UNHCR and WFP

Joint Assessment Mission (JAM)

An Annual Review of the Assistance Programme to Refugees in Malawi

September 2009
EXECUTIVE SUMMARY

During the period of inquiry, 14th-18th September 2009, the Mission assessed the overall management of the operation, including the supply of food and non food item assistance; the refugees' general living environment; and the scope for increased self-reliance at the Dzaleka Refugee camp in Malawi. The Mission paid particular attention to food security and protection issues, but also reviewed the relationship between the refugees and the surrounding population. All findings were used to develop constructive recommendations to ensure efficient delivery of refugee assistance by all parties.

The Mission consulted relevant actors, including the Government of Malawi and implementing Partners to UNHCR and WFP in the camps, and most importantly, the refugees themselves. The Mission conducted numerous focus group discussions and key informant interviews. Transect walks allowed an observation of living conditions of the population in the Dzaleka camp.

The Mission’s main recommendations are included in this Executive Summary, while the more specific operational recommendations are included in the body of the text.

FOOD SECURITY AND SELF RELIANCE

Refugees at Dzaleka remain highly dependent (greater than 50%) on food distributions to meet their consumption needs. WFP should continue to support the camp with food assistance.

WFP is the sole provider of food assistance to refugees at the Dzaleka Refugee Camp. While the Government of Malawi is a signatory to the 1951 Refugee Convention and its protocol of 1967 as well as the OAU Refugee Convention of 1969, it continues to hold numerous reservations to these agreements, which significantly reduce the refugees’ potential for local integration and self-reliance.

The proportion of refugees being able to cultivate land has decreased since the last JAM conducted in 2008. Due to growing inequalities in the plot size of camp-owned land amongst refugees (as refugees leaving the camp have not returned their land to MRCS but donated/sold their plots to other refugees), all claims have recently been withdrawn recently so as to redistribute plots to refugees in a more equitable manner. To situation has been aggravated further as many refugees renting land from local villagers have been forced off these plots after police notified the surrounding community that refugee use of land outside of the camp was illegal.

RESOURCING/ FOOD PIPELINE

WFP PRRO 10309.1 has been continually under-funded over the past year. Food obligations of the programme have been met by repeated monthly loans from PRRO 10586.0. Food distributions have been consistently delayed by pipeline interruptions, late preparation of distribution plans, and an overall lack of agency coordination.

WFP should advocate strongly with donors to ensure a solid pipeline. Agency coordination, led by WFP must be strengthened so that timely distributions of rations occur every month.
FOOD DISTRIBUTION MODALITIES

Approximately 13,000 refugees are currently being fed under the PRRO, with Malawi Red Cross Society (MRCS) in charge of distribution monitoring. In August 2009, distribution was changed to a *family size-based system* (FBS). In this system, each family size is called separately (e.g. when F4 is called, all households with four members receive their distribution, F5, all households with five members, etc.) Because the rations within every group of refugees are the same, theft is more visible and easily reported. However, prevention of theft during distributions will be dependent upon the enforcement capacity of WFP, UNHCR and MRCS distribution monitors.

WFP must offer support to MRCS in distribution monitoring to ensure the accurate and fair distribution of rations, limit leakages and ensure accountability.

Renewed efforts must be made to execute distributions in a timely and, more importantly, consistent manner.

The design, implementation and evaluation of a post-distribution monitoring system should be a top priority for the successor PRRO.

NON FOOD ITEMS

The Mission introduced several recommendations related to NFIs as refugees are currently monetizing food to provide for essential non-food items. Furthermore, the insufficient supply of NFIs forces some refugees to resort to negative coping strategies, including prostitution. These recommendations were developed in response to specific concerns raised by the refugees, and substantiated by implementing partners throughout the operation.

Firewood remains a serious concern for the refugees at the camp and the use of wood as fuel is causing serious environmental degradation. The cost of fuel will continue to erode the real value of the food ration and hence UNHCR and WFP should collaborate on ways to ease this cost by way of fuel provision.

Essential NFIs, specifically soap, kerosene and blankets must be more consistently and reliably provided. The current 200g of soap distributed is less than the 250g mandated by UNHCR guidelines.

WFP is currently in violation of the MoU with UNHCR by providing maize grain without in-camp milling facilities. In-camp infrastructure must be provided if maize grain is to remain the distributed commodity of the programme.

POLICIES AND REGULATIONS

Malawi is signatory to the 1951 Refugee Convention and its protocol of 1967 as well as the OAU Refugee Convention of 1969. Despite this, the Government of Malawi holds several reservations to the Refugee Convention, including the exemption from reciprocity, movable and immovable property, rights of association, wage earning employment, liberal professionals, public education, labour legislation and social
security, freedom of movement and naturalisation. This significantly reduces the 
refugees' potential for local integration and self-reliance. While GoM has allocated a 
limited amount of land to the refugees at Dzaleka, swelling of the population caused by 
the GoM-directed consolidation with the Luwani camp in 2007 has resulted in a shortage 
of plots.

UNHCR and all stakeholders should continue to engage the Government of Malawi in 
dialogue for lifting the current reservations to the international conventions.

HEALTH AND NUTRITION

All refugees have access to treatment at the camp Health Centre, free of charge. In 
cases where the patient cannot be treated at the Health Centre, they are referred to the 
District Hospital in Dowa.

In line with the information given by the personnel at the health centre, refugees listed 
HIV/AIDS, sexually transmitted infections, cold and diarrhea as some of the 
communicable diseases affecting adults at the camp. In addition, many refugees suffer 
from non-communicable diseases, especially malaria, ulcers and hypertension. 
Refugees found malaria to be the most common diseases among children, followed by 
cold and roundworms. Also ringworms and pneumonia were among the common 
illnesses. During the last rainy season between January and March, two cases of 
cholera were confirmed at the camp and a further eight in the surrounding communities.

There is a serious lack of qualified personnel at the Health Centre. Currently problems 
exist at the level of diagnoses and in the distribution of drugs. Hence both training and 
recruitment of professional staff is necessary.

HIV/AIDS sensitization campaigns at the camp must be intensified to assist in the 
reduction of transmission of the disease.

It is necessary to explore alternative methods for distributing free condoms as the 
current system does not guarantee privacy.

Malnutrition does not pose a major problem at the camp as there are only a few isolated 
cases reported. Since January 2009, of 44 children were admitted in OTP, four of them 
were refugees from the camp while the remaining were children from the surrounding 
community. Both the Health Centre and MRCS are implementing supplementary feeding 
targeted to HIV/AIDS patients that are on ART, TB patients, and other patients with 
medical complications such as peptic ulcer disease (PUD).

WATER, SANITATION AND ENVIRONMENT

Sanitation and drainage at the camp are poor. The number of boreholes is below 
standards and the existing ones have not been properly maintained. Water stagnates 
around boreholes and the need for proper drainage is evident across the camp. 
Communal toilets are provided but they are few in number and in many cases built too 
close to either housing or water sources, increasing the problems of sanitation. There 
are no areas for washing and maintaining personal hygiene that would also allow for 
privacy during these activities.
Waste disposal is a significant cause for concern at the camp. There are no waste pits, hence rubbish is collected in numerous different locations, often in very close proximity to houses. While many refugees burn their trash, this practice is not sufficient to ensure efficient and safe disposal of waste, and can have impacts on refugees’ respiratory health.

- Drainage around boreholes and throughout the camp must be improved.
- The number of public toilets must be increased, whilst ensuring that they are far enough from both water sources and housing.
- More emphasis should be put on reforestation programmes to ensure not only access to firewood, but also to improve camp environment.

### SOCIAL PROTECTION

According to the refugees the groups that are most vulnerable are single women and widows, elderly people (especially elderly women), and unaccompanied children. During the focus group discussions women also acknowledged the existence of gender-based violence (GBV) at Dzaleka. Young girls face specific security risks such as forced marriages by parents who would want to receive money from the lobola paid. In addition, rape, sexual abuse and forced prostitution (by parents who want their children to bring money in the home) are commonplace.

- There is need for more GBV sensitization campaigns in the camp.

UNHCR-Malawi is engaged in promotion and facilitation of voluntary return of refugees to their countries of origin. UNHCR Malawi is in constant contact with other UNHCR offices in Rwanda, Burundi and Democratic Republic of Congo to ascertain the political situation of those countries so that those refugees who are willing to return can do so. UNHCR-Malawi produce leaflets in different languages informing refugees about the current situation of those countries. In 2009, approximately 200 refugees have been repatriated back to their countries of origin.

Local integration is not an option applicable to Malawi. Chances of being resettled in a third country depend on the willingness of the third country to resettle the refugees. While UNHCR-Malawi facilitates the process of identification of refugees eligible for resettlement, the process relies heavily on the initiative of third countries.

- UNHCR-Malawi should continue to promote sensitization meetings with the refugees to convince more refugees to repatriate and to inform on procedures for resettlement.

Focus group discussions with the locals revealed that while the locals had no security problems with the refugees, they were surprised that the refugees continue to live in Malawi even after peace seems to have returned in their countries of origin. They were concerned with the behaviour of Ethiopian refugees who roam around begging or stealing food from Malawian villages. The refugee programme has lately suffered from negative media attention as some Ethiopians have been caught begging, stealing, and in transit across the Mozambique border. In addition, refugees and asylum seekers
residing outside of the camp have had some problems with immigration and security officers.

UNHCR/WFP should continue to have programmes that will foster unity and co-existence between refugees and the local population.
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ACKNOWLEDGEMENTS

The JAM team would like to express its appreciation for the support received from the Ministry of Home Affairs (especially Dzaleka Camp Management), Ministry of Health, Malawi Red Cross Society (MRCS), Jesuit Refugee Services (JRS) as well as World Food Programme (WFP) and United Nations High Commission for Refugees (UNHCR) staff in Lilongwe. The enthusiasm and hard work of employees of all the above organizations and government bodies ensured the success of this mission.

Particular appreciation goes to the refugees and the local communities for being so cooperative and willing to provide all the relevant information and for warmly welcoming the JAM team at the camp. Further thanks go to the individuals who assisted in translation during the data collection.
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JESUIT REFUGEE SERVICE:
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<table>
<thead>
<tr>
<th>ACRONYMS</th>
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<td>ADMARC</td>
<td>Agricultural Development and Marketing Corporation</td>
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<tr>
<td>ART</td>
<td>Anti-Retroviral Therapy</td>
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<td>ADGM</td>
<td>Age Gender Diversity Mainstreaming</td>
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<td>CHS</td>
<td>Community Household Surveillance</td>
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<td>DRC</td>
<td>Democratic Republic of the Congo</td>
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<td>DP</td>
<td>Distribution Point</td>
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<td>EPI</td>
<td>Expanded Programme on Immunization</td>
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<td>FBS</td>
<td>Family size-based system</td>
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<td>Food for Work</td>
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<td>JAM</td>
<td>Joint Assessment Mission</td>
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<td>JRS</td>
<td>Jesuit Relief Services</td>
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<tr>
<td>MCH</td>
<td>Mother and Child Health</td>
</tr>
<tr>
<td>Mk</td>
<td>Malawian Kwacha (1 USD = 141 Mk)</td>
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<tr>
<td>OVC</td>
<td>Orphans and Other Vulnerable Children</td>
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<tr>
<td>PDM</td>
<td>Post-Distribution Monitoring</td>
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<tr>
<td>PMTCT</td>
<td>Prevention of mother to child transmission</td>
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<td>PRRO</td>
<td>Protracted Relief and Recovery Operation</td>
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<td>RUTF</td>
<td>Ready-to-use therapeutic food</td>
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<td>Gender-Based Violence</td>
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<tr>
<td>UNFPA</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<td>UNHCR</td>
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<td>WFP Vulnerability Analysis and Mapping</td>
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<td>VCT</td>
<td>Voluntary Counselling and Testing</td>
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<td>WFP</td>
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<td>ZBS</td>
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1. BACKGROUND TO THE ASSESSMENT

Malawi has hosted refugees since 1990, the majority of whom originate from Rwanda, the Democratic Republic of Congo (DRC) and Burundi. The Dzaleka refugee camp is located in the district of Dowa in central Malawi, and also hosts smaller numbers of refugees displaced by violent conflicts in countries such as Ethiopia and Somalia.

The camp is run jointly by UNHCR and the Government of Malawi, with WFP responsible for food assistance to the refugees. Malawi Red Cross Society (MRCS) is an important implementing partner to both UNHCR and WFP being responsible for the distribution of food and non-food items and heavily involved in the provision of health and social programmes, while education to the refugees is provided by Jesuit Refugee Services (JRS).

Malawi is signatory to the 1951 Refugee Convention and its protocol of 1967 as well as the OAU Refugee Convention of 1969. Despite this, the Government of Malawi holds several reservations to the Refugee Convention, including the exemption from reciprocity, movable and immovable property, rights of association, wage earning employment, liberal professionals, public education, labour legislation and social security, freedom of movement and naturalisation. This significantly reduces the refugees' potential for local integration and self-reliance. While GoM has allocated a limited amount of land to the refugees at Dzaleka, swelling of the population caused by the GoM-directed consolidation with the Luwani camp in 2007 has resulted in a shortage of plots.

The last UNHCR/WFP Joint Assessment Mission (JAM) in Dzaleka camp was held in July 2008 in coordination with GoM. The mission focused on issues related to food security, self-reliance of refugees (livelihood activities) and the impact and effectiveness of UNHCR/WFP assistance within Dzaleka camp. Special attention was given to the health and nutrition status of reproductive-age women and children under five. The JAM also assessed the relationship between refugees and the residents of the surrounding villages.

WFP has been providing food assistance to the refugees under the 3-year PRRO 10309.1, which began in January 2007. As the current programme is now coming to an end, it was deemed necessary to assess food security and nutritional well-being of the refugees to better inform further assistance under the new refugee PRRO, scheduled to begin in January 2010. Furthermore, the findings of this mission will facilitate decisions on how the WFP can design the new programme to best respond to the above mentioned issues. The conclusions and recommendations will also enable UNHCR, GoM and implementing partners to focus their operations in areas where the need is the greatest, and highlight possible areas of improvement.
2. METHODOLOGY AND SECONDARY DATE REVIEW

2.1 Objectives

The primary objective of the 2009 JAM was to assess food security and nutritional status amongst the refugees at the Dzaleka camp, as well as investigate developments in the following areas:

- security and protection,
- the relationship between the refugees and the members of the host communities,
- health, sanitation, and the environment,
- education and community-level services at the camp.

The findings will be used to guide refugee assistance programme planning and implementation and to highlight the areas where adjustments need to be made to the current programmes. To this end the JAM assessed, reviewed and evaluated the different aspects of the refugee assistance programme operations, outlining strategic recommendations that will improve further assistance and support by all agencies involved.

2.2 Data Collection

The 2009 JAM relied heavily on secondary data (see Appendix 1) and focus group discussions, as well as interviews with key informants. In addition, through transect walks, JAM team members were able to observe and inspect sanitary conditions, healthcare facilities and the environment, and investigate the extent to which refugees have access to markets. Emphasis was placed on qualitative data to follow up on and supplement the extensive quantitative information collected during the 2008 JAM, which served as a baseline.

Prior to the focus group discussions, the four JAM teams reviewed existing secondary data relevant to their respective areas of focus – food security, nutrition and sanitation, security and protection, and education and community services – in order to be familiarized with the context. Team members had access to previous JAM assessments conducted in 2006 and 2008, reports from JRS, MRCS and MoH, GoM policies concerning refugees in Malawi, as well as refugee demographic data from a rapid headcount carried out on the 26th-27th of August 2009. Each team was led by respective agencies:

- Team 1 – Food Security: WFP
- Team 2 – Nutrition, Environment, Water and Sanitation: MoH jointly with WFP
- Team 3 – Protection and Security: UNHCR
- Team 4 – Education: MRCS
Each team conducted focus group discussions in the camp, and when relevant, with the surrounding local communities. Focus groups represented a wide cross-section of the camp population, including refugee women, men, and children, pupils at the school, teachers and zone leaders. Key informant interviews were administered to the health centre personnel at the camp, teachers, and camp staff. When possible, duplication of focus groups was used to ensure the accuracy of the information gathered (e.g. two groups of refugee women, two groups of refugee men, etc.).

In analyzing the results from focus group discussions it is important to bear in mind the inherent presence of biases. Language barriers between team members and the interviewees was one of the most prominent challenges that the assessment encountered. Interviewers relied heavily on translators from the refugee population, and focus groups often required translation into as many as four different languages. While this complication creates an increased likelihood of translation errors, triangulation of information and repeated verifications with translators are believed to have limited these errors to a minimum. It is also important to note that there is an inherent disincentive for refugees to provide information that suggests improvements to the camp situation that may result in decreased assistance. This risk is especially high in areas concerning livelihood activities, asset ownership, and land/market accessibility.

2.3 Review of secondary data

2.3.1 Demographic data

UNHCR, as the lead UN Agency on refugee matters works closely together with the Ministry of Home Affairs and Internal Security (MoHAIS) - the Government body responsible also for refugees – to realize general protection of refugees and assistance in accordance with international conventions and protocols. WFP provides food assistance to refugees residing at the camp, in coordination with MoHAIS and UNHCR. In addition UNHCR works closely with other implementing partners, including Ministry of Health, Malawi Red Cross Society (MRCS) and the Jesuit Refugee Service (JRS).

A rapid verification of the camp population was conducted by UNHCR with the help of WFP, MRCS and JRS on the 26th-27th of August in 2009 in order to have updated population figures prior to commencing the JAM exercise. Those who are of concern to UNHCR and appeared in person at the verification site with a valid ration card, were noted as ‘verified.’ Those who are of concern to UNHCR but did not appear at the verification in person and those who are yet to be verified as persons of concern or who could not produce a valid ration card during the exercise were then followed up by UNHCR over the month following the exercise. As a result it was established that refugees make up for 4,483 individuals living at the camp (on the 25th of September 2009).
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<tr>
<td>Total</td>
<td>323</td>
<td>846</td>
<td>921</td>
<td>19</td>
<td>2,109</td>
<td>372</td>
<td>885</td>
<td>1,100</td>
<td>18</td>
<td>2,374</td>
<td>4,483</td>
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A large proportion of the camp population is composed of asylum seekers, with a total population of 7,971. The majority of Somali and Ethiopian asylum seekers (1535 in total) have been staying in the transit shelter and hence receive food (2 week ration) twice a month. This population is very fluid and consists of mainly single adult males, who are on their way to third countries. Only 53 Somali and 17 Ethiopian asylum seekers are registered and have ration cards. The rest are in transit and expected to stay at the camp for only a very short period of time.
The refugee programme has lately suffered from negative media attention as some Ethiopians have been caught begging, stealing, and in transit across the Mozambique border. In addition, refugees and asylum seekers residing outside of the camp have had some problems with immigration and security officers. These incidences can however be partially avoided by improving follow-up and coordination between UNHCR and police.  

2.3.2 MRCS and JRS

Work at the community level is mainly carried out jointly by MRCS and JRS. Prior to the JAM it was noted that zone leaders were selected by organisations working at the camp rather than elected, creating questions of legitimacy and accountability. This has also led to a ‘power struggle’ between the zone and community leaders. The camp is divided into different zones, which each have a leader who has been the focal point in issues regarding food related issues, GBV and other daily issues. Community leaders on the other hand are leaders of their respective communities - currently elected leaders are for DRC and Rwanda, while Somalis and Ethiopians have elected leaders accepted by their communities and recognized by UNHCR and MRCS. Burundi has no leaders because they refused to do elections. Before the creation of zones, UNHCR and MRCS worked with Community leaders. However, cooperation with zone leaders has been found to be more efficient as they represent people regardless of their nationality whereas with Community leaders nationalistic issues and aspiration has been overriding the common good thus causing significant problems in terms of cooperation and efficiency.

Another issue that MRCS has been facing is the ability to distinguish between genuine and false complaints, as some refugees try to appear more vulnerable than they are in order to receive special treatment.

Social support services are also available. While there is a functioning Anti-GBV committee at the camp, incidences are not always adequately reported due to fear or insufficient knowledge of rights and what should and should not be tolerated. In addition, not all reported cases have been properly followed up by the police. Several activities on HIV/AIDS awareness and support have been done in the camp and PLWAs who come in the open are provided with supplementary feeding and help by the Health Clinic at the camp or by MRCS. Despite this support, the existing stigma against HIV/AIDS causes many people to continue to hide their status. JRS supports MRCS activities in the community through its psycho-social programme.

JRS is also responsible for the pre-, primary- and secondary schools at Dzaleka camp and also provides adult education and vocational training as well as psycho-social programme. JRS collaborates with numerous agencies, including the Ministry of Education and the Ministry of Home Affairs, Mary’s Meals, World University Service of Canada (WUSC), the Centre for Social Concern, UNISEF, UNFAO and as mentioned above, MRCS. The work of JRS has been impacted by the global recession and it too has been facing serious funding constraints, which are affecting the operations of all organisations working at Dzaleka camp. In addition, demand for JRS services has increased following the closure of Luwani and GoM’s decision that all refugees must live with Dzaleka. High enrolment levels have affected the quality of education at the pre-school, while in the primary school the teacher-pupil ratios remain high. Despite these

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1 MRCS, Programme Mid-Year Report, 2009, p.2.
challenges, primary-school students have for several years achieved the best results in the Central region. This success has not been replicated at the secondary school, where performance has been poor due to ineffective selection criteria, insufficient English skills of some students, and a lack of dedication on the part of the secondary school teachers. Demand for adult education remains high, especially for the popular intensive English language course (ESL).^3^

2.3.3 UNHCR

UNHCR is responsible for providing non-food items to the camp. The provision of items including blankets, soap and kerosene has been a cause of concern for many refugees at Dzaleka. The provision of blankets was delayed due to procurement issues – the blankets were originally to be provided by the regional office in Pretoria but it was deemed too costly to transport them to Malawi and hence procurement was eventually done locally and distribution to new arrivals by July 2009. Soap has been distributed on a regular basis but the 200g per person ration falls short of the 250g per person recommended monthly ration. The monthly kerosene ration of four litres per family per month has been untimely and distributed inconsistently. To improve sanitation, UNHCR has again increased the number of boreholes at the Dzaleka camp this year from 20 to 24. Unfortunately, their premises have not been kept clean by the refugees. Instead the water points have been used for moulding bricks. In addition, water stagnates around these areas. While water point committees have been trained on how to maintain boreholes, some of the members have requested compensation for performing their duties. Sanitation is not up to date at the camp as poor drainage causes water to stagnate around boreholes, while there are too few toilets and no washing areas available at the camp. Health hazards have also resulted from the high level of deforestation, which makes the area increasingly prone to heavy winds and flooding. Deforestation of the area surrounding the camp has continued at an accelerated rate, hence firewood is collected more than 15km away from the area. UNHCR has made attempts to improve the situation by planting 5,000 trees, however few trees survived due to the mistiming of planting and not being cared for by the camp population (see discussion on the project in section 3.1.4).^4^

The GoM reservations against the 1951 Geneva Convention continue to prevent refugees from enjoying many of the rights that would otherwise be granted. As refugees are not allowed to trade, those who do so risk losing their merchandise when forced back to the camp by GoM. UNHCR has implemented various measures to improve camp security. Refugees who were deemed at risk at Dzaleka have been provided housing in Lilongwe, pending durable solutions. In addition, both uniformed police and other security personnel have been deployed to provide security within the camp and both civic and criminal cases are being monitored and followed at the Magistrate Court in Dowa and Lilongwe. UNHCR has also succeeded in reducing the backlog in resettlement, voluntary repatriations, and in providing safety and security to refugees. Solving these problems is a lengthy process due to the limited number of UNHCR staff in Malawi.^5^

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^4^ UNHCR, RBM, 2009.
^5^ UNHCR, RBM, 2009.
2.3.4 WFP

WFP provides food assistance to all refugees with a valid ration card at Dzaleka refugee camp, under the PRRO 10309.1. The individual ration per month should comprise of 13.5kg of cereals (rice/maize meal), 1.8kg of pulses, 0.75kg of vegetable oil, 0.45kg of sugar and 0.15kg of salt, which provides the minimum recommended requirement of 2100Kcal for an average normal active person per day. Due to pipeline breaks, no salt was provided from February 2009 until August 2009. Furthermore, funding constraints have compelled the PRRO 10309.1 to borrow heavily from other WFP programmes, and has forced the programme to replace maize meal with maize grain since August 2009. To make up for the cost of milling, each individual is given an additional 2kg of cereals. WFP also needs to give heightened attention to the timeliness of distributions as these are known to have been up to two weeks late.

The PRRO 10309.1 includes a food-for-assets (FFA) component targeted at the host community, which is designed to support lean season food security and decrease tensions that would have arisen had the refugees received food and the host community had not. This FFA programme included a reforestation component (separate from the UNCHR-directed refugee reforestation scheme) to be carried out in cooperation with MRCS, to the end of replacing the trees that have been cut due to the high demand for firewood at the camp. The targeted beneficiaries would receive food items in return for preparing composite manure, the planting site, and for ensuring that the woodlots are adequately cared for. This programme is currently on hold due to significant funding shortfalls, and it is highly unlikely that resources will be available for it before the project comes to an end in December 2009.
3. FOOD SECURITY AND SELF-RELIANCE

3.1 Food Access

3.1.1 Food sources

Refugees at Dzaleka receive the majority of their food from WFP, which is the sole donor in the camp. According to key informants and focus groups, food distributed from WFP can compose of as much as 75% of the food consumption for the average refugee. In addition to these distributions, some refugees complement food donations with own-production and food purchased in the local market. A standard ration, calculated to provide each refugee with 2,100 kcal per day, consists of 13.5 kg cereal, 1.8 kg pulses, 0.45 kg sugar, 0.15 kg salt, and 0.75 kg vegetable oil per person.

3.1.2 Food preferences

Refugees have been considerably vocal with regard to the commodities, which they have received over the course of the past year. Due in part to recent price volatility in international markets, the preferred cereal, rice, has become increasingly expensive and difficult to source within the program budget. Maize meal, and in some cases, maize grain, has been more frequently utilized to meet program obligations. Rice is preferred because it does not require milling, and it can be eaten without vegetable relish (whereas nsima, made from maize meal, is reported to require relish). Rice, because of its significantly higher market value, is also easier to barter for meat and vegetables, and yields higher profits when sold on the local market to finance other purchases.

Since April, pigeon peas have been distributed as the pulse ration. Pigeon peas are by and large unpopular in the camp, for a number of reasons. First, the taste is disliked by many refugees. Second, the longer cooking time that is required imposes an extra fuel requirement upon households already limited by cooking fuel (and particularly firewood) access. Finally, the low market price relative to other pulses makes peas less valuable in terms of their trading/purchasing power.

3.1.3 Market access

Dzaleka refugees have access to two markets, both located within the camp (this trade is allowed under GoM reservations as it is inside the camp boundaries). The majority of market activity takes place once a week on Tuesdays, where both the refugee population and local Malawians buy and sell basic food items such as maize, rice, pulses, tomatoes, onions, potatoes, fish and oil, as well as non-food essentials such as fuel, clothing and soap. Information on refugee access to markets is difficult to obtain from focus group discussions, as participants are hesitant to reveal any activities in which they engage that might indicate that they have cash.

Of the refugee population, small businesses tend to be owned by Burundians, while the supply market for locally produced vegetables is dominated by Rwandan farmers. Nevertheless, refugees report that the market traders are mainly Malawians who do not understand or care about refugee needs or preferences. Observations from the market
reveal that almost all of the maize grain, rice, pulses, and oil being sold are still in its WFP-marked packaging.

Local maize grain traders report that sales are primarily to Malawians, and that there is little if any contact with mobile traders coming from Lilongwe. Nevertheless, the nearby Admarc depot by effect of the national minimum price, has kept maize prices roughly in line with those in Lilongwe. This approximate price parity is true for other cereals and vegetables as well. With the completion of road construction that will connect the camp to the M1 highway, integration with surrounding markets will likely further increase.

3.1.4 Economic resources

Access to land and the capacity for own-production is a critical metric in evaluating refugee self-reliance. In the past, land has been accessed through two sources. The first is plots that are part of the camp. These are in theory to be distributed by the camp administration, but in practice are often transferred or sold from refugee to refugee. The second source is renting from villagers in the surrounding local community.

The proportion of refugees cultivating has decreased since the last year’s JAM. Due to growing inequalities in the plot size of camp-owned land amongst refugees, MRCS recently withdrew all claims to land so as to redistribute plots to refugees in a more equitable manner. At the same time, many refugees renting land from local villagers have been forced off these plots after police notified the surrounding community that refugee use of land outside of the camp was illegal. As the window to plant for the coming harvest narrows (planting season starts in October when the rains start and runs through to January), it is unclear whether the redistribution of land will occur soon enough for the refugees to cultivate this coming season. The 2008 JAM found that 27% of refugees had access to land, 95% of that figure cultivating. In the absence of a household survey it is difficult to quantify how this figure has changed over the course of the past year. It can be inferred, however, that the reclamation of land by MRCS has drastically reduced this number.

Environmental pressures surrounding the camp have eroded an important economic asset, as refugees continually search for cooking fuel. To counter rampant deforestation, UNHCR supported a reforestation intervention that delivered 5,000 seedlings to refugees, who upon planting take ownership of the trees. Timing of the project was miscalculated, however. Seedlings were delivered after the rains, and most did not survive.

As all refugees interviewed reported serious food shortages on a regular basis that must be made up through own-production and market purchases, employment is an important resource needed to cope until the next food distribution. Employment opportunities are reported to be very scarce, both for skilled and unskilled labor. Many refugees reported not having enough food because of a lack of employment opportunities, and are at risk of resorting to non-constructive coping mechanisms in the absence of jobs, such as asset-depletion, theft, prostitution, etc. The most common form of employment is *ganyu* labor or piecework. For women, this generally includes washing clothes or needlework.

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6 At the time of the JAM, the maize grain price at the camp was MK40/kg in the camp, compared with MK43/kg in Lilongwe. The GoM-mandated price floor for is currently MK40/kg, the price at which Admarc buys.
where as for men brick work is predominant. Many of the pits that are dug for the making of bricks in the camp are left open afterwards, creating a dangerous landscape to navigate at dark.

Asset ownership varies widely within the camp. Many focus group participants projected an image of a complete lack of assets, which is likely true for many refugees. However, some own televisions and radios, while more common assets include livestock such as hens and goats. The selling of livestock, and sometimes even clothing, has depleted the asset base of many camp refugees.

Formal credit and savings services do not exist in the camp. In 2003, World Relief Malawi (WRM) and Malawi Savings Bank (MSB) attempted to pilot a savings program, but it was not continued. Refugees report that they do not have enough money to save. Many refugees are hesitant to take out informal loans because if business moves slowly, they may not be able to repay the loan. The lender will then come and take their rations. However, focus groups expressed the desire for microcredit services; this may indicate a moral hazard that refugees are less concerned with the consequences of default with a formal lender (i.e. a bank or agency will not take their rations, and thus have little recourse to enforce the loan).

3.1.5 Livelihoods and coping mechanisms

Reducing meals and ration size is a common practice across the camp, with most refugees subsisting on one meal per day in the afternoon, or various small meals of porridge with lower nutritional value. Selling of food rations is the most commonly utilized coping strategy. Focus groups estimate that refugees on average sell approximately 50% of received rations, though there is wide variation in this estimate. These sales follow a “sell high” strategy that is in part responsible for refugees’ preferences for more expensive cereals such as rice as opposed to maize. Sales finance the purchase of less expensive food items (e.g. maize meal), food items not included in the ration (e.g. vegetables and meat), non-food items (e.g. cooking fuel and soap), and often non-productive expenditures such as alcohol.

Dissatisfaction amongst refugees with the maize grain rations is closely linked to ration sales. Focus groups report that they will sell 25% of their rice ration, but to receive the same amount from maize grain they are forced to sell from 75% to 100% of the ration. Recent maize grain rations included an additional 2.0 kg to compensate for the cost of milling, however many refugees reported that this amount was insufficient. Oil sales are also common, especially amongst the elderly who report digestion problems and need to buy more appropriate foods. Pigeon peas are also commonly sold, though this mostly likely more related to taste and cooking time rather than their market value. They are often sold or bartered for firewood.

Borrowing of food is widely reported amongst refugees. These are refugee-to-refugee transfers that do not entail interest payments (i.e. the amount of food borrowed in period \( t \) is the same as the amount of food repaid in period \( t+1 \)), though rarely there are gifts of food made without expectation of repayment. Many households are prone to debt traps, where each month they are obligated to repay food borrowed from the previous month, which in turn creates a food shortage they must again cover by borrowing. Households with more individuals are likely to have more children; because the ration received is a
standard 2,100 kcal/day per refugee, and children do not eat as much as adults, more children translates into more food relative to a household that is composed entirely of adults. This, in turn, results in households with fewer heads typically borrowing from households that are larger in size. Households that have only one or two members are particularly risky borrowers, and have trouble finding food loans. Single women are seen as the greatest repayment risk, because they have the fewest employment opportunities to finance repayment. For these refugees, begging is also common.

Resorting to illegal activities is a coping strategy for some. Theft of maize from plots in the surrounding community has been reported by zone leaders and confirmed by the local community. Focus groups of women report that some women have turned to prostitution for food or for cash to buy food. These activities are downplayed by men’s focus groups, which state that women who resort to these activities would have done so even if there was not a need for food.

3.1.6 Recommendations

- Refugees at Dzaleka remain highly dependent (greater than 50%) on food distributions to meet their consumption needs. WFP should continue to support the camp with food assistance.

- Pigeon peas are highly unpopular amongst refugees, both because of taste and cooking time. The problem of cooking time may be solved by sensitizing refugees to practices such as soaking pulses thoroughly in water before cooking. The successor PRRO should also explore procurement possibilities for cost-effective substitute pulse that will minimize the fuel cost to refugees and that are better in line with refugee preferences.

- The successor PRRO should explore the feasibility of alternative and supplementary feeding options for the elderly and sick, considering need, cost, leakage and the effect such a program may have on refugee relations within the camp.

- Immediate redistribution of camp land resources for the next season’s planting is critical for developing refugee self-reliance. Failure to meet this encroaching deadline will exacerbate the food security situation, further increase labor supply thus decreasing wages, and potentially increase market prices by way of decreased local market supply.

- While deforestation represents a major threat to refugee economic resources, reforestation schemes will not be sufficient to address this problem in the short run. Both reactive and preventative measures must be taken to slow continuing degradation. These may include the intensified promotion of fuel-efficient stoves, supplying of paraffin stoves along with an augmented, family size-based paraffin ration, and renewed concentration on supplying rations that utilize commodities that require minimal cooking time. The feasibility of provision of firewood by UNHCR should also be explored.

- Successful reforestation projects will not only require careful planning and timing, but also the support of experienced extension workers to meet the considerable
challenge of growing trees in a highly desertified area. In addition, continuing care and protection of the reforestation project will require new incentives for refugees beyond potential non-tangible, long-run benefits. Training and employment of local refugees (particularly women) in the planting, but also maintenance of reforested areas, may be effective in this capacity.

- Similar to refugee operations in other countries, the successor PRRO should explore the feasibility of a trust fund, financed by the monetization of empty ration bags and containers by refugees. Such funds may provide a revenue stream to assist the implementation of reforestation or FFW projects.

- Activities such as theft and prostitution should serve as red flags that the employment situation in the camp is untenable. Food-for-asset or cash-for-asset interventions should be a priority for the successor PRRO.

3.2 Food Availability

3.2.1 Pipeline and logistics

PRRO 10309.1 has been continually under-funded over the past year. Food obligations of the programme have been met by repeated monthly loans from PRRO 10586.0. Since July 2008, 10586.0 has provided 10309.1 with over 1,600 Mt of commodities to compensate for pipeline breaks. At the time of the 2009 JAM, less than one-fifth of this amount had been repaid. Food distributions have been consistently delayed by these pipeline interruptions, late preparation of distribution plans, and an overall lack of agency coordination.

3.2.2 Rations and targeting

Across all focus groups and informant interviews, ration sizes were described as inadequate by refugees. A standard monthly ration, calculated to provide the refugee with 2,100 kcal per day, consists of 13.5 kg cereal, 1.8 kg pulses, 0.45 kg sugar, 0.15 kg salt, and 0.75 kg vegetable oil per person. Estimates of how long the rations last vary widely from one to three weeks, and rice is said to last longer than maize (most likely due to differences the value when sold on the market). This large range likely reflects a high amount of variance in refugee coping strategies and household utilization. Some refugees reported larger households borrowing from smaller households, a counterintuitive observation considering larger households should have a greater amount of surplus food (see above discussion on borrowing in section 3.1.5). This may again indicate wide variation in levels of indebtedness (being caught in a debt trap) amongst households, food management and household budgeting skills.

No complaints were raised with regards to targeting of the food. A repeated viewpoint was that everyone with a ration card, all refugees, has the right to food. However, there were numerous reports of refugees abusing the system by holding multiple ration cards, and of teachers and students that have moved to live and work outside of the camp passing along their ration cards to friends and family. Ration cards were recently reclaimed for the purposes of the pre-JAM verification, and there are complaints by
some that they have not had their cards given back to them, despite these individuals being eligible for food aid.

3.2.3 Food distributions

Approximately 13,000 refugees and asylum seekers are currently being fed under the PRRO, with MRCS in charge of distribution monitoring. Currently, no post-distribution monitoring is occurring. In the past, food distributions were conducted using a zone-based system (ZBS). Dzaleka is divided in zones, composed of multiple nationalities and household sizes; each day a zone would be called, and refugees living in that zone would queue at the distribution point (DP) to receive their rations. This system was described as extremely inefficient by many refugees: with different household sizes receiving different rations, the amounts distributed needed to be changed for each refugee, a lengthy process which led to errors in measurement. In some cases, refugees would wait at the DP an entire day and still not receive their ration. The distribution process could last as long as a week.

In August 2009, distribution was changed to a family size-based system (FBS). In this system, each family size is called separately (e.g. when F4 is called, all households with four members receive their distribution, F5, all households with five members, etc.) Refugees overwhelmingly prefer this system. Because each ration is the same for each refugee called to the DP, rations are more uniformly and accurately measured. In addition, the number of days of the camp-wide distribution has been reduced to five days. Because the rations within every group of refugees are the same, theft is more visible and easily reported. However, prevention of theft during distributions will be dependent upon the enforcement capacity of distribution monitors.

Nevertheless, refugees have suggested numerous improvements to the distribution process. Scales used in weighing rations are reported as inaccurate by refugees, and there is still imprecise scooping of rations in the absence of MCRS supervision. Refugees still complain that the distribution process is too long and should be streamlined to three days. This could be facilitated by doubling the number of entries to the DP. The roofing between the warehouse and the distribution point was destroyed by a truck this past year; this area will need to be covered during the wet season. It is generally felt that the elderly should not be made to wait for distributions as they are too weak or sick to spend long hours in the queue and that they should be given preferential treatment. There are also accusations that the scouts who are in charge of maintaining order in the queue are showing favoritism.

There is also a lack of consensus on which family size groups should begin the distribution process. Some think that F1s and F2s should go first, because they are the most likely to run out of food early, while others suggest starting with higher family sizes so that they can lend to the smaller family sizes, while feeding their own households. Others feel that a staggered process would be most fair, where F3s would begin one distribution, F4s would begin the following distribution, and so on. Zone leaders complain that with the FBS, they are unable to verify who is truly a member of that family size because each family size group is composed of households from different zones with whom they are not familiar. They recommend forming “family size leaders” to monitor distributions so as to ensure that households actually correspond to the called family size number. In general, zone leaders complain that there is not enough integration of
distribution officials and zone leaders; they feel that they should be playing a more prominent role in the distributions.

3.2.4 Recommendations

- The successor PRRO must be adequately funded to avoid the repeated pipeline breaks that characterized 10309.1. Funding alone will be insufficient to assure adequate food availability for refugees. Agency coordination must be strengthened so that timely distribution of rations occurs every month. This lack of coordination is one of the most prominent problems at the camp.

- The design, implementation, and evaluation of a post-distribution monitoring system should be a top priority for the successor PRRO.

- The WFP must offer support to MRCS in distribution monitoring to ensure the accurate and fair distribution of rations, limit leakage, and ensure accountability.

- The inefficiency of borrowing and food management strategies related to budgeting in many households in part reflects uncertainty around the next distribution date. Renewed effort must be made to execute distributions in a timely, and more importantly, consistent manner.

- Distributions should continue using the family size-based system, and experiment with the order in which these family sizes receive their distributions. This order should be designed to ensure a maximum 30-day period between distributions. A committee should be formed representing a broad cross-section of refugee stakeholders that meets regularly with camp officials to increase refugee participation and suggest ways to improve distributions, while addressing issues such as ration measurement and scout favoritism, etc.

- The possibility of preferential treatment of the elderly during distributions should be explored in a forum inclusive of all stakeholders.

3.3 Food Utilization

3.3.1 Milling

Milling has only become an issue during the past two distributions, when maize grain was used instead of maize meal or rice. Restricted by the costs of transporting maize grain to Blantyre for milling and processing, it was calculated to be more cost-effective to distribute the grain directly to refugees and have them mill it themselves. The current cost of milling a 20.0 kg bucket of maize grain is MK50. To compensate for the milling costs incurred by the refugees, each ration was supplemented with an additional 2.0 kg of maize grain (total 15.5 kg and market value of MK40). Refugees in some cases were unaware that the additional ration provided, and in others deemed its value inadequate to cover the cost and time of using the one functional milling facility in the local community.

3.3.2 Storage and consumption
Within the home, rations are stored on top of bricks to prevent direct contact with the ground, in the sacks in which it was distributed. It appears that for many household, the ration does not last long enough to incur significant damage; it is either consumed or sold. Refugees did not report any storage or quality issues. Refugees are for the most part subsisting on a single meal a day, though some will eat smaller meals of porridge. Cooking of rations is dependent upon increasingly scarce cooking fuel sources.

3.3.3 Non-food items provision

Non-food items (NFIs) are purchased by UNHCR and distributed through the MRCS as the implementing partner. The planned items and quantities include 4 litres of paraffin per family per month regardless of family size, and 200 grams of soap per family per month. UNHCR also provides other NFIs such as kitchen sets to new arrivals. The set includes four pots, five cups, two knives, six plates, six spoons and a frying pan. In addition, one blanket and jerry can/water container per family is part of the NFI set. Due to budgetary constraints, the kerosene is sometimes distributed bi-monthly. The price of fuel has in recent past gone up against the static UNHCR budget and this has prevented UNHCR from maintaining steady supply of the product to the refugees. It is common that upon receiving these goods, refugees have resorted to selling the NFIs to finance other purchases.

During focus group discussions with old women and old men refugees/asylum seekers expressed the following concerns regarding particular NFIs that they receive (see above discussion in section 2.3.3).

- The refugees pointed out that the four litres of kerosene they receive per month was not sufficient. They strongly proposed an increase from the current four litres per month to at least 10 litres per month. Focus groups also pointed out that the supply of kerosene was irregular; distribution sometimes is done after two or three months. Focus groups also complained that sometimes kerosene is distributed to some zones while other zones go without kerosene. They suggested that the distribution should cover all refugees in the camp. On why they sell the kerosene despite it being in short supply, the refugees claimed that they sell part of the kerosene to buy other necessities not provided in the food basket such as vegetables and meat. Kerosene is mainly used for lighting and firewood for cooking.

- The refugees also pointed out that the soap they receive (200g per person per month) was not enough. As with kerosene, the supply of soap at Dzaleka Camp is irregular. They proposed an increase in the supply of soap and more consistent distribution.

- During the focus group discussions refugees complained that blankets are distributed per family and not per individual. They proposed that each family member should receive one blanket instead of a family of six receiving four blankets or a family of ten receiving eight. The sizes of the blankets they receive are reportedly too small to be shared.
Some refugees said that the pots that they receive are too small for some large families in the camp. Some also suggested that rather than targeting specific families, MRCS should distribute the NFIs to all refugees in the camp.

UNHCR normally does not distribute clothes to refugees/asylum seekers at the camp. However, MRCS periodically buy clothes using UNHCR funding for refugees/asylum seekers with special needs such as orphans and the elderly. During the focus group discussions, the elderly women asked UNHCR to provide refugees/asylum seekers with clothes regularly including warm clothing during winter.

3.3.4 Recommendations

- The current cost of milling a 20.0 kg bucket of maize grain is MK50. The additional 2.0 kg of maize grain supplied in the rations, at a current market value of MK40/kg, is sufficient to finance milling cost if sold. Moving into the lean season, the maize grain retail price should increase in line with the national market, adding value to the supplemental ration. However, programme should be prepared to increase the supplemental ration accordingly if the local market price falls below MK25/kg (a possibility when harvest begins in April), and closely monitor any changes in milling costs.

- WFP is currently in violation of the MoU with UNHCR by providing maize grain without in-camp milling facilities. WFP should investigate the milling capacity at nearby locations within Dowa district, before the commodities reach the camp. In-camp infrastructure must be provided if maize grain is to remain the distributed commodity for the programme. Cost-benefit analyses should explore ways in which such infrastructure can be utilized to increase economic activity within the camp. Possibilities include using revenue from milling charges to fund group savings schemes, invest in community assets, etc.

- As fuel sources continue to become scarcer, the added cost of purchasing cooking fuel will continue to erode the real value of the food ration. UNHCR and WFP should collaborate on ways to ease this cost by way of fuel provision. Awareness-building of techniques such as soaking pulses should be conducted. Promotion of fuel-efficient stoves must be scaled up. Cooking fuel provision needs to be intensified.

- Essential NFIs, specifically kerosene, soap, and blankets, must be more consistently and reliably provided. The current 200g soap distribution is less than the 250g mandated by UNHCR guidelines.
4. HEALTH, NUTRITION, WATER AND SANITATION

4.1 Health and health care

4.1.1 Diseases

The clinicians at Dzaleka camp reported malaria, pneumonia, diarrhea, acute eye infection and skin infections as the most prevalent diseases in the camp, especially amongst children. Adults are also affected by the same diseases except skin infections. While these maladies can be the result of multiple factors, it is clear that the high prevalence of malaria is the result of a lack of mosquito nets and of stagnant waters at various locations within the camp, especially around washing slabs that are found at boreholes. The health centre has distributed mosquito nets to children under five and pregnant women, but these are not sufficient in number to significantly reduce malaria cases. In addition, some nets are sold by the refugees for additional income, while others believe they can only be used when sleeping in a bed rather than on the floor. All mosquito nets can be treated during Health Centre Child Health days. Many refugees prefer to treat cases of malaria themselves at home, rather than to turn to the health clinic for help.

Pneumonia, another disease that significantly affects both children and adults at the camp, results from difficult environmental conditions (dust, coldness) and overcrowding in the camp. Refugees living with HIV/AIDS are particularly vulnerable to pneumonia-related infections that often occur. Camp conditions, especially those leading to poor hygiene contribute notably to the number of diarrhea cases. Sanitation around the boreholes is extremely poor as the lack of proper drainage system causes water to stagnate. In addition there are inadequate communal toilets and no refuse pits that ensure proper waste disposal. During the last rainy season between January and March, two cases of cholera were confirmed at the camp and further eight in the surrounding communities. Lack of proper personal hygiene is often the main cause of acute eye infections.

In line with the information given by the personnel at the health centre, refugees listed HIV/AIDS, sexually transmitted infections, cold and diarrhea as some of the communicable diseases affecting adults at the camp. In addition, many refugees suffer from non-communicable diseases, especially malaria, ulcers and hypertension. Refugees found malaria to be the most common diseases among children, followed by cold and roundworms. Also ringworms and pneumonia were among the common illnesses.

HIV/AIDS is reported to be prevalent and rising at the camp, especially by women. The most common means of spread is sexual intercourse. The health centre does offer VCT services on daily basis but these are not effectively used due to privacy reasons. A blanket HIV testing for all refugees residing at the camp was seen as a possible solution by interviewed refugees.
4.1.2 Health care services

Dzaleka camp has a health centre that provides health and nutrition related services to all refugees and the communities surrounding the camp. The health centre has one clinical officer, two medical assistants, seven nurses and seven health surveillance assistants. With the number of staff available, the health centre should be able to provide the OPD, maternity and emergency services. In case of any complications, patients are referred to Dowa district hospital for further treatment. Health services including treatment are free of charge both at the camp and in Dowa but some refugees seek medical attention from Mtengowanthenga hospital whereby they accrue a cost. Mtengowanthenga is a Christian Health Association of Malawi hospital (and thus part of the private hospital association) and despite charging for its services it is preferred by some refugees. The Health Centre refers patients to the District Hospital – Dowa.

Interviewed refugees raised several concerns regarding the services provided at the health centre. The main issue was related to the distribution of drugs. There were numerous claims of patients having received outdated drugs, incomplete treatments or wrong medication for the illness in question (for example pain killers were reported to be distributed when antibiotics were appropriate). These accusations were not confirmed by the Health Centre staff, however the clinical officer interviewed said they are lacking some drugs. Some of the refugees interviewed are trained medical personnel and confirmed the claims from their part. There were also complaints concerning access to healthcare, especially in the case of emergencies. One reason for this was the night guard not having been found at his duty station and hence there not being a way to contact the emergency service. It has also been common for the health centre personnel to not respect working and opening hours and often patients have to wait for hours before they are attended to.

The health centre does not have drugs to treat acute eye infections and is thus obliged to refer all patients to the district hospital. The laboratory at the Health Centre is not fully functional because there isn’t a qualified laboratory assistant. The limited services currently available are conducted by a partially trained health surveillance assistant.

According to the health centre personnel, numerous healthcare measures are in place to ensure efficient and proper health care services to refugees. Pregnant mothers are encouraged to receive and treat mosquito nets. In addition, the health centre provides health and nutrition education to women and mothers through MCH clinics on weekly basis. Health education is also provided at OPD and at household level, especially for new arrivals and to the surrounding villages. Selective feeding is available for refugees that are on ART, and in general the available selective feeding targets all categories of malnourished people. Together with MRCS, the health centre also conducts sanitation, health, and HIV/AIDS prevention campaigns targeted to refugees. EPI services are conducted on daily basis at the heath centre.

4.1.3 Recommendations

- There is a serious lack of qualified personnel at the camp health centre. Training should be provided at least on management of adult malnutrition and in laboratory services. Furthermore, there is an urgent need to improve the
distribution of drugs, which is currently not administered professionally. Problems also exist at the level of diagnosis, hence both training and recruitment of professional staff is essential. Refugees who are trained medical professionals should be utilized, in cases where this is allowed by MOH regulations.

- It is necessary to ensure sufficient supply of drugs to the Health Centre. The supply of essential drugs is inadequate, which further increases the problem of patients having been given incomplete dosages.

- Serious complaints were made regarding the treatment of patients. Responsible parties must ensure that emphasis is placed on patient care as well as on professional behavior. Staff who fail to respect work hours and Health Centre opening hours should be replaced.

- There is a need to explore the possibility of increased funding to improve the Health Centre facilities. The Health Centre lacks proper laboratory equipment and is in desperate need of an upgrade. These would also facilitate diagnoses. There is no water pump at the Health Centre or a computer for processing reports and record keeping. Health Centre staff also requested a motor bike or bikes for follow ups in cases where the use of an ambulance is unnecessary and too costly.

- HIV/AIDS sensitization and awareness campaigns at the camp must be intensified, for example by showing HIV/AIDS sensitization films routinely targeting various groups at the camp. This would assist in preventing transmission of the disease.

- Explore alternative methods for distributing free condoms, as the current system doesn’t guarantee privacy and was not seen as efficient by the refugees.

4.2 Nutrition

4.2.1 Nutrition and feeding practices

Malnutrition in children under 5 years old does not pose a major problem at the camp as there are only a few isolated cases reported. The most common type of malnutrition at the camp is marasmus (4 cases in January 2009), although anemia is also prevalent. Lack of dietary diversity was reported as the main cause of malnutrition, while malaria and intestinal worms increase the likelihood of anemia.

In general most households eat in groups according to age groups. Young children eat together sharing one plate, the same for adolescents and adults. Men, women, boys and girls all eat separately. Interviewed adults reported eating once a day while children receive at least two meals per day.

Most women breast feed exclusively for five months. However, there are others who introduce water and other foods to their infants three months after birth due to sickness of the child.
4.2.2 Selective feeding activities

Since January 2009, of 44 children who were admitted in OTP, four of them were refugees from the camp while the remaining were children from the surrounding community. Since June 2009, five children were admitted into supplementary feeding with two coming from the refugee community. Additionally, since March to June 2009, a total of ten adults were enrolled in supplementary feeding. Two of them were from the camp.

OTP programme performance at the camp was very good between March 2009 and September 2009. The cured rate was high, 97%, above the lower threshold of 75%, according to the SPHERE standards and the national guidelines on management of acute malnutrition using the community approach. Likewise, defaulter rate was low, 3%, below the upper threshold of 15%. Mortality rate was at 0%, lower than the upper threshold of 10%, again following SPHERE standards. In 2009 there have been 4 severe acute malnutrition cases, which were all enrolled in Out Patient Therapeutic Care (OTP) and received ready-to-use therapeutic foods (RUTF).

Both the health centre and MRCS are implementing supplementary feeding targeted to HIV/AIDS patients that are on ART, TB patients, and other patients with medical complications such as peptic ulcer disease (PUD). The health centre uses national guidelines on management of acute malnutrition, including admissions and discharges in its programmes, which currently supports 118 ART patients. MRCS focuses on moderately malnourished groups in its supplementary feeding programme but as therapeutic foods are provided partly as a motivation, discharging the beneficiaries is challenging. This raises questions of sustainability of the programme. In addition, very limited reports of the MRCS are available.

4.2.3 Recommendations

- The health centre should be provided with food supplements such as milk to assist patients suffering from peptic ulcers. Corn-soya blend is needed for the PMTCT.
- It is recommended that MRCS sends a copy of their feeding activity reports to the district hospital for consolidation and further reporting at national level.
- Collaboration and coordination amongst partners within the camp must be strengthened by involving all stakeholders in campaigns related to health and nutrition-related issue.

4.3 Water and sanitation

4.3.1 Water and sanitation

The camp has a total of 22 boreholes. These are not enough in number for the population at the camp (according to SPHERE standards). The water is considered safe for drinking but some boreholes are drilled very close to toilets and hence there is potential for contamination and questions about safety of the water could be raised. The major challenge is inadequate number and cleanliness of containers that are used by the
refugees to keep water. Some refugees use the same containers for bathing and drinking, but drinking water is not boiled. Hence an additional health risk arises from the way water is stored.

Water stagnates around boreholes and the need for proper drainage is evident across the camp. Communal toilets are provided but they are few in number and in many cases built too close to either housing or water sources, increasing the problems of sanitation. There are no areas for washing and maintaining personal hygiene that would also allow for privacy during these activities.

Housing at the camp is poor. Due to the weather conditions – strong winds and dust – most houses either have no windows or have their windows closely shut, preventing ventilation. During the rainy season the sandy grounds turn into mud, increasing humidity and hence also the risk of mould and fungus in the houses. These conditions in turn increase the risk of diseases, especially respiratory problems and skin diseases.

There is no vegetation at the camp, which increases the number of weather-related problems. Due to the camp being overcrowded, animals live in the same premises with people, increasing the risk of infections and spread of disease.

Waste disposal is a significant cause for concern at the camp. There are no waste pits, hence rubbish is collected in numerous different locations, often in very close proximity to houses. While many refugees burn their trash, this practice is not sufficient to ensure efficient and safe disposal of waste, and can have impacts on refugees’ respiratory health.

Storage of food items for sale is below standard. Most goods are exposed to the dust that moves around due to high winds and food items are not protected from the sun, which is especially problematic for salt. (Salt provided by WFP is iodized and when salt is left in an open place iodine evaporates and as iodine content in the food consumed by refugees is already low, this risks becoming a nutrition problem). Inappropriate storage methods of food can further contribute to the high levels of diarrhea and other diseases caused by a lack of sufficient sanitation.

4.2.3 Recommendations

- Drainage around boreholes and throughout the camp must be improved.
- The number of public toilets should be increased, whilst ensuring that they are far enough from both water sources and housing.
- Refuse pits must be dug around the camp to improve waste disposal.
- It is important to increase control over the way houses are built around the camp. Currently the residences are too close to each other. In addition, it would be advisable to encourage people to keep animals away from sleeping and eating areas in order to reduce the spread of disease. Such needs point to the need for a comprehensive public health awareness campaign.
• More emphasis should be put on reforestation programmes to ensure not only access to firewood, but also to improve the camp environment, to provide shade and shelter from the wind and to reduce dust.

• Active information campaigns, combined with health and nutrition information campaigns would improve also storage of food and thus help in reducing food related illnesses.
5. SOCIAL PROTECTION, COMMUNITY AND EDUCATION

5.1 Social protection issues

5.1.1 Gender based violence

According to the refugees the groups that are most vulnerable are single women and widows, elderly people (especially elderly women), and unaccompanied children. During the focus group discussions women acknowledged the existence of gender-based violence (GBV) at Dzaleka and cited the following as examples common GBV cases in the camp:

- Men selling food meant for the family, or women clothing to purchase alcohol
- Spousal abuse
- Single women in the camp being harassed by men after they refuse sexual advances
- Widows/single women living in fear at night due to the risk of breaking-and-entering and sexual assault

During the same focus group discussions, some women did not know reporting procedures of GBV. Others said that they report to their zone leaders who dismiss them outright. Other women pointed out that leaders are able to sort out some of these problems faster but it becomes too slow when the issue is being handled by the Camp Administrator. On the effectiveness of the reporting mechanisms, the women pointed out that sometimes GBV and other related security cases take along time or never get resolved at all, which they describe as demoralizing. Children also pointed out that young girls face specific security risks such as forced marriages by parents who would want to receive money from the lobola paid. In addition, rape, sexual abuse and forced prostitution (by parents who want their children to bring money in the home) are commonplace.

Other security concerns described by youths include:

- Child trafficking
- Fear of forced repatriation which will jeopardise their education
- Child labour in the homes at the expense of education (orphans are particularly at risk)
- Discrimination against children whose parents die from HIV/AIDS

5.1.2 General camp security

Camp security is provided by the government. The government via the Ministry of Internal Affairs and Public Security provide both uniformed police officers (eight) and non-uniformed security personnel (six). The police have an office at the camp and rotate every month. The non-uniformed security personnel are responsible to the Camp Commander (Camp Administrator). During focus group discussions, both refugee women and men decried the corruption amongst the police. They pointed out that some cases are never concluded, especially in incidents where police show favouritism to refugees with greater wealth. Members of the focus group team were requested to ask the police to be fair in their dealings.
Regarding the coexistence with the locals, refugees said that they live harmoniously, although children pointed out isolated cases where some children from the local community tout them as people who run away from their countries. The refugees pointed out they have no problem marrying local women although they are not comfortable allowing their daughters to marry the local men. Respondents criticized the harsh treatment Malawians subject to their women to, especially when it comes to working in the garden.

Focus group discussions with the locals revealed that while the locals had no security problems with the refugees, they were surprised that the refugees continue to live in Malawi even after peace seems to have returned in their countries of origin. They were however concerned with the behaviour of Ethiopian refugees who roam around begging or stealing food from Malawian villages.

5.1.3 Voluntary repatriation

UNHCR-Malawi is engaged in promotion and facilitation of voluntary return of refugees to their countries of origin. UNHCR Malawi is in constant contact with other UNHCR offices in Rwanda, Burundi and Democratic Republic of Congo to ascertain the political situation of those countries so that those refugees who are willing to return can do so. UNHCR-Malawi produce leaflets in different languages informing refugees about the current situation of those countries. UNHCR conducts sensitisation meetings regarding voluntary repatriation. Those willing to return are registered and the process of repatriation begins. UNHCR offices in the countries of origin are informed about the people willing to return and are also given details of the areas that the refugees would like to return to. After all immigration formalities have been completed, the refugees are given a repatriation grant and are flown to their respective countries. In 2009, approximately 200 refugees were repatriated back to their countries of origin.

During focus group discussions both refugee men and women said that they were willing to repatriate to their respective countries if they were assured of total security. Some refugees from Rwanda said that they know if they go back home they will not find any relatives and they do not want to be strangers in their own country. Others said that they fear they may not have land to farm after staying outside of their countries for a number of years. Others said they know the underlying problems that made them flee are still present.

5.1.4 Local integration

This option is almost inapplicable to Malawi. The government of Malawi is not keen to offer citizenship to refugees who want to stay in Malawi. During focus group discussions, some refugees said they were willing to settle in Malawi permanently as long as they are given land to cultivate. On the other hand the locals categorically said they were not would not accept that refugees settle among them as citizens because they already have land problems and therefore they would not like to share the already scarce land resource.
5.1.5 Resettlement

Chances of being resettled in a third country depend on the willingness of the third country to resettle the refugees. While UNHCR-Malawi facilitates the process of identification of refugees eligible for resettlement, the process relies heavily on the initiative of third countries. Some refugee children from Rwanda wondered why Rwandans are not offered resettlement as often as their DRC, Burundian and Somali counterparts. Some older refugees think that those that have money and are able to travel to UNHCR office in Lilongwe stand a better chance to be resettled than the poorer ones who cannot afford to travel to Lilongwe.

5.1.6 Recommendations

- There is need for more GBV sensitization campaigns in the camp. The GBV SOPs need to be shared with all the stakeholders.

- UNHCR/WFP should continue to have programmes that will foster unity and co-existence between refugees and the local population. These may work through joint activities such as traditional dance concerts, joint economic activities such as farming clubs, joint tree planting exercises and exchange visits.

- Security personnel in the camp need to be constantly reminded of their role in the camp, which is to be non-partisan in the way they discharge their duties in the camp. New structures of accountability should be explored in a collaborative discussion involving both stakeholders and refugees.

- UNHCR-Malawi should continue to promote sensitisation meetings with the refugees to convince more refugees to repatriate. More sensitisation meetings should also be conducted on procedures for resettlement.

5.2 Community factors

5.2.1 Committees

There are community committees on gender-based violence and HIV/AIDS. In these meetings, men report that participation and decision-making is equitably shared between males and females. Females, however, report that while participation numbers are roughly equal, female participation is only nominal, with most female participants contributing little and deferring judgment and decision-making power to more dominant male participants. Both males and females report the need for a committee specifically addressing food and food distribution-related issues.

Zone leaders were reported by men to be more in touch with the refugees than community leaders, and thus in a better position to offer assistance. Women reported both zone and community leaders as being a source of friction and creating more problems than they solve. Women suggested streamlining the role of community and zone leaders, while creating new leaders and committees for social groupings, such as widows and orphans.
5.2.2 Gender equity issues

Reports on gender equity and asset ownership follow a similar pattern to reports on committees by males and females. Men assert that asset ownership and household decision-making is equally shared by males and females. Women however report having zero decision-making power in their households. Women are said to be care-takers, not owners of property. The male heads of household sometimes sell off rations immediately to purchase alcohol, and women are not consulted on the sales or purchases of assets. In general, the attitude expressed by the women's focus group was one of frustration as to gender discrimination and repression.

5.2.3 Recommendations

- Community mobilization should be facilitated by capable stakeholders so as to create new committees for issues such as food security, widows, orphans, etc. This facilitation should concentrate on empowering women members to have a more representational participation. Committees and groups exclusive to women may engender participation and provide a secure forum for women to discuss issues of specific concern to them that might normally be disregarded in male-dominated committees.

5.3 Education

5.3.1 Absenteeism

There is a problem with students dropping out of school, though no teachers reported a rate much higher than 10 percent. Dropping out is more common for girls than for boys, particularly around adolescence when early pregnancy and marriage become problems. Other issues affect both genders: migration, resettlement, and engagement in household chores can create disincentives for school attendance.

5.3.2 School resources

Generally speaking, teachers in the primary school are constrained by a lack of resources, both in terms of supplies and manpower. The number of textbooks is said to be inadequate for the school size, and limited space available in the library discourages students that would otherwise study. Student-teacher ratios, while decreasing from the previous year, are extremely high even by Malawi standards. Teachers report that ratios of 70:1 are an improvement from last year, where some classes were as high as 120:1. However, some classes with ratios of around 50:1 are more manageable. These high numbers make marking exams and providing individual attention to students extremely challenging. School uniforms were the most commonly requested resource by students.

5.3.3 Food and schooling

In many cases, absenteeism by schoolchildren is exacerbated by having to collect rations on distribution days if the head of household is ill, or if the child is an orphan. A lack of food at home was reported to be an issue for nearly all schoolchildren, with rations often running out before the coming distribution. Parents are commonly unable to
provide adequate food over the 10 to 15 day lean period between distributions that many schoolchildren reported. The school feeding program, which provides a small porridge ration to students, has been effective in providing food assistance to many children in this capacity. Teachers report that the porridge ration given each day allows the children to concentrate and learn more effectively. However, of the three required factors: flour, firewood, and volunteers to prepare the meal, one of the three is usually in short supply.

5.3.4 Recommendations

- While the primary school’s performance points to a commendable use of limited resources, additional teachers would be useful in lowering student-teacher ratios, while additional textbooks can fill existing gaps. An emphasis should be put on curtailing absenteeism caused by resettlement or migration expectations. Furthermore, collaborating agencies should coordinate to assure the reliable supply of inputs to the school feeding program, especially considering the importance of this food source for students in the lean period or ration shortfalls.
6. CONCLUSION

Refugees hosted by Malawi at the Dzaleka refugee camp remain extremely reliant on aid from UNHCR, WFP, MRCS and other organisations working at the camp. Still as much as 75% of all food consumed by refugees comes from donations from WFP. It is thus extremely important that food assistance continues to be provided in a sustainable, predictable, equitable and efficient manner in the future. The WFP programme has been suffering from recurrent pipeline breaks and funding shortages and whilst these are likely to cause problems also in the future, attempts should be made to minimise their impact. In addition to the food basket provided by WFP, refugees at Dzaleka depend on donations from UNHCR for non-food items. These too have been in short supply, due to pipeline breaks and other management issues, and further emphasis should be placed on efficient and timely delivery of sufficient quantities of non-food items.

Despite being a signatory to the to the 1951 Refugee Convention and its protocol of 1967 as well as the OAU Refugee Convention of 1969, the Government of Malawi continues to hold several reservations to them, including the exemption from reciprocity, movable and immovable property, rights of association, wage earning employment, liberal professionals, public education, labour legislation and social security, freedom of movement and naturalisation. This significantly reduces the possibility of local integration and self-reliance and increases the dependence of refugees on aid. Continuous efforts should be made in lobbying for lifting of these reservations, especially those limiting employment opportunities and inhibiting refugees from achieving self-reliance.

Security or lack thereof is an issue at the camp deserving of special consideration. Gender-based violence remains common place and only few effective measures have been put in place to curb its occurrence. There is a need for more GBV sensitisation campaigns, but more importantly, security personnel within the camp must be reminded of their responsibilities to ensure impartial treatment of all victims of any form of violence or mistreatment. Furthermore, there is a need to develop new structures of accountability which would be best designed and implemented in collaboration with all stakeholders and refugees.

While malnutrition does not pose a significant problem at the camp, various health problems are extremely prevalent amongst the refugee population. The camp Health Centre is not well equipped to respond to the demand and hence refugees are not currently provided with services of acceptable standards. Insufficient supply of medication has led to people being given incomplete and inappropriate treatments. The situation has been aggravated by the lack of proper sanitation at the camp. Provided boreholes are not adequate in number and have been poorly maintained, with water stagnating around them and drainage being hampered by rubbish. Poor drainage, together with too small number of toilets and complete lack of a waste disposal system further contribute to poor sanitation and the spread of disease.

In addition to the above, all actors involved at the camp must address the evident energy problem of the camp as a matter of urgency. With almost all refugees relying on charcoal and firewood for their cooking needs and these being sourced 15km away from a reserved forest area, there is need for an immediate solution to the shortage of firewood, whether this is a provision of fuel efficient stoves or an increased amount of kerosene as well as a more long-term approach. Reforestation programmes, such as proposed in the current WFP Refugee PRRO and attempted by UNHCR and the
Government of Malawi must be included in the refugee assistance work to ensure to avoid further depletion of assets and increased environmental degradation.

To ensure that all issues and concerns listed in this JAM report can be effectively addressed, there is a need for increased cooperation, collaboration and information sharing between all organisations involved in providing assistance to refugees. Without a streamlined plan of action that eliminates possible areas of overlap in the face of fallen funding levels that have followed the global economic and financial crisis it will be difficult for all parties concerned to ensure sustainable and efficient provision of assistance to refugees.
Appendix 1

Food Delivered to Dzaleka by WFP

<table>
<thead>
<tr>
<th>YEAR</th>
<th>PROJECT ACTIVITY</th>
<th>MONTH</th>
<th>MAIZE</th>
<th>RICE</th>
<th>PULSES</th>
<th>SUGAR</th>
<th>VEGETABLE OIL</th>
<th>IODISED SALT</th>
<th>Grand Total</th>
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<td>2008</td>
<td>PRRO 10309 REF</td>
<td>Jan-08</td>
<td>118.15</td>
<td>15.5</td>
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| YEAR | Total | PRRO 10309 REF Total | 403.450 | 156.700 | 1,030.310 | 195.400 | 48.700 | 75.360 | 1,915.095 |

|      | Grand Total | 403.450 | 156.700 | 1,030.310 | 195.400 | 48.700 | 75.360 | 5.175 | 1,915.095 |
Beneficiary numbers at Dzaleka Camp according to WFP distribution plans

![Bar chart showing beneficiary numbers at Dzaleka Camp from Jan 2008 to Oct 2009. The chart displays the number of individuals in two categories: Permanent population and Transitory population. The y-axis represents the number of individuals ranging from 0 to 14,000. The x-axis represents the months from Jan 2008 to Oct 2009.]
Appendix 2

JAM 2009 Team Checklists

Team 1 Focus Group Check List

FOOD SECURITY

Refugees’ access to food, income and essential non-food supplies

- Access to food and other essentials:
  - means by which the refugees - or different groups among the refugees - presently obtain food and essential non-food supplies and services;
  - resources and sources of income they have to acquire those items (livelihoods);
  - inter-refugee food and resource sharing, buying and selling of rations;
  - preferences in food type and distributions, quality of commodities, household utilization;
  - adequacy of utensils, water, cooking facilities and fuel for food preparation; requirements (if any) for additional inputs;
  - adequacy of shelter and hygiene materials (especially soap) available to the refugees/IDPs;
  - the effectiveness of current arrangements for targeting and distribution of non-food items; problems, if any;
  - possibilities for improved targeting and distribution systems;

- Effects of refugees’ coping strategies:
  - Define coping strategies used;
  - the probable short and long term effects of the coping/survival strategies adopted by the refugees;
  - movements of refugees in and out of the camp;
  - asset ownership;

- Economic factors:
  - access to land; the fertility of that land; land tenure and ownership; the availability (and cost) of water and other essential agricultural inputs including extension services; possibilities for intensive small-scale (including multi-storey) gardening or chicken and other small livestock rearing on household plots; crop/food storage facilities;
  - the availability of pasture and veterinary services; endemic livestock diseases;
  - current employment opportunities (formal and informal) in the locality, for skilled and unskilled workers; unemployment rates among the local population; local labour laws and taxation considerations;
  - financial opportunities; whether and how households save or access cash (credit) through informal, traditional or community-based mechanisms; the availability of micro-finance services (credit, savings); government regulations concerning credit and micro-finance services;
  - possibilities for natural resource management programmes (including but not limited to environmental protection and rehabilitation) and other infrastructure works programmes inside and outside the refugee settlements;
  - the backgrounds and skills of the refugees or displaced persons and how well these skills match the opportunities available; any changes in skill profiles due to continuing population movements (departures and new arrivals);

- Access to land, employment, markets:

- whether refugees’ have physical access
- if government policy is restrictive
- the extent to which restrictions are enforced
- changes in government policy
- host community perceptions towards economic integration of refugees into local markets

Seasonal calendar:
- crop calendar
- how seasonal considerations (including any seasonal disruptions of transport) affect the ability of the refugees to obtain food
- climatic factors that facilitate or constrain agricultural, employment and other self-reliance activities, or access to markets; seasonal considerations

Food handling, targeting and distribution

Food deliveries:
- any problems with deliveries, on-site storage and handling

Targeting:
- the effectiveness of the mechanisms used; whether improvements, or alternative methods, are needed and possible.

Distribution:
- the effectiveness and efficiency of current arrangements
- whether the most vulnerable/at risk individuals and groups are able to receive their entitlements without too much difficulty
- how do the severely food insecure groups access food? what is their relation with wealthier refugees?
- what improvements, or alternative arrangements, are needed and possible
- the capacities (and willingness) of government entities, other organizations and the refugees themselves, to improve or adopt new arrangements to ensure equitable distributions.

Household food utilization

Food storage:
- arrangements and facilities for food storage at household level;
- losses incurred during storage

Food preparation:
- extent to which the refugees are able to prepare food for themselves
- availability of necessary utensils, stoves, grinding/milling facilities, water and cooking fuel
- ability to prepare easily digestible foods suitable for very young children and sick and elderly people

Infant and young child feeding and care practices:
- traditional practices of the refugees and whether these are maintained
- extent of breastfeeding,
- arrangements for complementary (weaning) foods and care; availability/access of complementary foods
- risks for the health of infants and children
- arrangements for the feeding of infant orphans and infants of mothers who cannot breastfeed
Team 1 Focus Group Questionnaire

FOOD SECURITY FOCUS GROUP QUESTIONNAIRE

FOOD ACCESS:
- Access to food and non-food supplies:
  o How do you obtain food?
  o How do you obtain non-food supplies (ex. soap, fuel, hygienic supplies, pots and water buckets, etc.)?
  o Do you share resources with other households?
  o Do you buy or sell rations? What part of the rations do you most commonly sell? Why?
  o What type of food do you prefer? How do you prefer it to be distributed?
- Coping strategies:
  o What assets do you own? Do you ever sell these assets to buy food? Did you have more or fewer assets when you arrived at Dzaleka?
  o Sometimes you run out of food. How do you survive until the next distribution if you run out of food? What things do you do that are good? What things do you do that are bad?
  o What positive or negative impacts does your survival strategy have upon you and your family?
- Economic factors:
  o Do you have access to land? How much? Owned or rented? From whom (a previous refugee, or did it come from an agency)? Is water available for irrigation? Inputs and fertilizers? Tools? Extension services?
  o Is there pasture available? Veterinary services? What types of diseases affect livestock?
  o What employment opportunities are there? Skilled or unskilled? How many people are unemployed? How are you affected by labor laws?
  o Are there ways to save cash or access credit? Cooperatives or savings groups? Microfinance services?
  o What skills or abilities does the refugee population have? Are people arriving with new or different skills? What was primary employment of people before they arrived in Dzaleka?
- Crop calendar:
  o When do you plant crops?
  o When do you harvest?
  o When is there the least food?
  o When is there the most food?
  o When do you have to sell your harvest? Do you sell before it is optimal? Why?
  o What crops do you grow?
  o What is the food most commonly purchased?
  o What is the food most commonly sold?
  o How does your ability to obtain food change with the season?
- Markets:
  o Are you able to access markets?
  o Who is buying food?
  o Who is selling?
  o Are prices and availability the same for refugees as for the people in the local town?
  o How much do you rely on the market for food?
  o How much of the food your family consumes are you able to grow on your own?
  o How much of your food do you receive from distributions?
  o Do you have other sources of food? (donations)?

FOOD AVAILABILITY:
- What are problems with how food is delivered? With storage? With handling?
- Is food going to the most vulnerable and poor people?
- Is the distribution fair? Are some people getting more than others?
- How can distributions be improved?
- Who is rich? How do you define rich? Who is poor? How do you define poor? What characteristics do the poorest of the poor have?
- How do the poorest access food? How do the richest access food?
- Do you take part in the distributions? What roles do you play?
- What can refugees themselves do to improve the process?
- How do agencies relate information about food distributions? Are these ways of communication effective?

FOOD UTILIZATION:
- How do you store food in your home? How long is it stored before it is consumed?
- How much is damaged during storage in between distributions?
- Is the quality acceptable? Does it ever make you or your family sick?
- How do you prepare your food? Cooking method? Do you wash your hands? What water source do you use? What is your source of cooking fuel?
- Do you have to mill or process the food you receive?
- Is the food you prepare and receive easily digestible for the very young or very old?

Team 1 Key Informant Interview Check List

**FOOD SECURITY**

**Refugees' access to food, income and essential non-food supplies**

- Effects of refugees' coping strategies:
  - Define coping strategies used
  - The probable short and long term effects of the coping/survival strategies adopted by the refugees
  - movements of refugees in and out of the camp
  - asset ownership

- Economic factors:
  - access to land; the fertility of that land; land tenure and ownership; the availability (and cost) of water and other essential agricultural inputs including extension services; possibilities for intensive small-scale (including multi-storey) gardening or chicken and other small livestock rearing on household plots; crop/food storage facilities
  - the availability of pasture and veterinary services; endemic livestock diseases
  - current employment opportunities (formal and informal) in the locality, for skilled and unskilled workers; unemployment rates among the local population; local labour laws and taxation considerations
  - financial opportunities; whether and how households save or access cash (credit) through informal, traditional or community-based mechanisms; the availability of micro-finance services (credit, savings); government regulations concerning credit and micro-finance services
  - possibilities for natural resource management programmes (including but not limited to environmental protection and rehabilitation) and other infrastructure works programmes inside and outside the refugee settlements
  - the backgrounds and skills of the refugees or displaced persons and how well these skills match the opportunities available; any changes in skill profiles due to continuing population movements (departures and new arrivals)

- Access to land, employment, markets:
- whether refugees' have physical access
- if government policy is restrictive
- the extent to which restrictions are enforced
- changes in government policy
- host community perceptions towards economic integration of refugees into local markets

Government policy:
- changes in policies towards the refugees and their access to land, employment and markets, or in the manner in which any restrictions are enforced
- national policies and attitudes towards the refugees or internally displaced, their right to life with dignity and the quality of the asylum provided
- national and local government regulations concerning: access to land, employment, markets, financial services; their freedom of movement; their access to and use of natural resources (e.g. water, firewood) and social services; the integration of displaced and refugee groups into local development programmes; the promotion of self-reliance activities by aid organizations
- the degree of enforcement of those regulations, and any indications that policies or their enforcement could change
- the membership and effectiveness of official national and local coordination arrangements for refugee-related operations – the involvement of development oriented departments and organizations
- the commitment demonstrated by UN agencies and individuals in their employment
- the willingness of the donor community to support self-reliance pending a durable solution

Food handling, targeting and distribution

Food deliveries:
- any problems with deliveries, on-site storage and handling

Targeting:
- the effectiveness of the mechanisms used; whether improvements, or alternative methods, are needed and possible.

Distribution:
- the effectiveness and efficiency of current arrangements
- whether the most vulnerable/at risk individuals and groups are able to receive their entitlements without too much difficulty
- how do the severely food insecure groups access food? what is their relation with wealthier refugees?
- what improvements, or alternative arrangements, are needed and possible
- the capacities (and willingness) of government entities, other organizations and the refugees themselves, to improve or adopt new arrangements to ensure equitable distributions.

Markets

General market information:
- locations of markets where refugees can purchase food, non-food essential (such as soap, medicines, clothing).
- the demand among the refugees or displaced persons and in the locality for items that could be produced by them (e.g. vegetables, other food items, soap, tools, utensils,
containers); present availability, trends in prices and the volumes of items traded, and the potential unmet demand and its limits
- the demand for services among the refugees or displaced and in the locality (e.g. food processing, bicycle repair); present availability, trends in remuneration rates and the potential unmet demand and its limits
- access to other markets – the degree of integration of local markets with national markets (or markets in neighbouring countries); the capacity of those local markets to absorb the items (food and non-food) that the refugees or displaced may produce; transport facilities and costs; storage; measures that could open access to other markets for refugees or the host populations
- the factors (if any) that constrain market operations (e.g. transport difficulties, lack of reliable market information, etc.)
- sources of market and price information

What information to seek in retail markets
- selling prices of staple food items and other important food items (e.g. beans, essential condiments) of average quality – prices per kg or the usual local measure; how these prices compare with what is normal for the season; recent price trends
- selling prices for essential non-food items (e.g. soap, fuel-wood and/or other cooking fuel, household utensils, clothing); how prices have changed in the last few weeks and in the last year or two
- selling prices for agricultural inputs (e.g. seeds) and other raw materials used in local productive activities; how prices have changed in the last few weeks and in the last year or two
- buying and selling prices of agricultural (including livestock – healthy animals) and other products that refugees/IDPs and local people (especially poor people) have to sell; how prices have changed in the last few weeks and in the last year or two
- the terms of trade for the labour and/or produce (including ration items) the target group has to sell against their essential expenditures, how the terms of trade have changed recently and how they may change in the coming months
- items that are in short/declining supply and relatively expensive; items that are plentiful/in increasing supply and relatively cheap
- the reasons for changes in availability and price as perceived by buyers and sellers

What information to seek from wholesale traders
- wholesale selling prices for staple food items, other important food items, essential non-food items
- buying prices for the agricultural and other products produced by the refugees/displaced and/or in the locality
- whether any food supplies are being moved out of the area; if so, which items
- other supplies that are moved out to be sold in other markets
- costs of taking supplies to the main markets in other areas; whether transport capacity is a constraint; any other constraints
- whether stocks of any particular items are low; if so, why; whether stocks of any particular items are building up because of weak demand and/or transport difficulties; if so, which items

What information to seek about labour and services markets
- daily wage rate for casual, unskilled labour; how the rate compares with what is normal for
the season; how the rate has changed recently
- the reasons for changes in the supply and demand for unskilled labour, and in daily rates, as perceived by contractors and labourers themselves
- the skills and services that are in plentiful supply, and those for which demand exceeds supply

Team 2 Focus Group and Key Informant Interview Check List

HEALTH

Refugees’ access to health services
- Access to health and environmental conditions
  - What are the five common communicable diseases affecting the camp in order of importance
    - adults
    - children
  - What could be the common causes of these diseases?
  - What measures have been put in place to prevent these diseases?
  - Is treatment for the diseases readily available? What is the source?
  - What is the quality of those services?
  - Are there any recent changes in the quality of services?
  - Is there any improvement on health status of the refugees?
  - Are there any epidemics?
  - Mortality rates (under-children, crude)?
  - How often are health workers providing EPI services to the children in the camp?
  - What is the immunization coverage?
  - What are the public health risks at the camp?
  - What is the main source of water? Is it adequate? Is it safe for drinking?

- Effectiveness of the Dzaleka Health Centre:
  - Are refugees seekers satisfied with services offered at Dzaleka Health Centre
  - Which areas need improvement at the Health Centre.

- HIV/AIDS
  - Accessibility of drugs
  - Are VCT services available at the Health Centre;
  - Are you satisfied with the VCT services in the camp.
  - Do refugees/asylum seekers with HIV/AIDS have access to supplementary feeding in the camp?
  - Are HIV/AIDS prevention campaigns conducted in the camp?
  - Are you satisfied with these campaigns
  - What would you want to see done?
  - Do refugees/asylum seekers have access to condoms
  - Are you satisfied with the manner condoms are distributed?
Nutrition situation
- To what extent is Dzaleka Health Centre receiving malnourished clients since January (current status, changes and trends compared to last year same period)?
  - children
  - adolescence
  - adults
- What are the common types of malnutrition (kwashiorkor, marasmus, micronutrient deficiencies)?
- What are the causes of malnutrition at the camp?
- What programmes have been put in place to prevent malnutrition in the camp?

Selective feeding programmes
- What selective feeding programmes are available at the Health Centre? Who are targeted? What is the targeting criterion?
- What is the performance of the current selective feeding programmes?
- How is it reported?

Feeding practices
- What is the average number of meals taken by: children, adults?
- How are the meals taken - together in a large group; small groups; individually.
- On average how many months is the child exclusively breast fed without introducing water? On average after how many months is water introduced?
Team 3 Focus Group and Key Informant Interview Check List

Security and durable solutions characteristics

Opportunities for voluntary return

- Readiness of refugees to return to countries of origin:
  - Are people willing or ready to return home?
  - What do people require in order to be able to return?
  - Are they aware of the current situation in their countries of origin?
  - What fears do refugees have as to returning to their countries of origin?

- In the home country:
  - What assistance do they believe would be required after arriving in their countries of origin?

Local Integration

Opportunities for local integration

- Awareness of legal integration:
  - Are people aware of how to apply for residence permit?
  - Are people aware of how to obtain Malawi citizenship?
  - Do refugees in Malawi want to obtain Malawian citizenship?
  - Are there individuals who have tried to apply, if so, were they successful?

- Awareness of legal integration:
  - Are people aware of how to apply for business residence permit?
  - Are there individuals who have tried to apply, if so, were they successful?

- Awareness of social and cultural integration:
  - Do people learn to speak Chechewa and English?
  - Are people learning how to read and write English and Chechewa?
  - Is there any particular Malawian customs being adapted by refugees/asylum seekers, if so, which ones?
  - Do refugees/asylum seekers in general eat Malawian food and dishes?
  - Are there any intermarriages between Malawians and refugees?
  - Do refugees know of any implications of such marriages?

SECURITY

Camp security

- General security of refugees/asylum seekers:
  - Do the population feel secure in the camp
  - Main security concerns for refugees/asylum seekers at Dzaleka
  - Is there any particular security concerns for women in the camp?
  - Is there any particular security concerns for older persons in the camp?
  - Is there any particular security concerns for disabled persons in the camp?
  - Is there any particular security concerns for children in the camp?
  - Is there any particular security concerns for men in the camp?
  - What security structures are there in the camp?
- Are sufficient security measures in place to ensure security of refugees/asylum seekers at Dzaleka and if not, what is required to improve the security?
- Are criminal acts considered common in the camp?

☐ Available security services:
- Is there any security structures available to prevent Sexual and Gender Based Violence?
- Is there any services available to respond to Sexual and Gender Based Violence?
- Is there any security structures available to prevent and respond to exploitation of children in the camp?
- Is there any services available for children that has come in conflict with the law?
- Are security issues addressed promptly and adequately in the camp? If not what should be done?
- Are there reporting procedures of security issues in the camp?

☐ Coexistence with the surrounding local population:
- How is the relationship between refugees/asylum seekers and the host community?
- Is there a need to improve on the relationship and if so, how?

☐ Coexistence among refugees/asylum seekers from different nationalities:
- Is there any tension between different nationalities in Dzaleka camp?
- Is there any tension between different ethnic groups (tribes) in the camp?
- Is there any organised activity to reduce any potential tension?
- What solutions would be possible to reduce any potential tension?

NON FOOD ASSISTANCE

Non food items- requirements and distributions

☐ General requirements of non food items at Dzaleka
- Adequacy of utensils, water, cooking facilities and fuel for food preparation and lighting, blankets and mats; required (if any) for additional inputs;
- Adequacy of shelter and shelter construction materials and hygiene materials (especially soap) available to the refugees/asylum seekers;
- The effectiveness of current arrangements for targeting and distribution of non-food items; problems, if any; possibilities for improved targeting and distribution systems;
- Recommendations.

Team 4 Focus Group and Key Informant Interview Check List

EDUCATION AND COMMUNITY SERVICE

Education

☐ Use of time amongst children:
- What do girls and boys do with their time;
- Who goes to school? Who does not go to school?
- What do girls who do not go to school do with their time? And boys?
- Do girls or boys who go to school go to collect food during food distribution? If yes, how many hours do they spend at the distribution point?
Safety and Security at school:
- Are pupils afraid of going to school or anything at school?
- Is there a system in place that allows pupils to safely report any abuse or other unacceptable behaviour at school?
- How often are teachers absent from school?

Interaction between pupils and parents:
- How do parents interact with boys and girls after school? If not at all, what is the reason for not interacting?

Teacher’s perspective:
- How many pupils drop out of school (per term)? Who drop out more between boys and girls? Which age groups/grades have most dropouts?
- How are parents involved in school issues? How are the school committees formed?
- How many teachers are there? How many refugee teachers are there? And Malawian teachers?

Community committee and services:
- How are committee structures formulated? Are the processes participatory?
- Do women participate in committees? How often?
- Can women make decisions? What do women think about that? And men? What is the impact in the community?
- Why do men participate in most of the committees?
- What would women and men do differently?
- To what extent are the youth involved in the community?
- Are there services provided for those who wish to gain additional skills or improve existing ones?
- Is there a system in place that allows parents to report any mistreatment of children at school?

Distribution of assets:
- Who owns household assets?
- What is the role of women in the household assets?
- Is there a need for change and if yes, how would you go about it?
- How are the sanitary materials used? Intervals of distribution? Quality and quantity being distributed?