Flygtningenævnets baggrundsmateriale

Bilagsnr.:	581
Land:	Etiopien
Kilde:	International Refugees
Titel:	Scars of War and Deprivation. An Urgent Call to Reverse Tigray's Humanitarian Crisis
Udgivet:	29. februar 2024
Optaget på baggrundsmaterialet:	14. juni 2024

Refugees International

SCARS OF WAR AND DEPRIVATION

An Urgent Call to Reverse Tigray's Humanitarian Crisis

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About Refugees International

Refugees International advocates for lifesaving assistance and protection for displaced people and promotes solutions to displacement crises around the world. We do not accept any government or UN funding, ensuring the independence and credibility of our work.

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Executive Summary

It has been over a year since peace was declared between the Federal Ethiopia Government and authorities in the Tigray region. Yet at a time when the region should be recovering, people remain in crisis. Widespread hunger is gripping a portion of the population, including the most vulnerable. That hunger is a function of two years of living under siege during the war, a crippling drought, and a nearly seven-month pause in food aid intended to root out corruption. Mothers who survived gang-rape by soldiers should be undergoing treatment for physical and mental healing, but instead are wondering how they will feed their children. For a range of reasons, aid has not scaled up to meet the need of Tigray's internally displaced people (IDPs). If relief does not come, many will die, and some even fear that the fragile peace agreement could be in jeopardy.

Tigray's brutal conflict, which started in November 2020, may have taken upwards of 600,000 lives and displaced nearly 3 million people. Widespread human rights violations and sexual violence have left deep scars on the population. During the conflict, much of the region was cut off from food and medicine, and communications and banking were blocked. Many are still unable to return home because Eritrean troops, Amhara forces, and others have yet to fully withdraw from these western and southern parts of Tigray, despite the Cessation of Hostilities Agreement (CoHA) (also known as the Pretoria Agreement) requiring them to do so.

In 2023, just as the population was trying to begin recovery efforts, the U.S. government announced a pause in its food assistance program. The decision was due to widespread corruption and aid diversion by Ethiopian government and regional officials, with some food aid being sold for profit in local markets. While the investigation and much-needed reforms made operational sense, the timing could hardly have been worse. The real-life consequences for millions were catastrophic for the nearly one-sixth of Ethiopians who rely on food aid. Food assistance resumed in December 2023 and is slowly returning, but hunger is outpacing the scale-up. Aid groups indicate that only 14 percent of those targeted for food aid had received it by January 21, 2024, and that child malnutrition rates are around 26.5 percent.

Tigray's displaced population – and children, elderly, and women in particular – are feeling the food shortages most acutely. Some parents are feeding their families cattle roots, and others are forcing their children to sleep longer to avoid hunger pains. Stunting levels – which indicate chronic undernutrition that prevents children from reaching their full physical and mental potential – were at 43 percent in 2023, and malnourished pregnant and lactating women had rates as high as 70 percent in some parts of the region.

The Tigray Bureau of Health indicated that 60 percent of households have moderate or severe hunger, compared to just 3 percent before the war. Ironically, this rate is now even higher than during the war – when Tigrayans lived under siege – which saw a rate of around 36 percent. Growing hunger could also undercut the peace deal, which should pave the way for the population to begin to recover and return to their daily lives. And while a long-term, development-oriented response that considers the drought and other effects of climate change in Ethiopia needs to remain a priority, the most pressing needs are still how to stop people from dying of hunger today.

Refugees International's recent visit to the region revealed that women are bearing the brunt of the crisis, and feel the strain of intersecting crises of hunger, sexual violence, and displacement. Many IDP households are female-headed, as many husbands, fathers, brothers, and other males were killed during the conflict or their whereabouts remain unknown. Some have sheltered with family after being displaced during the war, but many others are huddled in crowded schools that are unsanitary and unsafe. A staggering number of women faced sexual violence during the conflict: of those reporting rape, some 70 percent were gang-raped, and now have lasting physical and mental scars. While some are able to access treatment, many health facilities remain damaged or entirely non-operational, and health professionals need additional resources to reach far-flung woredas. The overlap of unaddressed sexual violence, combined with worsening hunger and displacement creates a triple risk for IDP women in Tigray, and makes recovery very difficult. While need is great across the region and Ethiopia as a whole, this group in particular needs urgent international attention.

The government of Ethiopia bears full responsibility for the protection of its population and their access to basic rights, including ensuring that it is facilitating aid reaching all regions, and upholding its commitments in the peace agreement. IDPs in Tigray need peace to hold and for armed groups in western and southern Tigray to leave so they can return home. They also need access to services, including the reinstatement of Ethiopia's Productive Safety Net Program (PSNP), a social safety net that can provide cash for families facing food insecurity, the rebuilding of health infrastructure, and other essential services.

For its part, the international community will face a reckoning on its lack of action in Tigray. A surprisingly small number of aid actors are operating in Tigray, and relief workers interviewed acknowledged that the scale up in response to the current crisis has been limited. There is a perception among many external actors that peace and recovery are taking place in Tigray – and some displaced have indeed returned and resumed their lives. Yet much of the region remains in dire straits, and many who remain displaced are languishing in very difficult conditions. Aid groups also reflected a disconnect, where perceptions driving aid from Addis Ababa are out of step with the realities in Tigray. And while it is true that aid budgets are shrinking globally, the aid community must push for more across Tigray and the rest of Ethiopia. The lack of scale-up not only jeopardizes the region's recovery, but risks undercutting the Pretoria Agreement's attempts to bring stability to the region.

The plight of Tigray's IDPs also highlight important lessons for the rest of Ethiopia, which also hosts IDPs from other regions, and for the broader international community, which needs better responses and solutions to internal displacement that is caused by both climate and conflict-related issues. It has long been documented that IDPs receive less assistance and attention than refugees and other groups of migrants. While the state is ultimately responsible for their protection and assistance, IDPs in Tigray demonstrate the need for a robust international response.

Recommendations

To the United States:

- Take urgent action to accelerate the full resumption of food assistance programs in Ethiopia, prioritizing high-risk populations in Tigray. Identify and resolve chokepoints relating to registration and assessments that are blocking the efficiency of the rollout.
- Push for accountability for atrocities and human rights violations, in line
 with Secretary Blinken's March 2023 statement, and pressure the Ethiopian
 government to fully implement the Pretoria Agreement, including requiring
 Eritrean military and other forces to withdraw from western and southern Tigray.
- Given the human impact of the food aid suspension, launch a rigorous external evaluation to learn from the pause, ensuring that if aid diversion is discovered in the future (in Ethiopia or elsewhere), minimal disruption takes place.

To the aid community, donors, and development actors:

- Prioritize funding toward the needs of displaced people who are returning, as
 well as those who remain displaced. The response should be multi-sectoral and
 integrated, focusing on the most food-insecure locations. New funding should
 prioritize access to mental health and psychosocial services especially for
 survivors of sexual violence.
- Consult closely with local officials, civil society, and local IDP leaders in setting
 priorities and programs as part of the scale up of the humanitarian response. The
 presence and role of local leaders should be strengthened in the aid coordination
 mechanism, and at least 25 percent of new funding should be channeled directly
 through local actors.
- Prioritize interventions that support IDPs moving into more stable housing, including through cash for rent programs and other initiatives. Remaining in overcrowded and unsafe schools should not be a long-term option.
- Support livelihoods activities and early recovery with further investment in the rebuilding of Tigray's infrastructure and services. The World Bank in particular should continue and expand its support to reopening schools and clinics across the region, and supporting survivors of GBV.

To the government of Ethiopia and Tigrayan authorities:

- Uphold and fully implement the Pretoria Agreement without delay, including requiring Eritrean troops to withdraw from western and southern Tigray. Ensure accountability in line with the International Commission of Human Rights Experts on Ethiopia reported, including prosecuting those who committed crimes and violations.
- Ensure that food assistance from aid groups is able to reach the region, and follow through on new commitments to prevent aid diversion and corruption.
- Reinstate social safety net programs like the PSNP to prevent high-risk households from becoming more food insecure.
- Follow through on financial commitments to rebuild health facilities, infrastructure and other services.
- Prioritize the safety and security of IDPs and find local housing options that are
 alternatives to schools, so that schools can be reopened as quickly as possible.
 Where possible, this could be modeled on cash for rent programs with aid groups.
 And while camps should be avoided, some settlements in partnership with
 international actors may need to be considered to allow schools to function again.

Research Methodology

In November 2023, Refugees International traveled to Ethiopia to research the IDP situation in Tigray. Site visits with IDPs, as well as interviews with local and international aid workers, government, UN, civil society, and health experts were conducted in Mekelle, Abiy Adi, and Addis Ababa. In addition, Refugees International conducted a range of virtual meetings in November 2023, December 2023, and January 2024. Refugees International is grateful to the Bosch Stiftung for their funding this research.



Map of Ethiopia highlighting Tigray region and Addis Ababa. Source: MapChart.net

Background

Fighting in Tigray broke out in November 2020 when the Ethiopian government declared war after accusing the Tigray People's Liberation Front (TPLF) of attacking the Ethiopian National Defense Force Northern Command headquarters. Ethiopia joined with Eritrean forces and Amhara militia in the fighting, which, though predominantly in the Tigray region, also saw fighting in Amhara and Afar regions. The war was brutal, with projections estimating that it could have killed as many as 600,000 people and displacing nearly 3 million. Much of Tigray lived under siege for nearly two years, receiving little food, medicine, humanitarian assistance or access to banks or telecommunications due to a blockade on the region. The conflict, drastically exacerbated by climate change, pushed people to the brink of famine.

The conflict was marked by extensive war crimes and crimes against humanity: rights groups have documented ethnic cleansing and a "campaign of killings, rape, mass detentions, and forcible transfers." Western Tigray saw some of the worst atrocities, some of which may still be occurring, according to aid groups Refugees International interviewed. During the war, many international organizations were unable to speak out against the blockade or other atrocities taking place. Some NGOs that spoke out against the blockade of aid in Tigray had offices ransacked and some staff threatened. Some staff even lost their lives, while others, like Norwegian Refugee Council, were expelled from the country and are only just rebuilding their programs in Ethiopia. The aid community still struggles to scale up and push the government for the access and operational space that it needs.

Peace was finally achieved with the signing of the Cessation of Hostilities Agreement (CoHA) (also known as the Pretoria Agreement) in November 2022, which restored federal authority to the region, disarmed Tigrayan forces, and required an end to the siege that was being carried out by Ethiopian and Eritrean forces. Eritrean forces were also to withdraw from Tigray, though they have yet to do so. While peace is holding, there are fears that the region could slide back into conflict if more is not done to enforce the Pretoria Agreement and hold actors accountable. The International Commission of Human Rights Experts on Ethiopia (ICHREE), which exists to investigate rights abuses, expired in October 2023 despite calls for its renewal in the face of ongoing atrocities, including continued rape as a weapon of war.

More broadly, Ethiopia faces tensions in virtually all of its other regions: Amhara, Oromia, Afar, Somali, Benishangul Gumuz, and even among urban slums in Addis Ababa. Often considered an economic and political powerhouse in the region, home to the African Union's headquarters and many large organizations and companies, the country is now facing acute economic and financial woes, including a devaluing currency. In addition, conflict in neighboring countries like Sudan and Somalia, which

also face chronic poverty, food insecurity, and the effects of a changing climate leave the region desperately in need of stability.

Hunger in Ethiopia is widespread – a result of conflict, lack of development, a crippling drought, and the pause in food aid – across regions. The UN estimates that some 20.1 million need food aid in Ethiopia, noting that humanitarian needs in Ethiopia have tripled since early 2015. Acute malnutrition has risen sharply, and one quarter of Ethiopia's districts are now classified as facing a nutrition crisis. Many have been pushed to begging, migrating to urban areas, or even abroad – an often dangerous journey that risks their lives. Parts of Tigray, Amhara, Afar, and Somali region and southern Ethiopia are projected to reach emergency level classification (IPC 4), meaning that "…people are facing extreme food shortages, acute malnutrition and disease levels are excessively high, and the risk of hunger-related death is rapidly increasing."

Displacement: Scale and Scope

Ethiopia hosts 4.38 million internally displaced people (IDPs) – one of the highest IDP populations in the world. Some 1 million of those IDPs are in Tigray. While some have been able to return in the wake of the COHA, many are still displaced and living with family, in schools, and in some cases, camp-like settlements. Most of these locations are crowded, unsanitary, and unsafe. Most IDPs that Refugees International spoke with insist that they hope to return home someday. Yet damaged infrastructure, a lack of services, and ongoing insecurity – particularly in western and southern Tigray where Eritrean and Amhara forces are still present – make that unlikely anytime soon.

Ethiopia's other regions also host large numbers of IDPs, who are also in desperate need of humanitarian assistance, and risk having their rights denied. In Amhara, for example, thousands of IDPs from Oromia and Benishangul Gumuz regions have been without food. Others were recently threatened to be forcibly returned to Oromia. Ethiopia also hosts nearly a million refugees from neighboring countries like Eritrea, Somalia, South Sudan, and the Democratic Republic of Congo. Groups of refugees that had taken shelter in Tigray, including Eritrean refugees, were killed, kidnapped, attacked, and forced to flee. Long-standing camps Hitsats and Shimelba were destroyed, and many Eritreans found themselves with no safe options, and no armed group protecting them.

Key Issues

Displacement and hunger are extensive across Ethiopia. Nearly every region is facing food shortages, rights violations, hunger, and displacement. A scale-up in assistance across Ethiopia and the wider region is desperately needed in the face of drought and long-standing and protracted conflicts in the region. Tigray not only hosts a large number of Ethiopia's displaced people, but as discussed below, bears the difficult combination of displacement, hunger, and widespread sexual violence.

Food Insecurity

Hunger is widespread across Ethiopia, and food aid is desperately needed in all regions. Specific to Tigray, the Tigray Bureau of Health indicated that 60 percent of households have moderate or severe hunger, compared to just 3 percent before the war. Shockingly, this rate is now even higher than during the war – when Tigrayans lived under siege – which saw a rate of around 36 percent. The Director of the Tigray Health Research Institute reported that approximately 68.3 percent of deaths in Tigray were caused by starvation between December 2022 and August 2023, and that most of these deaths are in IDP sites. A 2023 study verified that 1,329 people had died of hunger since the ceasefire, and more recent reports document additional deaths. Moreover, between March and April 2023, the number of under-five children dying of acute malnutrition in the region increased by 28 percent – a number that likely increased once the food stoppage was in full effect. Displaced children in Tigray have a malnutrition rate of 26.5 percent, and as of January 2024, just 14 percent of those targeted for food aid were receiving it.

IDPs are particularly vulnerable to food insecurity. In IDP sites where families live in crowded schools, IDPs told Refugees International that hunger was their foremost concern. One woman showed the meager food she had received, the goodwill from a local nun who did her best to feed children, pregnant women, and elderly.

A recent Oxfam report cited a mother of four girls saying:

"We are hungry, our children have nothing to eat sometimes for an entire day. Pregnant women and mothers with small babies are suffering. The hunger is so unbearable that mothers are forcing their children to sleep longer to avoid hunger pains since there is nothing to feed them. Mothers are also having to feed their children roots meant for animals in order to survive."

Since the stoppage and the worsening drought, some displaced Tigrayans have taken to begging in the streets or sending children to beg. Local aid workers from Mekelle emphasized that this would have been a rare sight prior to the conflict, as begging comes with social stigma. Even among those IDPs who have returned home, some



A young mother shows Refugees International the small bag of hardened root – normally reserved for cattle feed – that she was feeding her six children. She regularly went without food so that her children could share whatever she had. One of her children was disabled and sat alone in a broken wheelchair all day. Photo by Refugees International.

found their returns unsustainable. After trying to rebuild their lives at home, they have returned to displacement sites, indicating that they were unable to find food or basic services, and that all of their homes had been looted.

Donor officials have raised questions about the actual severity of the hunger in Tigray, given the resumption of food aid. Refugees International's research identified a combination of factors to explain Tigray's hunger. First, in addition to the siege and ongoing conflict, a severe drought in the region is wreaking havoc. The global El Niño phenomenon has caused increased flooding, cyclones, drought, and wildfires around the world, as excess heat leads to worsening droughts in some places and, in other cases, extreme rainfall. Livestock deaths have been reported across the region – both due to the drought, and in some cases, because they were slaughtered during the war. Increasingly, parts of the population are facing hunger linked to these extremes. Some 80 percent of Ethiopia relies on rain-fed agriculture, which means that droughts can greatly impact millions. In Tigray, below normal and unseasonal rainfall resulted in a poor harvest, and was compounded by high food and commodity prices, low labor wages, and stalled livelihoods. OCHA's January Situation Report indicated that only 49 percent of Tigray's farmland was planted last year, and crop production was at a mere 37 percent.

Second, there are few safety-net programs or aid from the Ethiopian federal government to fill the void. Only a small number of local groups, including nuns and some civil society groups, are working to feed anyone they can. Families and other networks help those they can to access cash and food, but many have exhausted their resources. Ethiopia's Productive Safety Net Program (PSNP) was one way to combat the effects of recurring droughts and to avoid endless reliance on food aid. Created in 2005, the PSNP provides cash or food transfers to rural Ethiopians in need. It is intended to prevent famine-prone areas from becoming food insecure. Research has shown that safety net programs can work. However, Ethiopia halted disbursement of the PSNP, just as the conflict was starting in late 2020.

Compounding the effects of the drought and prolonged PSNP suspension, the U.S. government and World Food Program (WFP) decision to pause food aid beginning in May 2023 has had a devastating effect on some of Ethiopia's most food insecure people, and certainly on IDPs in Tigray. Fortunately, nutrition assistance to children and pregnant and lactating mothers continued during this time. To combat corruption and widespread aid diversion, the government of Ethiopia was removed from much of the assistance process, including oversight of warehouses and distribution.

Partner organizations now share oversight of lists of households and beneficiaries that will receive assistance. New GPS trackers on food trucks, ration cards with QR codes, and other technical improvements were made. These measures have no doubt improved accountability, but have also caused delays. As the new model is rolled out, vulnerability-based targeting methods now focus on a smaller number of people – those considered in the IPC 4 or IPC 5 category. This contrasts to previous assistance



A displaced woman in Tigray seen 6-months pregnant in a small space inside a barn where she sleeps with her toddler. Photo by Refugees international.

that also reached those in IPC 3, which was intended to intervene before reaching emergency levels.

While it is a positive step that aid is returning, the scale up – by the United States, WFP, or other donors – is nowhere near enough. Moreover, while corrupt individuals and a lack of oversight by the Ethiopian government are ultimately to blame, USAID and WFP must learn from the pause. An externally led evaluation should be commissioned to ensure learning from the food pause in the event that aid diversion is discovered again in Ethiopia or elsewhere. This obviously includes understanding how to prevent aid diversion in the future – but should also include assurances that if corruption is discovered again that food aid is not taken entirely offline, or if it is, for a minimal amount of time.

Food insecurity alone would be challenging enough, but in the context of the war in Tigray – a war where starvation was also used as a weapon and many are still displaced – it is nothing short of devastating. Recovery remains an aspiration when a population is going hungry. One former aid worker emphasized that Tigrayans have now "...paid doubly – they were just starting to get up from the siege and having food, medicine, and other assistance cut off, and then food aid was stopped, leaving them on their knees again."

Mental Health & Gender Based Violence (GBV)

While hunger was the first issue raised by IDPs and other interviewees, sexual violence and the need for mental health services was a close second. Health and aid workers recounted extensive sexual violence. They told Refugees International that women had nails, gravel, metal, blades, and shrapnel inserted into them, leaving excruciating physical and mental scars. Refugees International heard stories from women about female friends and relatives who struggled to function. Health workers recalled the story of one woman who had nails removed from her womb, but upon receiving little mental health support, was in such a psychological state that she could not begin to heal or move beyond the attack. Surgeons found her returning with nails in her stomach, which she had taken to eating as she relived her trauma over and over. Others have contracted HIV. In a particularly brutal case, health workers recalled a woman who said she lied and told her attackers that she was HIV positive, hoping it would spare her the attack. The attackers laughed at her and returned with a soldier who they said was already HIV positive, and he then proceeded to rape her.

During the conflict, sexual violence was widespread, and it is still ongoing. Women of all ages were raped by armed actors – some in front of family members. Some Tigrayan IDPs recounted rape taking place in front of their children. Others were brutalized in other sexually violent ways.

Interviews by Refugees International, as well other reporting, indicate that much of the sexual violence was perpetrated by Eritrean and Ethiopian forces. However, there are

reports that fighters from all parties to the conflict carried out war crimes against civilians. Physicians for Human Rights (PHR) reported that armed men carried out sexual violence in group settings, in captivity (sexual slavery), and with weapons. It was often accompanied by the murder of family members, including children, before, during, and after rape. According to Amnesty International, sexual violence during the conflict was not a byproduct, but a strategy intended to "...inflict lasting physical and psychological damage on survivors. Soldiers and militias subjected Tigrayan women and girls to rape, gang rape, sexual slavery, sexual mutilation, and other forms of torture, often using ethnic slurs and death threats." Other conflicts have long demonstrated that rape and sexual violence are common weapons of war. As noted in an Amnesty International report, one survivor said, "I don't know if they realized I was a person."

It is difficult to know the precise numbers of people affected by sexual violence, as many women and girls choose not to report, due to social stigma or simply being unaware of any services available or reporting options. Health experts estimate that between 40 and 50 percent of women in Tigray experienced gender-based violence (GBV), with more than 80 percent of those having been raped, and nearly 70 percent of those having been gang raped. Interviewees recounted the severity of such cases to Refugees International, emphasizing high numbers of cases of traumatic fistula and the effects of other types of abuse.

Not surprisingly, this has left deep physical and emotional scars. Consistent with what Refugees International field interviews revealed, researchers have reported post-traumatic stress disorder, depression, reproductive organ injuries and disorders including urinary incontinence, fecal incontinence, abnormal uterine bleeding, uterine prolapse, chronic pelvic pain, and fistulas. A number of babies – many now toddlers – were born from these acts of sexual violence. Some women find it traumatic to care for them, as children are a reminder of what took place. In some cases, husbands abandoned their wives who were raped, or communities cast these women out. The children born of rape also face discrimination and may be ostracized from their communities.

In light of this crisis, local health professionals need the resources to scale up mental health and psychosocial services to meet the needs of those suffering the effects of sexual violence. While aid groups and health officials are doing what they can, there need to be far more resources available from authorities and the aid community. Tigray's health system was largely destroyed during the conflict and needs resources to rebuild. Specific to mental health, local officials noted that there are only eight psychologists for the entire region of Tigray, despite a population of more than 7 million. By comparison, the United States state of Massachusetts has a similar population of around 7 million, but approximately 5,660 licensed psychologists. Aid workers also noted a lack of prophylaxis and other sexual and reproductive health services, none of which is surprising in light of a lack of functioning health facilities.

Combined with starvation – under the siege imposed by the government of Ethiopia during the conflict, and over the last year amidst the drought and during the food aid pause – some of Tigray's women are barely surviving. Indeed, unaddressed sexual violence combined with worsening hunger and displacement mean that Tigray's women are suffering under multiple catastrophes and need urgent international attention. Widespread hunger also forces women to make difficult choices. Aid workers spoke of women having to choose which child should receive food – hedging bets on which appeared strongest and most likely to survive, leaving the others to languish. These desperate circumstances put women at great risk of exploitation. Some women are resorting to negative coping practices, such as survival sex.

Finding a durable solution to displacement and seeing peace upheld seems unlikely in this context. How can a woman who saw family members killed, was gang-raped and has borne a child from those attacks, is hungry, and does not feel her home is safe even begin to think about a solution to her displacement? The fate of these displaced women will have direct bearing on Tigray's recovery and stability in the future.

In the meantime, other actors can also step up to help women begin to recover. Local clergy, for example, can lead the charge to destigmatize the issue of sexual violence so women feel safer coming forward to report GBV and receive treatment. If women feel that their communities and families will embrace them rather than cast the out, they will be more likely to report and seek assistance. Interviewees noted lessons from other campaigns, including the de-stigmatization of HIV/AIDS among local communities, which have changed community perspectives on various issues and could improve reporting, and by extension accountability, funding, and treatment options.

Shelter, Livelihoods, and Recovery

Some IDPs have been able to return: the UN estimates 1.5 million have already returned to their homes. However, more than a million remain displaced in urban or peri-urban areas, while others have found their way to formal settlements or camps. Many others, however, have nowhere to go and remain in informal settings, including schools across Tigray. Classrooms are dirty, tattered and crowded, with little privacy and even less sanitation. Most continue to lack access to food, hygiene items, clean water, and other basic services. Moreover, the schools have not been used for learning in years, meaning children have now missed years of schooling and will struggle to catch up.

Housing is an urgent priority, particularly if IDPs cannot return home soon. After all, if armed groups have not left and services are destroyed, it is unthinkable for a woman who may have been gang-raped and seen her husband killed, to consider returning home. A different housing model must be considered. In some cases, camps – which are never ideal - may offer an interim option for IDPs to leave the school sites and have more safety, security, and space. A better option may be to expand programs such as

cash for rent models, which provide greater agency for individual families and can stimulate local housing markets. Interviewees also stressed that displaced Tigrayans need support in resilience and livelihood programming, which will require additional investments by development and financing actors. This includes agriculture and livestock support, and additional PSNP assistance. Livelihood programming will also need to take into account the drought and other climate-related factors.



People living in a classroom housing IDPs in Tigray. Photo by Refugees international.

The Response: A Failure to Scale Up

"Where are the land cruisers? Where are all the logos and signs showing that the global NGOs are here?" – Aid worker

Interviewees all stressed a need for a much greater scale-up of aid. Certainly funding cuts to aid are resonating across Ethiopia and the rest of the world, and that has translated to reductions in assistance in many locations. Yet IDPs in Tigray see very little assistance from the international community. Local, national, and civil society groups, as well as IDP-led efforts, are doing critical work with small budgets. The aid groups that are present, as well as local officials, are reaching as many as possible. These local actors should continue to lead the response, as they know the communities best. But many more resources are needed from outside of Tigray to scale to the need. As one displaced person told a journalist, "We have nothing left, nowhere to sleep, and nothing to eat. We are desperate. Why does no one care?"

The lack of scale-up also points to a striking disconnect between the capital, Addis Ababa, and other parts of the country. Government, UN, and NGO officials in Addis articulated very different views on Tigray than what Refugees International witnessed and heard while there. While it is not uncommon for there to be a gap between capital city and field-level needs and priorities, the distance between the two is particularly pronounced in Ethiopia. Higher-up officials insisted that conditions were not as bad; that food was more plentiful than it was, that regional data sources were unreliable, and that people were returning, and peace was holding. While some parts of Tigray are indeed peaceful, and some IDPs have been able to return, this view neglects much of the ongoing crisis still taking place and hampers the much-needed scale up. A humanitarian emergency and lackluster response also undercut wider diplomatic efforts to maintain peace and see Tigray begin to recover and find stability again.



An IDP woman in Tigray who is working to help her community. "Give the mothers a little something to work with. They know what to do," she said. Photo by Refugees International.

IDP-specific Lessons

The costly failure to effectively address the urgent needs of IDPs in Tigray highlights larger system shortcomings in the world's approach to internal displacement. First, it reveals complications around the concept of national responsibility being at the core of IDP responses. Certainly, the state still bears responsibility for the protection of its citizens, and IDPs are squarely in their home country, needing the protection of their state. Ethiopia must be held to account for the protection of its citizens in Tigray and all other regions. Their access to rights is fully the state's responsibility. Yet, on the heels of a brutal conflict where Ethiopian forces blocked food, aid, medicine, and other supplies from the civilian population; where communications and banking were blocked; where troops committed rape and other sexual violence against the population; and where tensions remain high, calls for national responsibility seem more aspirational than in-step with reality.

That is not to say that advocacy with the government and expectations that it protect the rights of all of its citizens should stop. Of course all governments should be held to these basic standards, and the international community must continue to emphasize this and do the hard work of pushing governments and working across ministries to build in IDP rights and protections to domestic laws and policies. But these may not be realized without immense international pressure. In the meantime, the international community may need to do more in cases like Tigray if humanitarian needs of IDPs are to be met.

Internal displacement in Tigray also demonstrates that much more needs to be done to make the Kampala Convention – an impressive legal feat, which comprehensively integrates IDP rights into the domestic sphere – a reality. Ethiopia was the 31st African Union Member State to ratify the convention since its adoption in 2009. While the Kampala Convention is supposed to make legally binding the protection and assistance of IDPs, enforcing a state's commitment to it seems extremely challenging in this case.

Finally, internal displacement in Tigray is yet another example of the complexity of conflict- and climate-related drivers. While the conflict has consumed much of the coverage, the drought in the Horn is reshaping how food is produced and driving millions to hunger. Climate change will make recovery that much more difficult, as some Tigrayans will not be able to return to farming as they previously had. Combined with land located in insecure areas, the slaughtering of cattle, and destruction of infrastructure, many will not return to their former lives. IDPs therefore must be included in Ethiopia's climate adaptation planning. Urbanization – as in many other internal displacement cases – is also a critical part of Tigray's internal displacement.

The IDP situation in Tigray thus provides new learning opportunities for humanitarian and development workers focusing on IDP issues. This comes at a time when the

international community is working hard to maintain momentum around IDP issues. The High-Level Panel's recent report, the subsequent Secretary-General's Action Agenda, and the work of Special Adviser Robert Piper and Special Rapporteur Paula Gaviria Betancur have brought renewed attention to IDP issues, including the need for states to step up their responsibility for protection and assistance needs of IDPs, and for the global community to think creatively on durable solutions, including by further incorporating development and financing institutions. The international community will need sustained engagement on IDP situations like Tigray if IDP rights and protections are going to be upheld.



A displaced women in Tigray, Ethiopia, stands in her family's small living space in a local school that is shared by dozens of families. Photo by Refugees International.

Conclusion

At a time when it should be recovering, many in Tigray – and IDPs in particular – are barely surviving. Lacking food on its own is, of course, devastating. But lacking food in the context of having survived years of war, atrocities, and sexual violence – is almost unimaginable. IDPs and others in Tigray need more food aid quickly. Women in particular need physical and mental health services if they are going to be able to begin to recover, let alone consider returning home.

While some IDPs have been able to return, others remain displaced, and will not be able to return home until the Pretoria Agreement is implemented, and they have some semblance of stability, including a way to feed their families and a place to return to. Women that have survived sexual violence need far more resources at their disposal, and extensive, long-term support.

The government of Ethiopia is first and foremost responsible for the rights and protections of its citizens, and it needs to do much, much more to ensure that Tigray is able to recover. It must fully implement the Pretoria Agreement and ensure that Eritrean troops leave Tigray, so that IDPs can return. This stability is essential amidst a range of challenges. Indeed, the drought in particular is ravaging many of Ethiopia's regions, and limited food aid is affecting virtually every region in the country. Fiscal crisis is looming, and neighboring countries like Sudan and Somalia remain in conflict. Ethiopia needs to be stable, and it needs a stable Tigray to remain strong. Without access to human rights – in Tigray and across Ethiopia – recovery and stability will be difficult to achieve.

The international aid community must also reckon with its response to IDPs in Tigray, even as the rest of Ethiopia is also struggling greatly and aid resources are reduced by donors. The lack of scale up, as well as the food pause – understandable as it was, given the essential need to root out corruption – are undercutting the Pretoria Agreement's very attempts to bring stability to the region.

The United States must continue to offer leadership by encouraging Ethiopia to uphold and implement the Pretoria Agreement, by scaling up assistance to all regions in Ethiopia and encouraging other donors to do the same, and by committing to internal learning from the pause so future corruption in any aid context can be rooted out as quickly as possible. Other aid actors must also follow suit, expanding operations and resources throughout Ethiopia, and specifically to help Tigray's IDPs. And financing institutions and development actors will play critical roles in helping to rebuild Tigray and the rest of Ethiopia to stave off future conflict and food insecurity.

For now, however, Tigray's IDPs are paying the price, and if more help does not come soon, some may not be able to hang on for long.

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