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## Disaster relief emergency fund (DREF) Tanzania: Refugee Repatriation

 International Federation  
of Red Cross and Red Crescent Societies

### DREF operation n° MDRTZ014

9 July 2012

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

**CHF 70,222 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the Tanzania Red Cross National Society (TRCNS) in delivering immediate assistance to approximately 38,000 Burundian refugees who will be repatriated following a decision made by the Government of Tanzania to Burundi starting 7 July until mid December 2012. TRCNS operation is initially planned to be completed in four months. Unearmarked funds to repay DREF are encouraged.**



**Burundian refugees boarding a truck ready for repatriation (Photo/TRCS)**

**Summary:** Tanzania has hosted refugees from the great lakes countries since 1930s. From 1993 to date, it has been host to hundreds of thousands of Rwandese, Burundian and Congolese refugees. Currently, there remains about 40,000 Burundian refugees and 60,000 Congolese refugees from the Democratic Republic of Congo (DRC). TRCNS offers comprehensive health care services (preventive and curative) to refugees and host communities. During refugee repatriation, the National Society is responsible for conducting pre-departure medical screening of returnees, provision of drugs to chronically ill patients (three months stock), escorting refugees including the sick to their countries of origin and handing over drugs to the health agencies of the receiving country.

Following the decision of the Government of Tanzania to repatriate the refugees, a series of tripartite meetings between the Governments of Tanzania, Burundi and the United Nations Humanitarian Commissioner for refugees (UNHCR), it has been concluded that by 31 December 2012, all Burundian refugees still in the camps have to be facilitated for a safe and dignified return to their country of origin. The repatriation starts in July 2012. However, despite the planned repatriation, TRCNS identified gaps in the planned services by the government and other aid agencies to be provided to the refugees till they reach the border. Those unmet needs are within the mandate of TRCNS. Hence this intervention was planned to address needs that are not planned for by other actors, and to fill expected gaps in the humanitarian services.

TRCNS requests the support of IFRC to cover for some of the activities planned for implementation during the repatriation of 38,000 Burundian refugees between July and December 2012.

This operation is expected to be implemented over four months, and will therefore be completed by 31 October, 2012; a Final Report will be made available three months after the end of the operation (by 31 January, 2013).

[<click here for the DREF budget; here for contact details; here to view the map of the operation area>](#)

## The situation

Historically, Tanzania has hosted refugees in the great lakes since 1930s, because of civil unrests and political differences, causing civilians to flee their countries for safety in other countries.

After the killing of the Burundian President Ndadaye in October 1993, followed by the Rwandan Genocide in 1994, Tanzania was able to receive more than half a million refugees, in Ngara, Karagwe, Biharamulo, Kasulu and Kibondo districts, overwhelming the local populations in the areas.

Tanzania Red Cross was the first humanitarian organization to act fast in handling the refugees in Ngara at that time (1994). Because of the huge influx, TRCNS requested support through the International Federation (IFRC) and other international organizations.

With the support from IFRC, TRCS was able to implement and manage activities in Benaco and Lukole camps and participated in the return of the Rwandese in 1996, the Burundians of Lukole camp in 2007 and Lugufu Congolese Camp in 2008.

The Government of Tanzania decided to repatriate the Burundian refugees and close the camp. Refugees were advised to return on their own, so far according ICRC information in the camp, only few families returned voluntarily. Tanzania Government has already mobilized about 800 security personnel to ensure the repatriation will take place even by force if needed. However, screening was done to identify people who need special protection and couldn't be repatriated. The Burundi government welcomed the decision of Tanzania Government to repatriate the refugees back home. Unfortunately, both governments are not able to mobilize necessary resources and take responsibility for providing humanitarian needs to the refugees. Both governments called upon humanitarian partners and the relevant National Societies to support the process. TRCS identified gaps in the planned services to be provided by the government and other aid agencies especially in provision of health services as well as the water and hygiene promotion. Hence, this proposed intervention has been suggested. Moreover, it was not possible to secure funding from donors or from on going operations in the area. The DREF is designed to help cover the needs of the refugees whether they voluntarily leave the camp for Burundi, or they are forcibly repatriated.

On the other side of the border, Burundi Red Cross (BRC) has been engaged in various coordination mechanisms and meetings with government, UNHCR and other agencies to prepare for receiving the returnees from Tanzania. BRC is in the process of finalizing its response engagement along its mandate and based on actual gaps in planned services by government and other aid agencies.

Both TRCNS and BRC coordinated with regard to the transfer of medical records of chronically ill people, minors and other people with special needs.

### **Burundian Repatriation 2012**

A series of tripartite meetings between the Governments of Tanzania, Burundi and UNHCR, has concluded; a safe and dignified return of Burundian refugees to their country of origin will be ensured. All Burundians in refugee camps in the western corridor in Tanzania have been requested to repatriate before the end of this year. There has been significant repatriation of Burundians in the Kibondo Camps and Congolese in Lugufu Camps over the past years.

The repatriation for the present caseload of more than 38,000 Burundian refugees in Mtabila I and Mtabila II camps is now planned to commence in July and end by 31 December 2012.

Tanzania Red Cross is operational in both camps – Mtabila (Burundians) and Nyarugusu (Congolese). It provides comprehensive healthcare services to the refugees and host communities.

During repatriation, TRCNS is the responsible agency for conducting medical screening of returnees, provision of drugs to chronically ill patients (three months stock), escorting refugees and the sick to the countries of origin and handing over drugs to the health agencies of their country of origin. On the way to the borders, the refugees will need temporary shelter as they spend few nights before crossing the borders and completing processing of their papers at respective borders.

All these activities require funds for efficient and effective management of returnees with safety and dignity. The overall goal is safe and dignified return of Burundian refugees to their country of origin.

## Coordination and partnerships

UNHCR and the Ministry of Home Affairs (MHA) are the overall coordinators of the refugee relief programme. MHA plays a vital role of providing security for refugees and Non Governmental Organization (NGO) personnel. The World Food Programme (WFP) has a mandate of mobilizing funds, procuring, and pre-positioning food items for general distribution in the camps.

The United Nations Children's Fund (UNICEF) focuses on capacity building for all health staff engaged in provision of mother and child health services and supplies all vaccines for immunization, medications for prevention of risk factors in pregnancy, and provision of some life-saving equipment for children aged under five years.

The Tanzania Red Cross Society partners with PNS including American and Spanish Red Cross societies as well as other partners in the implementation of refugee programme activities.

Spanish Red Cross is the recipient of the Commission's European Community Humanitarian Office (ECHO) funding for TRCNS interventions in the refugee programme (provision of comprehensive health services). They also provide technical assistance with health, finance and administration personnel either based at the Red Cross compounds at the camps, Kigoma Logistics Support Base or at TRCNS headquarters in Dar es Salaam.

TRCS uses some vehicles leased through IFRC. Capacity building in terms of trainings has also been facilitated by IFRC from time to time. TRCNS collaborates with the International Committee of the Red Cross (ICRC) in carrying out tracing and family reunification activities in and out of the camps.

The International Rescue Committee (IRC) undertakes camp management and community services functions in Mtabila Burundian camps. The Tanzania Water and Environmental Sanitation (TWESA) provides water and sanitation services to the Burundian refugees in Mtabila camps.

## Red Cross and Red Crescent action

Tanzania Red Cross National Society (TRCNS) in collaboration with its partners has been providing services in the refugee camps specifically curative and preventive health, nutrition, water and sanitation services. In refugee repatriation process, TRCNS will be responsible for pre-departure medical screening, departure screening and ambulance escorts of the repatriation convoys from the refugee camp up to the border point of the receiving country.

Curative services include out patient department (OPD), in patient department (IPD), surgical procedures and laboratory services. Preventive services focus on reproductive health including family planning, Expanded Programme on Immunization (EPI), Prevention of Mother to Child Transmission of HIV (PMTCT), Home Based Care (HBC) as well as and curative and preventive nutrition services. All these services given to the refugees also benefit Tanzanians from the host communities in vicinity of the camps.

## The needs

### Temporary shelter needs

#### *Tarpaulins/plastic sheets, poles and nails*

In the event of a forced repatriation, the refugees will not be able to cover the distance between the camp and Burundi on foot in one go: they will need to stop at resting points along the way. Therefore, during the repatriation, several stops are made at identified sites for a short rest. The size of an average convoy of refugees is not determined by IOM, which is providing the transport service, but the NS expects no less than 300 families to be moved at once in each convoy. Moreover, tarpaulins/plastic sheets, poles and nails will be required for constructing temporary first aid shelters at the sites.

#### *Bottled drinking water*

Repatriation is a mass movement involving a diverse group of people. Children under five years, pregnant and lactating women, the elderly and the sick; all these people will be travelling in convoys during the repatriation. Bottled drinking water will be an essential requirement for the returnees' health during

repatriation. Two half-litre bottles of pure drinking water per returnee will be adequate for transiting from the camp to the border.

#### *First aid kits*

First aid kits will be required for emergency health during the repatriation.

#### *IEC materials and visibility materials*

This population movement is an important event which requires adequate information, education and communication. Visibility of the Red Cross Movement is equally important during this operation.

It is anticipated that approximately 10,000 leaflets will be required for 6,330 families anticipated to repatriate. The leaflets will carry information/educative messages to the refugees on how to stay healthy during repatriation. There will be four types of leaflets covering prevention messages on HIV/AIDS, Malaria, Pneumonia, and hygiene promotion messages.

Red Cross branded T-shirts, bibs and flags will be procured and distributed to the National Society staff and volunteers for visibility purposes.

#### *Monitoring and supervision costs*

The Programme Manager will be making frequent visits to the field to monitor repatriation activities and some health staff/volunteers will have to escort all the convoys/the chronically ill patients up to the border and official handover will be done to the health agency responsible for health services in Burundi.

In case of delays that may compel the team to stay over night; some per diems/allowances will be required for the health staff/volunteers. A total number of 84 convoys are expected to take place.

#### *Fuel*

Fuel will be used to support the movement of some items from Ngaraganza living compound to Kigoma and/or Nyarugusu at the same time enabling the generators to provide security lights in the living compound. Lubricants will be required for servicing vehicles and the generator in the compound.

## The proposed operation

### Emergency shelter

**Outcome: The immediate shelter needs of the 38,000 returning refugees at way stations are met.**

Outputs	Activities planned:
<ul style="list-style-type: none"> <li>Emergency shelter assistance is provided to 38,000 returning refugees</li> </ul>	<ul style="list-style-type: none"> <li>Construct emergency shelters (300 temporary shelters) where refugees may stay overnight on the way to the borders.</li> <li>Construct temporary first aid shelters at three way stations</li> </ul>

### Emergency health

**Outcome: Refugees have access to immediate health and care assistance**

Outputs	Activities planned:
<ul style="list-style-type: none"> <li>Immediate First Aid is provided to the returning refugees during repatriation.</li> </ul>	<ul style="list-style-type: none"> <li>Procure 100 First Aid kits, to-go-with medical stocks for three months to chronically ill persons, and personal protective equipment for staff and volunteers to use during response.</li> <li>Provide First Aid to the returning refugees both on transit and at the way stations</li> </ul>

### Water, sanitation, and hygiene promotion

**Outcome: Returning refugees have access to safe drinking water**

Outputs	Activities planned:
<ul style="list-style-type: none"> <li>The most vulnerable returning refugees are provided with bottled and safe water for drinking on transit during repatriation.</li> </ul>	<ul style="list-style-type: none"> <li>Procure and distribute 68,400 bottled water (0.5 litres) for 11,400 (30%) most vulnerable returnees</li> </ul>

## Logistics

Outcome: Efficient and effective logistical support to run the refugee operation	
Outputs	Activities planned:
<ul style="list-style-type: none"><li>Coordinated delivery of relief items, ensuring proper transport and storage</li></ul>	<ul style="list-style-type: none"><li>Mobilization of staff/volunteers for returnees screening and escorts</li><li>Maintain an optimal number of vehicles to support movement of staff/volunteers and emergency items during the operation</li><li>Vehicles fuelled and serviced</li><li>Procurement, storing and dispatching of medical and other items required for the operation</li><li>Ensure logistics procedures are followed/adhered to during movement of items/materials and people</li></ul>

## Communications

Outcome: Refugees and host communities have access to timely and relevant information on health issues as well as on progress of refugee operation	
Outputs:	Activities planned
<ul style="list-style-type: none"><li>A steady flow of timely and accurate information between relevant stakeholders on the population movement is shared</li></ul>	<ul style="list-style-type: none"><li>Print 10,000 leaflets on how to stay healthy during repatriation (Prevention of HIV/AIDS, Malaria, Pneumonia, and hygiene promotion messages)</li><li>Procure and print T-shirts and Bibs for Red Cross visibility during repatriation of refugees</li><li>Support operation teams to ensure consistent and two-way engagement with beneficiaries to ensure greater accountability to affected communities.</li></ul>

## Contact information

### For further information specifically related to this operation please contact:

- In Tanzania:** Tanzania Red Cross National Society (Mr. Joseph Kimaryo, Disaster Management Director), phone: +255 713.325.042; email: [utouh2009@yahoo.com](mailto:utouh2009@yahoo.com)
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### For Performance and Accountability (planning, monitoring, evaluation and reporting)

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## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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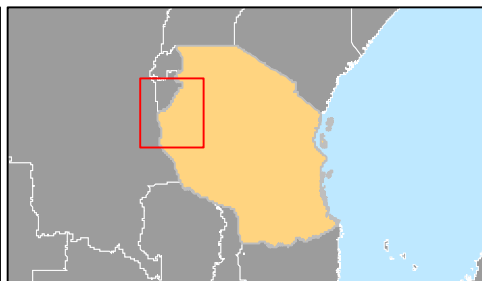
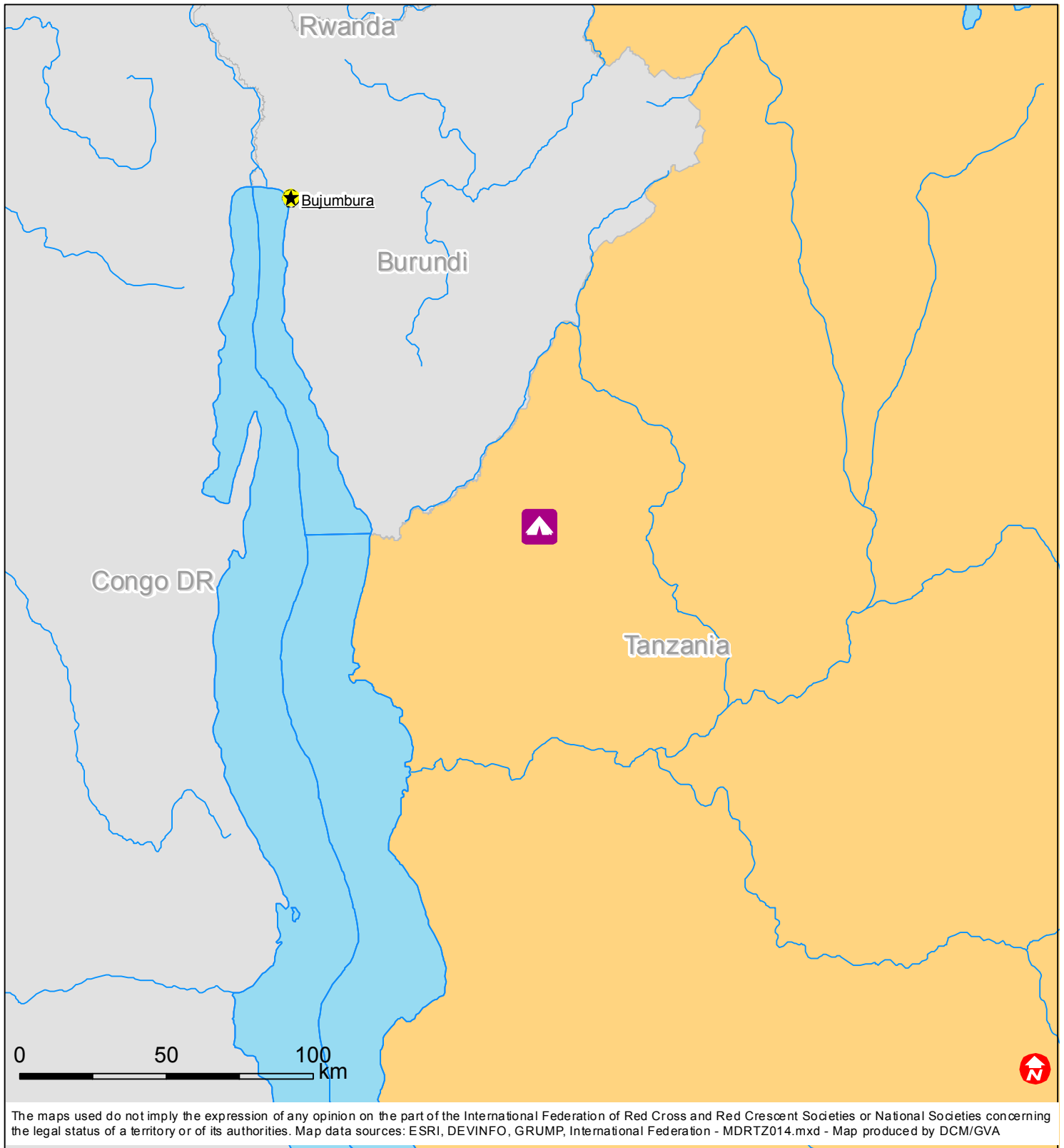


The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
  2. Enable healthy and safe living.
  3. Promote social inclusion and a culture of non-violence and peace.
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# Tanzania: Population movements



Mtabila refugee camp

# DREF OPERATION

27/06/2012

## APPEAL REFUGEES REPATRIATION

Budget Group	DREF Grant Budget CHF
Shelter - Relief	6,467
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction - Materials	227
Clothing & Textiles	0
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	27,360
Medical & First Aid	3,333
Teaching Materials	5,333
Utensils & Tools	0
Other Supplies & Services	0
Cash Disbursements	0
<b>Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES</b>	<b>42,720</b>
Land & Buildings	0
Vehicles	0
Computer & Telecom Equipment	0
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
<b>Total LAND, VEHICLES AND EQUIPMENT</b>	<b>0</b>
Storage, Warehousing	
Distribution & Monitoring	5,000
Transport & Vehicle Costs	4,000
Logistics Services	0
<b>Total LOGISTICS, TRANSPORT AND STORAGE</b>	<b>9,000</b>
International Staff	0
National Staff	0
National Society Staff	0
Volunteers	4,333
<b>Total PERSONNEL</b>	<b>4,333</b>
Consultants	0
Professional Fees	0
<b>Total CONSULTANTS &amp; PROFESSIONAL FEES</b>	<b>0</b>
Workshops & Training	0
<b>Total WORKSHOP &amp; TRAINING</b>	<b>0</b>
Travel	0
Information & Public Relations	5,633
Office Costs	1,750
Communications	1,000
Financial Charges	500
Other General Expenses	500
Shared Office and Services Costs	500
<b>Total GENERAL EXPENDITURES</b>	<b>9,883</b>
Partner National Societies	0
Other Partners (NGOs, UN, other)	0
<b>Total TRANSFER TO PARTNERS</b>	<b>0</b>
Programme and Services Support Recovery	4,286
<b>Total INDIRECT COSTS</b>	<b>4,286</b>
<b>TOTAL BUDGET</b>	<b>70,223</b>