IN OUR OWN WORDS

Perspectives from local actors in the Horn, East,
and Central Africa

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Oxfam is committed to supporting the participation of local actors in humanitarian and development responses. This includes ensuring their opinions and perspectives about priorities, needs, and appropriate ways of addressing issues are part of public debate. Oxfam advocates for their presence and participation in coordination meetings and other spaces for decision-making. We also provide support to local actors to write and publish their opinions and perspectives. This paper is a compilation of eight opinion pieces written by local actors in the Horn, East, and Central Africa region, with editing and publishing support from Oxfam.

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For further information on the issues raised in this paper please email advocacy@oxfaminternational.org

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Front cover photo: Internally displaced persons (IDPs) at a camp in Bunia, Democratic Republic of the Congo. Photo by John Wessels/Oxfam.

Back cover photo: Zakaria Mohamed, Oxfam Public Health Promotion Officer, and Cambaro Cali, a displaced woman, discussing the drought challenges in Karasharka IDP camp. Photo by Pablo Tosco/Oxfam.

INTRODUCTION

In the Horn, East, and Central Africa (HECA), public discourse about social, political, economic, and humanitarian challenges in the region is too often dominated by people with power—UN agencies, INGOs, and government officials, usually men. The voices of women, refugees and displaced people, people living in poverty or affected by crises, and other vulnerable communities are often marginalized in debates and decision-making about solutions.

In August 2020, Oxfam's HECA regional office initiated a program to support local actors from across the region to write and publish opinion pieces. The objective was to counter Western narratives about a range of issues and help efforts to diversify the voices contributing to key humanitarian debates. The program also sought to equip diverse individuals with improved writing skills and the confidence to write and publish their views.

THE PROCESS

Effectively supporting local actors and marginalized people to raise their voices and speak for themselves about issues that affect them can be time-consuming. Recognizing the gap in Oxfam's ability to consistently support writing by local actors, Oxfam recruited a writing coach who provided individualized support to a group of local actors over a period of two months. Her role was to coach, review, and edit draft pieces to be ready for publication. Communications and advocacy staff at Oxfam provided additional feedback on some articles and support to pitch the articles to various media outlets.

The writing coach usually received an initial draft piece. She reviewed it and then scheduled a phone call with the writer to understand the goals of the piece and the writer's personal background, so that she could best advise on how to flesh out the story. She then shared written feedback as well as tips on a variety of elements, including gathering testimonies, improving structure, adding a human angle, reducing jargon, and making headlines catchier. Back-and-forth continued between the writing coach and the authors until the pieces were finalized and ready to submit for publication.

THE PRODUCTS

The pieces cover a range of topics. Ahmed Mohamed of Save Somali Women and Children writes about the lack of coordination among international NGOs when assessing the capacity of organizations before they can provide support and funds. He highlights the time spent by his organization responding to repeated similar queries, the fact that the assessments are not shared, and that there is no support provided to address any identified weaknesses. He calls for assessments to be shared and used to inform capacity-strengthening, based on the needs of an individual organization, and for INGOs to coordinate and standardize their assessments.

Christine Ogutu of the Center for Rights, Education and Awareness (CREAW) and Wangu Kanja of the Wangu Kanja Foundation (WKF) describe the rise in Kenya in incidents of gender-based violence in the context of COVID-19, which they attribute to the fact that women and girls are stuck at home and cut off

from support networks and services. WKF has set up a real-time mobile application where survivors can report incidents of abuse and get referrals to service providers, and is also providing cash transfers to survivors of gender-based violence to help them build resilience and increase their decision-making power. Ogutu and Kanja call on others to help address the gap in safe houses, to increase cash transfers to vulnerable households, and to ensure accountability for perpetrators of abuse.

Grâce Wani lives in the Eastern Democratic Republic of the Congo (DRC), where thousands have been displaced due to conflict. She shares her conversations with two women living in an internally displaced persons (IDP) camp, who, in addition to their displacement, Ebola, and poverty, are confronting challenges linked to COVID-19. They are concerned about the absence of running water and congestion within the IDP camp that is increasing as armed groups continue their attacks.

Ritah Nansereko, Executive Director of Ugandan humanitarian and development organization African Women and Youth Action for Development, writes of the important role that local organizations and leaders play as first responders when disasters hit. She narrates the role her organization played in encouraging and supporting the Ugandan government to establish a new settlement for South Sudanese refugees and calls for rhetoric around localization to translate into action. Specifically, she asks INGOs to increase their support for local actors, provide flexible funding, and to meaningfully engage local groups in planning response programs.

The writing coach supported four South Sudanese refugees living in Uganda to write about their concerns and recommendations for the refugee response. John Jal Dak writes about the food insecurity faced by refugees, particularly since the World Food Programme reduced refugee food rations in March 2020, just as COVID-19 was starting to become a concern in Uganda. His organization is playing an important role not only in supporting food distributions, but also in communicating with and explaining to refugees that rations have been cut. From his vantage point on the frontlines of seeing and responding to refugees' food concerns, he recommends more support—especially access to land—so that refugees can be more self-reliant and contribute to feeding themselves.

Kuol Arou Kuolnuer is concerned about the spread of COVID-19 in the refugee settlement where he lives, particularly as health services were so limited even before the pandemic. He tells the painful story of a two-year-old girl who died without receiving adequate medical attention, and her mother, who was left to bury her without clarity about why her daughter had died. He describes the fear of refugees who know that if they get sick, they will not get the healthcare they need.

Moses Sakondo also highlights challenges related to the COVID-19 context. He tells the stories of two teenage refugee girls who, despite their young age, are heads of household and caring for multiple siblings. For them, school was a sanctuary, the only place they could put aside the many burdens they carry. Now, Moses and his organization are working to create outlets for children while schools are closed due to the pandemic and to help counter some of the negative impacts of school closures. He calls for more support to address the needs of refugee children.

Simon Marot Touloung left South Sudan when he was eight years old. In Uganda, he discovered the power of sports to address trauma and bring

people together. He writes about how football has helped heal the ethnic fractures among South Sudanese youth, by creating a space where they see each other as teammates, brothers, and sisters.

OUR COMMITMENT

The pieces convey the sentiments and views of people who are personally impacted by the issues they write about. Indeed, it is difficult to question their perspectives, and to not also be moved or inspired to help take forward their recommendations.

Hearing from local actors is critical for national and global debates. Oxfam is committed to finding additional ways to support the words and writing of local actors, so that their perspectives can better influence policies, planning, and priorities for humanitarian and development responses.

SOMALIA: LOCALIZATION AND CAPACITY ASSESSMENT SHOULD GO HAND IN HAND

By Ahmed Mohamed. Originally published by Devex.¹

Ahmed Mohamed is the deputy director and head of programs at Save Somali Women and Children, a national NGO that has been supporting Somali women and girls for nearly three decades.

A year after the collapse of the Somali government and the outbreak of civil war in 1992, a group of Somali women intellectuals from a cross-section of the community came together to create the organization that I work for today, Save Somali Women and Children. Their aim was to provide hands-on support to women who were facing violence, living in poverty, and marginalized by society.

In the long term, their vision was to contribute to the establishment of a Somalia that is united, peaceful, human-centered, and genuinely democratic. Thirty years later, we are still working towards the achievement of these broader goals, but the organization has implemented a myriad of projects, from supporting women to get into leadership roles and ensuring that their perspectives influence policies and legislation, to hands-on interventions, including supporting women to start and run their own businesses, giving them cash assistance during emergencies, and so on. This has not been without its ups and downs.

As head of programs, one of my main frustrations has been the lack of coordination among international NGOs when assessing the capacity of organizations like mine before they can provide support and funds.

Assessing the capacity of national and local NGOs is a critical part of the relationship between INGOs and us. It cannot be overlooked. But I do believe that it can be done differently.

Between 2019 and 2020, my organization has been involved in seven assessments, and the figure would be higher had the year not been interrupted by COVID-19 restrictions. With no coordination among INGOs, these assessments covered over 90% of the same content. We are engaged in endless interviews that could be streamlined and make the humanitarian sector more efficient. This would not only save money but also a lot of precious time for everyone involved.

We all agree that improving the capacities of local actors is vital in order for us to be able to respond fast and well in times of humanitarian crisis. It also helps ensure better quality data collection, analysis, and reporting. But at times these assessments feel more like a risk-management exercise rather than a real attempt to increase the capacity of local and national NGOs. In my experience, INGOs seldom follow up on the recommendations that we give them during these assessments.

“...one of my main frustrations has been the lack of coordination among international NGOs when assessing the capacity of organizations like mine before they can provide support and funds.”

Furthermore, they do not share the reports that they produce afterward. Of the seven assessments SSWC has been involved in in the past 18 months, we have only received the results from one organization. I believe that it is fundamental that INGOs come together in a coordinated way to share information and resources amongst each other, and also with us.

And we need to go a step further. The data gathered from these assessments must actually be used to inform the capacity-strengthening programs that are rolled out. The way that capacity assessments are currently conducted means that often blanket assessments are done without enough consideration of the individual organization's needs.

Six steps INGOs must take for more effective capacity assessment of local actors

- Commit to the coordination and standardization of capacity assessments for local and national actors.
- Establish a task force that is mandated to push and develop the standard capacity assessment tool.
- Develop strategic partnerships with national NGOs that are long term.
- Facilitate and plan a smooth and sustainable power transfer to local and national actors.
- Support coordinated and systematic development plans for national and local actors.
- Advocate for coordinated capacity support based on accurate assessment of needs.

We were recently invited to a human resource management training alongside other local actors. As local and national organizations, we were all lumped together in the same training. But in my opinion, not everyone in the room had gaps in HR management and they could have benefited from a very different type of training. But when local and national groups try to raise these issues, they are accused of not being serious or even worse, of being ungrateful and biting the hand that feeds them.

Ahmed Mohamed attending a capacity-building training. Photo Credit: SSWC.

This kind of unequal relationship needs to change. Over the past few years, much noise has been made in the humanitarian community about building more efficient relationships between international and local actors and changing the balance of power. This has led to a number of international agreements that commit to increasing funding and partnerships that promote more locally-led humanitarian responses. These include The Grand Bargain, the Agenda for Humanity, and the Charter for Change.

“Going forward, all international NGOs must use a standard partnership and capacity assessment tool to assess local actors.”

While these agreements provide the initial stimulus toward the realization of a more inclusive and effective humanitarian system, the next steps in attaining the goal of making principled humanitarian action as local as possible in the Somali context would require all humanitarian actors—international, regional, national, and local—operating in Somalia to develop strategies and activities that support the localization agenda.

Going forward, all international NGOs must use a standard partnership and capacity assessment tool to assess local actors. This will enhance the categorization of local partners into different classes for ease of creating training and development plans. With the recognition and approval of the harmonized capacity and partnership assessment tools by all INGOs, the strengthening of capacities of local actors will be continuous and systematic and not repetitive nor blanket. This will be a solid basis for a graduation model that is agreed upon by all the actors.

Furthermore, INGOs must commit to being more open, both with each other and with local partners. The results of assessment reports should be shared with the organization being assessed. In addition, the recommendations of local and national NGOs must shape the kind of capacity-building programs that are developed.

The good news is that some of this work is already underway. Almost all of the country directors of international NGOs in the Somali NGO Consortium have blessed the move to harmonize the capacity and partnership assessment tool in the country. They have nominated a representative in a task force to discuss the process.

There will be challenges no doubt. Some international NGOs may not be able to participate in the process if they do not get buy-in from their headquarters. In addition, it is likely to take time for the technical task force to develop new frameworks and tools. Another challenge is that different international NGOs have different focus areas—child protection, health, cash programming, and so on, which will not allow 100% harmonization of partnership and assessment tools. But I believe that these issues are all surmountable if there is true will and concrete actions are taken.

Localization must be more than a word used in meetings and conferences. It must be the driving force behind all of our engagements in the global humanitarian community.

KENYA: WOMEN FACING DOMESTIC VIOLENCE DURING COVID-19 NEED ACCESS TO SAFETY NOW MORE THAN EVER

By Christine Ogutu and Wangu Kanja. Originally published by Citizen Digital.²

Christine Ogutu is a Communications Specialist at the Center for Rights, Education and Awareness, and Wangu Kanja is the Executive Director of the Wangu Kanja Foundation.

‘My husband beat me up and threw me out into the streets in the wee hours of the night with my two children’, Rehema,* a survivor of domestic violence, tells us when we meet her at her home in Nairobi’s Kawangware slums.

She says as soon as the first case of COVID-19 was announced in Kenya, her estranged husband wanted nothing to do with her.

‘For the last seven years I have been married to him, there has never been peace in our home. Occasionally, we would fight even on the slightest provocation’, she says.

Sadly, Rehema* is not the only one facing domestic violence. Her experience mirrors that of many women and girls who are increasingly being trapped with their abusers at home.

With the raging cases of COVID-19 pushing households into economic slumps, women and girls ‘locked in’ with their abusers are also finding it difficult to seek safety away from violence-marred homes – cutting them off from their supportive networks and resources that could help them.

The Center for Rights, Education and Awareness (CREAW) and the Wangu Kanja Foundation (WKF), who have been among the first responders to incidents of gender-based violence (GBV), have reported a rise in the number of women and girls making frantic calls to report abuse and seek refuge in shelters away from their abusers.

A similar trend of exacerbated levels of violence has also been reported by the National GBV helpline 1195, with up to a 55 percent increase in the number of calls made by survivors reporting abuse and seeking referral to support services.

Prior to the coronavirus outbreak, 45 percent of women and girls aged between 15 and 49 reported that they have experienced physical violence, and 14 percent sexual violence, according to the 2014 Kenya Demographic and Health Survey.

These statistics tell the tale of the everyday lived realities of women and girls who are forced to contend with the deeply rooted cultural norms, attitudes and

‘With the raging cases of COVID-19 pushing households into economic slumps, women and girls ‘locked in’ with their abusers are also finding it difficult to seek safety away from violence-marred homes...’

practices that erode their dignity and deny them the freedom to live free from violence, and the opportunity to advance their livelihoods as equal members of society.

Evidently, lockdowns and movement restrictions have even made it harder for women and girls to report abuse and seek help along the GBV referral pathways; countless survivors continue to lack access to the much-needed services essential for their safety, protection and recovery, such as the police sector response, shelters and psychosocial support.

This is despite the fact that the government has publicly acknowledged the spike in GBV.

However, there is nothing to write home about; the pain and suffering of survivors is real and if unattended, has potential to regress the survival, growth and development of able-bodied women and girls.

Moreover, GBV prevention, response and management continue to be underfunded and uncoordinated – more so during the pandemic.

Worse still, in some health facilities, GBV services are being withdrawn or are missing due to lack of resources because the majority of services in these facilities are donor-funded.

We have also seen instances where hospital staff have been redistributed to other areas to deal with COVID-19.

With that said, the COVID-19 pandemic is, however, gifting us the opportunity to take decisive action, make it right and address the scourge of violence against women and girls in Kenya.

From the household level to communities and institutions, we must address the power imbalances that normalize inequalities and magnify social ills, especially during crises like COVID-19.

We can all agree that the pervasive nature of gender-based violence continues to subdue the gains made in creating equitable spaces for all, hence targeted safety nets are central to mitigating the impacts of the shadow pandemic.

Women's rights organizations like CREAM and WKF have had to adapt their community interventions to better support survivors and address the needs of diverse groups of women and girls.

In the 'new normal' necessitated by curfews and social distancing measures, most of CREAM and WKF's GBV service provision, such as facilitating referrals to health facilities, offering counselling and safety planning for survivors, has transitioned to phone and virtual connections.

In particular, CREAM has established a toll free GBV helpline (0800-720-186) to provide referrals, tele-counselling and legal services to women and girls facing violence.

WKF operates a real-time mobile application where survivors can also report their abusers, document their ordeals, seek information and get online referrals to service providers within their localities.

In a joint initiative funded by the European Union, CREAM and WKF are also part of the consortium of partners – Oxfam in Kenya, Kenya Red Cross,

'Evidently, lockdowns and movement restrictions have even made it harder for women and girls to report abuse and seek help along the GBV referral pathways; countless survivors continue to lack access to the much-needed services essential for their safety, protection and recovery, such as the police sector response, shelters and psychosocial support.'

Impact, Concern Worldwide – currently supporting vulnerable households through cash disbursements aimed at cushioning households from plunging deeper into poverty in the wake of economic recession.

It is critical to note that the relief fund has especially targeted survivors of GBV to not only improve their purchasing and decision-making power, but also to help them build resilience as they reorganize their lives beyond the pandemic.

We know for a fact that the pandemic has greatly impacted the financial earnings of households due to job losses and reduced economic activities for women who work in the informal sector.

The value of cash transfers to such vulnerable households amid the pandemic, especially survivors of GBV, cannot be overstated. It is literally a lifeline!

Evidence from past emergencies has shown that cash transfers are a sure way of helping households access food, healthcare and shelter, and achieve resilient livelihoods.

WHAT MORE CAN BE DONE?

Beyond the aforementioned interventions from non-state actors, much action is needed from government, UN agencies, the business community, civil society actors and the community as a whole to build stronger social protection structures to safeguard the safety, dignity and rights of women and girls – more so during COVID-19.

For starters, given the dire challenges that women and girls are facing during the pandemic, the county and national level governments must take bold steps to ensure that women and girls have access to safe houses that offer survivors of GBV protection from their abusers.

To date, only Makueni County has been able to establish a fully-fledged state-run shelter. It is only practical that the other counties replicate this.

There is also an urgent need for the government to offer unconditional cash transfers to vulnerable households to ease economic stress and reduce the vulnerability of women and girls to violence.

Additionally, the aggravated nature of GBV also calls for perpetrator accountability, hence the need for special crimes police units to urgently investigate and expedite on GBV matters.

RDC : LES DEPLACES COURENT LE RISQUE DE CONTAMINATIONS A LA COVID-19

Par Grâce Wani. Initialement publié par Media Congo.³

Grâce Wani est Assistante Programme et Chargée de communication de L'ONG FECONDE.

Elles ont fui la guerre en Ituri et risquent maintenant d'être infectées par la Covid-19. Rachel et Esther racontent leurs expériences dans un camp de déplacés à Bunia en RDC.

Rachel a 18 ans. Elle a un beau sourire qui illumine son visage. Mais ces jours-ci, me dit-elle, il n'y a pas de quoi se réjouir.

Il y a un an, Rachel a fui son village de Largu dans la province d'Ituri au Nord-Est de la République Démocratique du Congo. « Ce fut l'expérience la plus pénible de toute ma vie » raconte-t-elle. « Quand les miliciens sont arrivés, ils ont brûlé nos maisons et tué beaucoup de gens. Par grâce nous avons rencontré deux taximen moto, que nous avons payé pour nous conduire dans la ville de Bunia où nous avons été accueillis dans ce site des déplacés ».

Rachel vit depuis Février 2019 dans le camp des déplacés ISP II, situé à environ deux kilomètres du Marché Centrale de Bunia. Le camp bourdonne d'activités. Les cris des petits enfants jouant au ballon est accompagné d'un parfum de fufou de maïs en train d'être malaxé. Le soleil bat fort.

« Les conditions de vie ne sont pas parfaites dans ce site mais c'est mieux que dans mon village. Nous recevons la même nourriture tous les jours- le fufou de maïs et les petits poids - souvent ça provoque la diarrhée chez nos enfants, mais je préfère mourir de la mal nutrition dans ce site, que de retourner à Largu où les attaques des miliciens continuent jusqu'aujourd'hui. Je ne sais pas si ça finira un jour », ajoute Rachel.

DRC: DISPLACED PEOPLE FACE THE RISK OF CONTRACTING COVID-19

By Grâce Wani. First published by Media Congo.⁴

Grâce Wani is Program Assistant and Communications Officer for the NGO FECONDE.

They fled the war in Ituri and now they're at risk of contracting COVID-19. Rachel and Esther share their stories from a camp for internally displaced people in Bunia, DRC.

Rachel is 18. A beautiful smile lights up her face. However, there's not much to smile about these days, she says.

One year ago, Rachel fled her village, Largu, in the Province of Ituri, in the North East of the Democratic Republic of Congo. "This was the hardest thing I've ever done in my whole life", she says. "When the militiamen arrived, they burnt our houses and killed many people. Luckily, we met two moto-taximen and paid them to take us to the city of Bunia, where we found shelter in this internally displaced people camp."

Rachel has lived in the ISP II displacement camp, which is located about 2km from the Bunia central market, since February 2019. The camp is buzzing with activity. You can hear kids playing football and smell the scent of corn fufu being prepared. The sun is beating down.

"The conditions are not perfect in this camp but it's better than in my village. We receive the same food every day – fufu and peas – which often gives our kids diarrhoea, but I prefer to die of malnutrition here than to go back to Largu where attacks by militiamen are still happening. I don't know whether it will ever end", Rachel adds.

Esther, ne cache pas son désespoir : « D'abord la guerre, après l'Ebola et maintenant la COVID-19 pour couronner le tout. Avons-nous réellement de l'avenir ? »

En effet, en plus de l'état de vulnérabilité dans lequel Rachel, Esther et d'autres déplacés se trouvent, ils sont également appelés à faire face à la propagation de la COVID-19.

Agée de 23 ans, Esther vit dans le site des déplacés ISP II depuis Février 2018. Elle préfère rester dans le camp, même si sa condition de vie l'expose davantage à la COVID-19. « Ça fait plus de deux ans que je suis là. Jusqu'aujourd'hui je vie avec une trentaine d'autres déplacés dans un hangar commun qui parfois ne préserve pas notre intimité. On ne peut pas appliquer les mesures de distanciation sociale que les autorités nous recommandent. Nous utilisons les mêmes ustensiles de cuisine et souvent il n'y a même pas de l'eau courante pour bien se laver. Mais c'est mieux que de retourner mourir dans notre village. Je ne veux plus jamais avoir à revivre ces atrocités ».

A ce jour, l'activisme des groupes armés s'est accru sur la quasi-totalité des territoires de l'Ituri, entre autres Djugu, Mahagi, Irumu, Mambasa et Aru. Cela entraîne une augmentation exponentielle des déplacés dans la zone. Cette population, contrainte au déplacement vit dans la précarité par manque de moyens de subsistances. 200 000 personnes ont été forcées de fuir leur foyer durant ces deux derniers mois seulement, Cinq millions de personnes sont aujourd'hui déracinées en RDC, dont 1,2 million dans la province de l'Ituri selon un rapport de UNHCR.

Avec l'apparition de la COVID-19, l'attention portée à ces vulnérables au profit des mesures collectives de lutte contre cette pandémie diminue. Bien que, l'aide apportée était déjà insuffisante, la COVID-19 a amplifié le degré de vulnérabilité des déplacés, les rendant encore plus exposés à cette maladie. En date du 01 septembre 2020, le nombre des malades atteints de Coronavirus est 112 cas confirmés en Province de l'Ituri.

Esther can't hide her despair: "First the war, then Ebola and now COVID-19 to top it off. Do we really have a future?"

Indeed, on top of already being vulnerable as displaced people, Rachel, Esther and others are also facing the risk of COVID-19.

Esther, 23, has lived in the ISP II displaced people camp since February 2018. She prefers to stay in the camp even if the living conditions put her at higher risk of getting COVID-19. "I've been here for over two years. I've been living with about 30 other displaced people in a warehouse which often doesn't allow for intimacy. We can't apply the social distancing measures that have been recommended by the authorities. We use the same kitchen utensils and there's often not enough water to wash ourselves properly. But it's better than going back to our village to die. I don't want to ever have to face those atrocities again."

The attacks by armed groups have now spread through almost the entire territory of Ituri, in Djugu, Mahagi, Irumu, Mambasa and Aru, among other places. This means displacement has increased exponentially. The population, forced to flee, lives in precarious conditions because of a lack of livelihoods. 200,000 people have been forced to leave their homes in just the last two months. Five million people are still rootless in DRC, with 1.2 million displaced in the province of Ituri, according to UNHCR.

With the surge of COVID-19, the collective measures to fight the pandemic are taken at the expense of vulnerable people, to whom we are paying less attention. Although the aid provided was already inadequate, COVID-19 has exacerbated the vulnerability of displaced people, putting them at higher risk of contracting the virus. On 1 September 2020, there were 112 confirmed cases of COVID-19 in the province of Ituri.

Pour Rachel, Esther et beaucoup d'autres personnes déplacées, tant que la situation sécuritaire n'a pas changée, elles ne désirent aucunement retourner dans leurs villages. « Nous ne voulons que deux choses : la paix et la sécurité » conclu Esther.

Rachel, Esther and many more displaced people won't return to their villages as long as the security situation is unchanged. Esther concludes: "We want two things: peace and security".

[Français] Camp des déplacés ISP (Institut Supérieur Pédagogique) à Bunia, Ituri, RDC. Photo Credit : FECONDE.

[English] ISP (Institut Supérieur Pédagogique) displacement camp in Bunia, Ituri, DRC. Photo Credit: FECONDE.

UGANDA: WE MUST PRIORITIZE LOCAL SOLUTIONS TO GLOBAL PROBLEMS

By Ritah Nansereko. Originally published by IPS News on World Humanitarian Day 2020.⁵

Ritah Nansereko is Executive Director of the African Women and Youth Action for Development (AWYAD). AWYAD is a local woman-centred humanitarian and development organization in Uganda that works in refugee protection response, education in emergency and women's rights advocacy.

World Humanitarian Day is the perfect time to refresh our push to localize humanitarian aid for COVID-19 and all the challenges we face. Celebrating #RealLifeHeroes!

I'll never forget the day when the Palabek refugee settlement officially became home to South Sudanese refugees in the Acholi Sub-region of Northern Uganda. The year before, I had visited the area in Lamwo District with my team from the African Women and Youth Action for Development (AWYAD).

We were shocked to find hundreds of refugees, mainly women and children, living under trees. They had no protection and told us that cross-border attacks by rebels were frequent. Still, they refused to move on to the closest designated refugee settlement in West Nile.

I remember them telling us repeatedly, 'We will not be safe there; our people are fighting there too'. One woman pointed to a watering hole and said, 'We'd rather drink water here with the cattle than go there'.

After we left and I got back to the coordination office in Kampala, their words continued to dance in my mind. I had to do something.

Immediately my team and I joined hands with Lamwo District Local Government officials, the Wanainchi, together with the refugee representatives, and we began to lobby the central government asking for the establishment of the refugee settlement in Lamwo District.

In less than a year, the Ugandan government responded to our appeal and in April 2017, Palabek became the official home to over 20,000 refugees at the time of its inception. My heart filled with pride that once again, we Ugandans had answered when our neighbors knocked on our door. Currently Palabek hosts more than 53,000 refugees.

I use this case as just one example of how, over the years, local leaders and organizations have increasingly become the first responders when disaster hits. Refugees in Uganda always receive their first emergency support from local actors.

Uganda is the largest refugee-hosting country in Africa. The country hosts about 1.4 million refugees, the majority from South Sudan and the Democratic Republic of Congo.

Uganda's progressive refugee policy has enabled its nationals to stand with refugees and share their limited resources with them. Northern Uganda is one of the country's poorest regions, but it hosts over 60% of the refugees. All are settled on citizens' land.

The great contribution of the hosting communities, the local NGOs and the government has meant that many refugees have been given a second home after being forcibly being displaced from their country of origin. Unlike in other hosting countries, Uganda's refugees, especially the majority in the northern part of the country, are integrated within the hosting communities.

And yet, time and again, local actors and communities, who have shown that they are part of the solution, are sidelined when the international actors arrive. Suddenly, we 'lack capacity' and our indigenous knowledge and physical proximity are undervalued.

Debates on localization and the balance of power between the so-called Global North and Global South have been gaining traction in humanitarian discourse over the last decade. The first UN World Humanitarian Summit in 2016 in Istanbul was intended to fundamentally reform the humanitarian sector so that it could react more effectively to today's many crises.

Among the major things emphasized was the need to adapt to new challenges through local, inclusive and context-specific responses.

This need to re-think global humanitarian response has to a large extent been driven by escalating humanitarian needs – over 168 million people are in need of humanitarian assistance worldwide today, coupled with protracted crises around the globe, which call for more diverse thinking.

The current global COVID-19 pandemic has posed yet another threat to the already shrinking humanitarian basket. It has exposed once again the need for more country-based systems that are able to address emergencies and mitigate future risks, using locally available solutions.

But on the ground, the shift to valuing local actors as a critical part of the solution is still not being felt enough. The rhetoric has not translated into action. And I have been forced to face up to the reality that the humanitarian system was built by and for international actors, multilateral organizations and international NGOs. Not for us to find local solutions to global problems.

What does this sidelining look like in practical terms to those of us who are local actors? It means not being asked to participate in key policy debates. It means not being part of the planning process for major interventions. It means that funding to local actors is still below 10% of total humanitarian funding.

In the case of Uganda, although it was one of the first countries to adopt the Comprehensive Refugee Response Framework (CRRF), and has further integrated refugee response in the National Development Plan Three (NDPIII), local groups are still left on the periphery during the planning and implementation of refugee response programmes.

There is a persistent misinterpretation of localization by many international agencies that limits localization to local staff recruitment and one-off, project-based community consultations.

This is not enough, especially as we are responding to a protracted refugee crisis. Response programmes need to speak to each other at every stage; if they do not, there is a great risk that we end up with parallel response strategies which in the long term means that there is a gap between the emergency and the recovery phase.

Local groups must be included in order to manage smooth transitions from the emergency and recovery phases, where host communities play a fundamental role.

Closer to home, in Palabek, after mobilizing for the establishment of the settlement alongside fellow local groups, we received no support to continue our work. You cannot imagine my disappointment when, after fighting so hard for its opening, only INGOs received funding.

The reason given was that none of us local organizations had 'the capacity' to offer humanitarian services. It felt like once again, the commitment made in Istanbul to 'empower national and local humanitarian action by increasing the share of financing available to them' was mere lip service.

So today, we continue work in the service of implementing partners. The set structures within the settlement themselves are skewed towards giving INGOs more power. Everything we do must be approved by them. More often than not, they do not support our innovative ideas, claiming that they are not up to standard!

This paternalistic attitude needs to change. INGOs need to be willing to have real partnerships with local actors. And yes, this also means giving up some of the jobs and some of the money so that we have the 'capacity' to help find long-lasting solutions to emergencies like the refugee crisis.

We've talked enough. We've shown that we can lead humanitarian interventions. Now we need more action from all those concerned. And I think that change needs to start from those who currently hold the power, INGOs.

'What does this sidelining look like in practical terms to those of us who are local actors? It means not being asked to participate in key policy debates. It means not being part of the planning process for major interventions. It means that funding to local actors is still below 10% of total humanitarian funding.'

They must:

- Develop strategies that will support local actors to regain the space to operate where we are needed.
- Meaningfully engage local groups in all processes of planning and implementation of response programmes in our countries, through our national disaster management and humanitarian response plans.
- Develop a new Global Humanitarian Response Plan that includes local and national NGOs directly, recognizing that our perspectives and contributions are not always reflected in Humanitarian Country Teams (HCTs) and in clusters.
- Support and encourage unconventional, alternative and creative responses that go beyond standard sectoral approaches. These must empower local people and organizations, including the faith community and women-led organizations, to take active leadership roles.
- Work in collaboration and coordination with us and local authorities to address and ensure humanitarian principles and standards are met.
- Provide flexible funding, including adequate and consistent support for organizational overheads and staff.
- Provide greater direct funding to local and national groups under the new COVID-19 funding mechanisms, opening up calls for new partners, with simplified and fast-tracked partner assessment processes, wherever possible. Grants should be allocated directly to local and national NGOs, rather than via intermediaries.
- Track the Global Humanitarian Response Plan COVID-19 funding through International Aid Tracking Initiative (IATI) reporting, so there is transparency and accountability of the funds being raised in the names of populations in crisis.

I firmly believe that localization will not be achieved until application of the historical westernized humanitarian systems is regulated to give room for local, context-based solutions.

As we celebrate #RealLifeHeroes on World Humanitarian Day, we shouldn't leave it as a one-off ceremony, but rather use it as an opportunity to strengthen our commitment to local actors so that they can, in turn, continue to support populations in need.

It is a chance to work in earnest to remove the bottlenecks that have hindered their ability to access humanitarian funding and operational space.

UGANDA: ‘THEY HAVE TO GIVE US OUR 100% FOOD RATION BACK’

Hit by 30% ration cuts and with no land to grow their own food, South Sudanese refugees in Uganda are stuck between a rock and a hard place.

By John Jal Dak. Originally published by African Arguments.⁶

John Jal Dak is a South Sudanese refugee living in Uganda. He is the Executive Director of the Youth Social Advocacy Team (YSAT), a refugee-led organization supporting food distribution in Rhino Camp. YSAT Community Based Mobilisers work under the General Food Assistance Project supported by the World Food Programme (WFP) in co-partnership with Andre Foods International (AFI).

Elias Moses is an important man. Like me, he is a refugee [from] South Sudan who lives at the Rhino Camp refugee settlement in northern Uganda. He is important because his job here is to help other refugees get the food they need.

As part of a team of Community-Based Mobilisers (CBM), the 26-year-old Moses explains to people where to collect their food, when and how much each person or family will get. He uses an arsenal of tools to make sure everyone has access to this information. He chats with people, goes door to door, tells stories – sometimes with the help of a local drama group – and even shouts his messages out loud on a megaphone.

It can be a tiring job, and it has got even harder these past few months. In March 2020, the World Food Programme (WFP), UN Refugee Agency (UNHCR) and Ugandan government met with refugee leaders across Rhino Camp’s seven zones. With attendance limited to just ten people due to COVID-19 restrictions, they told the gathered representatives that food and cash assistance would be reduced by 30%. They said that donations had started to reduce because of the pandemic and that, with 2.1 million refugees to feed in Uganda alone, their hands were tied.

Monthly food ration and cash assistance cuts for refugees since March
Cereals (maize or sorghum): from 12.6kg to 8.82kg.
Pulses (beans or cowpeas): from 3kg to 2.1kg.
Vegetable oil: from 0.9kg to 0.63kg.
Salt: from 0.21kg to 0.15kg.
Cash assistance has been reduced from 31,000 Ugandan Shillings (\$9) to 22,000 Ugandan Shillings (\$6) per person per month.

Afterwards, it was the responsibility of refugee leaders and those of us working in food distribution to inform the camp residents.

‘Because I am at the forefront everyone comes to complain to me’, says Moses. ‘Many tell me that with the reduction in the amount of food they are getting, they only eat one meal a day. They also complain that because of COVID-19 restrictions, they cannot even engage in other income-generating activities to supplement the small rations. I feel bad, especially for those with young children, but there is nothing I can do.’

What Moses does do, however, is ensure people have the information they need. As part of a team of 24 people that covers 11 food distribution points in 42 villages, he and his colleagues at the Youth Social Advocacy Team (YSAT) ensure that the delivery of food runs smoothly and that, especially now, there is no overcrowding.

‘We create awareness both before and during the food distribution,’ explains Moses. ‘We let refugees know what services we offer, tell them about measures they can take to stop from getting COVID and also talk to them about how to protect themselves from sexual exploitation and abuse, which may arise as a result of the ration cuts.’

YSAT staff coordinate food distribution in Rhino Camp. Photo credit: Luat Shem.

‘HELP US FEED OURSELVES’

In a refugee camp like Rhino, food is more than just food. It is also currency. Refugees are given basics such as cereals, pulses, cooking oil and salt. But these can be bartered or sold to buy items like vegetables, firewood, clothes and medicine. Relying on rations, however, is a meek and vulnerable way to live.

Amule Felix has lived in Rhino Camp for the last four years. Like many, the ration cuts have hit his household hard. ‘We are seven people in my family’, he says. ‘The food that we get now does not last for the whole month. By the 20th, sometimes even by mid-month, the food is finished.’

He wishes he didn’t have to depend only on what the WFP provides. ‘I have tried to get land from the host community, but I have not been successful’, he

explains. 'My plea to the Ugandan government and to their partners is to help us feed ourselves. They should encourage livelihood activities such as provision of agricultural plots for those who are agriculturalists, animal rearing for those communities who are pastoralists, fish farming for those who have good knowledge and skills in fish farm management. If not, they have to take the food rations back to what they were before.'

Emelda Yawa, a single mother who has also been at Rhino Camp for four years, is facing similar challenges in trying to provide for herself. 'During community meetings, the staff of the UNCHR, the government and other international organizations working here told us to befriend landlords so as to get land for crop farming', she says. 'But those landlords demand that we pay for the land on a seasonal basis. Most people here don't have that money. We've explained that to them, but nothing has changed.'

In the face of this, Yawa has channelled her steadfast entrepreneurial spirit to find another solution. She now uses part of her rations to invest in a small pancake business. 'After receiving my food ration, I take two kilograms of maize grains to exchange for firewood so that I can make pancakes', she explains. She then sells them at Ocea Trading Centre, walking one hour every day there and back.

Through this endeavour, she has managed to save 150,000 Ugandan Shillings (\$40). She has used this to rent a small plot of land for this planting season on which she is growing maize, sorghum and simsim. She also plants vegetables in the 20×20 metre plot where she lives with her four children.

'This small vegetable patch has helped us to have a balanced diet and has at least promoted good health in my home. I use what I make from selling my farm produce and pancakes to buy clothes, shoes and medicine because of the poor health services we receive here. But competition is stiff, and buyers are very few. They have to give us our 100% food ration back.'

Emelda Yawa tending to her small vegetable patch in Rhino Camp, Northern Uganda. Photo credit: Luete Shem.

A TOUGH SITUATION GETS TOUGHER

For those of us at the forefront of food distribution in Rhino Camp, we see every day how the COVID-19 pandemic and ration cuts have exacerbated an already hard situation. Many refugees, no matter how determined they are to take back some control of their lives, seem to find themselves stuck between a rock and a hard place.

We bear witness to the impact of insufficient donor funding as well as decisions made in meetings that don't include us. Our plea is for the funding gap to be filled, for full rations to be restored, for greater support for us to build livelihoods so we can be more self-sufficient, and for increased recognition of the important role refugee-led organizations like YSAT play.

UGANDA: REFUGEES ARE AT HIGH RISK OF CATCHING CORONAVIRUS IF MEDICAL SERVICES IN CAMPS DON'T IMPROVE

The global COVID-19 pandemic has worsened the already broken health systems in refugee settlements like Ayilo 1 in Northern Uganda.

By Kuol Arou Kuolnuer. Originally published by Nile Post.⁷

Kuol Arou Kuolnuer is Chairman of the Network of South Sudanese Civil Society Organizations in Uganda.

My neighbour, a little girl called Nyanechek, died needlessly in Ayilo refugee settlement two months ago. On Friday, she developed a stomach ache, headache and fever.

Concerned that it might be malaria, her mother Rebecca took her to the nearest Health Centre 45 minutes away, but after queuing for hours, she was told to come back the following day because the centre was closing.

'They didn't even give me paracetamol, which is what they usually do'. Rebecca told me when I saw her that day. I touched Nyanechek's forehead. It was boiling hot.

I saw Rebecca again the following day. Nyanechek was still unwell but she decided to keep observing her condition for a while.

After her experience the day before, she didn't trust that she would get any help if she went to the Health Centre again.

As we talked, she looked up at the clouds gathering in the sky above. She was also conscious of the fact that she had little time left to clear as much space as she could in her small patch of farmland before the rains started to fall. We said our goodbyes and Rebecca went to her farm.

At home, Nyanechek's 14-year-old sister Sarah kept an eye on her while catching up with her studies. Classes are now broadcast on radio since schools closed down across Uganda in March.

Nearby, kids crouched together in a circle playing with clay. Nyanechek lay on the floor on the veranda with both her arms squeezed between her thighs, shivering.

As Rebecca cleared her farm, she thought of the life she was trying to rebuild, away from the violence in South Sudan, which had forced her to flee with her four children four years earlier.

So far, she had managed to build two grass-thatched huts and to fence them with wooden slats. She had enrolled her children at the local school and she worked hard every day to cultivate her small patch of farmland. Life wasn't perfect, but it was definitely better than life in our home country.

Then a neighbour came running. Nyanechek had made a turn for the worse. Rebecca rushed back home and found her daughter having convulsions.

She grabbed her and ran to the Health Centre. But it was a Saturday – they only work half days – and by the time she got there it was shut.

Not knowing what else to do, she waited on the footsteps of the clinic for a few hours, praying that a nurse would come by.

No one came so she took Nyanechek back home. At 3am on Sunday morning, Nyanechek's breathing became laboured. Rebecca ran back to the Health Centre.

At 7am a doctor informed her that her beautiful Nyanechek Monyjok was dead. The doctor told her that the cause of death was anaemia, but no tests were done to confirm this.

The next time I saw Nyanechek she was wrapped in a sheet in her mother's arms. In 2014 a child had died in my arms and seeing Nyanechek's tiny two-year-old frame all wrapped up brought it all back.

I have a son myself and he is my pride and joy. I was furious when Rebecca told me that the nurse had told to take her daughter home, and that she didn't know what to do with her body.

I walked her home. When we arrived, Nyanechek's brother and sisters saw the tears on their mother's face and the bundle in her arms and broke down, throwing themselves on the ground.

It was heartbreaking. Other neighbours came in to condole with them.

As a South Sudanese refugee living in Uganda, I have seen my fair share of suffering, but I just can't let this go. There is something fundamentally wrong with this picture.

Why would the nurses at the Health Centre send such a sick child home in the first place? Why are there no medical services for a population of 24,000 people on the weekends?

And why, at a time of Coronavirus, when there are clear protocols on how dead bodies should be handled, was Rebecca sent home with her dead baby?

I am frustrated because I feel like the most vulnerable members of our society are being failed. At a time of global crisis, refugees have already had to face 30% cuts to their food rations.

Children are at home, many unable to attend classes broadcast on TV and radio simply because they don't own these luxuries. On top of all that, refugees are facing medical negligence.

Ayilo 1 refugee settlement is one of the 19 settlements in greater Adjumani district. It is located across the plains of the land of the Madi people of Uganda.

The view is breathtaking, with hills to the north, west and south. Most people live in grass thatched huts – new homes that they built for themselves when they had to flee South Sudan after violence erupted in our country again in 2013.

We don't have much, we are survivors. We have survived war, displacement and countless traumas. But this feels like too much.

For years refugees have been complaining about the lack of adequate medical services at the camp. I did not expect that a pandemic that has taken the lives of so many around the world would be handled so badly.

Since the start of the COVID-19 pandemic, I have noticed much anxiety about the lack of healthcare in my community. People feel abandoned.

The system was already struggling before but now there seem to be fewer healthcare workers, and those that are there are afraid of touching the dead.

When the first cases of Covid were reported in Adjumani district, the healthcare workers were more terrified than the refugee themselves.

They wouldn't want to touch or come close to patients, leaving the miserable patients to lie helplessly on the hospital veranda or under the trees in the hospital compound.

Besides being poorly paid, the health workers had no personal protective equipment at the time so they would watch and do nothing.

At most, they would give the family protective gloves. The lucky ones would be offered an ambulance with only the driver. Offloading the corpse is up to the relatives.

Bodies are released to the families without instructions. Generally, it is up to them to find means of transportation and to bury their loved ones.

This is making us all more vulnerable to the virus. And I fear that this could unleash a vicious cycle of infections if not addressed urgently.

Sadly, Nyanechek's story is not the only one I've witnessed first-hand or heard about that makes me question the ability of health care providers, the international agencies working at the camps and the host government to protect refugees during this pandemic.

I have attended the funerals of four family members and friends since the start of the global pandemic. I also spoke to a young woman called Achol who told me the story of her father Paul Majok.

He was about 60 years old and blind in both eyes. Achol looked after him in Ayilo settlement. On April 6th he started vomiting and complaining of chest pains.

He had spent days without eating. Worried, Achol took him to the Health Centre. His condition got worse upon admission and at midnight he took his last breath.

The nurse on duty alerted Achol that her father had died and told her to mobilize people to dig the grave in the morning. The cause of death was undisclosed. Family and friends gathered to lay him to rest in a dignified manner, but all were worried that they didn't know the cause of death.

'When the first cases of Covid were reported in Adjumani district, the healthcare workers were more terrified than the refugee themselves. They wouldn't want to touch or come close to patients, leaving the miserable patients to lie helplessly on the hospital veranda or under the trees in the hospital compound.'

Like everyone else, refugees are living in fear of contracting COVID-19.

More so because they know that if they get sick, they will not get the healthcare provision that they need.

I know the pandemic has hit the world hard. Even the most economically advanced countries have found it hard to cope.

But I took these pictures because, as the world goes back to focusing on what Donald Trump has said about China or Iran, the plight of refugees and how they are being impacted by the pandemic must not be forgotten.

I cannot help but feel that international agencies and host governments are lying when they say they are helping us. Where is the money going? We are stuck here.

But we should not have to choose between going back home to die by the barrel of a gun, or staying here and risk dying of Corona and hunger.

UGANDA: TEEN GIRLS LEFT TO RAISE THEIR SIBLINGS STRUGGLE TO SURVIVE

By Moses Sakondo. Originally published by WeInformers.⁸

Moses Sakondo is a South Sudanese refugee living in Uganda. Moses works with I CAN, a refugee-led organization that works with children in Bidibidi refugee camp, using arts and music for trauma healing.

At 16, Scovia Kaji's primary concern in life should be school. But it isn't. Her main worry is how to put food on the table for her three siblings after their mother abandoned them at Bidibidi refugee camp in January 2019.

'It is hard to give them more than one meal a day. And if one of my sisters or brothers falls sick, I have to take them to the medical centre. That means there is no one at home to look after the other children.' Scovia's siblings are three, five and eight years old. They depend on her for everything. She gets a little help, mainly from the World Food Programme and UNHCR, but she says it is not enough to keep them afloat. When she needs sanitary pads or when her siblings need school materials or shoes, it is a struggle. But most of all, it is the weight of responsibility that she carries that is hard to manage. 'I should be resitting my primary four examinations this year. But all schools in Uganda have been closed since March because of Coronavirus. But even before that, I was behind in class because I have too much work to do at home to be able to concentrate on my studies. I've repeated a year already.' Despite this, Kaji tells me that her favourite subject is Maths, with teacher Amos, and that she one day dreams of becoming a pilot. She also dreams of going back to South Sudan and of being reunited with her father. But that too, seems unlikely. 'It seems like my dream has been drowned by the scramble of South Sudanese politicians for power. All I can say is that life without parents, without friends and without school is very, very hard.'

Scovia Kaji at her home in Bidibidi refugee camp. Photo credit: Moses Sakondo.

For refugee children like Kaji, the closure of schools means that they have lost the sanctuary that these institutions once provided. Schools like Twajiji Hope, where Kaji studied, are not just about education. They are also a place where children are protected, where they find happiness, and perhaps most significantly, where they can forget the hardships at home and just be children.

'For refugee children like Kaji, the closure of schools means that they have lost the sanctuary that these institutions once provided.'

Like Kaji, Viola Poni is also 16 and already managing a family of three children. 'My elder sister used to take care of us, but she got married and abandon me and my two younger brothers.' Viola says it is a struggle to look after her brothers alone. 'We are surviving on the food rations that we get from the WFP. But for the past six months, they have reduced the amount we get. Once it's finished, we have no other alternative unless the neighbours come to our rescue.'

Viola relies on the kindness of neighbours and strangers. She tells me that sometimes well-wishers buy them clothes. She also sells part of her ration so that she has money to grind the maize. But the rations and gifts only go so far. 'We don't have mosquito nets or bed sheets and blankets. Actually, we don't even have a mattress to sleep on. I wish that God can send us good Samaritans to rescue us.'

The organization I work for, I CAN South Sudan, is led by refugees. We ourselves have been through the hardships of trying to build a new life for ourselves. Our work involves using music, art and drama to help children heal their traumas. It provides an outlet now that children are locked out of school. Sometimes, when we meet young women like Kaji and Viola, we also give them sanitary pads.

'Despite the horrific memories of war, the coronavirus pandemic has had devastated psychosocial and distressing effect on refugee children, child-headed families and single mothers in Bidibidi refugee settlement', says Stephen Bimo Wandu, the director of I CAN. 'Many children have got pregnant, others are forced to marry adults, and I've seen some of the young boys joining

small gangs who are a bad influence on them. I hope this situation does not last.'

In June 2020, I CAN conducted a door-to-door pilot study in Zone 1 of Bidibidi refugee settlement to understand the impact that the school closures have had on refugee children. We found that incidents of child labour and physical assault have become the norm in child-headed families and families headed by single mothers. We also found that forced and child marriages are on the increase within the settlement. We are calling on partners with greater capacity than us, particularly those like UNICEF and Save the Children, who work specifically on children's issues, to carry out a more comprehensive study on the effects of COVID-19 on refugee children in Northern Uganda. It is only by understanding the scope of the problem that we can effectively help these kids. As Stephen Wandu told me, 'As a refugee-led organization that is championed by refugee youth, most of our personnel do not have the specific skills and knowledge required to manage and curb the overwhelming traumatic, social, legal and economic challenges affecting refugee children in Bidibidi. We therefore call upon child-related organizations and donors to empower our staff in child protection, child rights, legal protection and counselling.'

Until that happens, we will continue helping young women like Kaji and Viola as best we can. But they deserve so much more.

UGANDA: POLITICIANS DIVIDED SOUTH SUDANESE REFUGEES. SPORT CAN REUNITE US.

During COVID-19, youth from different ethnic groups have worked together, drawing on teamwork and friendships forged on the football pitch.

By Simon Marot Touloung. Originally published by African Arguments.⁹

Simon Marot Touloung fled his native South Sudan 20 years ago. In 2016, as he watched the fighting in his country spill over into refugee camps in Uganda, he was compelled to start mentoring young people about the value of peace. Eventually, the one-on-one mentorship turned into a full-blown peacebuilding organization called the African Youth Action Network (AYAN), which he leads. He is also a member of the AU Youth Advisory Council.

Simon Marot Touloung. Photo Credit: Ingrid Sikima.

I was eight years old when I made the journey from South Sudan to Uganda in 2000. At that young age, I didn't understand why we were leaving my hometown of Mayom. I thought we were headed to Raabchiok, a village about 60km away, to pay dowry for my brother's wife.

I assumed that after the short trip I would return home to my mother. But while we were away, fighting intensified between the Sudanese government forces and the rebel Sudan People's Liberation Army (SPLA). We could never go back.

Instead, we headed to Uganda. I remember the journey like it was yesterday. I remember sleeping under a leaking roof at the home of then Commander Kerbino Kuanyin Bol in Wunrok. I remember the lion that followed us for nearly an hour as we made our way through bushes to Mayen Rual. I remember how flood waters reached my knees as we reached Liet-Nhom and how tired I was even though the only thing I was carrying with me was the shirt on my back.

I also remember that it was people from the Dinka tribe, supposedly our enemy, that helped us along the way. I was served roasted groundnuts and welcomed with cold pots of drinking water by women from the Dinka families. These women shouted at my brothers, 'He is too young. Why are you making him suffer? Leave him with us. We'll look after him'. They couldn't understand why such a young boy was being taken on such a gruelling journey to an unknown destination. To this day, I wish I could go back to thank them for their kindness.

When I got to Uganda, the nightmares came with me. One particular memory played on my mind night after night for years. It was of a time I was gathering wild fruit as my older brother Matut grazed cattle near our home. Suddenly I felt a crunch underfoot. When I looked, it was the body of a dead soldier. Two vultures, which had been picking at his body, opened their wings wide. I ran back home, not stopping for four kilometres, shaking and crying all the way. For eight years, every time I tried to sleep, the image of the dead man's body would creep into my mind.

DREAMS OF FOOTBALL

All that changed when I started to play football with other kids at the Imvepi refugee settlement. My nightmares were replaced with dreams of kicking the ball. Each night, I would see myself running with the other children in my sleep, smiling and laughing.

At that young age, I realised that sports could be a powerful tool for healing trauma. It had helped *me* heal. The other thing I loved about football was that the boys that I played with in Imvepi settlement were not all from my tribe. I saw that the tribal differences that pulled us apart were not real, but politically fabricated.

In 2016, I and a group of other refugees decided to create an organization called the African Youth Action Network (AYAN) to address conflicts in refugee camps and help build peace amongst different ethnic groups and clans. Once again, I was able to see the power of sport in bringing people together.

In 2018 and 2019, clashes erupted in the Kiryandongo Refugee Settlement in Midwestern Uganda between different sub-clans of the Nuer ethnic group. Worst of all, the fighting had started on the football pitch. The settlement commandant reacted by banning all forms of sport. I knew that football wasn't at fault and that, in fact, the community was potentially losing one of the few things that brought them together. My team and I immediately went to the Principal Settlement Commandant with a simple suggestion: don't stop sports, change it. We lobbied them to keep the football pitches open but to ensure that teams are made up of different clans, sub-clans and tribes.

It may sound like a very simple solution, but we have seen results. First, games have continued in the camps, which is vital for both the physical and mental health of the refugees. Second, they provide the space for people to

see each other as teammates, as brothers and sisters. I have seen how the harmony and teamwork among the refugee youth in Kiryandongo refugee settlement has grown as a result of the new mixed football teams.

During COVID-19, youth from the Nuer, Kuku, Acholi, Kakwa, Azande and Dinka groups have worked together to share information on preventive measures. I have no doubt that these friendships and teamwork came as a result of young people constantly interacting and playing together. On a personal level, some of the boys I played football with as a child in Imvepi settlement are still my best friends today.

The conflict in South Sudan is a political one. Like many conflicts around the continent, politicians have used the tribal card to divide people and garner support for themselves. The Dinka women who helped me as an eight-year-old when I fled South Sudan taught me an important lesson at a very young age: we are all one people. The future of our country depends on us coming together across ethnic lines. I believe that sports can help. A peaceful South Sudan starts in our minds.

'The future of our country depends on us coming together across ethnic lines. I believe that sports can help. A peaceful South Sudan starts in our minds.'

NOTES

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