Personal reflections from an older refugee

by Ephrem Habyarimana

An older person forced to leave his residence finds himself in an unusual and unstable living context which renders him more vulnerable.

I can confirm this from my own experience living for three years 1994-1996 in two massive Rwandan refugee camps in eastern Zaire. At that time I also worked for UNHCR in humanitarian assistance.

Older refugees have special needs but seem to be ignored by humanitarian workers. Most older refugees are physically exhausted and require special and permanent care that cannot be assured by a non-trained person. Care to older people can consist of healthcare, help with cleaning and feeding or companionship. As funding is not provided, there are no NGOs with multi-disciplinary programmes to cope thoroughly with older refugees’ problems. During my time in the camps in Zaire I did not see any organisation working principally to assist older refugees.

Most emergency projects deal with health care, sanitation and food distribution in refugee camps. These services commonly do not discriminate by age of beneficiaries and particularly do not often target older refugees. One example can be food distribution. Older people are not able to queue for long periods of time, a frequent occurrence when food is distributed to sectors of camps. Then most older people would not attend food distribution sessions. A family member or any acquaintance can sometimes be requested to help an older refugee, either for free or for a payment. These payments often involve a certain portion of the food, thus penalising the older refugee.

Older persons are often physically too exhausted to walk longer distances. When groups of IDPs are dispersed, it becomes particularly difficult to reach older people as humanitarian workers are unable to reach areas where fighting is raging. In most instances, older IDPs are left to fend for themselves and receive no humanitarian assistance.

Older refugees will continue to be marginalised by relief agencies as long as special funds are not provided to take care of them nor special programmes set up. To increase the confidence of older refugees in relief agencies they should be headed by mature coordinators. Assistance to older refugees should also be integrated with their regular immediate carers or family members. Older but still active people could furthermore be involved in all efforts aimed at structuring camps, distributing food and in the kind of ongoing casual work that is frequent in refugee camps. Getting them involved would help integrate older refugees into camp life and decrease their marginalisation.

Older people have much experience which could be of help in managing refugee camps. They know their native society well. They can provide a reliable source of information which relief agencies should rely on in designing emergency programmes. From older people agencies could learn the type of food to distribute, the way to present themselves and to win the acceptance of beneficiaries, how to prioritise humanitarian interventions and how to arrange the spatial structure of camps.

Dr Ephrem Habyarimana is a PhD student in genetics at Tuscia University, in Italy.
Email: h.ephrem@libero.it
Tel. +39 3487433742