



REFUGEPOINT

2018 second quarter report

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A LIFELINE FOR FORGOTTEN REFUGEES

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Creating Lasting Solutions

In May, the entire RefugePoint staff convened for a four-day staff training in Nyahururu, Kenya. Counting Experts based across Africa and the Middle East, and staff from our Cambridge, Nairobi, and Geneva offices, we now have a strong team comprised of more than 90 members.

The training provided an excellent opportunity for staff to make face-to-face connections, and to ensure that the team develops a shared understanding of important topics such as RefugePoint's approach and the future direction of the organization.

All members of RefugePoint's leadership team made presentations at the training. Topics included the history and strategic direction of RefugePoint, RefugePoint's approach (direct services, field building, systems change), change management, and fundraising. Many notable guest speakers also presented, including Monika Sandvik-Nylund, Senior Adviser (Children) at UN High Commissioner for Refugees (UNHCR), who spoke about the new best interest determinations (BID) guidelines. Many formal and informal conversations were held to improve staff synergy, communication, and program delivery.

It was a very busy quarter at RefugePoint-Geneva, full of major events and culminating with Annual Tripartite Consultations on Resettlement and the Annual Consultations with NGOs during the last week of June. Amy Slaughter from RefugePoint-Boston and Jacob Bonyo from RefugePoint-Kenya, as well as Marty Anderson from RefugePoint-Geneva, attended all or parts of both events, so the entire range of our operations was nicely represented at both events.

At the Annual Tripartite Consultations on Resettlement there was a lot of enthusiasm for complementary pathways, seen as a way to offset the decline in traditional resettlement numbers. In these conversations, our new Canadian Economic (Labor) Mobility Pathway Project pilot (*see page 5*), to identify refugees in Nairobi who may be eligible for labor visas to Canada, was given a lot of positive attention.

Jacob Bonyo was asked to be a panelist in a session on NGO contributions to identifying refugees in need of resettlement, where he was able to speak about not only our program in Nairobi but also our work through our deployment partnership with UNHCR.

Lasting Solutions: Resettlement

Identifying and resettling the most at-risk refugees to countries worldwide

Providing lasting solutions for the most at-risk refugees remains at the core of our work. During this quarter, RefugePoint staff referred 582 refugees for resettlement from 24 locations across Africa. Our staff also contributed to additional resettlement efforts by leading identification exercises to find at-risk refugees, and completing quality review procedures for resettlement cases. Through these activities, we helped to facilitate the resettlement process for another 1,204 refugees this quarter.

NOTEWORTHY EVENTS

Resettlement continued to be impacted by reduced targets for resettlement to the U.S. and thus a diminished need for new submissions in certain contexts. However, additional quotas opened up in West Africa and in southern Africa which called for greater flexibility in meeting additional staffing needs swiftly. We hope that with the increase in staffing, we will be well-positioned to achieve our resettlement targets in the second half of the year. Resettlement highlights from this quarter include:

During a mission to Cape Town, our Expert based in Pretoria, South Africa interviewed a family that had experienced severe violence both in their country of origin as well as in their country of asylum. One of the family members also had acute medical needs requiring immediate treatment. Our Expert advocated for the family to be submitted to Sweden for resettlement on an urgent basis. Sweden promptly accepted the case, and travel arrangements were initiated within a matter of weeks. The family was ecstatic with the news that they would be able to travel so quickly to receive both medical and other support in Sweden. *(Continued)*



2nd Quarter RefugePoint Programs Locations

- | | |
|-------------------------|----------------------------|
| 1. EASTERN CHAD | 14. DAKAR, SENEGAL |
| 2. SOUTHERN CHAD | 15. PRETORIA, SOUTH AFRICA |
| 3. N'DJAMENA CHAD | 16. KASSALA, SUDAN |
| 4. ALI SABIEH, DJIBOUTI | 17. GENEVA, SWITZERLAND* |
| 5. CAIRO, EGYPT | 18. KASULU, TANZANIA |
| 6. ASSOSA, ETHIOPIA | 19. TUNIS, TUNISIA |
| 7. SHIRE, ETHIOPIA | 20. KYAKA, UGANDA |
| 8. ANKARA, TURKEY* | 21. SOLWEZI, ZAMBIA |
| 9. NAIROBI, KENYA | 22. TONGOGARA, ZIMBABWE |
| 10. LILONGWE, MALAWI | |
| 11. NIAMEY, NIGER | |
| 12. HUYE, RWANDA | |
| 13. KIBUYE, RWANDA | |

*NOT SHOWN

NOTEWORTHY EVENTS (CONTINUED)

The family was ecstatic with the news that they would be able to travel so quickly to receive both medical and other support in Sweden. The family had been struggling, as it was extremely difficult for the head of the household to find employment and support the family given documentation issues.

During a mission to Niger, one of our Experts interviewed an Eritrean woman who had been held captive by ISIS for two years and had experienced extreme violence. Processing the case for resettlement offered hope and a much-needed protection solution.

One of our Experts in Niamey, Niger interviewed a woman who had survived an explosion and was so traumatized that she lost her ability to speak in some instances. Fortunately, with our Expert's intervention, she is now on the path to resettlement where she can rebuild her life and receive the required medical treatment.

In addition to their regular casework, many of our Experts around the world serve as leaders in their offices, going above and beyond their core duties and acting as "focal points" for a diverse range of resettlement-related special projects and activities. These projects allow RefugePoint to have an impact beyond our core casework, as they focus on tackling gaps in systems. Working to bridge these gaps helps to ensure that refugees are not overlooked. These projects often involve capacity-building with partner organizations, including UNHCR, and involve working with especially vulnerable populations with specific needs.

Our Expert in Southern Chad worked with partners, assisting several women to obtain birth

certificates for their children born out of survival sex, so that the refugees could proceed with their resettlement cases to Canada. Before the expert began working on the cases, they had been pending for two years.

As the LGBTI focal point, one of our Experts in Dakar, Senegal, focuses on the protection needs of this vulnerable population. Because of the increased risk of refoulement, or the forcible return of refugees to a country where they could be subjected to persecution, the Expert created a tracking system for emergency LGBTI case processing, which is currently being implemented in the office.

One of our Resettlement Experts in Dakar, Senegal, is the focal point for liaising with other UNHCR operations regarding the Emergency Transit Mechanism in Libya. His goal is to reduce redundancy and make sure all cases are streamlined and proceeding. He coordinates the information collected from offices in Egypt, Ethiopia, and Sudan to make sure that refugees are registered and verified by only one caseworker.

One of our Experts in Niamey, Niger, is the resettlement focal point for working with unaccompanied minors. She acts as a liaison among the many units and processes at UNHCR, making sure that every child gets what they need.

Our Resettlement Expert in Cairo, Egypt, acts as a focal point for all external NGO referrals, which means that she is responsible for reviewing referrals from NGOs, granting interviews, following up as needed, and responding to inquiries.

Since 2005, RefugePoint has referred

40,626

refugees for resettlement to:

AUSTRALIA

BELGIUM

CANADA

DENMARK

FINLAND

FRANCE

IRELAND

NETHERLANDS

NORWAY

PORTUGAL

SWEDEN

UNITED KINGDOM

UNITED STATES

Lasting Solutions: Self-Reliance



In addition to referring refugees for resettlement, RefugePoint focuses on equipping urban refugees in Nairobi to become self-reliant. We achieve this through stabilizing support services to ensure access to food, shelter and medical care, and empowerment through counseling, skill building, and livelihoods assistance.

In April, we launched the Canadian Economic (Labor) Mobility Pathway Project (EMPP project). The pilot project aims to identify candidates who qualify for relocation to Canada via economic rather than humanitarian pathways. RefugePoint has been subcontracted by Talent Beyond Boundaries to pilot the project in Nairobi for one year (April 2018 - March 31, 2019). Talent Beyond Boundaries is an organization that connects refugees to international job opportunities, opening labor mobility as a complementary solution to traditional refugee resettlement. The pilot is designed to provide learning opportunities related to the identification, assessment, and processing of applicants for employment in a select number of provinces and territories.

In April, we held a Business Development Skills training, which reached 18 participants, most of whom were refugees from Somalia and the Great Lakes region. In May, we held the first Business Strengthening Workshop (BSW) at the RefugePoint office, which reached 25 livelihoods clients who had received grants within the last six months. The workshop covered topics including setting goals, budgeting, planning, credit and financing, and how to communicate with customers and partners. It was a full-day event with guest speakers from the Danish Refugee Council, as well as former successful beneficiaries of the livelihoods program.

In April, we conducted two community health talks in Huruma, an area in Nairobi, which focused on peptic ulcers and stress management. A total of 137 participants were reached. We also reached 805 individuals through the Biafra medical clinic that was conducted in partnership with the Health Social Economic Development Africa and the Kamukunji Sub County Health Management Team.

In May, we registered 11 households (25 individuals) with the National Hospital Insurance Fund, which is a public health insurance system that allows sustainable access to public healthcare facilities. We also participated in an inter-agency community sensitization forum at Kawangware, where The International Rescue Committee took the lead by bringing together refugees, refugee agencies, government officials and local leaders.

In May, we presented on the Self-Reliance Index at a UNHCR Partners livelihoods training, facilitated by trainers from UNHCR Geneva and the International Labour Organisation. The objectives of the training were to build the capacity of participants to understand the fundamental principles of promoting livelihoods and the economic inclusion of refugees, and to explore and strategize on how to improve the livelihoods and economic inclusion of refugees in Kenya.

RefugePoint's Urban Stabilization Path

COMMUNITY NAVIGATOR OUTREACH

Q2 **1669**
YTD **3065**

EMPOWERMENT & STABILIZATION



Health Services

Q2 **779**
YTD **1440**



Food Assistance

Q2 **665**
YTD **1242**



Education Support

Q2 **287**
YTD **564**



Group Counseling

Q2 **162**
YTD **322**



Businesses Launched

Q2 **59**
YTD **98**

GRADUATED CLIENTS TO SELF-RELIANCE

Q2 **235**
YTD **322**

Advancing Refugee Child Protection

At RefugePoint, refugee children are prioritized in all of our programs, and we collaborate closely with partners to fill critical gaps in refugee child protection. During this quarter, our staff conducted child protection assessments for 116 vulnerable refugee children in 18 locations, and reviewed child protection assessments for an additional 369 children.

Field Highlight

In March, our Expert in Assosa, Ethiopia led a child labor survey to assess existing child protection risks (child labor, in particular) facing children across all five camps in the Assosa operation. Information gathering activities included a survey of approximately 80 key informant interviews in each camp with various stakeholders, focus group discussions with several different groups (ex. parents, male children, female children, etc.), observation visits of multiple sites believed to be locations where child labour occurs, and a desk review of records related to previous and current child labour cases. Following the completion of the data gathering and review exercise, our Expert was responsible for drafting the initial version of the report detailing survey activities, methodology, findings, and recommendations to address the issue of child labor in the Assosa operation. Through the findings, the operation was not only able to have a factual basis for determining the extent of the problem but was also able to shine a light on the desperation felt by many refugees as a result of reduced food rations, inadequate basic services, and the lack of hope for a better future. It was particularly concerning that the majority of children engaging in child labor were found to be doing so “voluntarily” out of a sense of responsibility to support their families due to a lack of food and basic support, with many children found to be engaged in labor activities for up to 10 hours per day.

Our Expert in N’Djamena, Chad, conducted a best interest determination (BID) for two separated children whose case had been on hold since 2014. With the finalized assessment, it is expected that the case will finally proceed with resettlement.

Our Experts working at the Emergency Evacuation Transit Mechanism (ETM) in Niamey, Niger struggle to find words to describe the situation they are seeing regarding the refugees coming from Libya, especially the large numbers of unaccompanied children. They report that the inhumanity and dangers these refugees face are unimaginable. People regularly die crossing the Sahara desert and are tortured, kidnapped and traded from one smuggler to another as they are extorted for more money. Authorities also often enable and participate in the trafficking, and sometimes sell refugees to traffickers as well.

On top of their usual and difficult casework, our experts in Niger have been identifying gaps and advocating for better systems and processes in their offices. Our Child Protection Expert advocated for streamlined referrals for medical and psychosocial resources. As such, she was able to help a boy with a severe skin condition, another child who required dentures, and another with chronic eye issues which had not been treated even months after his arrival in Niger. With regular follow-up from doctors and nurses, the Expert made sure that the children received the necessary treatment. Similarly, another Child Protection Expert in the area trained his colleagues on child protection and case management practices. He also developed and adapted several protection tools, including case management forms and a risk assessment tool, which is now being used to assess children as they arrive to the guesthouses.



Rescuing Lives

A Long Journey to Safety

Charles fled from Burundi in 2012 when the country was experiencing post-election violence. He feared persecution due to his affiliation with an opposition party. After being forcefully arrested and detained for five days by the Burundian police, Charles was released on medical grounds. His journey to safety took him through Rwanda, Uganda, and on to Nairobi, Kenya.

Charles began receiving assistance from RefugePoint in 2016 after being referred for services by the medical team. Charles has leukemia, and one of the toughest issues that he faced in managing his illness was maintaining a healthy diet. After receiving nutritional guidance from his RefugePoint case manager, Charles began to make healthier diet choices. “I used to hate porridge and watermelons, but these days I can eat them and enjoy them.

I have even put on weight, and my blood count is improving,” Charles shared with us during a recent check-in.

Charles received rent, medical assistance, counseling and food support for six months, and continues to receive food assistance due to his medical condition. After completing RefugePoint’s business training, Charles received a livelihoods grant and started a business selling boiled eggs, but it has been difficult to conduct business due to his health condition. Charles is hopeful that he will be resettled soon, as UNHCR is currently processing his case. He says that once he is resettled, his priority will be to get specialized medical treatment. He cannot wait for the day when he will be able to live an independent and healthy life, unrestricted by his medical condition. **Name changed for anonymity*