In the Republic of Camu, tensions between the Sarvo and Djamba people have been smouldering since the time of independence from a nameless European power. Over the past 25 years, the Djamba have gradually consolidated their control of the institutions of governance, leaving the minority Sarvo increasingly isolated from public life. Ethnic tensions increased with the discovery of oil in Sarvoland, and demands for self-determination began to be heard. Two years ago, a leaked internal government audit report indicated that 40% of oil revenues received by the government could not be accounted for. In protest, a series of strikes by the largely Sarvo oil production workforce began. The brutal response by government militia has been documented in detail.\(^1\) This response set off an intermittent but intense conflict which displaced an estimated 450,000 persons within the country’s borders over the next few years. A loose-knit Sarvoland Patriotic Front (SPF) was formed with these irregular forces attacking targets such as highway and railway bridges, power lines, the oil pipeline and militia garrisons.

Nine months ago, a major offensive by the army and the militia took place in mountainous (2000m) areas of Sarvoland. This sent many Sarvo fleeing across the border into the southern part of the neighboring Kovali Republic, where they settled spontaneously in low lying areas. The Sarvo form the largest single ethnic group in Kovali, and so they were initially received with hospitality by their kinspeople there. Local NGOs such as Kovali Muslim Relief, the National Episcopal Council, and the Kovali Red Cross Society set about to provide what assistance they could. Recent waves of refugees, which threatened to overwhelm local resources, prompted the Kovali government to ask for outside assistance and a UNHCR office is presently being established.

Information from Headquarters

Your organization, the United Relief Committee (URC), has been asked to put together a team to assess the situation in south Kovali and to establish basic services required. Although the time is short, your head office has been able to pull together the following information from various sources:

- A Reuters reporter visiting a border area around Ratta village three weeks ago noted that recently-arrived refugees had constructed temporary shelters of grass thatch on sticks to protect themselves from the sun. Perhaps a thousand of these shelters were scattered along the railway line and in the bed of a dry river. Shelters made out of grass, sticks, and banana leaves built by earlier waves of refugees dotted the surrounding areas.

- The director of the National Episcopal Council was reached by telephone. He estimates that there are about 10,000

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Sarvo refugees camped on the Kovali border areas. His organization has been trying to supply food from several warehouses to the refugees. Some of the newly arrived refugees still have some food that they brought from Camu. He does not know how much food is being supplied on an individual basis but says one seven-ton lorry is making a trip with World Food Programme supplies every few days.

- The U.S. State Department desk officer for Kovali reported that the Deputy Chief of Mission at the American Embassy visited the refugee site last week in company with a Kovali Ministry of the Interior (MOI) representative. The desk officer says the DCM estimated about 3,000 shelters were present in the areas he visited. Women were having to walk many kilometers to fetch firewood. He saw many teenagers, but the bulk of the population were women and children, with few adult males noted. Only a few unarmed Kovali police were seen in the camps, and evidently these returned to the police barracks in Oketo at dark (35km away). The MOI representative claimed the camps were peaceful, but his government was concerned about possible incursions by Camu Militia and infiltration by members of the Camu Special Operations Unit posing as refugees.

- Last night, the BBC World Service carried a dispatch by Jane Standley indicating that the security situation in Sarvoland was deteriorating and several thousand additional Sarvo had been seen approaching the border with Kovali. There had been unconfirmed reports that the Camu army was planting land mines along the border to deter further refugee movement.

- The 1996 DHS survey for Camu lists common diseases as malaria, tuberculosis, schistosomiasis, leprosy, measles, malnutrition, and diarrhoeal diseases (including cholera and dysentery). The HIV prevalence is estimated to be 25% in urban areas but unknown for rural areas (Camu is 88% rural). According to the State of the World’s Children (UNICEF), 78% of children have been immunized against measles. Stunting was estimated to be 55 percent and wasting to be 28 percent. Infant mortality rate for 1997 was 132, childhood mortality 280, and the maternal mortality rate was estimated to be 460.

On Arrival in Tataba

On your arrival in Tataba, you set out to gather further background information in the two days you have before proceeding to the refugee areas, as well as obtaining the necessary permission to visit the border area from the Kovali authorities. The following information is obtained:

**Interview with Ministry of Health (Principal Secretary and Chief Medical Officer).** The MOH is concerned that epidemics may start in the refugee population and spread to the Kovali population. This is the dry season, and the ministry fully expects a *Neisseria meningitidis* outbreak in southern Kovali any day now. Further, they are concerned that the refugee population will be using (and overwhelming) the Kovali health facilities, and exhaust the limited supplies of drugs which are available. There is a health centre at Oketo town (population 1,800) with ten inpatient beds and eight maternity beds. There are two clinical officers, and four nurse/midwives assigned. Serious cases are referred to the 160-bed Catholic hospital some ten km outside Oketo. The Ministry of Health will not be able to provide supplies to any relief efforts on a continuing basis but may be able to second some paramedical personnel to supplement personnel that your organization may bring in. They are anxious that the services your organization establishes follow Kovali health system protocols and use the established health information system wherever possible. They are very concerned that NGOs entering the area may hire away MOH staff at much higher wages.

**Visit with Sister Theresa (Sisters of Mercy).** Sister Theresa is administrator of the Oketo Catholic Hospital and is in Tataba to obtain additional supplies from central medical stores for refugees referred to the hospital. She says the wards are full of refugees with cerebral malaria, pneumonia, and severe diarrhea. The hospital facilities are barely able to cope with the numbers and their daily census is now running at about 190. However, the hospital will be running short of drugs if this admission rate for the refugees continues, especially since the refugees are not able to pay fees as do the other patients. She says the temporary clinic established by the National Episcopal Council is doing a good job, though it is understaffed, and is short on drugs most of the time. The White Fathers, who run the mission station, have been trying to help by transporting patients in need of hospital care. She is happy your organization has come and expresses a willingness to collaborate, even though their resources are limited. She thinks the Kovali Muslim Council has been doing a good job organizing at least some food distribution but lacks details.
Visit to the Ministry of Agriculture. You are able only to find a Deputy Permanent Secretary in the office. He states that the area where the Sarvo refugees have settled is generally of low soil fertility. Although it is able to support the local Kovali population, it cannot support many more people than are now present. Further, the area is subject to droughts. He understands that the refugees may have brought some food with them. The local population has much of its own supply from last year’s good harvest, though he doubts there is much to share. Kovali has some maize supplies in storage silos here in Tataba, but he thinks these would not last long if there were a major demand by increasing numbers of refugees. He is concerned about the large number of cattle the refugees have brought with them. The local grasslands, he is sure, cannot support this number. He is concerned about possible effects the refugees might have on market prices, both in the local area and nationally.

Message from the American ambassador. The American ambassador sends word that the 43rd U.S. Army field hospital, which is presently on joint maneuvers with the Botswana Defense Force 800 miles away, could be redeployed in nine days to the refugee area if you wish. She will need your decision on whether you want the field hospital and its medical staff within two days. She also mentions that you should see the DANIDA office which has been planning a water project for the area into which the refugees have now come.

Interview with the Ministry of the Interior. A representative tells you that the Republic of Kovali has done all in its power to help the Sarvo people but wants to remain on good terms with the Republic of Camu, since goods in transit to and from Camu are an important revenue source. Particularly, his Ministry is anxious that the refugee areas not be used as a staging area for attacks back into Camu territory by the SPF. Although the refugees have been well received so far, the provincial governor for the south feels that tensions with the local population are beginning to rise. Competition for goods and services may erupt, especially if large-scale resources are brought in for the refugees. Tensions are probably most likely to first break out over the subject of land. Refugees appear to have settled on some of the agricultural land of Ratta village, on which cultivation should begin within two months. Chief Ratta has already made several visits to the governor requesting some action.

DANIDA office. You are fortunate to find the representative in, though he is departing for home leave tomorrow. He gives you an assessment report from the hydrologist who has examined the area where the refugees are now camped. There are no protected water sources or boreholes in the area. The water table is high, and the villages traditionally dig shallow wells. The Samba river flows nearby, and the representative suspects that this is being used by the refugees as a water source. The assessment report indicates that the water quality in this river is quite low. If you wish, DANIDA might be able to assist with provision of water to the refugee areas as part of the development scheme for the Ratta area. He believes that at least some of the refugees are camped in areas prone to flooding.

Visit to the Border Area
You travel to the border area, which takes seven hours. Much of the road is tarred and in good repair. The last 50 km is dirt, which promises to be difficult in the rains. On your arrival, you meet with Chief Ratta, who repeats the same concerns as expressed by the provincial governor. Relations with the refugees seem to have deteriorated over the three months since the first Sarvo began arriving. He thinks there might be 9,000 persons in his area and hears from the refugees that more are coming. With some of the village elders, you set off to visit the sites where Sarvo refugees have settled. Many of the refugees have by now built shelters of grass and reeds. Shelters are bunched together tightly.

The village elders point out that many of the shelters are in areas which will begin flooding in a few months as the rains start. Some of the new arrivals have built temporary shelters along the railway line. Large numbers of cattle are present in areas adjacent to the camp. You are told they are watered twice daily in the same location where water is collected and clothes washed.
Water is being carried from the river one to three km away in buckets and is being collected from ponds of stagnant rainwater standing in excavations along the road. There are no latrines viable, but large amounts of feces are. Health services are provided from a makeshift clinic held in the Ratta Anglican church. You judge that there are about 200 persons waiting to be seen by the Clinical Officer and nurses. They tell you that diarrhea and fever are now the major problems. They are beginning to see some cases of measles and have fears about cholera, which is endemic in this area, especially when the rains start. After walking through the area, you estimate that perhaps 8,000 persons are present, distributed more or less equally in the three sites. You draw the map above from your observations and the information you are given.

**Discussions with the Refugees**

With the help of the Deputy District Administrator, who joined you after being alerted about your visit by the Ministry of the Interior, you talk with refugees in several of the areas where they have encamped. Most shelters have small amounts of maize that people brought with them from Camu, and people are boiling cassava and beans which they say they have gotten locally. Some food has been given to them by local villagers or relief organizations and some food has been purchased after sale of cattle. Several refugees indicate that the price they receive through sale of cattle is dropping. In general, the refugees with whom you spoke request assistance for more permanent shelters and more medical care. They have been worried about increasing diarrhea in the past few days, as well as attacks of fever. Most of all, they fear the Camu army and militia, which they say is undisciplined and bent on continuing its harassment of the Sarvo, even across the border. There is general agreement that it is likely that more refugees will come. Because Sarvo leaders have been repeated targets of the Camu Internal Security Militia, there is little traditional organization remaining, though a new leadership pattern has been emerging in the past few weeks.