Reserves adjacent to refugee settlements, in partnership with the National Forest Authority. In the same vicinity, the project restored degraded areas with both fast-growing and hearty species, with the expectation of harvesting within the first three years of the project.

This initiative has since been expanded to the entire operation, which includes about 1.5 million refugees. Since “tree-growing” is a long-term undertaking, the ReForest project continues to nurture the trees established in 2019 even as new planting sites are established. In a typical 12 month implementation cycle, the main activities include monitoring and maintenance of previously planted forests, new tree planting and planning for the following year’s planting. There are also ongoing forest protection activities throughout the cycle.

1. Monitoring and Maintenance of Planted Forests

Monitoring is an important activity in “tree growing”, which entails a long-term process, contrasted with “tree planting”, which is an event that in isolation has no sustainable long-term impact. Monitoring was undertaken at different levels by different stakeholders to achieve the specific objectives of the project. The stakeholders included UN agencies, several departments of the Government of Uganda, civil society and the private sector. The support provided ranged from forest policy planning and formulation, technical backstopping, sector coordination and regulating trade in forest products.

Maintenance activities such as community education have been essential in raising awareness on the role of trees in overall wellbeing, how to protect forests, tree planting and maintenance. This community education was implemented by stakeholders in coordination with the district and national government. Refugee community engagement was done through established

community structures such as the Refugee Welfare Committees and Environment Committees. All key stakeholders are required to adhere to IASC guidelines that set out essential actions that humanitarian actors must take in order to effectively identify and respond to the needs and rights of the displaced populations.

2. Ongoing Reforestation and Tree-Planting Activities

Every year, new tree planting targets were identified, which were largely guided by resource availability as well as the severity of environmental degradation in a given refugee settlement. A key eligibility criterion was that the intervention area must be adjacent to a refugee settlement, and must be impacted by refugee presence. The refugee community was supported through this project with trees to plant: typically one to five seedlings of fast-growing multipurpose trees to increase tree cover. These trees will restore the vegetation cover and sustain the ongoing demand for biomass energy.

Similar activities were implemented in the surrounding host communities, contributing to peaceful coexistence. With larger land areas available, host communities were able to plant more trees which could then be supplied to displaced population at an affordable cost to meet their diverse needs for biomass.

3. Forest Protection Activities

The simultaneous implementation of monitoring, maintenance and protection were carried out to ensure long-term survival of the trees and to achieve the energy and conservation objectives of the project. The forest protection activities were guided and supervised by the National Forest Authority, and included protection against fires, from damage by grazing animals, and from human damage. To provide the displaced population with an additional incentive to participate in activities, they were offered employment in forest maintenance activities such as weeding, slashing woodlots, pot-filling and pricking seedlings, as well as patrolling for protection.

WHAT IMPACT DID COORDINATION HAVE ON THIS PROJECT?

The Refugee Reforestation Project was headed by the National Forestry Authority (NFA), who closely collaborated with the project’s lead agency and the Ministry of Water and Environment⁴ for technical expertise. The lead agency played an important role in ensuring funding for the project and project control monitoring for accountability. Moreover, the lead agency supported district governments and key stakeholders in their specific project roles.

Through the Comprehensive Refugee Response Plan and Water and Environment Sector Response Plan, project activities were mainstreamed through coordination with all stakeholders under the project. The NFA led the project not only in managing

the finances, reporting and logistics, but by also managing the restoration of forests. Additionally, the NFA produced the tree seedlings and provided technical support to districts and stakeholder coordination. Implementing partners and Government partners, including the Office of the Prime Minister (OPM) and district governments, played an important role in coordination and oversight, including leading the community engagement process. Strategic coordination and monitoring of implementation was closely done with all relevant stakeholders. This harmonised and clear stakeholder coordination structure was important in achieving the project objectives and deliverables.

KEY ACHIEVEMENTS

- Over 10 million indigenous, fruit and fast-growing tree seedlings have been provided to refugee and host communities to increase multipurpose tree cover to restore and sustain the ongoing demand for biomass energy.
- Direct planting has restored approximately 600 hectares of degraded forest with indigenous species and bamboo, while an additional equivalent of 10,000 hectares of woodlots established in the community planting.
- Upon maturity, these plants are expected to help reduce cooking energy access challenges. In some cases, even if refugees can afford to buy firewood, there is a lack of firewood. Availability of biomass among the host community will improve access to affordable energy for refugees who have limited land to plant their own biomass.



CHALLENGES

1. Due to inadequate funding, the tree planting implementation is a major undertaking. To address this challenge, it is recommended to seek long-term strategic support from donors.
2. The project planning cycle was 12 months, but tree growing is long-term. This is a challenge in planning for the long-term needs for this project. This project should be linked to long-term strategic support from donors and therefore delinked from an annual planning cycle.
3. The onset of COVID-19 adversely affected implementation of some project activities in 2020. This setback is being addressed by adopting evolving WHO and government protocols for prevention of infection.
4. Given the large number of stakeholders involved, there was initially inadequate coordination among the partners involved in the project. Continued engagement is key, and to address this challenge the project has set up a Standard Operating Procedure (SOP) on support mechanisms to ensure effective coordination and the use of the local coordination structures to reach households.



Mango tree grafting ongoing at Masindi Nursery June 2020

LESSONS LEARNED AND RECOMMENDATIONS

1. There is far more demand for tree seedlings in the host communities than within the refugee settlements due to availability of land. The most preferred tree species in the host communities were the fast-growing exotic plantation species, as most planters were looking at future economic returns from tree planting. Future programming will therefore need to **factor in the desires of the intended beneficiaries**.
2. Monitoring is key to successful implementation of the project in order to **avoid huge deviations from standards**. A monitoring plan needs to be designed with adequate funding dedicated to it to ensure successful adherence.
3. It is important that **stakeholders harmonise their schedules and communicate regularly**.
4. Community engagement is important to **build trust and support and ensure long-term impact**. There is a need to understand the carrying capacity of land to balance supply and demand of resources and inform physical planning.
5. There is a need for **sustainable land use planning and management**. This can be done through designation of zones for residences, services, farming, woodlots, agroforestry and protection (wetlands, shorelines, greenbelts) to ensure that trees, once planted, shall not be cut down.
6. Through the project, it was identified that there is a need for **detailed mapping of existing and planned interventions to track progress and avoid losses** if the same land is targeted for multiple projects.

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⁴ Represented by the Forest Sector Support Department (FSSD)

Annex A

PARTICIPATION CHAPTER

The following are examples of useful resources on how to best conduct improved participation and Risk Communication and Community Engagement (RCCE):

1. The Community Engagement Hub hosted by the British Red Cross¹, offers a range of learning materials, tools and guidance to support humanitarian's mainstream community engagement and accountability. This hub has been updated with a Global Repository of COVID-19 IEC materials and RCCE training packages and webinars² to help equip community health workers, volunteers, partners and humanitarians around the world.
2. Through work during the Ebola and Zika outbreaks, OXFAM has learnt the best way to respond to virus outbreaks is to build trust, understand communities' perspectives and work with communities. OXFAM developed a set of resources³ for community engagement during the COVID-19 pandemic that captures good practices for community engagements when access may be restricted.
3. CARE published a policy brief, "Gender implications of COVID-19 outbreaks in development and humanitarian settings"⁴ and adapted its Rapid Gender Analysis toolkit to develop the Global Rapid Gender Analysis on COVID-19⁵ report, conducted in consultation with the International Rescue Committee (IRC). This report aims to deepen the current gender analysis available by encompassing learning from global gender data available for the COVID-19 public health emergency.
4. NRC conducted a desk review, "Engaging Communities during a Pandemic"⁶ to identify best practices and lessons learnt from community engagement efforts during COVID-19.
5. Capitalizing on previous research⁷, NRC developed the Community Coordination Toolbox⁸, a repository of tools to support displaced populations in creating systems for meaningful and inclusive participation with a particular focus on women and marginalized groups.

Annex B

CAPACITY BUILDING CHAPTER

1. The Global Shelter Cluster page on Somaliland includes recent documents and links to maps. Additional information available at: <https://www.sheltercluster.org/hub/somaliland>
2. The Referral and Escalation System (RES) in the Yemen case study is not accessible externally, however the Referral and Escalation Platform is accessible at: <https://rescccm.org/ReferralActions.aspx?id=612>
3. The UNHCR Operational Portal tracks current statistics on the response in Bangladesh as well as providing a library of documents and reports at https://data2.unhcr.org/en/situations/myanmar_refugees
4. Beyond Bentiu Response in South Sudan publishes maps of humanitarian services (as in this example from October 2019): <https://reliefweb.int/report/south-sudan/south-sudan-beyond-bentiu-response-bbr-humanitarian-service-map-october-2019>

¹ <https://communityengagementhub.org/>

² <https://www.communityengagementhub.org/what-we-do/novel-coronavirus>

³ <https://oxfamilibrary.openrepository.com/handle/10546/620977>

⁴ <https://insights.careinternational.org.uk/publications/gender-implications-of-covid-19-outbreaks-in-development-and-humanitarian-settings#:~:text=The%20paper%20explores%20a%20range,likely%20to%20be%20engaged%20in>

⁵ <https://insights.careinternational.org.uk/publications/global-rapid-gender-analysis-for-covid-19>

⁶ <https://womenin displacement.org/node/305>

⁷ <https://womenin displacement.org/node/203>

⁸ <https://cct.nrc.no/chapter/1>

Annex C

CAMP MANAGEMENT & COORDINATION CHAPTER

1. The Norwegian Refugee Council's Case Study for Cash-Based Owner-Driven Shelter Response in Baidoa can be accessed here: <https://www.nrc.no/globalassets/pdf/reports/durable-solutions-in-somalia-case-study/case-study---early-solution-project-baidoa-20200228.pdf>
2. OCHA Nigeria's website provides overview information about the humanitarian response in Nigeria at <https://www.unocha.org/nigeria/about-ocha-nigeria#:~:text=The%20number%20of%20people%20in,people%20among%20the%20most%20vulnerable>.
3. African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention), <https://www.unhcr.org/about-us/background/4ae9bede9/african-union-convention-protection-assistance-internally-displaced-persons.html>
4. The London School of Hygiene and Tropical Medicine provided a report using satellite imagery to estimate population mortality. The paper, Excess mortality during the COVID-19 pandemic in Aden governorate, Yemen: a geo-spatial and statistical analysis, 29 Oct 2020 can be found at: <https://reliefweb.int/report/yemen/excess-mortality-during-covid-19-pandemic-aden-governorate-yemen-geospatial-and>

Annex D

ENVIRONMENT AND SUSTAINABILITY CHAPTER

1. Energy in situations of displacement. Global Plan of Action for Sustainable Energy Solutions in Situations of Displacement (GPA). Moving Energy Initiative. https://unitar.org/sites/default/files/media/file/presentation_gpa_launch_glada.pdf
2. Global Strategy for Sustainable Energy: A UNHCR Strategy 2019 – 2024. UNHCR. <https://cms.emergency.unhcr.org/documents/11982/39956/UNHCR+Global+Strategy+for+Sustainable+Energy%2C+2019-2024/b803fc32-9c29-447a-8edc-772c86ba2217>
3. Global Estimates 2015: People displaced by disasters. IDMC. <https://www.internal-displacement.org/publications/global-estimates-2015-people-displaced-by-disasters>
4. Sphere Thematic Sheet 1: Reducing environmental impact in humanitarian response. Sphere. <https://spherestandards.org/wp-content/uploads/Sphere-thematic-sheet-environment-EN.pdf>
5. Core Humanitarian Standard: The Nine Commitments. CHS Alliance. <https://corehumanitarianstandard.org/files/files/CHS%20Nine%20Commitments%20posters%20English.pdf>
6. Nexus Environmental Assessment Tool (NEAT+). Environmental Emergencies Centre. <https://eecentre.org/resources/neat/>
7. Camp Coordination and Camp Management (CCCM): Key environmental issues linked to camp coordination and camp management. EHA Connect. <https://ehaconnect.org/clusters/camp-coordination-and-camp-management-cccm/>
8. Connectivity, Clean Energy and Sustainability Working Group. Global CCCM Cluster. <https://cccmcluster.org/global/Connectivity-Sustainability-and-Clean-Energy-Working-Group>



www.cccmcluster.org