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UNHCR

United Nations High Commissioner for Refugees
Haut Commissariat des Nations Unies pour les réfugiés

Gender Concerns – The Refugee Crisis in Niger

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Due to conflict in north-eastern Mali, particularly in areas in close proximity to Niger, significant numbers of persons have fled south across the border and are situated in refugee sites north of the Nigerien capital Niamey. The conflict stems from the Tuareg rebel group, the National Movement for the Liberation of Azawad (MNLA) attacking civilian locations in Mali in early 2012. This insecurity was compounded by an absence of security from the Malian Government. While the majority of the displaced are Malian, some are Nigeriens that have been living in Mali for many years. This is representative of what is a nomadic culture where movement across this particular border has historically been fluid.

The context is extremely challenging; an unstable security environment, the wider issue of food shortages across the Sahel region and a humanitarian caseload comprised of different ethnic groups, some which reside in isolated areas close to the border and the original point of flight and insecurity. It is also a humanitarian situation in its infancy. Knowledge, understanding and experience of the caseload is (at this stage) limited. Women and children constitute a significant proportion of the refugees and their needs are of particular concern. Early indications suggest understanding specific gender issues of concern will not be easy with some evidence of a closed and patriarchal culture. The challenge for humanitarian actors will be to determine the existing and (prior to their displacement) pre-existing vulnerabilities. Particularly vulnerable categories include unaccompanied children, single women, female headed households and the elderly.

In an effort to address these concerns to ensure equal access and benefit for all persons, UNHCR recommends these three immediate steps.

A	<u>Assess</u> Needs – At the forefront of the humanitarian response <i>must</i> be the recognition that the needs of women, girls, boys and men are different. Immediate tangible steps include ensuring women are part of any assessment team and/or refugee committee coupled with a consistent effort to ensure the needs of the particularly vulnerable are considered and suitably assessed.
B	<u>Be</u> Alert – to the specific risks facing women and girls and other vulnerable groups. Efforts needed to understand the risks before their displacement, during their flight and in their current situation. Measures must be made to mitigate these risks to ensure their safety and security. Immediate concerns include ensuring women and girls living alone and/or without male companionship are provided with safe spaces in refugee sites from non-relative men, safe travel in the event of relocation and equitable access to all the necessary humanitarian assistance in dignity.

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C	Collect data by sex, age and vulnerability. Specific efforts are already underway to collect a certain amount of disaggregated data, which includes male/female breakdown, five different age groups and some vulnerability categories. This data will be of significant use to target particular vulnerabilities.
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KEY GENDER MESSAGES

1. Equal Access to Humanitarian Assistance:

Humanitarian assistance has to ensure equitable inclusion and support for the female population. Assistance needs to prioritise women as recipients of assistance, despite some initial evidence of patriarchal structures. Female-headed households, as well as other persons with specific needs, have to be identified and protected. Inclusive balanced with culturally acceptable methods to determine the needs and deliver the assistance need to be put in place. This should include the participation of women, as well as men, as key partners. The varied ethnic groups and locations mean that each site must be understood in terms of its individual specificities. Humanitarian actors must avoid the assumption that a one size fits all approach will meet all the needs, particularly for the more vulnerable. Meaningful participation of women will likely be a significant challenge but if achieved, can aid their access to assistance and protection. Building on the methodology adopted during the rapid protection assessment, creating female focus groups may serve as a useful point of entry.

2. Prevention, Identification and Reporting of Sexual Gender Based Violence (SGBV):

There is a need to put SGBV prevention and response mechanisms in place. Initial efforts should concentrate on sensitization of the refugee community in a culturally appropriate way about all forms of SGBV and the availability of services. In light of the traditional structures and the role and position of women, efforts must be made to explore ways to cooperate with medical partners and/or local health centre. Baseline data should be obtained and where possible individual consent for personal data should be pursued. Given the particularities of the displacement and the culture, community-based reporting and response mechanisms will need to be put in place. Both will require significant collaboration with a suitable partner, whose capacity may require enhancing through training and close collaboration with relevant actors.

3. Health:

The health of the displaced is a major concern. The priority is primary and emergency health care. All persons of concern will require access to free primary health care at UNHCR/implementing partner managed health facilities. In addition, a referral system for access to secondary and tertiary health care is required. In particular the nutrition of children and pregnant women is a major concern. Nutrition and food security programmes are being established, taking into account the wider ongoing Sahel food crisis response. Community based health, HIV, hygiene and nutrition promotion will also need to be integrated into the overall response, linking these to other sectors such as food distribution, water and sanitation and camp management.

4. Data Disaggregation:

Level One registration started February 24 and is ongoing. Data is being disaggregated by age and sex, family size, place of habitual origin and age. In addition five categories of vulnerability are being collected. While this data will be of significant use in targeting particular vulnerabilities it will need to be supplemented with more specific assessments, in particular a Level Two registration planned for May.

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KEY HUMANITARIAN FACTS AND FIGURES

- Conflict and insecurity-driven displacement; most recent data states that the total humanitarian caseload being 4686 families (24953 individuals).¹ Data remains fluid, in part due to new arrivals from Mali. Females constitute more than 50 per cent of the caseload.
- Four confirmed key refugee sites spread along the Niger Mali border. Sites are dispersed with some particularly isolated, difficult to access locations that are in close proximity to the border. Two sites have been identified by the Government in view of the relocation of refugees further away from the border; site preparations are underway.
- The decision to relocate refugees situated close to the border is met with great reluctance, as voiced by male refugee leaders, who wish to remain close to their places of habitual origin, symptomatic of the apparent influence of a minority of (wealthy) refugees across the caseload.
- Priority needs include all basic ones, while longer term needs include education and livelihood support.
- Historically the aid community in Niger (national and international) has been development and internal displacement centric as opposed to refugee focussed relief. This poses a significant challenge in terms of in-country capacity to meet the more immediate humanitarian needs of the caseload.²

ERT/UNHCR Niamey

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¹ Data source is the Commission Nationale d'Eligibilité (CNE), UNHCR & CADEV as of 8th March 2012. Figures include Nigeriens that have also fled Mali.

² Prior to the recent crisis UNHCR had one staff member based in Niger.