



REFUGEE  
AND INTERNALLY  
DISPLACED WOMEN:  
A DEVELOPMENT  
PERSPECTIVE

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# INTRODUCTION

Between seventy-five and eighty percent of the world's 50 million refugees and internally displaced persons are women and their dependent children. They can be found in more than one hundred countries. Many have been living in camps and emergency situations for generations.

Only in recent years has attention focused on their largely marginalized and neglected status and on the need to include them in income-generating and development projects. The Fourth World Conference on Women, held in Beijing in September 1995, called for the provision of vocational and professional training for refugee women.<sup>1</sup> Earlier women's conferences organized by the United Nations found that refugee women repeatedly face discrimination in access to relief supplies, often receive only limited health care, benefit in only small numbers from education and training, and usually have little or no possibility of participating in income-generating and employment opportunities.<sup>2</sup> A Policy on Refugee Women adopted by the U.N. High Commissioner for Refugees (UNHCR) in 1990 pointed out that planners often overlook the needs of refugee women, making them vulnerable to exploitation.<sup>3</sup>

Internally displaced women often are in a more precarious situation than refugee women because of the difficulty of securing access to them and because their own governments, under whose jurisdiction they reside, may be unable or unwilling to provide for their safety and well-being. There is, moreover, no one international organization with responsibility for providing protection and assistance to the internally displaced. Often they are caught up in internal conflicts between their governments and opposing forces. Some of the highest mortality rates ever recorded during humanitarian emergencies have come from situations involving internally displaced persons.<sup>4</sup>

International concern about the plight of refugee and displaced women has been fueled by several factors. For one, the number of refugees and internally displaced persons is rapidly growing and has been outstripping the international community's capacity to provide adequate assistance. It is estimated that 10,000 persons are fleeing their homes each day and that out of a world population of 5.5 billion, roughly one in every 130 people has been forced into flight.<sup>5</sup> The explosion of civil wars and ethnic strife combined with scarce resources, overpopulation, and poverty have been compelling people daily to leave their homes in search of security and survival elsewhere. The number of those considered refugees has risen to about 20 million persons today; internally displaced persons have gone beyond the 30 million mark.

Many situations of displacement turn out to be long-term, lasting for more than a decade. This has led to a growing international consensus that the capacities and skills of refugees should be enhanced during this lengthy waiting period so that they may become self-reliant and contribute more fully to their host countries and to their countries of

origin upon return. In particular, attention has begun to focus on integrating refugee and displaced women into development-oriented programs and environmental projects so as to "unleash" their productive potential. In many prolonged refugee settings, there is a preponderance of female-headed households because men have become disabled or because women have lost male family members to combat, to recruitment in resistance armies, or to migration in search of work. Their inability to become economically self-sufficient poses a threat to themselves and to their families.

Finally, most refugees seek asylum in and return to the least developed countries.<sup>6</sup> The impact of mass migrations on the economic and social structure of poor countries has often been so devastating that development agencies and governments are finding that they can not easily design development plans without taking into account the presence of refugees and displaced persons. The United Nations Development Programme for Women (UNIFEM), for example, created the African Women in Crisis Umbrella Programme (AFWIC) because it realized that "it is no longer possible to make significant developmental progress in Africa without addressing the impact of emergency situations and mass migrations."<sup>7</sup>

Some figures are instructive. In Mozambique, more than 25 percent of the population (4 million of 15.7 million persons) have been displaced inside the country or in neighboring countries -- and 83 percent of the 4 million are women and their dependent children. In Malawi, more than one million Mozambican refugees placed a tremendous strain on the local economy and infrastructure for at least a decade. In Liberia, more than half of the population (or more than 1 million) is displaced internally or abroad; in Rwanda and Somalia, at least one third of the country is uprooted. Several million Afghan refugees have been housed for more than a decade in Pakistan and Iran, and in Afghanistan about 50 percent of a population of 16 million have been uprooted by conflict. The civil war in El Salvador caused about one-fifth of the population to become internally displaced or to flee to Mexico or the United States. In most of these settings, the vast majority of the displaced are women and their dependent children.<sup>8</sup>

Although these figures should easily suggest the need to prepare refugee and displaced women for productive activities through education and training, income-generation activities and similar forms of empowerment, both relief and development agencies have been slow to come together to accomplish this. Development agencies until recently have had only limited involvement with uprooted populations while agencies dealing with emergency relief have had neither the experience nor the funds to move programs substantially beyond the emergency phase of operations. Even UNICEF, an agency committed to providing relief and development assistance to women and children, has chosen not to become extensively involved with refugee women and children on the grounds that this would duplicate UNHCR's responsibility to assist and protect this group. In some refugee and returnee settings, development-oriented approaches have begun to be introduced, but refugee and displaced women too often remain outside of these efforts because of discriminatory practices or traditional

perceptions of women's roles. Policies and strategies to incorporate women have not yet been implemented sufficiently to bring about real improvement in the lives of refugee and displaced women.

This paper examines the actual experience of refugee and displaced women in light of the need for their greater integration into development-oriented programs for refugees, displaced persons and returnees. It looks at women's access to basic services, their role in planning and delivering emergency assistance, their opportunities for economic self-reliance, and their role in reconstructing their home countries after they repatriate. It identifies the obstacles impeding their full integration into economic and social programs and recommends steps to overcome these barriers. It recommends the greater involvement of development agencies and multilateral development banks in programs for refugees and displaced persons, and in particular in efforts to make refugee and displaced women self-sustaining.



## NEW POLICY ORIENTATIONS

Within the refugee field, there exists substantial interest in moving assistance efforts from a relief orientation towards an emphasis on social and economic development to ease the burden on host countries and to make refugees more economically independent. A development approach would move refugees from being the passive recipients of shelter or food aid to becoming active participants in the process. Both refugee women and refugee men would be consulted at the outset of an emergency, whether on the type of shelters to be provided or on the preparation, distribution and allocation of food, and they would participate in the planning and implementation of social and economic programs. The approach is based on the view that assistance provided in a participatory way will establish a basis of self-reliance and thereby contribute to long-term solutions by building upon the skills and economic roles of the refugees themselves.<sup>9</sup>

Within the development community, there is also growing support for the view that relief assistance should be delivered in such a way as to lay the foundation for development work and that development-oriented programs introduced early on can better prepare refugees to integrate into countries of asylum and resettlement or to repatriate more successfully. As one U.N. report aptly commented, development assistance for refugees "would allow several million human beings to dispense with the international community's charity and resume a productive life."<sup>10</sup> Taking a development approach at the early stages of a refugee emergency would also reduce the cost to the donor community of ongoing emergency relief.

Moreover, research has repeatedly shown that relief assistance delivered on the assumption that people have strengths and capacities tends to do a much better job of supporting the longer-term development process. Taking a development approach at the outset of an emergency establishes a basis of self-reliance upon which development planners can build.<sup>11</sup>

To avoid the risk of large-scale and continuing "refugee dependency syndrome," relief and development agencies have endorsed the "relief-rehabilitation-development continuum" or the integration of short-term relief measures into a longer-term development perspective. The approach aims to build on the capacities of refugees, returnees and displaced persons and integrate them more fully into national development plans, whether in countries of asylum or countries of origin. With repatriation becoming more and more the preferred solution for refugee situations, emphasis is being given to the need to ensure a link between emergency relief and development in countries to which refugees are returning and in which internally displaced persons are reintegrating. U.N. proponents of "the continuum" look forward to the day when the traditional dichotomy between relief and development funding and operations will be eroded and when the needs of refugees, displaced persons and returnees "will be automatically integrated into the development process of the host areas."<sup>12</sup>



It has proved difficult, however, to translate the new approach into concrete operational terms. In emergency situations, the focus of relief agencies largely remains on meeting short-term needs rather than on developing skills that can contribute to long-term solutions. Participatory approaches are often seen as too time-consuming or impractical, especially when large numbers of refugees come pouring over a border. Instead of involving recipients of assistance in decision-making, attention focuses on getting the job done as quickly and inexpensively as possible. Even after the emergency phase is over, attention often focuses on providing relief assistance rather than moving to development-oriented approaches.

Funding is a major part of the problem. After emergency needs are met, few resources generally remain for primary education, basic literacy training, health education, vocational training, and income generation. Refugees are given enough food and medical care to survive, but little or no funds are left for development projects, skills training, education, agricultural projects and tools which could help the refugees to become more self-sufficient.

Development agencies, for their part, do not have extensive funds beyond their regular budgets for projects involving uprooted populations. They also have not always been inclined to provide such assistance when the governments concerned are resistant to including programs for refugees and displaced persons in the regular development aid provided them. When their own local communities are equally in need, governments are especially reluctant to use development aid for refugees or even for their own displaced populations. They also may fear that refugees will not readily return home if they are able to establish themselves economically. However, when rehabilitation and development programs are designed and funded to benefit both local communities and the displaced, they have found greater response from governments and local populations. It is important that community-based programs be introduced, especially in very poor countries, so that uprooted populations can be helped while simultaneously stimulating the recovery and reconstruction of entire communities. The creation of an international fund for development projects related to uprooted populations has been proposed to underwrite such initiatives.<sup>13</sup> Clearly, the impact of substantial numbers of uprooted persons on the development process in different countries is too significant to ignore and requires adequate funds for their absorption.

Providing development-based assistance to internally displaced persons caught up in conflict situations is an even more difficult challenge. Although in such situations, massive emergency needs can be projected for long periods, much more could be done to assist the internally displaced to become self-reliant. UNIFEM has developed several low-budget projects for war-torn countries that include the provision of seeds and tools and income-earning activities for refugee and displaced women. It has found that training and small-scale programs can be introduced even though the requirements for traditional development programs are not in place. UNICEF also has sought to target the development needs of internally displaced women when it provides assistance to the

internally displaced in conflict situations. Both agencies are seeking to develop new strategies to translate the link between relief and development assistance into concrete, operational terms.<sup>14</sup>

Overall, however, for the vast majority of refugee and displaced women the relief-to-development "continuum" has had little impact to date.

## THE NEED FOR BETTER STATISTICS

One of the first steps needed to carry out a development-oriented approach for refugee and displaced women is the compilation of basic statistics essential to the formulation of effective policies and programs. In 1992, of forty-seven UNHCR branch offices reporting from countries with more than 10,000 refugees, only eighteen provided some demographic breakdown of the population, and the data provided was incomplete. Some reported the proportion of women and children, but gave no percentage specifically for women. Others reported a male/female division but did not indicate what proportion of either group were adults. No data was provided on the number of female-headed households or on the educational level, skills, or occupation of the refugees.<sup>15</sup>

Refugee populations by and large tend to be regarded in numerical terms rather than as women, men and children with their own unique needs and abilities. In many countries, including those with large-scale refugee programs, there is little information available on the number of female-headed households, single women or school-aged girls in a refugee community. Nor is much data available on female mortality, morbidity and malnutrition rates, or on the age of refugees.<sup>16</sup>

To be sure, there is genuine difficulty in obtaining and maintaining accurate figures in refugee settings, and sometimes the refugees themselves or their host governments seek to obfuscate the figures for a variety of political or economic reasons. But in many cases little importance seems to be given to gathering data, in particular data that is gender-sensitive and that provides information about the demographic composition, socio-economic structure and culture of the refugee population. Without information about the gender, age, and makeup of a refugee population, it is much harder to design effective programs for women.

Even during an emergency, it is necessary to know about the gender, age and capacities of the refugee population so that appropriate programs can be introduced. Food distribution systems, the construction of shelters, the location of camp sites, and camp decision-making are all determined in the first phases of an emergency. If the programs designed create biases or exclude women, they are exceedingly difficult to reverse later on. Providing statistics by gender and age will also help immeasurably in the development of appropriate programs for women once refugee situations stabilize. Disproportionate numbers of female-headed households or of single unaccompanied women, for example, should indicate the need for programs that develop their economic self-reliance. Needs assessments that provide information on the capacities of refugee and displaced populations -- their skills, community organization and attitudes -- will enable greater refugee participation at the outset and the introduction of a development orientation earlier on.<sup>17</sup>

In the case of the internally displaced, even less attention has been paid to the collection of accurate demographic data. The African Women in Crisis Programme of

UNIFEM, based in Nairobi, has begun to collect demographic data in locations in which projects for displaced women are planned. But because no one organization is responsible for the internally displaced, no consistent methodology is applied. As relief and development programs become more involved with internally displaced persons, attention will have to be paid to the better collection of gender-specific information. The Representative of the United Nations Secretary-General on Internally Displaced Persons has called for more reliable statistics on internally displaced populations, especially women, so that more effective programs can be designed.<sup>18</sup>

## ACCESS TO HUMANITARIAN ASSISTANCE

In most instances, international organizations and host governments make decisions about food and non-food distribution without adequately consulting refugee or displaced women. When refugees are consulted, basic assistance and protection decisions are usually made in consultation with refugee men who come forward during emergencies to assume leadership roles over the distribution of food and supplies. Refugee women are reported to be routinely ignored even though they may represent the majority of the camp population and may have played a leading role in their home countries in the production and handling of food.<sup>19</sup>

In Africa, for example, women produce 80 percent of food consumed and at least 50 percent of export crops. In Central America, 25 percent of agricultural workers are women.<sup>20</sup> Involving refugee women early on in the distribution of food will build on their experience in the agricultural sector and further develop their skills in the management of food supplies. Involving them in policy decisions on food will also reduce their dependency and will encourage development-oriented approaches. In particular, it has been shown to lead to small-scale gardening and farming projects in which refugee women can participate. Home gardening has often proved a successful source of supplemental food and income by enabling women to market the surplus and use the proceeds to purchase other items. Refugee women, moreover, could be remunerated, either in cash or in kind, for work performed in organizing food distribution, which would further help them meet their families' needs. An ideal food strategy would include the distribution of items by international organizations that are not readily available and the establishment of small-scale subsistence and income-generating projects to supplement the distributed food basket and also add to family income.

Enabling women to play a role in food distribution would also ensure that they and their children receive sufficient food for their needs. Food and supply distribution systems set up through male camp committees often result in women getting less than they should or their having to trade sexual favors to secure needed food and supplies. High malnutrition and death rates among refugee women have repeatedly been traced to distribution systems run exclusively by men. In Mexico, in the late 1980s, the control of food distribution by refugee men resulted in high rates of malnutrition among women and children. In Pakistan, inequity in food distribution is reported to have caused a high incidence of anemia among the adult female population. In Kenya in early 1992, food distribution policies were largely to blame for the high overall death rates reported in one of the camps; food was being distributed through clan elders who apparently diverted quantities for sale on the black market or to feed those fighting in Somalia. In Zaire in 1995, food distributed by the U.N. to Rwandan male refugees was sold on the open markets, including protein supplements intended for pregnant women.<sup>21</sup>

Similar problems have arisen when the distribution of non-food supplies has been made the sole responsibility of male leaders. In Ethiopia, for example, plastic sheeting

for basic shelter hardly reached female heads of household. In Rwanda, plastic sheeting distributed by refugee men is reported to have rarely reached widows or older women.<sup>22</sup> In Kenya, an assessment of the conditions of refugee women found that despite a large number of female-headed households, "most planners tend to assume that they do not exist and that only men can legitimately head households." As a result, some female-headed households were "ignored altogether and thus deprived of access to material resources for their basic needs."<sup>23</sup>

Giving refugee and displaced women a role in the distribution of food and supplies has been shown time and again to result in more equitable distribution for the entire refugee community. In camps along the Thai-Cambodian border, for example, the provision of rations to women and girls succeeded in reducing the diversion of food to the military.<sup>24</sup> In Malawi, when women refugees became responsible for distribution, complaints about being "undertipped" or forced to give sexual favors or money in exchange for food largely ended. In Benin, UNHCR staff put women in charge of the distribution of food and supplies to stop the abuses reported by the refugee men in charge of distribution. In southern Africa, women refugees have increasingly been used as food distributors because it was found that "they are more aware of the need for equitable distribution."<sup>25</sup>

A Working Group of UNHCR's Executive Committee recommended in 1994 that UNHCR attempt "on an experimental basis" to "place food distribution in the hands of women in one of its new operations" and then evaluate the impact.<sup>26</sup> However, this does not go far enough or take into account the findings of earlier studies. UNHCR's own Guidelines on the Protection of Refugee Women, adopted in 1991, recommend that refugee women should be the initial point of control for the distribution of food and basic supplies.<sup>27</sup> Yet women continue to be given a role in the distribution of food and supplies on an *ad hoc* basis without institutional memory about the consequences of excluding them or the benefits to be derived from their inclusion. In 1994, the Executive Director of the World Food Programme (WFP) expressed concern over food distribution systems that fail to give priority to refugee women and ensure that entire families are fed.<sup>28</sup>

Nor are refugee and displaced women regularly consulted about food preparation. Too often the rations provided are inappropriate to the refugees' dietary traditions or may require preparation that cannot readily be accomplished in the camp.<sup>29</sup> Women refugees, moreover, have been found to be especially susceptible to acute forms of deficiency diseases, such as scurvy and anemia. In one refugee camp in the Horn of Africa, nearly 40 percent of lactating women had scurvy as compared to 14 percent of the males in the camp.<sup>30</sup> Greater consultation could help address health problems and assure better nutrition for refugee families. Similarly, women in refugee and displaced persons camps should be regularly consulted about the best techniques for the collection of water and fuel, time-consuming and sometimes dangerous undertakings essential to refugee survival.

Limited concepts of women's abilities and their roles as well as cultural tendencies among the refugees regularly contribute to ensuring that refugee and displaced

women do not actively participate in camp management and in the distribution of supplies. It is time for WFP, which is the single largest provider of food commodities to refugees and internally displaced persons, UNHCR and all others actively involved with providing material assistance to refugees and displaced persons to take action to ensure that, barring extraordinary circumstances, women are placed in charge of the distribution of food in all refugee and displaced persons' settings. Women should also be given a prominent role in the distribution of supplies. Although achieving this will not be easy, especially in locations where food and supplies constitute political power, current distribution systems too often place women and children at risk and do not adequately reach the intended beneficiaries. When distribution processes include women and build upon their experience in food preparation and agriculture, they prove to be the most cost-effective way of utilizing relief aid and also could help increase women's source of income.

## ACCESS TO HEALTH CARE

Reducing the barriers to health care for refugee and displaced women will not only enhance their well-being and productivity but those of their children and families. Women are the prime providers of health care to their families. When women become incapacitated, they are unable to assume responsibility for child care, food preparation, fuel gathering, water collection, and other family chores. Nor are they able to partake of developmental activities. In Ghana in 1991, development agencies found that they first would have to deal with the health problems of Liberian refugee women before they could introduce skills training and educational programs.<sup>31</sup>

In the case of internally displaced women, surveys conducted by the Centers for Disease Control (CDC), as noted above, have found that death rates among the internally displaced have been as much as 60 times higher than those of non-displaced persons in the same country.<sup>32</sup> For both internally displaced and refugee women, the sudden absence of food and shelter, together with contaminated water, become leading causes of death.

Although refugee women in long-term settings are often provided with health services that are better than in their home countries, many barriers exist to their full enjoyment of these services. One of the principal obstacles is that health services for refugees are often dominated by expatriate or host country men, and the refugees chosen to work with NGOs are often men as well. Many refugee women, however, because of cultural or religious reasons, are reluctant to be examined and treated by male personnel. Refugee women as a result often underutilize the health services provided. Burmese refugee women in Bangladesh, for example, consistently complained that they were not able to avail themselves of medical care because they did not feel comfortable talking to or being examined by male doctors.<sup>33</sup> In Pakistan, Somalia, and Ethiopia as well, refugee women have not allowed male practitioners to examine them fully. Reports from Mexico further show that refugee women's access to health care has been limited when health schemes are controlled predominantly by male refugees.<sup>34</sup> It was not surprising that an International Conference on Uprooted Muslim Women in 1994 specifically called upon governments, UNHCR and NGOs to "ensure that Muslim refugee women have access to female medical staff."<sup>35</sup>

The consequences for women's health of not having female health professionals treat them can be serious. In 1992 in Bangladesh, mortality rates were twice as high among refugee women as among refugee men. This was directly linked by the CDC to an absence of female medical personnel. Doctors in Ethiopia, Mexico, and Pakistan have likewise testified to the health risks posed to women by an absence of female personnel, especially in diagnosing and treating cervical, uterine, and breast cancer; serious gynecological infections; and sexually transmitted diseases.<sup>36</sup>

Various explanations have been offered for the relatively small number of female doctors and female health care personnel, but the main reason is that little priority has



been given to the issue. While it is true that female health professionals are not always easy to find or ready to take on assignments in refugee areas, they can be located among the host country population, among the refugee population, or brought in from abroad. Very often incentives like short-term contracts and safe housing are not explored. Nor do contracts signed with health service agencies specify that a certain percentage of doctors and health professionals must be women. UNHCR/Mexico placed an affirmative action clause in a contract with an NGO in 1993 to ensure that at least 30 percent of the health promoters hired would be women.<sup>37</sup>

UNHCR has recommended that at least 50 percent of all refugee health workers should be female. To meet this goal, a sustained effort will be needed on the part of NGOs and health delivery services to train and recruit from among the refugee women population an adequate number of female nurses, health aides and traditional birth attendants. To facilitate this, training sessions will have to be held closer to women's homes. In some cases, refugee women will have to be given remedial literacy training. The benefits of women's involvement will also have to be explained to the entire community, and the support of male leaders secured.

Training greater numbers of refugee women in health services can enhance the health of entire refugee communities. In many settings, refugee women are the only ones able to gain access to other refugee women in need of medical attention. Moreover, many health-related functions are better performed by refugee women -- particularly outreach, public health education, and primary care. In Malawi, a research team found that the health of the entire refugee community would be improved if more female community health workers were involved.<sup>38</sup> The training of refugee women in public health has also been found to have an impact on surrounding communities. A health practitioners' training project in Somalia, which trained 1,200 women as community health workers, not only went on to service refugee settlements but also surrounding communities.<sup>39</sup>

Involving greater numbers of refugee women in health services will gain refugee women the further benefit of entrance into a new income-producing field. This is particularly important when women return to their countries of origin. Often health infrastructure is destroyed and health conditions are in a precarious state. Trained refugee women will be better able to cope with these conditions and find a useful means of supporting themselves and their families. Moreover, they will be able to introduce into their countries of origin the new health information and practices provided in refugee camps which might be superior to what they previously enjoyed at home. In Ghana, a UNIFEM mission found that most of the women refugees wanted to train in basic primary health courses so that they could help their families in times of emergency and bring back health skills to their home country.<sup>40</sup>

For training to be more effective, it should go beyond the few weeks or months often provided. According to a UNICEF survey of Afghan refugee women who were trained as community health workers and traditional birth attendants, only about 5 percent had received training that could be considered adequate by international standards.<sup>41</sup> This notwithstanding that community health workers and traditional birth attendants (TBAs)

may be the only accessible health care resource a refugee or displaced population has. Their training should be standardized and should meet certain criteria. TBAs, moreover, should receive instruction that goes beyond childbirth. They should be trained in gynecological services, in social services, and in reproductive health care. When TBAs have been trained in preventive medicine and have been utilized to provide home visits, positive results have been reported. In Pakistan, for example, TBAs were able to upgrade health services and hygiene provided to Afghan refugee women.<sup>42</sup>

Training in childbirth and reproductive health care should also help reduce high mortality rates in countries to which refugees return. Women repatriating to Cambodia, Ethiopia and Afghanistan, for example, return to countries where the maternal mortality rate is between 600 and 1,000 for every 100,000 births because of hemorrhage, infection and septic abortions. Training in childbirth and family planning programs are ways to reduce these rates.<sup>43</sup>

The scope of the health care to which refugee and displaced women are exposed should be broadened. As a senior UNHCR epidemiologist pointed out, current health programs for refugee women "restrict women to the role of mother" and focus on pregnant and lactating women.<sup>44</sup> Single women, older women, and adolescent girls generally receive inadequate attention, and health problems to which women are vulnerable in addition to those connected with childbirth are largely neglected. Gynecological services, for example, are largely non-existent or inadequate in refugee settings. As a result, serious infections may not be treated and conditions such as uterine or cervical cancer are not likely to be detected. Interventions to control problems such as sexually transmitted diseases have also been largely neglected. Even women who are raped do not receive tests for sexually transmitted diseases; nor are abortions provided for those who become pregnant. Most refugee health-care delivery programs have been found to proceed from a care and maintenance approach, which fails to see gynecological care as a basic need.<sup>45</sup>

Lack of attention to reproductive health care is one of the most serious health deficiencies confronting refugee and displaced women. Information about birth spacing and family planning are hard to come by in refugee settings, sex education is rarely provided, and contraceptive devices are not distributed in most locations. Even information about sexually transmitted diseases, in particular HIV/AIDS, is often lacking. It was found that for refugees in Ghana, "gonorrhea was top on the list of diseases at the camp" but that sex education was not being provided; nor were condoms being distributed free of charge.<sup>46</sup> As a result, refugee and displaced women, as well as adolescent girls, often have no means of avoiding sexually transmitted diseases or frequent, high-risk pregnancies in camps that have poor sanitary conditions and minimal food and shelter. Recent findings show that fertility rates in refugee and displaced persons' camps are "extraordinarily high," sometimes surpassing those of the country of origin and country of asylum. For example, a fertility survey carried out in 1987 among Afghan refugee women estimated 13.6 children per woman. In Cambodian camps along the Thai border, the birth rate was estimated at 55 per 1,000 population. Although the reasons vary for the high birth rates, one of the main ones found is "the virtual absence of

fertility-regulating information or services."<sup>47</sup> As a result, women risk overall poor health by early and multiple pregnancies, and generations of children are born and raised under the protection of agencies like UNHCR. Clearly, means have to be developed to assist refugee and displaced women who wish to practice child spacing to be educated in and gain access to effective services.

In the absence of such services, many women turn to self-induced abortion despite the risk to their lives. Africa is reported to have the highest rate of deaths in the world caused by unsafe abortions. In Rwanda, for example, many self-induced abortions have been reported in refugee camps, and some of the women have died as a consequence. In Ghana, abortion was listed as one of the leading causes of death in a Liberian refugee camp. In Azerbaijan in 1994, refugee women were found to be carrying out risky abortions in the absence of contraceptive information and supplies.<sup>48</sup> In Latin America, complications from illegal abortions are reported to be the leading cause of death for women between the ages of 15 and 39.<sup>49</sup>

Humanitarian relief agencies often neglect reproductive health care because of their concentration on what they consider "emergency" problems requiring curative health care. Preventive health practices and the reproductive needs of women are generally not considered part of this emergency response. The religious or social beliefs of various NGOs have also interfered with the provision of family planning information, contraceptives or medical care for those undergoing abortion. Moreover, resources are often limited for health care that goes beyond emergency services. Clearly, support is needed from international development agencies to encourage relief organizations and their operational health partners to recognize the importance of including preventive medicine, family planning services, and reproductive health care in refugee settings and to train refugee women in these services so that they can control their reproductive lives and contribute to the health and development of their communities. A field manual drafted recently by several U.N. agencies and NGOs calling for reproductive health care to be taken into account in refugee settings represents a step in this direction.<sup>50</sup>

Finally, mental health services are sorely neglected in most refugee and displaced persons camps, even though many refugee and displaced women have undergone traumatic experiences and need counseling to deal with loss of family members, exposure to violence and rape, and adaptation to new cultures and socio-economic circumstances.<sup>51</sup> A UNDP report issued in 1993 on internally displaced women in Liberia recommended as a priority the organizing of mental health services for women and girls. It found that many Liberian women had suffered rape and psychological and physical trauma, and that many were infected with sexually transmitted diseases. It pointed out that while most effort was concentrated on building health systems to deal with physical needs, programs were needed to emphasize "the centrality of mental health" to long-term development.<sup>52</sup>

A related need is greater protection. For too long rape has been regarded as a regrettable but acceptable part of refugee life with substantial numbers of refugee and displaced women subjected to sexual violence while in camps under national or international protection. Only in recent years have more concerted efforts begun to be

taken to try to prevent and combat sexual and domestic violence in refugee and displaced persons' settings.<sup>53</sup> The record, however, needs considerable improvement for sustainable health and development to be possible.

## PARTICIPATION IN EDUCATION

Most refugee and internally displaced children receive no education. In 1992, only 36 percent of primary-age refugee children were covered by UNHCR-funded primary schools, the main source of schooling for refugee children. Of these, 40 percent were estimated to be girls, although figures are not kept by gender in many locations. Vietnamese refugee girls, for example, have been enrolled in high numbers, but in other locations, girls are enrolled in very low numbers and these markedly decrease in the upper grades. In Ethiopia, for example, a 1992 survey of one of the camps housing Sudanese refugees found that of 2,594 registered school children in grades one to eight, only 267 were girls, and of these 145 could be found in grade one. In Pakistan, in 1993, 92 percent of the beneficiaries of a \$4.5 million UNHCR-funded education program were boys. A study of two camps in Somalia showed that of the approximate 4,000 children enrolled in primary school, almost all were boys. According to the U.N. Economic Commission for Africa, "the proportion of females enrolled for primary schooling is even lower in the spontaneously settled urban and semi-urban communities, where refugees compete with nationals for the same educational facilities."<sup>54</sup>

At the higher levels, there are even fewer educational opportunities. Host country regulations often limit refugee access to secondary and university education, and UNHCR scholarship programs, which may be the only means for refugees to obtain higher education, allow only a small number of refugees to do so. Of those eligible for UNHCR assistance in higher education in 1992, only about 10 percent were helped. Of those enrolled in secondary school, only 21 percent were female, and of those in universities, only 15 percent were women.<sup>55</sup> One expert found that the scholarships for higher education awarded by UNHCR "showed discrimination against women; scholarships generally went to single, male students."<sup>56</sup>

At the same time, there are efforts underway to close the gender gap in refugee education. In Malawi, for example, the level of school enrollment of refugee girls was raised by increasing the number of refugee women teachers. This was accomplished by giving remedial training to 100 refugee women who otherwise could not have qualified for the teacher training course. With more females on the teaching staff, more female students were encouraged to stay in school. In 1993 it was reported that more than 40 percent of the refugee children in school were female and that more girls were staying in higher grades.<sup>57</sup>

Affirmative action approaches have also proved effective in increasing female participation in educational programs. In Burundi, UNHCR awarded half of its 1,000 secondary school scholarships to young women in 1989-1991.<sup>58</sup> Other innovative methods found effective include the introduction of part-time educational programs, night and weekend classes, and day-care centers for siblings whom refugee girls have to take care of. In Ethiopia, special "family life" education programs were introduced to enable girls to continue with their education when they had to drop out of school to work or stay

home to help their families.<sup>59</sup> In the higher grades, the linking of educational programs to employment opportunities has been shown to encourage girls to remain in school.

Imaginative ways also have been found to deal with "cultural constraints." Separate schools for boys and girls have been organized in societies where women and girls are largely segregated, with female teachers assigned to teach the girls. Or religious classes for girls have been utilized to provide basic educational instruction when girls have been discouraged from enrolling in public school. These strategies, together with those developed by UNICEF,<sup>60</sup> should be collected in a compendium for field personnel seeking to improve educational opportunities for girls. At the same time, U.N. agencies and NGOs must be required to uphold international equal opportunity standards in the face of cultural traditions that discriminate against women and girls. In Pakistan, for example, Afghan refugee women routinely expressed the desire that their daughters be educated. Yet the views of the more traditional elements of the male population were allowed to prevail and less than one-tenth of one percent of Afghan school age girls were enrolled in schools.<sup>61</sup> In these and other cases the cultural constraints cited by international organizations are often those of the traditional and more vocal elements of the male population with little attention paid to the views of refugee women and girls. The International Conference on Uprooted Muslim Women, for example, made clear the Muslim women's desire for education and training programs.<sup>62</sup> It is time for U.N. agencies and NGOs working in refugee and displaced persons' settings to affirm international standards and make clear that educational opportunities will have to meet these standards if aid is to be provided. Funding programs with limited female participation could make concerned agencies complicit in discriminatory practices.

Investing funds in education for refugees has not been a major priority of refugee programs because of their primary concentration on emergency relief. According to a recent UNHCR survey, "education programmes are often the first victims of any cuts in assistance budgets, with higher priority being given to food, shelter and medical care."<sup>63</sup> One notable exception has been the United Nations Relief and Works Administration (UNRWA), which administers assistance to Palestinian refugees. Given the long-standing nature of the Palestinian refugee problem, UNRWA made education one of its priorities. Today it spends about half its total budget (\$255 million for 1991) on education, running both elementary and secondary schools for 358,000 pupils as well as vocational and teacher training centers. The male-female ratio is now about equal and about half the teaching staff of 10,000 are refugee women; women also play a substantial role in school administration.<sup>64</sup>

For the vast majority of the world's refugees, however, especially refugee girls, education is one of the main casualties of an emergency-driven agenda. This notwithstanding that investment in the education of women and girls can pay significant dividends in economic growth and in improved quality of life for entire refugee communities.

Although no statistics are available, internally displaced children residing in camps or caught up in conflict situations have even more limited opportunities. UNICEF

in particular has sought to introduce educational programs in war affected areas, such as in Sierra Leone and Bosnia, and has tried to ensure the enrollment of girls in the classes organized. It also has developed, in cooperation with UNESCO, emergency educational programs for returning refugee and displaced children, such as in Rwanda. Overall, however, internally displaced children, especially girls, suffer from a lack of education and training.

For adult refugee and displaced women, literacy programs and skills training are sorely needed. In Angola, for instance, a country in the process of reconstruction, the need to introduce educational programs for internally displaced women is critical. Only 20 percent of displaced women, compared with 65 percent of displaced men, have studied beyond the fourth grade. Moreover, 68 percent of displaced female heads of household as compared with 12 percent of male heads of household have had no schooling.<sup>65</sup> In Peru, in one urban area with large concentrations of internally displaced persons, 89 percent of those found to be illiterate were internally displaced women in dire need of vocational training.<sup>66</sup>

Too often, however, the programs introduced by international agencies or NGOs for refugee or internally displaced adults are targeted at men or require a level of prior education that many women do not have.<sup>67</sup> When programs have been introduced that include women, the impact has been considerable. In Honduras, for example, over 90 percent of the refugees who arrived at one camp were illiterate, but refugee teachers were able to reduce this to 20 percent through a literacy project. In Somalia in 1984, more than 8,000 refugee women participated in a family education program and successfully received skills training as well as basic literacy courses.<sup>68</sup>

Development agencies have not become sufficiently engaged in funding educational programs for refugee or displaced women even though education and literacy training can lead to opportunities for employment and economic self-reliance. Education should become an automatic and integral part of relief, rehabilitation and resettlement operations with funding set aside for training programs wherever refugee and displaced populations are located. This could prove the most economical, if not efficient, way of bringing refugee communities from relief to development.

## MOBILIZATION OF WOMEN

Development concepts involving popular participation have been inadequately applied in refugee settings. Refugees and displaced persons are usually the targets and beneficiaries of aid rather than active partners in designing and implementing programs. A 1992 report on refugees in Bangladesh, for example, drew attention to an "assessment" made by persons in the field that "the refugees cannot be expected to take responsibility for themselves as they are mostly illiterate and to a large extent, unskilled." The report challenged this view and recommended that "the process of self help" be initiated immediately. It listed several areas for refugee participation -- food preparation and distribution, housing construction, assistance to the elderly and sick, refugee registration, reforestation programs, and the organization of literacy and skills training programs. It pointed out that 70 percent of the refugees were women and children and that the women were able to handle a variety of programs.<sup>69</sup>

The assumption that refugee and displaced women have few capacities or skills is widespread. In Burundi, internally displaced women were found to play no role in camp decision-making. When the Representative of the U.N. Secretary-General on Internally Displaced Persons asked to meet with the spokespersons of a camp housing several thousand women and twenty-five men, only men came forward to discuss the problems of the camp.<sup>70</sup> The failure to include women in camp activities affects their ability to cope with the refugee or displaced experience and with their return home. Cambodian refugee women in camps, for example, grew so accustomed to a high level of support from the U.N. and voluntary agencies that repatriation became more difficult for them. One study found that because they had "not been allowed to make any major decisions about their lives for over a decade," they had become over-dependent and insufficiently prepared for the lack of facilities they found upon return.<sup>71</sup>

Clearly, more attention needs to be paid to promoting self-help. Women's active participation in refugee and displaced persons camps benefits not only themselves but the quality of life in the entire community. No sooner did a refugee women's group form in Thailand in 1992 than it became active in collecting funds and material items for needy members of the community, organizing outreach services for the elderly and handicapped, identifying vulnerable women for vocational training and income generating projects, reporting on sexual abuse, and intervening in domestic violence cases. In Mexico, the 8,000-member refugee women's organization, Mama Maquin, carried out the most extensive survey ever done of the Guatemalan refugee women's population which enabled relief and development agencies to identify training and employment opportunities for women. Although refugee men initially opposed the initiative, they later acknowledged the benefit accruing to their families when clinics were opened, classes given in hygiene and health, and instruction provided in typing and driving. This made it possible for women to contribute to family income.<sup>72</sup>



UNDP and other relief and development agencies have strongly recommended that support be given to strengthen organizations formed by internally displaced and refugee women. These organizations, they have found, are often the most effective way of identifying the needs and capabilities of the displaced population and of organizing programs that utilize their skills. Too often, providers of aid have identified women as "the most vulnerable," and responded by designing programs for, rather than with, them. Such programs have typically offered emergency supplies to meet immediate survival needs "with little regard for the relationship of this assistance--and the way it is provided--to the women's abilities to sustain their new-found roles and make significant contributions to long-term development."<sup>73</sup>

Encouraging the creation of women's organizations should be a priority objective of agencies working with refugees and displaced persons. Even in countries where the cultural dominance of men is strongly entrenched, women can be organized in parallel committees or other kinds of groupings. This should not prove difficult since, in many cultures, women are organized into local self-help or mutual associations that could form the basis for their organizing in refugee settings. Relief and development agencies and NGOs should make clear their interest in supporting organizations in which women occupy decision-making roles. Such support can bring legitimacy and standing to their efforts and better prepare women for participation in income-generating and development programs. It can help displaced women gain legal recognition and apply for loans from private banks and from their governments for entrepreneurial activities.

## ACCESS TO INCOME-GENERATING AND EMPLOYMENT OPPORTUNITIES

Refugee experts have found that refugee and displaced women want to increase their incomes and, if given the chance, will participate in economic activities outside the home.<sup>74</sup> One of the main reasons is to supplement the basic food ration, which is usually inadequate to meet the needs of women and their families. WFP food rations are calculated on minimum food consumption requirements so that refugees and displaced persons are obliged to purchase extra food commodities or secure them through barter. Extra income is also needed to enable refugee and displaced women to purchase non-food items such as medicines and fuel.

There are also many refugee women who would welcome employment opportunities so as to become less vulnerable to sexual exploitation. Surveys repeatedly have found that refugee and displaced women are forced into prostitution and non-consensual polygamous arrangements to secure food and supplies. In Liberia, for example, it was reported that "displaced women formed bonds with soldiers for protection or to obtain food."<sup>75</sup>

For the growing numbers of widows and female-headed households who are the sole caretakers of their families, skills-training and income-generating activities are essential. Large numbers of civil wars have left many women responsible for supporting their families. The Afghan situation is instructive. It is estimated that nearly one million men have been killed or disabled in the civil war, leaving tens of thousands of widows, thousands of young girls who have lost intended spouses, and other thousands whose husbands have become disabled. Most of these women can not be absorbed by their husbands' families because there are too many of them to be cared for in the traditional social welfare system.<sup>76</sup> The situation is similar in Cambodia. In Battambang province, where most returning refugees have settled, women also can no longer rely on extended family support systems: 64 percent of the adults are women and 35 percent of the households are headed by women. There are an estimated 32,807 widows, 1,491 women with handicapped husbands and among the internally displaced, 1,583 widows.<sup>77</sup> Rwanda has been described as "a nation of widows;" in the first preliminary study undertaken by the Government in four prefectures, 31 percent of the women were found to have lost their husbands.<sup>78</sup> In Central America, civil wars have left more than 100,000 widows, with women comprising 52 to 55 percent of the refugees and internally displaced.<sup>79</sup> These women are in desperate need of supporting their families.

Only small amounts of funds, however, have been allocated by relief agencies and NGOs for training and income-generating projects for refugees and displaced persons, and only small percentages of women actually participate in them. Out of UNHCR's \$31 million budget for Pakistan in 1991, only about \$1 million was earmarked for income-generating projects, and only about 4,000 women (out of more than one million) benefitted. Most of the projects, moreover, were not organized until after the women had

been displaced for at least six to ten years.<sup>80</sup> In Southeast Asia, a survey of female heads of household on the Thai-Cambodian border found that "very few of the vulnerable women in the survey had received skills training" even though most of these women will be the breadwinners for their families.<sup>81</sup> In West Africa, little priority has been given to skills training for Liberian refugees or internally displaced persons and few development-oriented programs introduced.<sup>82</sup>

When income-generating projects are introduced for refugee and displaced women by international agencies and NGOs, they are often not designed to lead to long-term economic self-sufficiency.<sup>83</sup> Many projects, although called income-generating, have been introduced for reasons of occupational therapy and focus on sewing and embroidery which bring in little income for the time expended. Factors that could lead to economic viability are often ignored such as the marketability of the goods produced, access to raw materials, access to transportation, credit extension, and management training. In Mexico, for example, a fruit production and marketing cooperative would have become much more profitable for the women involved if they had been taught marketing, bookkeeping, and banking.<sup>84</sup> A study of the sustainability of income generating projects in Central America found that they often were undertaken with little attention paid to land tenure, access to markets and product demand.<sup>85</sup>

Only recently is there evidence of a more developmental approach being applied to income-generating projects for refugee women. Training in a number of locations is being given with more attention paid to the potential for earning income and becoming self-supporting. In Ghana, for example, a program was developed to involve refugee women in brickmaking and carpentry. The women were quickly able to construct a dormitory, a women's center and other building projects, skills that are marketable not only in the host country but in their home country, Liberia.<sup>86</sup> Soapmaking is another skill for which refugee women have found a ready market, especially if relief agencies and NGOs buy the soap and distribute it to refugee communities. In Pakistan, an NGO monitoring several hundred Afghan refugee women found that those skilled in dressmaking, shoemaking, carpet weaving and handicraft production were able to improve their standard of living and their chances for economic self-sufficiency.<sup>87</sup>

Credit projects have been found to be especially effective to enable women to start up their own businesses. The Port Sudan small-scale enterprise development program has helped refugee women, through loans and training, to establish businesses in tailoring, catering, cake baking, hairdressing, macaroni making and other needed services.<sup>88</sup> Moreover, the most successful programs observed in Pakistan, particularly for rural women, were credit projects in which refugee women were able to purchase items such as sewing machines or chickens, learn a skill, and earn income as a result.<sup>89</sup>

To be sure, areas in which refugee women reside are often poor settings in which the purchasing power of local communities and other refugees is minimal. But involvement in small enterprises does enable women to meet day-to-day subsistence needs, to acquire income and assets, and to learn skills that will better prepare them for the future. Refugee women can be extraordinarily resourceful. Anyone visiting refugee

camps will be struck by the extent to which thriving markets have sprung up in the midst of what would seem to be the most unpromising circumstances. Often these markets have heavy female participation. Although critics often say that microenterprises are too small to significantly address the severe problems of developing countries, small-scale credit projects which involve basic entrepreneurial skills and which are introduced broadly often prove an important means of improving the lives of women and their families.<sup>90</sup>

Careful study needs to be given to how relief and development agencies can build on patterns of entrepreneurship that develop in refugee and displaced persons' settings. Successful NGO initiatives should be examined, such as those undertaken by CARE's Small Economic Activity Development Program or Women's World Banking, to see the extent to which such programs can be applied effectively in refugee and displaced persons' settings. "Micro-banking," modeled on the Grameen Bank of Bangladesh should also have important lessons. By making small loans (\$100-\$600) to poor women and groups of women who are mutually responsible for each other's loans, it has enabled many women to begin their own businesses while keeping default rates low and profits reasonable. Of \$400 million lent to women in 1994, repayment rates were 97 percent.<sup>91</sup> Microcredit institutions and cooperatives have been spreading to other parts of the world as well and their customers are mainly women whose repayment rates for loans are exceedingly high. Such credit programs should be initiated routinely in refugee and displaced persons' settings. To its credit, UNHCR has provided cash advances and loans to both refugee and internally displaced women to help them launch their own income-generating activities.<sup>92</sup> But refugee and internally displaced women need far greater access to credit than can be made available by a relief agency on an *ad hoc* basis. An inter-agency U.N. team that visited Liberia and Sierra Leone in 1993 identified the "unavailability of finance" as a major constraint to job creation for internally displaced women and recommended the immediate injection of investment capital for their entrepreneurial activities.<sup>93</sup> In other countries as well, for example Peru, internally displaced women have been found in need of credit for small-scale enterprises in the areas to which they have relocated.<sup>94</sup> UNIFEM's increasing involvement in small-scale projects for refugee and displaced women is an encouraging sign. Its budget, however, is small, only \$14 million, and only about \$1 million is allocated to projects for refugee and displaced women. A collaborative agreement that was signed with UNHCR might help expand the scope and impact of its projects. The establishment of credit schemes and banks for uprooted women should be actively explored to enable women to undertake microenterprises on a more widespread basis.

Involving refugee and displaced women in larger-scale development projects introduced in areas hosting refugees and displaced persons should also be encouraged. Accomplishing this, however, will require certain steps. Gender clauses, for example, have been found effective in promoting women's participation in development projects. As a result of affirmative action initiatives in Mexico in 1992, 20 percent of refugee women were hired in reforestation projects. In Malawi, affirmative action also resulted in the selection of a group of female heads of household for participation in forestry projects.<sup>95</sup>

Designing specific components for women in large-scale development projects is another means of encouraging their participation. A World Bank-funded reforestation project in Pakistan was specifically designed to include women by providing them with seedlings to grow while at home.<sup>96</sup> This has also worked in the agricultural area, where women have been provided with seeds and implements and are able to grow fruits and vegetables and tend animals while remaining at home.

Support services responsive to women's needs also need to be built into such projects. Often, transportation, labor-saving devices and child care have to be made available to enable women to participate. In Central America, considerable progress has been made in increasing women's access to work outside the home through the introduction of applied technologies. Refugee women in Mexico, for example, have been involved in the construction of hand pumps and threshing mills which have increased the time they have available for work outside the home. In Costa Rica, grants have been provided for child care centers to enable refugee women to work away from home.<sup>97</sup>

Enlarging women's access to development projects will also require finding the necessary financial support for such projects. In 1987, the United Nations General Assembly requested UNDP to "increase its efforts to mobilize additional resources for refugee-related development projects and, in general, to promote and co-ordinate with the host countries and the donor community the integration of refugee-related activities into national development planning."<sup>98</sup> UNDP, however, like other development agencies, has been slow to respond. For one, development agencies have little experience in working with refugee communities. They also have limited funds for such purposes. Moreover, they are mindful of the attitudes of host governments which, as noted above, may be unwilling to spend their limited development aid on the reintegration of uprooted populations.

However, when development support is targeted to benefit not only refugees and displaced persons but local communities equally in need, governments have been more responsive. In Mexico, for example, Guatemalan refugees have become integrated in a number of areas because the projects in which they are involved have addressed the basic needs of the local population, and the international aid the refugees have attracted has been seen as a support to local development. Similarly, a recent UNIFEM project in Malawi has been training both Mozambican refugee women and Malawian women in fish-processing skills, thereby benefitting the refugees as well as host country nationals.

By and large when funding is made available for large-scale projects involving refugees, it has been in the area of rehabilitation of host country infrastructure and environment, which have been damaged by the refugee presence. Host governments are usually receptive to such projects. Few refugee women, however, have been integrated into these programs, even though the U.N. has found that in many countries "when women have been involved in environmental management, protection and conservation, they can be a decisive factor in the success of programmes and initiatives."<sup>99</sup>

As noted above, a World Bank-financed project in Pakistan selected more than 1,000 Afghan refugee women to grow seedlings. It also provided them with instruction in the use of energy-saving stoves, and in Baluchistan, refugee women were hired to help break granite for the rebuilding of roads. However, the main thrust of the Bank's \$86.6 million reforestation project was geared to male, not female, labor. A "Women Impact Study" commissioned by UNHCR found that the projects "were not broad enough" to encourage the "economic productivity" of Afghan refugee and Pakistani women, and that they also had some negative effects on women.<sup>100</sup>

Reforestation, road building and maintenance, and other conservation projects that include refugee labor are extremely important. Experts estimate that a refugee population of 100,000 requires 85,000 tons of firewood annually just for cooking. By repairing ecological damage, conflicts can be avoided with the local population, and refugees will have contributed to the development of the host country. Training for such projects also serves to prepare refugees and displaced persons for returning home. In many cases, home countries have suffered severe environmental degradation as a result of civil wars, land mines, and the interruption of agriculture and development projects.

Such projects, however, should be designed and implemented to take into account gender concerns and to include larger numbers of refugee women. More even than refugee men, refugee and displaced women have a clear stake in environmental protection, having to walk each day in search of fuel and water. The time spent, moreover, searching for new sources of fuel and water diminishes the time women have for income-earning activities. One study found that longer waits at boreholes and more time spent finding fuelwood have lost refugee women the possibility of earning independent income but that "this time loss by women is seldom incorporated into environmental impact or needs assessment studies."<sup>101</sup> Deforestation, the drying up of watersheds, and soil erosion have a clear and direct impact on refugee and displaced women's lives.

## ROLE IN REPATRIATION AND RECONSTRUCTION

That refugee women are not adequately prepared for the difficulties they will face upon returning home is well-documented. Often, the fabric of society that they knew has changed or been destroyed. In countries devastated by civil war, infrastructure has been damaged; villages may be without health clinics, roads, schools, food stores or other basic items.

The ability of refugee and displaced women to sustain themselves in such circumstances largely depends on the extent to which they are included in reconstruction and development programs and have been trained sufficiently to participate in them; and whether sufficient international relief and development assistance is made available. Although in recent years, repatriation has become the international community's preferred solution for refugees, funding has not always matched the needs of those returning.

It is estimated that about 5,000 refugees return to their home countries each day. One and a half million people are in process of returning to Mozambique; 370,000 have returned to Cambodia; 2.5 million refugees have returned to Afghanistan, while another 3.5 million refugees are waiting in Pakistan and Iran; hundreds of thousands have returned to countries of Central America. The success of these returns, however, too often is undermined by conditions in those countries. Scarred by the effects of war, insecurity, land mines and poverty, and burdened with the problem of demobilized soldiers and displaced civilians, countries to which refugees return can not easily reabsorb them when they can hardly sustain their own populations.<sup>102</sup>

The majority of returning refugees are women, and many are heads of household. In El Salvador, six out of ten displaced/repatriated families are headed by women.<sup>103</sup> In Cambodia, 25 percent of families returning in 1992 were headed by women; and 9,000 of these were considered to be vulnerable to economic and sexual abuse because there was no male over the age of 15 living with the family.<sup>104</sup> Surveys of women returnees in Cambodia, Central America, Afghanistan, and Mozambique have found that the breakdown of traditional community and family support systems is making it even more critical that female heads of household be provided with the training and technical support needed to enable them to earn money to support themselves and their families.<sup>105</sup>

To help returnees reintegrate and better sustain themselves, UNHCR/Nicaragua came up with a novel program in 1990 that is fast being replicated in other parts of the world. Known as Quick Impact Projects or QIPs, the program consists of small-scale projects (\$5,000 to \$70,000) designed to reintegrate returning refugees and displaced persons into their home communities while at the same time benefitting the local communities. QIPs restore basic infrastructure that may have been damaged during conflict situations, such as roads, bridges, schools, wells, and clinics. They also provide training and materials for employment opportunities such as carpentry workshops, tree nurseries, bakeries, fisheries and other small-scale enterprises.<sup>106</sup>

In Nicaragua, special efforts were made to include women returnees in the projects. Gender clauses were incorporated in 131 out of 354 contracts signed with implementing partners and they stipulated that up to 50 percent of the personnel to be trained and involved in the planning and implementation of the projects would have to be women and that they would receive the same pay as men. This overturned an initial practice of paying only male participants and treating women as "volunteers." Although no precise statistics exist on the extent to which women returnees were actually included in the projects, tens of thousands of women are reported to have benefitted as a result of the clauses, thereby receiving a much higher share of the wage-earning, income-generating and training opportunities than might otherwise have been the case.<sup>107</sup>

Programs were also designed specifically for women, called QIPFEMs. They were not limited to traditional women's activities but provided opportunities for women to be trained and hired in activities such as honey bee production, rice threshing, and reforestation. They also provided technical training in more traditional activities so that women's skills in areas such as health and tending animals could be upgraded. QIPFEMs further provided loans and credits for women to enable them to form cooperatives and open small businesses. To facilitate women's participation, special arrangements were made for day care and for part-time work.

The quick-impact projects, particularly those to restore basic infrastructure, have been extremely successful in reintegrating returnees into their home communities and including women in the reconstruction process. The economic viability of the employment-oriented projects, however, has been problematic. First, the time span allotted for carrying out the QIPs was often too short. The projects were expected to be accomplished in three to six months, but in many cases that was insufficient to ensure all the training and follow-up needed. When UNHCR staff departed Nicaragua in 1993, not all of the QIPs were at a point where they could become sustainable. Second, local implementing partners were not always sufficiently skilled or motivated to monitor, service and maintain the projects after UNHCR's departure. Moreover, U.N. development agencies, such as UNDP and the U.N. Development Programme for Displaced Persons, Refugees and Returnees in Central America (PRODERE) were not always ready to incorporate these projects into their development schemes because they were too small, were not deemed sufficiently viable, or because the agencies had not been involved in the planning of these projects from the outset, had no investment in them, and found it difficult to meet the departure deadlines of the relief agencies.<sup>108</sup>

Future QIPs should be designed to improve upon the original Nicaraguan experience. In particular, more time should be devoted to training and follow-up. Greater attention also should be paid to ensuring that local implementing agencies are able to perform efficiently or that NGOs are brought into the process when they are not. Most importantly, a concerted effort should be made by both relief and development agencies to coordinate more effectively. In Zambia, for example, UNHCR and UNDP have planned a fishbone project together for which UNDP will assume supervision immediately upon UNHCR's departure. This should avoid the project's being left



unattended and isolated when the relief phase is over. In other countries, most notably Tajikistan, Mozambique and Cambodia, collaborative efforts have also been worked out with regard to QIPs.<sup>109</sup>

Much more work will be needed, however, to bridge the gap between emergency assistance and longer-term development. The U.N. High Commissioner for Refugees has urged that development agencies integrate QIPs into their medium and long-term development plans to ensure that the projects do not remain unlinked and isolated from development efforts.<sup>110</sup> At a minimum, development agencies should become more actively involved in the planning of QIPs to improve their chances for viability and their support of long-term social, economic and environmental development priorities. In Cambodia, engaging development agencies earlier on in the planning of the projects might have avoided several mistakes, such as the building of houses in paddy fields without concrete supports.<sup>111</sup>

The greater involvement of development agencies in the planning of QIPs would also increase the funding available for them and possibly the involvement of international financial institutions. In Cambodia, only \$5.9 million of UNHCR's \$114 million repatriation budget was earmarked for development-related projects.<sup>112</sup> Yet the need for such projects was critical. According to one expert study, the main problem for returning widows in Cambodia was the lack of such projects. Many women heads of household wanted to start micro-businesses but lacked capital to buy sewing machines, looms, seeds and means of transport. The "insufficiency of reintegration projects" was identified as one of the prime barriers to successfully repatriating and reintegrating women in southeast Asia.<sup>113</sup>

Another barrier to women's participation in reintegration projects has been the resistance of male community leaders to having women take on jobs traditionally done by men. The high number of widows and women with handicapped husbands in many repatriation situations make it essential that U.N. agencies and NGOs prepare the way for women to assume new roles and be given the technical assistance and financial support to do so. In Cambodia, voluntary agencies have been found to be slow in training women in skills traditionally held by men despite the fact that a large proportion of the returning women are family breadwinners.<sup>114</sup> In other areas as well, women have not been adequately integrated into projects introduced for returnees. In the Horn of Africa, for example, no gender clauses have been included in the QIPs; nor have QIPFEMs been introduced, although in Tajikistan, of an estimated \$8.5 million spent on QIPs in 1993, more than half was intended to benefit vulnerable groups, including internally displaced widows and women heads of household.<sup>115</sup>

Restrictions on women's ability to own or inherit land is another obstacle that will have to be addressed. In Africa, women are the principal source of agricultural labor; in Central America, women also play an important role in agricultural production. Yet many face constraints in securing access to land for farming. Guatemalan refugee women, in negotiations with their Government over repatriation, insisted that female

heads of household be able to own land upon return. As a result, a few have been accepted on the executive boards of returnee cooperatives while others have been given their own land.<sup>116</sup> But the problem is far from resolved in Guatemala or other countries. In Rwanda and Burundi, the general problem of lack of land is compounded by the fact that women can not inherit land either from their husbands or their parents. Thus, returning widows who have no sons risk losing their property to their brothers-in-law or deceased husband's relatives. The Representative of the U.N. Secretary-General on Internally Displaced Persons found that women returnees have a more difficult time than other members of the society and urged legal measures to improve the status of women, especially with regard to property and inheritance rights.<sup>117</sup> So too did a conference on the Legal Status of Refugee and Internally Displaced Women in Africa.<sup>118</sup> Beyond the legal dimension, sustained advocacy will be needed at the national, regional and international levels to secure equality of access to land and property rights for women.

Preparation of refugee and internally displaced women more fully for the economic conditions they will find upon return is also needed. In 1993, for the first time, collaboration was undertaken between relief agencies in countries of asylum and countries of origin with a view to designing programs that would make refugee returns more viable. Specifically, income-generating opportunities in Guatemala were identified for Guatemalan refugee women in Mexico so that they could learn the needed skills and thereby be better prepared for return. This kind of collaboration should be actively pursued so that the skills refugees acquire in countries of asylum can be more readily transferred to countries of origin.

Regional frameworks have been especially effective in raising the awareness of governments and development agencies to the benefits of integrating refugee, returnee, and displaced women into assistance and development programs in home countries. The International Conference on Central American Refugees (CIREFCA) held in Guatemala City in May 1989 brought together Central American governments, the donor community, U.N. relief and development agencies, and NGOs to work together materially to assist refugees, returnees, and internally displaced persons. A total of 126 projects in seven countries was introduced, with an overall investment of \$365 million. Areas with high densities of returnees were targeted, and special attention was given to projects to support uprooted women.

In addition, UNHCR initiated in 1992 in Central America the First Regional Forum on Gender Focus in Working with Refugee, Returnee, and Displaced Women (FOREFEM). The needs of uprooted women were examined by governments, U.N. agencies and NGOs together with refugee, returnee and displaced women over a period of months. One result was the creation of gender-focused QIPs and QIPFEMs; another was the inclusion of refugee and displaced women in plans for repatriation. One striking example of the latter has been the participation since 1992 of Guatemalan refugee women in the Permanent Commissions established to negotiate refugee returns with the Guatemalan Government.

Processes like CIREFCA and FOREFEM, and programs like PRODERE but with more of a gender focus,<sup>119</sup> should be introduced into other regions of the world to encourage governments and development agencies to integrate uprooted women into both repatriation and development plans. This will not be easy, however, as donors are generally much more willing to allocate resources for emergency and disaster relief than for programs in support of social and economic integration of refugees and returnees.<sup>120</sup>

## CONCLUSION

International interest in moving from a relief to a development approach, to enable refugees and displaced persons to become more self-reliant, has not yet materialized in a meaningful way. Rather than laying the foundation for self-sufficiency and development, relief assistance of an emergency nature essentially still leads to debilitating dependency. In the case of refugee and displaced women, development-oriented projects are few and far between despite the preponderance of female-headed households and their need to earn income to support their families. Most uprooted women find they do not have full access to the resources and opportunities that would enable them to become self-reliant. Barriers exist to their obtaining adequate food, shelter, and health care, and they are not called upon sufficiently to take part in the provision of services. Opportunities for them are limited in education, training, and employment. Many as a result are ill-equipped to participate in reconstruction and development efforts upon return to their home countries.

The international community should act without delay to apply more broadly developmental approaches for refugees and displaced persons. Their numbers are too large and their impact on the development process in different countries too significant to ignore. Recognition should be given in particular to women's skills and capacities and the need to cultivate these skills in order to better equip growing numbers of female heads of household to become self-supporting.

The following are some of the steps that need to be taken:

- ◆ Systematic information collection should be undertaken about refugee and internally displaced women, in particular their numbers, their skills and education, their age, the proportion of female-headed households, and the problems that might impede their participation in development programs. NGOs could play an important role in this area by developing, in cooperation with displaced populations, demographic surveys and needs assessments to lay the foundation for more effective programming. In the case of the internally displaced, NGO surveys would be particularly valuable since there is no organization like UNHCR responsible for them or charged with collecting information about them. The obstacles and constraints to gathering data should also be analyzed, together with methods for overcoming them. In the absence of basic demographic data, effective programs for refugee and displaced women are difficult to design.
- ◆ Refugee and internally displaced women must be put in charge of the distribution of food and play a prominent role in the distribution of basic supplies in most, if not all, refugee and displaced persons' settings. Studies have shown that women and children suffer when distribution

systems are run by camp elders and refugee men and that families, including men, benefit when women are given the principal role in food distribution. It is time that UNHCR, WFP and other international and non-governmental organizations involved in the provision of food act on these findings; failure to do so will continue to place at risk many women and children, who represent the vast majority of displaced populations.

Refugee and internally displaced women should also be routinely supported in developing small-scale gardening and farming projects to supplement food rations and increase their family earnings. They should have access to seeds and tools on a regular basis as part of overall food strategies. Refugee experts have further recommended that plots of unused land near displaced persons' settlements be procured to enable displaced farmers, both men and women, to produce food for consumption as well as crops for marketing.<sup>121</sup>

- ◆ Greater numbers of refugee women should receive training as community health workers to help reduce morbidity rates among women, ensure more effective services for entire refugee communities and give refugee women entree into an income-producing field. Broadening the training to include preventive medicine, family planning services and reproductive health care could also help offset the high fertility rates in refugee camps and contribute to the public health and development of refugee communities. It is time that refugee and displaced women receive help in avoiding sexually transmitted diseases and unwanted pregnancies, which undermine their health and development. To increase the number of refugee and displaced women in health programs, the techniques that have worked best to accomplish this, such as literacy training or affirmative action programs, should be introduced into refugee and displaced persons' settings worldwide. Development agencies, UNICEF and the World Health Organization (WHO) should become more directly involved in supporting development-oriented health programs for refugee and displaced women.

- ◆ Education, training and income-generating opportunities must be made more broadly available to refugee and displaced women with the help of development institutions. The prolonged nature of many refugee situations coupled with the importance of viable returns make essential that relief and development-oriented assistance be extended so that refugees, in particular women heads of household, can become economically self-supporting.

Since their budgets are generally stretched to meet emergency relief needs, organizations assisting refugees will have to play a catalytic role in mobilizing development agencies and multilateral development banks to support programs that go beyond basic survival needs. In recent years,

U.N. development agencies and the World Bank have to some extent begun to support projects for refugees and displaced persons and to integrate refugee-related activities into national development plans. Increasingly they have come to recognize that significant development progress can not be made in many countries unless the impact of uprootedness is addressed. The activities these agencies have supported, however, have often been large-scale infrastructure projects into which few refugee women have been integrated.

The World Bank and other development agencies need to expand the numbers of refugee women they include in large-scale development projects. NGOs with gender-in-development experience, as well as UNIFEM and UNICEF, should be enlisted to examine the projects and recommend how refugee and displaced women might be more fully integrated in them. Gender clauses, labor-saving devices and the designing of special components for women have all worked to enlarge women's access to development projects and should be widely introduced.

- ◆ Development banks should also orient more of their funding toward the support of small-scale programs of direct benefit to refugee and displaced women. At the U.N.'s Fourth World Conference on Women in September, the World Bank announced that of the \$3.5 billion it had set aside for improving the status of women worldwide, \$200 million would go into a new micro-credit program to provide small loans to women.<sup>122</sup> A share of this program should be targeted to refugee and displaced women.

Small-scale projects that train refugee and displaced women as teachers or health professionals and that support their learning marketable skills, whether carpet weaving, tailoring, soapmaking or food production, are critical to the future of millions of women who need to become self-sustaining. Many refugee and displaced women need only a minimum of credit to start up and maintain small businesses. Relief and development agencies should be studying more closely how they can build on patterns of entrepreneurship already in existence in refugee settings. Successful NGO initiatives should be examined as should the use of microcredit institutions, such as the Grameen Bank, in refugee and displaced persons' settings. UNIFEM's experience should also prove instructive. Although its budget is small, it has become directly involved in supporting small-scale projects for refugee and displaced women.

Small-scale credit projects which teach basic entrepreneurial skills can make the difference between absolute poverty and the ability to meet the daily subsistence needs of one's family. Well-designed microenterprises have the potential to make women self-supporting or at least able to contribute to meeting their families' requirements for food, clothing and shelter. Microenterprises in addition have proved successful in

reintegrating returning refugees and displaced persons into local communities. The viability of the projects, however, and their integration into governments' medium and long-term development plans will not be assured unless the development community makes this a part of its policies and priorities.

- ◆ Because returns to areas devastated by war and ecological disasters are extremely fragile and problematic, it is important that the international donor community add to its agenda the sustainability of the reintegration process, with special attention paid to the obstacles faced by women, including access to land. The creation of an international fund for development projects related to uprooted populations has been proposed to help make returns more viable. It has also been proposed that development agencies should have discretionary rehabilitation funds which they can use for reconstruction and development projects related to uprooted populations.<sup>123</sup> Whatever the mode decided upon, relief and development agencies must make every effort to collaborate in making repatriation viable by designing and funding programs that move rapidly from relief to development, that benefit entire communities and that take account of the needs of refugee and internally displaced women.
- ◆ Finally, regional frameworks for collaboration, on the models of CIREFCA, FOREFEM and PRODERE, should be introduced into different parts of the world so as to involve governments, NGOs and development agencies more fully in integrating uprooted persons, in particular women, into repatriation and development plans. Evaluating how to replicate these processes in other areas of the world should be undertaken by NGOs and development agencies.

Refugee and displaced women heads of household, without means of sustaining themselves and their families, will continue to need emergency relief whether in countries of asylum or upon return home. Relief assistance must be accompanied by the provision of skills and job training, so as to offer refugee and internally displaced women the possibility of becoming self-sustaining and to avoid the vicious circle of dependency that today so often entraps them, at far greater cost to the international community.

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