

# Malian Refugees at Agando and Chinwaren Sites

## Assessment Report

Tahoua Region, Tillia Commune, Niger



A Malian Refugee woman holds her grandchild, born two days earlier at the refugee site.

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# Summary and Recommendations

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Following an assessment of the needs of Malian refugees conducted between June 12 and 27, 2012 of the Agando and Chinwaren sites in the Tahoua region of Niger, Relief International (RI) urges humanitarian partners to focus on the urgent and unmet needs evident in these sites. At Agando and Chinwaren, RI's team found significant needs that are not being provided for by the humanitarian community. In general, the sites are not attracting the same level of attention as of the established camps in Tillaberi, despite the high number of refugees living there (15,093 as of May 25).



A group of Malian girl refugees gather to participate in a RI focus group meeting to explain their needs.

The refugee population that has settled at Agando and Chinwaren are particularly vulnerable at this time given not only the losses they sustained during their displacement and the protection risks present in refugee settings but also due to the fact they many had already been experiencing food insecurity, poverty and marginalization in their home communities. Since the refugees plan on staying at the sites as long as the violence continues in Mali, the humanitarian community should advocate for greater assistance to this population. Solutions should be found around the security and logistics concerns, and adaptations should be made to accommodate the refugees' pastoral livelihoods and the less organized nature of the sites.

With anticipated funding from the U.S. Department of State Bureau of Population, Refugees, and Migration (BPRM), RI is starting to respond to the needs of Malian refugees in Tahoua through food security and nutrition interventions, improving health and hygiene services, and providing emergency shelter.

## PRIORITY NEEDS

RI's assessment found that as of June 23, the priority humanitarian needs were in the sectors of food security, shelter, health and WASH. Education, psychosocial support and protection issues were present but did not represent the same urgency as the four sectors described below.

1. **Food Security:** The refugees prioritized food assistance above all others. Currently the food basket provided is limited in nutritional scope, focusing on cereals, cowpea and oil. The refugees

also complained that the monthly rations are insufficient to meet needs throughout the entire month. However, the refugees' medium and long-term food security depends on the restoration and rebuilding of their livelihoods.

2. **Shelter:** Most refugees are living in inadequate and makeshift shelter at the sites, leaving them exposed to harsh weather conditions and putting them at risk to diseases including dehydration and malaria, as well as protection risks.

3. **Health:** While the health services being provided are of good quality, medical staff and refugees both complain of a lack of adequate medicines to treat disease. Health facilities are inadequate to provide proper and shaded consultation, and the medical staff lack equipment to perform health interventions, especially with regards to the delivery of babies. No preventative health services are provided, including in reproductive health, while the population has been affected by sexually-transmitted disease.

4. **Water, Sanitation and Hygiene (WASH):** Although actors have made headway in providing WASH services at the sites, they remain inadequate to meet Sphere standards. This includes the provision of drinking water, latrines, hygiene kits and hygiene promotion activities.

## RECOMMENDATIONS

In order to address the needs of the refugees in Tahoua, RI recommends collective, coordinated action by the humanitarian community. Specifically, RI suggests the following actions be taken:

- Since refugees are currently unable to pay for or grow food, humanitarian actors should ensure that food distributions and direct food assistance continues, at least for another six months, while at the same time providing support to the economic development of revenue generating activities and restoration of livelihoods. RI recommends that cash vouchers or food be provided to allow refugees to supplement their diets beyond the cereal and oil rations currently being provided. Cash vouchers should be used to the extent possible given the availability of food in the local market, the flexibility of suppliers to demand, and the high cost of transportation to the sites. Another way to address the need for a richer diet would be to change the current food basket.
- Given that the populations' primary livelihoods are pastoral, RI recommends livestock restocking activities in order to help families recover their herds. In addition, activities such as animal-fattening should be encouraged in order to provide women with a source of revenue. RI sees that efforts to expand the ability of local households to engage in building a sustainable community at the sites, with sufficient livelihood opportunities, will serve as a safety net and a platform for self-recovery.
- Shelter assistance should be provided as soon as possible to protect refugees from the harsh weather conditions and elements and to increase protection over all members of the typically large families of eight or more. RI recommends developing a shelter design which reflects the beneficiaries' preferences as well as the availability of local materials, and involves them in the planning and construction of the shelters.

- Potential impacts on environment should be considered when considering additional assistance in shelter. RI also recommends activities such as cash-for-work activities that can directly contribute to site and environmental improvements, such as dune stabilization, creation or restoration of pastoral grazing lands, and/or replacement of trees lost to shelter and wood-burning fires. CFW activities should be accompanied by education in savings in order to encourage beneficiaries to invest a part of these new assets into RGA. The animals fodder and feed is needed on immediate basis followed by animal shelter reconstruction and cash-for-work or cash-for-training activities.
- In the health sector, RI recommends that the clinic run by Akarass in Agando and Chinwaren to continue, and that it be refunded after September. The medical personnel are dedicated, well-paid and competent. In order to make the clinic fully functional, more medicines and supplies are needed. In addition, resources should be dedicated to improving the sexual and reproductive health components of the care that is provided. The clinic should be expanded and/or rebuilt in order to provide more durable construction as well as space for delivery, consultation and waiting.
- With regards to WASH, actors should take note that the current drinking water provision does not provide the required 226.4 cubic meters of water per day for a population of 15,093. Therefore, actors should increase the supply of drinking water. RI recognizes the initial efforts to construct latrine and shower blocks, but the planned sanitation response needs to be increased so as to meet the needs of the entire population at the sites. Latrine promotion should also be planned as the population practices open-air defecation. Hygiene is a strong need and additional hygiene kits and hygiene promotion should be provided.
- RI recommends that Akarass and UNHCR assess the needs for additional NFIs, especially with regard to clothing, personal and household items. To date no clothing has been distributed and not all families have benefitted from distributions of the household and kitchen kits.
- In order to ensure that children do not miss out on educational opportunities, the school at Agando should be reinforced through the addition of classrooms and instructors. Solutions should be found for providing Malian students with a Malian curriculum or successfully integrating them into the Nigerien program. For students who cannot attend school because there aren't enough places or they have never attended schools, actors should focus on emergency initiatives that will nevertheless encourage long-term development planning and funding.
- Actors should pay attention to protection issues that may be present due to the emergency conditions, as well as those that are more deeply rooted in the culture and which may be exacerbating access to assistance or satisfaction of needs; in order to protect at-risk groups, including youth, from conscription into armed groups. While psychosocial trauma has not been noted among children, actors should also monitor the situation and provide opportunities for protection assistance and referral.

# Background

Beginning in January 2012, residents of the Malian communities of Adrenboukan, Ménaka, Kidal and other southern villages began fleeing the violence initiated through armed rebellion against the Malian state into northern Niger, including the commune of Tillia, in the Tahoua region. RI spoke to the affected families who recounted rumors of the violence occurring in neighboring villages and that they had barely enough time to grab their children and flee.



The area is hot, dry and remote.

As they fled across the border, the refugees sought refuge in five main areas along the border, including Chighimar (Atanbo), Tankademi, Agando and Chinwaren. In Agando, the refugees were received by residents of the area, who met their needs, until they too began to run out of food. The refugee and host populations share many characteristics and have enjoyed contact in previous years, due to the pastoral nature of their livelihoods. Their numbers were first counted by the village chiefs, the mayor and the Tillia administrative post in early February. In early March, OCHA, WFP, Nigerien Red Cross (NRC), UNHCR, UNICEF, Africare, several local non-governmental organizations (LNGOs) and the GON conducted a joint needs assessment in the area<sup>1</sup>.

Since March, actors seeking to assist the refugees in Tahoua have coordinated their efforts through the OCHA office in Tahoua city, the UNHCR office in Niamey and the UN Cluster system. One major shelter planning effort was to consolidate the refugees onto two sites, at Agando and Chinwaren, which are located further from the border and are therefore safer. The Nigerien military based in Agando provided initial security to the site. Given the security challenges in the area, UNHCR asked a LNGO, Akarass, to manage the sites and provide essential services to the populations.

Many humanitarian actors anticipate that this community will grow in the near future, as the ethnic tension, high food insecurity and violence in Mali continue to push refugees across the border. The decision of ECOWAS to use force against the rebel factions due to their refusal of compromise, and the commitment of the Nigerien president, Mahamadou Issaoufou to provide military support to such a

<sup>1</sup> « Evaluation Rapide de la Situation des populations maliennes réfugiées sur les sites de Chighimar, Tankademi, Agando et Chinwaren commune de Tillia/Tchintabaraden: 08 au 11 mars 2012, Rapport d'évaluation, », joint needs assessment report of OCHA, CR/PGCA, CRN, PAM/WFP, UNHCR, DR/P/PF/PE, ONG Reform, UNICEF, ONG Adkoul, and Africare.

mission, suggest that the countries bordering Mali may see increased numbers of refugees in the next several months.

RI’s assessment team found that the refugees still fear the violence across the border and wish to stay in Niger as long as that violence continues and peace is not restored: “Mali is always unstable, it is better to stay here,” one refugee informed RI during its assessment. The humanitarian community should thus anticipate that the needs of the Malian refugees will persist for at least another year.

Akarass’s first needs assessment of the Agando and Chinwaren sites was conducted on March 24, 2012. By May 25, after Akarass partnered with UNHCR and initiated registration services, as well as its assistance in health, nutrition, water and NFIs program, Akarass registered a total of 2821 households, or 15,093 individuals at the two sites. Of these, 12,900 are living in the Agando site and 2,193 are living in Chinwaren. These figures include 45 Nigerien nationals.

Agando is the site of a military base and large village, and is located approximately 10.6 miles from the Mali border, 85 kilometres from Telemcess, the site of the nearest public health center, 100 kilometres from Tillia, the commune’s prefecture and public administration, and 210 kilometres from Tahoua, the regional capital. Chinwaren is eight kilometers from Agando, to the southeast, along the same Agando-Telemcess axis, but there is no village there. The GPS coordinates of these sites are as below:

	Latitude	Longitude
<b>Agando</b>	15.771944	4.057778
<b>Chinwaren</b>	15.672778	4.117500

During OCHA’s March 2012 joint evaluation, the population was found to be entirely Muslim (moderate), with multiple ethnic groups present, mainly Tuaregs (with stratifications and sub-groups), and Fulani, with a few Djerma speakers from the area of Gao, Mali. The RI team found the populations had settled at the sites in groups, by ethnic sub-category. Akarass has worked with the refugee local leadership so that each subgroup has elected a leader who is in charge of representing the group as well as maintaining order and discipline.

This has allowed the Nigerien military stationed at Agando to step back from assuring security at the sites.

According to UNHCR<sup>2</sup>, 62% of the total refugee population as of May 25 in Tillia is under the age of 18, while a third of the population is between the ages of 18-59 and just five percent are over age 60. Women represent the majority, at 53% of the total population, with more girls than boys in each of the age categories under 18



Refugee men, women and children were interviewed at the sites.

<sup>2</sup> UNCHR’s website, at <http://data.unhcr.org/MaliSituation/region.php?id=47&country=157> .

years. Akarass's team at Agando provided data on June 22 that indicated there were 1145 households with children in Agando and 363 in Chinwaren, for a total of 1508 households with children. They found a total of 8812 children in these 1508 households, which gives an average of six children per household, and an average household of eight persons. RI's assessment team found that there were many female-headed households in the sites; most men were elderly, while younger and middle-aged men could not be interviewed in large numbers. Their absence could be explained by the fact that many men chose to stay with their herds to continue grazing them in areas outside the sites, as well as the possibility that some men and older male youth stayed behind in Mali.

## METHODOLOGY

From June 12-25, 2012, RI conducted a rapid assessment of the needs in Tahoua province. RI selected Tahoua for its assessment for determination of priority areas and assist in the planning and deployment of resources. The methodologies used by the assessment team to find out the current situation of the refugee displaced were multiple. The RI team first conducted **desk research** of all materials produced by UNHCR, OCHA and other actors. Following this reading, the team conducted a **gap analysis** of the humanitarian response to date. RI found that the refugee response in Tillaberi region, which is more accessible from Niamey, has better security and hosts existing projects by multiple international non-governmental organizations (INGOs) across sectors, has been greater than in Tahoua. As of June 12, three refugee camps in Tillaberi had been established by UNHCR, and ACTED has assumed camp management responsibilities in Abala, the largest camp with 13,202 residents at the time of the assessment. International NGOs ACTED, Islamic Relief Worldwide, Caritas for Development (CADEV) and Medecins Sans Frontieres-France were providing assistance in Abala and several other international NGOs, including Catholic Relief Services and World Vision, have each mounted a response to the needs of refugees in Tillaberi. This contrasts greatly with the situation in Tahoua, where despite the high number of refugees, only two INGOs have responded, Africare (who did an early distribution of non-food items (NFIs) and is planning a blanket feeding of Tillia commune which will include the refugees) and Accion Contre el Hambre (ACH) (who recently launched a small water, sanitation and hygiene (WASH) project).

RI conducted **coordination meetings** and **key informant interviews** in order to better understand the past response by actors in Tahoua and their plans for future intervention. RI attended the coordination meeting hosted by the UN Office for the Coordination of Humanitarian Affairs (OCHA) in Tahoua, and later met with OCHA, WFP, NRC, Akarass and ACH at OCHA's office in Tahoua in order to inform actors of RI's assessment and to solicit their latest updates and collaboration. RI also met individually with members of international and donor organizations including UNHCR, World Health Organization (WHO), International Organization for Migration (IOM), and the UN's Child Education Fund (UNICEF), local authorities including the Secretary General of Tahoua and the Prefet of Tillia, and humanitarian and development organizations active in the Tahoua region, including Africare, ACH and Akarass. Through interviews with key individuals at these organizations, RI was able to triangulate its findings and deepen its knowledge of past actions and those in development for the Tahoua sites. During these meetings

and interviews, actors confirmed that needs have not been sufficiently met in Tahoua and there is a need for additional intervention across multiple sectors.

For this reason and upon the suggestion of UNHCR, RI organized a joint assessment with Akarass of Agando and Chinwaren from June 20-23. **Using participatory, gender-sensitive and qualitative research methods** including a health and shelter assessment, focus groups, transect walks, market assessment, conflict analysis and a livelihoods assessment, RI and Akarass were able to develop a clear picture of the current humanitarian needs on the ground. The field assessment team included one woman and two men, which allowed for the gender-separated focus group sessions. Little gender or vulnerability analysis has been conducted to date, and the approach adopted by Akarass and others (confirmed during the June 19 coordination meeting with OCHA) to date was a ‘blanket’ approach of treating all refugees as having the same needs, regardless of gender, age or other vulnerability criteria. Since access to information and humanitarian assistance are influenced by the factors of gender and age, it is critical to take these into account in order to provide effective and equitable humanitarian response. For this reason, RI conducted focus groups with different age groups, such as with young boys and girls as well as women and men of different life cycle stages. In addition, RI’s evaluation included an assessment of the needs of the host populations living in the village of Agando.

## A NOTE ON SECURITY

The Agando and Chinwaren sites are accessed with difficulty, given their remoteness and the lack of established roads between Telemcess and Agando or Tchintabaraden and Agando. The area has a small population and is quite isolated from the rest of the country. The area is considered insecure due to the porous nature of the nearby Malian and Algerian borders, the possible return of Toureg fighters from the previous Libyan regime, rebellions in Mali and Niger and the infiltration by members of Al-Qaeda in the Islamic Maghreb (AQIM) in recent years. Given the risks of kidnapping and banditry, the government of Niger recommends that all international and humanitarian actors travelling from Tillia or Tahoua to the sites be accompanied by a security escort provided by the National Guard. However, local NGOs travel without security escort to the sites, and strategies such as renting local vehicles and maintaining a low profile have been successful. RI’s assessment team adopted these strategies and travelled to the sites with Akarass whose established community entry greatly benefitted the evaluation team. RI recommends avoiding sending international and headquarters staff to the sites unless the security situation improves, renting local vehicles or using older-model cars, and taking advantage of the security escorts when needed. Should the security situation deteriorate further, either at the sites or in the broader area, making it impossible to continue providing direct assistance, RI recommends transferring activities to local NGOs who are still able to operate.



# Food Security and Livelihoods



Refugee women reported having to struggle to assure the food security of their households, even one meal a day. Mothers receive support for malnourished children at the clinic run by Akarass.

Refugee families ranked food as their greatest need and despite the interventions of the Nigerien Red Cross (NRC) and WFP, all families face high food insecurity. The situation is complicated by the onset of a particularly long 'lean season' resulting from a poor 2011 harvest across the Sahel region<sup>3</sup>. The NRC has distributed food three times to the sites (on a monthly basis), beginning in March, when they delivered 124 tons, in April with 161.3 tons and in May, 178 tons. The food distributed has been rice, corn, cowpea, wheat and oil. The refugees complained about the corn distributions, since corn requires milling that cannot be done in Agando and in response the NRC has tried to provide rice.

The June distribution, scheduled for June 21, was delayed by several days which coincided with RI's assessment. RI heard from beneficiaries that the monthly rations were not sufficient. The refugees are living with no food as the May food distribution ended earlier than anticipated. In focus groups, several men stressed that they were ready to leave the site if the food requirement was not fulfilled within three days.

In RI's rapid assessment, RI found that the main livelihood of both the refugee and host population is pastoralism; some women also practice small commerce and animal-fattening, and men in the host population also take short-term jobs. In the arid lands of northern Tahoua, it is very difficult to practice agriculture and it is not encouraged by the Government of Niger. In most cases the refugees were forced to leave their animals behind them in Mali and flee without their possessions. One of the challenges to the livelihoods of the host population and refugees has been the loss of livestock due to either drought or heavy rains, which can cause flash floods that sweep away entire herds. During the week of May 28-June 1, the GON reported that 1800 heads of livestock were lost due to heavy rains.

With regard to human assets, the population complained to RI's assessment team that they were too weak to work; to walk long distances, to prepare food or even to relieve themselves. While the refugees have few financial or physical assets, they can rely on strong bonds of solidarity between each other as well as with the host community. Men from the host community affirmed that they have no reason for conflict with the refugee population.

<sup>3</sup> Sahel Food Security and Nutrition Crisis (Issue 02 | 3 July 2012)

In interviews with children, boys and girls reported eating one meal a day, either corn, millet, millet flour or rice. RI also observed that about 100 children a day go to the Agando military base where the staff give them food.

WFP has planned a targeted free distribution of food<sup>4</sup> with the local NGO Tasshak at the end of June throughout the department of Tillia, which will assist both refugees and host populations (a total of 5,629 people). At the same time Africare and WFP will conduct a blanket feeding throughout the Tillia commune in the next few months. However, all food distributions are scheduled to end by the end of September, unless WFP decides to continue them following additional assessment.

Given that distributions' focus on cereals, the refugees lack access to nutritious food of other types, such as sources of protein (meat, beans, milk), vegetables and fruits, as well as food and drink that are part of their culture, such as tea and sugar. Meanwhile, the hosting village of Agando hosts a weekly market where refugees would be able to source other kinds of food as well as additional rations, if they had the means (cash). The refugees, who are majority female, lack sources of revenue and have few possessions or assets. RI recommends adding and/or replacing items in the current food basket in order to provide a more complete diet, as well as providing income support to families in order to supplement their diets.

RI conducted a rapid assessment of the markets in Agando and Telemcess. Agando's weekly market, on Thursdays, is primarily a market for cereals and meats, basic or essential foods. Since it is known as a pastoral zone it is known as an animal market. Telemcess is a larger market, with activities all week long but one main market day on Wednesdays, and a more diverse selection of goods.

**Table 1: Food and Non-Food Commodity Price Survey, Telemcess and Agando Markets (during lean season, June 2012)**

Item	Units		Telemcess		Agando	
			Price CFA	Price USD	Price CFA	Price USD
Millet	100	Kg	28,000	<b>\$52.47</b>	38,000	<b>\$71.21</b>
Corn	100	Kg	23,500	<b>\$44.04</b>	26,000	<b>\$48.73</b>
Rice	25	Kg	13,000	<b>\$24.36</b>	11,500	<b>\$21.55</b>
Manioc flour	1	Smallest bag	25	<b>\$0.05</b>	25	<b>\$0.05</b>
Local bread	1	Piece	250	<b>\$0.47</b>	n/a	
Beans (niébé)	1	Kg	600	<b>\$1.12</b>	750	<b>\$1.41</b>
Tomato paste	1	Small tin	50	<b>\$0.09</b>	65	<b>\$0.12</b>
Dried hot pepper	1	Small bag	50	<b>\$0.09</b>	100	<b>\$0.19</b>
Oil	1	Liter	1000	<b>\$1.87</b>	1250	<b>\$2.34</b>
Salt	1	Kg	200	<b>\$0.37</b>	300	<b>\$0.56</b>
Tea	1	Box	1000	<b>\$1.87</b>	1000	<b>\$1.87</b>
Sugar (granulated)	1	Kg	700	<b>\$1.31</b>	800	<b>\$1.50</b>
Milk: Lahda brand (500 g)	1	Bag	1600	<b>\$3.00</b>	1750	<b>\$3.28</b>
Meat	1	Kg	1500	<b>\$2.81</b>	1500	<b>\$2.81</b>

<sup>4</sup> The Newsletter of the World Food Programme in West Africa June 2012

Sheep	1	Adult	50-60,000	<b>\$94-112</b>	25-30,000	<b>\$47-56</b>
Goat	1	Adult	7000	<b>\$13.12</b>	6000	<b>\$11.24</b>
Cow	1	Calf	30,000	<b>\$56.22</b>	40,000	<b>\$74.96</b>
Soap	1	Bar	150-250	<b>\$0.28-0.47</b>	150-250	<b>\$0.28-0.47</b>

RI also made the following observations about the two markets:

- Several refugees at the sites were baking bread in a traditional, below-ground oven. This bread was only for household consumption given that the other refugees have no purchasing power, but represents opportunity as a revenue-generating activity.
- The presence of fresh fruits and vegetables was not noted at Agando, with the exception of dried dates; however in Telemcress oranges, limes, bell peppers, ginger, tomatoes, onions, garlic, squash and hot peppers (fresh and dried) were available.
- Suppliers at Telemcress said that they would be able to fulfill orders for any cereal, of relatively any quantity, within a week. Likewise, Agando suppliers remain flexible to demand.
- Should the price of cereals rise above the warning indicator of the GON, the GON may exercise the option to release food that is stored into the local market to quickly cause a decrease in prices.
- The market at Agando lies between the area where most of the host population lives and the refugee site, and is therefore accessed equally by both populations. RI observed that markets had not developed within the sites themselves.
- The Tillia prefer has complained that the refugees having cut down the trees around the sites to make charcoal for resale on the local market. RI did not observe this but recognizes the importance of providing sustainable fuel resources to the refugees.
- RI observed that some of the refugees had resold elements of the household NFI kits distributed by Akarass on the local market in order to buy food.

The main barriers to selling additional commodities at the Agando market include the high cost of transport, given the distance (85 km) and the fact the road is sand and not marked. Suppliers complained that it is not worthwhile to transport perishables since they are not in high demand.

## Shelter and Non-Food Items (NFIs)

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The second priority need expressed by refugees is for shelter. Although on June 12 in Tahoua it was reported by OCHA that “all refugees are living under shelters”, RI’s team found the situation on June 21-22 quite the opposite. In the two sites RI observed more than half of the residents do not have any shelter. Wherever they do, it is by creating makeshift shelters with cotton fabric which do not keep out the rain or protect from the wind or sand. Many have tried to construct small shelters with a few tree branches and some fabric but the fabric has flown away.

The population's current shelters are not providing adequate space for sleeping, washing and dressing, for the care of infants, children and the ill or infirm, or for the proper storage of food, water, household possessions and other key assets. The pictures demonstrate that gathering of household members cannot be done inside the current shelters. Thus, the shelters at the two sites do not adhere to the Sphere standard: "sufficient covered living space providing thermal



**Makehift shelters at camps are inadequate to meet shelter needs.**

comfort, fresh air and protection from the climate should be prioritised to ensure privacy, safety and health and enabling essential household livelihood activities to be undertaken." Given the average family size of seven to eight persons, shelters will provide a total of 21-24 square meters of living space would need to be provided in order to meet the Sphere indicator. During RI's assessment it did not hear of any future planned or proposed interventions in shelter for the refugees in Tahoua.

RI observed that due to the strong winds and rains, canvas or nylon tents are not an ideal shelter because they do not last very long and are very hot during the day. Since many of the refugees told RI that they plan to reside on the sites either until the violence ends in Mali or for longer, it is worthwhile to construct more permanent shelters at this time, using locally available materials. Given the absence of wood and the high costs of transporting materials from Tahoua, the likely best and most available material would be *seco* (straw) or clay, which the host population uses for their housing. Another option would be to provide a shelter design that resembles the nomad's or pastoralist's tent.

With regards to non-food items, HCR and Akarass provided household and kitchen kits in May but the need remains to complete distribution to all families. The kits included 4000 mats, 4480 blankets, 4800 jerricans, 3160 mosquito nets, and 412 kitchen kits. Other NFI needs include shoes and clothing, especially for children, and hygiene kits.

For households who initially received shelters from Akarass, it is likely that their shelters will soon need upgrading, reinforcement for the rainy season or other improvements to increase their longevity and ensure compliance with the Sphere standards.

# Health, Hygiene and Nutrition

Health services ranked third among the refugees' priorities in RI's assessment. Previous to May 25, there was no response to the health needs of refugees in Tahoua. On May 25, with the assistance of WHO and UNHCR, Akarass opened a clinic at both Agando and Chinwaren who have been operating with a total of two doctors, four midwives, four nurses and four nutritionists. By June 3, 872 people had received a health consultation, including 216 pregnant women, and in the month of June 2572 consultations were made.



Patients at the health clinic must wait outside and be consulted in the doorway.

The most common illnesses among children were respiratory infections, diarrhea, malnutrition and malaria, while among adults, the staff observed joint pain, urinary infections and respiratory infections<sup>5</sup>.

During the period May 25-June 3, Akarass's doctors reported an outbreak of gonorrhoea in the sites, as well as one case of whooping cough and several cases of malaria among pregnant women; 10 births took place, with seven of these being evacuated to the Health Center at Telemcass. Throughout the month of June, 24 births took place.

As RI observed during its assessment, there is a lack of delivery beds, clean delivery kits and private areas for birthing mothers, as well as pharmaceuticals and medical supplies. The medical personnel provided by Akarass, while competent and dedicated, struggle to provide quality care due to the severe lack of medicines and medical equipment. With regard to delivery of babies, mothers give birth on the ground; doctors and midwives lack basic equipment and supplies, such as delivery beds, to assist them. Cases of complication are referred to a nurse in Telemcass which is a three hour drive away (while there are two qualified doctors at Agando and Chinwaren). In general, the doctor and nurses are unable to prescribe medicines for even simple illnesses, since according to Akarass, the two IEHK kits have proved to be insufficient to meet the needs of patients, both in quantity and type of medicine. The functioning of the clinic is also constrained. Akarass provided eight tents for the clinics and living space for the personnel, but these are insufficient to provide consultation space. Patients line up seated, under the sun, with the nurse and patient seated or crouching at the tent's door for the consultation.

Greater attention is also needed to the issues of sexual and reproductive health, as Akarass reported a high rate of sexually-transmitted disease among pregnant women and that unprotected sex is common among refugees. UNHCR is concerned by the risk that births will not be announced and requested

<sup>5</sup> Akarass's Health Report, Week 15

assistance in registration of children born in the sites. Rates of malaria are certain to rise in the coming months with the onset of the rainy season, and the threat of cholera exists due to endemic conditions.

In interviews with children, many girls and boys reported being sick, either in the past or present at the sites, with malaria, skin rashes (dermatose), colds and fevers, and diarrhea. They said they couldn't get medicines at the Akarass clinic.

In the area of nutrition, Akarass has provided CRENAM activities at the two sites, through the assistance of WHO and UNHCR. This allowed for the identification of 38 cases of severe malnutrition and 31 cases of moderate malnutrition during the month of June. Akarass has also distributed nutrition supplements to pregnant and nursing mothers and their children. Demonstrating the level of hunger among the refugees, RI observed that the mothers have shared these nutrition supplements with the other children in the household due to lack of other food.

## Water, Sanitation and Hygiene (WASH)

In the area of WASH, beyond issues of hygiene, RI found that this sector is not adequately covered at this time.

With regards to water provision, UNICEF has installed two cement wells at Chinwaren and provided Akarass with a reservoir bag at Agando. In addition, UNICEF is building another well at Tilabit, located in the Chinwaren valley, close to the Chinwaren site. Akarass and HCR provide 20 cubic meters of water per day to Agando and 30 cubic meters to Chinwaren, which filled a significant need but is nevertheless insufficient to meet the Sphere standard of 15 liters per person per day, since for a population of 15,093, 226.4 cubic meters would need to be provided to meet all needs for drinking, cooking and basic hygiene. Following a recent assessment, UNICEF is planning along with the Regional Direction for Hydraulics to finance a large WASH program at the sites



The provision of water is insufficient across the two sites.



Latrine and shower blocks are under construction.

including installation of a drilled well in the Agando town with extensions to the refugees at Agando. In addition, ACH has recently launched a WASH intervention which includes the construction of two traditional sumps with hand pumps, and the construction of three fountains for the drilled well provided by UNICEF. The host population at Agando reported that they consume water from wells, both for drinking and for their activities.

In the area of sanitation, UNICEF is also planning to construct 27 latrine and shower blocks (16 for Agando, eleven for Chinwaren). Each block has two latrines and two

showers. Assuming that each latrine will serve 50 people given the emergency nature of the situation, this intervention will serve 2700 people. Meanwhile, ACH is coordinating with UNICEF to begin construction of at least 60 latrine and shower complexes, which will be managed (two to each group of families) by a sanitation committee. These complexes should serve 6000 individuals. These interventions combined, there remains a gap of 6393 individuals needing to be served by latrines in order to meet Sphere standards.

RI observed the latrines in construction and asked the refugees where they used the toilet. By custom and lifestyle, the refugee population practices open-air defecation, and are not used to using latrines. Therefore, it seems that hygiene promotion around safe use of latrine will be necessary in order for this intervention to be worthwhile and to prevent disease transmission. When interviewed, men from the host population also said they do not have or use latrines.

With regards to hygiene, the refugees had by the date of RI's assessment lacked total access to hygiene materials such as soap, buckets, combs, brushes and scrubbers, as well as detergent. RI learned that ACH has received funding to provide 2000 hygiene kits to families consisting of one 20 liter jug, one 20 liter bucket with cover, one plastic kettle used for handwashing, five to ten bars of soap, five to ten packets of powdered detergent, and one piece of cotton fabric (0.5m x 0.5m) for menstruation use. This covers the majority, but not all of the 2821 households at the site. Additional items should be added to the current NFI kit, such as oral rehydration salts, nail cutters, fabric or towels, and combs.

For water treatment, 115,404 aquatabs have been distributed across the two sites and the Mentés village. A total of 1000, 10-liter jugs have been distributed to households by UNHCR, leaving a gap of 1821 jugs to be provided to the remaining households.

## Education and Children's Activities

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Due to the high number of children living on the sites (62% of the refugee population is under the age of 18), education is also a priority need, as the school year will begin in a few months and the population is



Refugee children had no organized play and were currently not attending school.

likely to remain on the sites. Educational needs are shared by the host population, as there is only one instructor, teaching students of all levels in one classroom, in the sole school in Agando.

RI found that refugee children were not currently attending school at the sites and only some of those assessed had some level of primary school (first through fourth years). It would be challenging to integrate the Malian children into the Nigerian school since the Malian and Nigerian educational systems have different schedules and curricula.

Children reported in focus groups that they play in

areas around the sites. RI observed that the children did play and had energy; often, groups of girls of all ages would gather in the shade of the few trees on the sites, while boys would run around and play. However, there were no organized play or informal education activities organized at the sites, although at the Agando school there is a soccer field and place to play, where boys from the host population reported they played. RI observed that groups of children move unaccompanied by adults and seemingly without fear between the two sites of Agando and Chinwaren. Boys from the host population said they wished the refugees would stay and the children could come to the school so they could play together.

RI hopes that the Regional Direction of the Ministry of Education will conduct further assessment of the needs of the host population and refugees. RI recommends interventions that focus on enlarging the Agando school so as to provide a long-term benefit to the host population, such as through building additional classrooms, hiring additional instructors and providing additional educational materials. One possibility for serving the Malian children would be to identify whether there are teachers among the refugee population who could be posted to the school to teach class to the refugee children.

## Protection and Pyschosocial Impact

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In general, women and girls face a higher vulnerability during the refugee crises due to the loss of protective family and social structures, and they often have a more difficult time re-establishing activities that bring in revenue to the household. Women and girls often face heightened risks of gender-based violence (GBV) and sexual violence in refugee contexts. Within Niger, girls experience high rates of female circumcision and early marriage, and these protection concerns also apply to the two refugee sites given the population shares many of the same cultural norms and traditions.

RI found that no cases of rape or GBV have been reported to date to Akarass/UNHCR, and the women and children interviewed said they do not feel any threat to their physical security. In studying the populations, RI understood that the refugees are not strangers to each other; they come from the same communities in Mali, and they have been able to replicate some of their social structures as they've settled on the sites. This has contributed to women and children reporting that they feel at ease within the settlements. RI observed that children move without any sense of fear between the two sites, which are eight kilometers distant from each other.



Children move unaccompanied between the two sites.

When asked in focus groups if they were afraid of anything or anyone, refugee girls reported, that no one threatens them there and that they felt security due to the presence of the Nigerien military. Refugee boys said they feared hunger or thirst, only.



One protection concern that RI did not have time to develop in depth was the risk that unaccompanied children could be kidnapped and/or conscripted into violent groups by members of the armed Tuareg rebellion. RI observed that the Nigerien military fears that the rebellion will spread into the area and that they would be challenged to resist them. RI also recommends that further assessment be conducted to understand the prevalence of child and forced marriage as well as female circumcision.

RI assessment tried to gauge the psychosocial impact of the violence in Mali and the displacement of the population. In focus groups, RI observed that the population struggles with feelings of disempowerment. “One day I was living in the house where I had everything, the next day I am here with nothing.” This simple statement belies the deep sense of loss, the refugees feel. They suddenly find themselves in a situation of dependency, without any might or power, and facing a situation of food insecurity, loss of livelihoods and homes and being helpless to alleviate the situation. Some told they feared the situation would degrade further and they would have to flee again. They thus seek somewhere secure and stable to live.

RI also observed that the population of refugees may already have felt marginalized by the Malian state due to their pastoral livelihoods and isolation in remote areas of southern Mali.

*Relief International is a humanitarian non-profit agency that provides emergency relief, rehabilitation, development assistance, and program services to vulnerable communities worldwide. Relief International is solely dedicated to reducing human suffering and is non-political and non-sectarian in its mission.*

# Annex A: Interviews and Focus Group Samples

Included here is a sample of the results of the interviews and focus groups conducted during RI's assessment.

- 1) The following interview was conducted with **Mr. Youssouf Hamdanna**, a community leader and Representative of the Tilia Group Leader at Agando.

Question	Response
What is the total population of Agando?	2401
How many schools, markets, health centers and water points are there?	1 School 1 Market 0 Health Centers 2 Cement wells
How have you found the situation of the refugees since their arrival?	Their conditions are not good, they eat only the means of subsistence. The old women collect water and fuel, by going into the bush.
How do you see the situation developing in the future?	There's a risk the population will disperse, return to where they are from.
How has the population adapted to the resources that are available here?	There has been a sharing of resources, through African solidarity.
Who does what to help them?	There has been distribution of WHO food stocks by the Red Cross and a distribution of kits by Akarass.
What are the needs of your village to support the refugees further or help them return?	Additional cereal distributions, as well as food for the animals. Help in developing revenue-generating activities, such as mills for the women.
How has the host population adapted to the refugees' arrival?	They are in some cases related, but also similar in terms of custom and environment.
What are the needs of the village to support its normal population?	Food assistance, such as a cereal bank, and restocking of our herds, and cooperative boutiques.

- 2) Focus group with **refugee women (all mothers, nursing or pregnant)** at Agando and Chinwaren

Question	Response
How do you find the situation as a refugee in this community?	(Agando) The population received us well even though they were also poor. (Chinwaren) This is the best location. The Nigerien population hosted us and we feel in good security.
When did you arrive to this place?	Six months but there are new arrivals every day.
Do you have access to a doctor, nurse or midwife for your prenatal or post-natal care?	(Agando) Yes. At first it was the military who healed us but now it is Akarass who heals us. (Chinwaren) We have access to the Akarass clinic and that's where we go.
How do you assure good health	(Agando) It's Akarass who takes care of our health and that of

during your pregnancy? How do you assure the good health of your newborn?	our children. (Chinwaren) We don't nurse well because we are hungry, so there's no milk. We have nausea and vomiting but there are medicines for that.
How do you assure good nutrition in your household?	(Agando) We cannot assure good nutrition because we have nothing, no animals or money. (Chinwaren) Our children are malnourished, they don't eat well. We barely have one meal a day.
How do you assure drinking water for your household?	(Agando) Before it was well-water but now we take water from the cisterns provided by Akarass. (Chinwaren) Akarass gives us water in jerricans.
How do you assure sanitation for your family? Are there latrines that are accessible, safe and clean for you to use?	(Agando) We don't have latrines, we go in the bush. (Chinwaren) We don't have latrines, we go in the bush a little far from the site. They are building latrines for us.
Do women who are menstruating have everything they need?	(Agando) No we don't have anything and have to make do. (Chinwaren) No, we use parts of our clothing (the cloth they use as a skirt).
Have you received any aid since your arrival?	(Agando) We received from Akarass kitchen kits, blankets, mats and medicines, and corn from the Red Cross. (Chinwaren) We received kitchen kits, blankets, buckets and mats, mosquito nets and jerricans, as well as plumpynut and cereal flour from Akarass.
Do you feel physically secure? What threats exist to your private life?	(Agando) Here we are not very afraid but we are afraid we've been pursued by the bandits. (Chinwaren) Here we are not afraid of anything but sometimes we fear the bandits that chased us.
What are your priorities at this time?	(Agando) Food in sufficient quantity, health care, shelter, clothes for us and our children, milk. (Chinwaren) First we want something to eat, then we want shelter and then the rest.

### 3) Focus group with **refugee men (all pastoralists)** at Agando and Chinwaren

Question	Response
How do you find the situation as a refugee in this community?	(Agando) When fleeing we thought our lives had ended. But arriving here we feel in security and well-received. (Chinwaren) Since we arrived nobody had done us wrong, we are in peace with everyone.
When did you arrive to this place?	(Agando) We arrived 5-6 months ago with a good number of people. (Chinwaren) Six months a good number came but others continue to arrive.
How have you found the registration process? Have all members of your family been registered?	(Agando) Everyone has been registered and has the refugee cards they gave us. (Chinwaren) The process is ongoing since some people are newly arrived and they haven't finished registering these.
Did you bring your animals with you? What percentage are they of your total herds?	(Agando) Yes we came with all of our animals but some of them have died. (Chinwaren) Rare are those who brought their animals. We don't have many animals due to the drought from last year and this year.

Have you practiced animal raising since your arrival here? What have been your challenges or opportunities?	(Agando) Yes we have practiced but there is no pasture land or food for the animals. There are no other opportunities for revenue-generating activities. (Chinwaren) A few animals were put out to pasture.
How do you assure the food security of your household?	(Agando) Through credit, short-term work (cutting wood, transporting water) but at present we don't do anything and the needs are not met. (Chinwaren) We don't have anything to eat except what they distribute to us.
Do you have health problems in your households? How do you provide health care?	(Agando) Yes, but we get treated at the health center where services are free. (Chinwaren) The children and nursing and pregnant mothers, they all go to the health center put in place by Akarass.
How do you assure drinking water for your household? For your animals?	(Agando) Akarass's cistern for humans, while the animals drink from traditional wells. (Chinwaren) The problem of water has been fixed due to Akarass's intervention, now there is enough water.
Do you plan to stay in this community? When do you plan to return?	(Agando) We will return once there is peace in our home communities. (Chinwaren) We plan to return when we will be in security. We don't have any desire to return to Mali and we can stay and cultivate here.
What are your priorities at this time?	(Agando) Food, shelter – because the rains are coming. (Chinwaren) Food, clothes, restocking of herds, cultivate the land, medicine, education for children.
Other comments	(Agando): "What has been done is good, but others should come help Akarass, because it's insufficient" "Keep in mind we are animal raisers, we live for the animals and by the animal products, but now we don't have any animals." (Chinwaren) "No one else has aksed us what we need, so now we trust you because you have done so" "There are households who haven't cooked in three days, they eat thanks to other households who are able to share a little of what they have." "We'd like a little money to develop commerce activities or buy animals" "We are especially vulnerable because the pastoral crisis has destroyed our animals". "Most of the children go to Koranic school."