The main objective of protection Monitoring is to inform UNHCR, the government, and the humanitarian and development community in Burundi and the region on the position of returnees, as well as on the status of their reintegration, through the provision of reliable, evidence-based qualitative and quantitative information, with will be the basis for humanitarian programming, advocacy, and decision making and action, leading to the improvement of the protection environment in Burundi’s areas of return in the long run.
OVERVIEW

In 2020, the Burundian refugee situation continued to be among the most underfunded globally. Yet, the pressure exerted by regional governments to increase the pace of return continued to intensify, resulting in overstretching the UNHCR reception capacity, in addition to overwhelming the absorption capacity in the areas of return. Moreover, with the onset of the COVID-19 pandemic, and with repatriation activities being exempted from the border closure imposed by the Government of Burundi in March 2020, UNHCR Burundi had to adapt to a new way of working to mitigate the risk of spreading the virus.

In a challenging situation, UNHCR continued to facilitate the voluntary return to Burundi of refugees who made a free and informed choice to exercise their right to return home, in line with its protection mandate and commitments under the respective Tripartite Agreement, and in collaboration with the Burundi Government, the governments of asylum countries, as well as operational and implementing partners. From September 2017 to 31 December 2020, UNHCR assisted 120,494 Burundian refugees to return home in safety, including 40,774 in 2020 who were assisted to return from Tanzania (30,636), Rwanda (7,896), the DRC (1,946), Uganda (231), Kenya (60), and Zambia (5). Among this figure, 51 per cent were women and girls, 56 per cent were children, and 20 per cent were people with specific needs (PSNs). PSNs include people with disabilities (PWDs), elderly people, widowed and divorced women. As of 31 December 2020, 368,456 Burundian refugees were residing in asylum countries in the region.

UNHCR Burundi had originally identified a population planning figure of 110,000 returnees in 2020, of which UNHCR would facilitate the return of 50,000 Burundian refugees from Tanzania and other countries in the region. In the first six months of the year, UNHCR facilitated the voluntary return of 6,427 Burundian refugees, far from the mid-year target of 25,000 returnees. However, assisted returns increased in the second half of 2020, following the relatively peaceful election process organized in Burundi in May 2020, with 34,347 returnees assisted between July and December 2020.

KEY FIGURES

<table>
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<td>Returnees since</td>
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<td>Returnees over the</td>
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<td>Households surveyed</td>
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<td>Monitoring interviews</td>
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In 2021, UNHCR and partners plan to assist up to 143,000 refugees to return in safety and in dignity, including 92,950 Burundian refugees from Tanzania; 40,000 from Rwanda; 6,000 from the DRC; 2,000 from Uganda and 1,040 from Kenya. UNHCR and UNDP have jointly developed the 2021 Joint Refugee Return and Reintegration Plan (JRRRP) along with 20 partners, to offer a holistic framework to humanitarian and development stakeholders. The reintegration approach will guarantee returnees enjoy the same rights as other Burundian citizens with equal access to services, productive assets, and opportunities, taking into account the socio-economic challenges in return areas and the compounding impact of the COVID-19 pandemic.

In 2020, with the support and partnership of UNHCR, the Government of Burundi set up an inter-ministerial working group to foster the ownership of the authorities over the reintegration plan and to achieve synergies through a linkage between humanitarian and development interventions. The working group will continue to coordinate the reintegration work in 2021 and support the implementation of the JRRRP.
SUMMARY OF KEY FINDINGS

PROTECTION

72% of respondents stated that adults in households have national ID. They also noted that 12% of households have at least one person with special needs.

HEALTH

58% of returnees were satisfied with the medical services provided in the areas of return. 28% of returnee children did not have access to immunization.

EDUCATION

48% of returnee children are enrolled in school, 34% in primary school and 14% in secondary school. The children repatriated at school age, 14% of them have either never been to school or have simply dropped out because school is not a priority.

WASH

41% of the interviewees have access to drinking water. 54% of heads of households reported that returnees drink public water, often unprotected (lake/river water, cistern water, unprotected wells, ...).

SHELTER

36% of the households had access to their old house upon return. The data collected show that 27% of returnees live in rented houses or with third parties (neighbors, acquaintances, community, etc.) in the areas of return.

FOOD

Only 19% of respondents said they were satisfied with the level of their food security. This is also explained by the fact that 56% of households eat at most once a day.

Returnees receive food assistance and essential non-food items upon arrival. The monitoring questionnaire shows that 37 per cent of the beneficiaries want this assistance to be converted into cash. The volume of the package was raised as the primary factor exposing returnees to protection risks.
COIVD-19 RESPONSE

In 2020, UNHCR, the concerned Governments and partners adopted a range of COVID-19 prevention measures to protect the returnees, UNHCR and partners’ staff and to mitigate against the spread of the virus through voluntary repatriation activities. These prevention measures include pre-departure medical screenings, awareness campaigns, COVID-19 symptom checks (temperature and other symptoms) for three consecutive days prior to departure, rapid tests prior to departure, and physical distancing measures. National Institute of Public Health personnel conduct temperature screening at the borders and oversee systematic hand washing. Temperature checks, washing stations, crowd control and physical distancing measures are mandatory for all people intending to enter the country at the border entry points.

UNHCR support

5,831 of PCR test  
24,493 of RDT test  
Construction and equipment of 05 COVID-19 screening centers  
Recruitment of 90 additional staff and training and retraining of 190 health personnel on Infection Prevention and Control, surveillance and management of COVID-19.  
Provision of cash to 300 PoCs more exposed to COVID-19 and increased the amount of soap distributed to PoCs (from 250g to 500g)  
Donation of 6 vehicles to the Ministry of Health including 5 ambulances for the provinces and one vehicle for coordination and monitoring.

Enhanced safety measures

Physical distancing  
Handwashing  
Mask  
Sanitizer

In 2020, UNHCR also supported the Government of Burundi to decentralize the COVID-19 testing and response. All Burundian returnees are subjected to a COVID-19 test using CPR GenExpert technology upon arrival at the transit centers. In addition, UNHCR Burundi has created isolation units within each of its transit centres, installed handwashing stations, stipulated the use of masks, gloves (mainly used by the receiving staff), hand sanitizer and physical distancing measures. Those who test positive are transferred from the isolation units at the transit centres to the designated national hospital for treatment and follow-up, while those who test negative are transported to their return location.

By the end of 2020, all operational transit centres (Kajaga, Gitara, Kinazi, Nyabitare and Songore) were upgraded and had the capacity to receive and provide adequate support to respect humanitarian reception standards. Beginning 16 July 2020, UNHCR, in collaboration with the Ministry of Health (MoH), was able to conduct rapid tests to all returnees at the transit centers. Out of 28,644 people tested in 2020, 63 cases were found positive for the COVID-19 virus and were treated accordingly.

In addition, UNHCR also supported the MoH in the return areas in conducting COVID-19 community surveillance. When there was an alert from the community monitors, the health district alerted the MoH and with UNHCR support, a rapid intervention team was deployed to the affected area to assist the suspected case and also conduct contract tracing.
METHODOLOGY

Protection monitoring of returnees to Burundi is an essential protection activity and remains one of UNHCR’s strong commitments included in the Tripartite Agreement signed on the 8 of May 2001 (Article 4 section 1 and 3 and Article 5 section 3). It aims to systematically and regularly collect, process, analyze and disseminate data and information on:

1) The conditions of return of assisted returnees, and

2) The level of reintegration in return areas.

The purpose of the Protection Monitoring is two-fold – to inform effective protection programming in the areas of return and to support advocacy efforts with partners, development actors, donors and government authorities by providing reliable information on the intensifying reintegration challenges faced by of returnees, and analysis of the scope, and root causes and dynamics of onward movements.

In August 2020, UNHCR and the National Statistics Office launched a zone profiling exercise in collaboration with various national and local services and administrations. This activity provided Burundian refugees with further information to make informed decisions about their return, in addition to allowing the Government of Burundi to better plan for the return and reintegration of the returnees.

The results of the protection monitoring paint a varied picture on reintegration and access to services. On a positive note, in 2020, 79% of returnees reported having access to primary health care in return areas, 82% of returnee households reported having access to land and 95% of returnee households reported having access to drinking water. However, it is evident that urgent protection needs persist throughout the reintegration process, and despite local efforts to welcome and reintegrate former refugees, most areas of return do not have adequate capacity to meet the socio-economic needs of returnees and host communities.

Following the pandemic global outbreak, on 16 March 2020, the Government of Burundi enacted COVID-19 preventive measures at all country border and entry points. From 22 March 2020 all borders were closed, with a formal ban on access to territory, including for asylum seekers. Land borders were reopened on 01 August 2020. In spite of these measures, the government instructed the Directorate General for Repatriation, Reinsertion, and Reintegration (DGRRR), to continue the voluntary repatriation process from Tanzania. Volrep operations were temporary suspended since the 18th of May until end of June 2020 in the context of the Burundi elections and the COVID-19 mitigation measures. Despite the impact of the COVID-19 pandemic, protection monitoring remained a priority for UNHCR in 2020 who adjusted the monitoring methodology to ensure activities aligned with COVID-19 prevention protocols. Implementing partners participated in three Protection Monitoring trainings and Protection capacity building activities (all while following COVID-19 protocols). Between January and December 2020, a total of 16,114 protection monitoring visits were conducted and 69 per cent of returnee households were found at their return areas during Monitoring visits.
PROTECTION

Among the most pressing protection needs affecting returnees identified during 2020 were lack of access to administrative and national documentation procedures. In average, 33.5 per cent of returnees in 2020 reported they did not have access to identification documents and 28% of returnees surveyed during the second and consecutive protection monitoring visits also declared not being in possession of IDs. Returnees reported it was especially difficult to obtain birth certificates for children (42 per cent of households reported that their children didn’t have birth certificates upon arrival and 54 per cent of returnee households reported that their children did not have any birth certificates after return). Most refugee returnee children hold a notification of birth issued by health partners in Tanzania. This birth notification does not have the same legal standing as a birth certificate under either Tanzanian or Burundian law. Lack of resources and the limited presence of national authorities at the transit centres to provide national identification documents immediately upon return has a significant impact and this delayed response severely hampers access to basic social services including health and education. This exposes the returnee families to additional protection risks, including the risk of statelessness.

In addition, returnees identified access to justice, including legal advice and support from communal courts, as one of the major gaps. According to protection monitoring results in 2020, 24 per cent of returnees interviewed three months after return responded that there are no local legal courts in their return areas. Other most pressing protection needs affecting returnees identified include:

1) Access to shelter upon return: In 2020, only 36 per cent of returnees could access housing upon arrival, while 70 per cent of spontaneous returnees had access to Housing, Land and Property (HLP).

2) Lack of school attendance: In 2020, 52 per cent of returnee children were not attending school exacerbating children’s exposure to neglect, exploitation and sexual and other forms of violence and abuse.

3) Food Security & Nutrition: 57 per cent of returnees reported that they consumed only one meal per day, while 82 per cent of households declared that they were not satisfied with their level of food security because of the low dietary diversity.

• Based on the Protection Monitoring findings, returnees in Kirundo, Ruyigi, Muyinga, Gitega, Cankuzo, Makamba and Rutana provinces report a medium level of vulnerability.
• 12 per cent of returnees interviewed declaring living with a person living with a disability.
• A protection monitoring activity conducted by Danish Refugee Council (DRC) on spontaneous returnees showed that 44 per cent of heads of households among the spontaneous returns declared having different vulnerabilities, including being elderly people, single women with children, people living with mental and physical disabilities, and people living with chronic diseases [1].

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[1] According to Protection monitoring to spontaneous returnees’ activities conducted by Danish Refugee Council (DRC) between August and November 2020. For more information contact DRC Burundi Céline Lefebvre celine.lefebvre@drc.ngo
Sexual and gender based violence (SGBV)

Protection monitoring activities with assisted and spontaneous returns have shown that more respondents and key informants were women (52%) than men (48%). In 2020, there is considerable numbers of woman (51%) who returned to the country alone.

The lack of a standardized GBV case management system, which would guarantee a safe and ethically sound collection of information, is among the major gaps related with reintegration support to woman and children. When asked about their primary source of fear upon return during Focus Group Discussions, returnee women and adolescents reported opportunistic attacks and rape while collecting firewood, water or accessing other services that are only available upon walking long distances. In addition, returning refugee women and girls continue to be at risk of intimate partner violence, and often lack effective community support mechanisms and awareness of the legal procedures available to address these risks. Underreporting, linked to social stigma and/or lack of access to survivor care services, means that limited reliable information is available on sexual and gender-based violence trends and patterns in the areas of return.

1,270 cases of GBV among the returnees in 2020. These cases were followed up on at the Transit Centers and compared to 750 cases reported in 2019.

68 percent of the cases were cases of domestic violence, which was an increase of 160 per cent compared to 2019.

For some women, the main cause of flight to the country of asylum and return to Burundi was linked to violence perpetrated by their partner, involving – but not limited to: (i) psychological violence, (ii) sexual assault and (iii) denial of resources and opportunities.

Access to justice, including legal advice and support from communal courts, remains a major gap. According to protection monitoring results, 24 per cent of returnees interviewed three months after return responded that there are no local legal courts at their return areas. However, some NGOs such as Cordaid support very vulnerable returnee survivors at the level of the provinces where they have programs. This means that this support is not spread out in the more rural areas.

During reception of the returnees at the transit centers in Burundi, countries of asylum reported. Some
Burundi is one of the poorest countries in the world and one of the most densely populated countries in Africa. In Burundi, children constitute 54 per cent of the population. According to UNICEF, more than two thirds of Burundian children live in poverty[2]. In 2020, humanitarian partners confirmed that over 1 million children were in urgent need of humanitarian assistance in Burundi including returnee children and IDPs. In 2020, Burundi’s fragile health system confronted multiple health emergencies, including malaria, cholera, measles and COVID-19. Approximately 56 percent of the Burundian refugees hosted in the Democratic Republic of the Congo, Rwanda, the United Republic of Tanzania and Uganda are children.

In 2020, less than half of returnee households (47%) reported that their children had birth certificates, further undermining access to health and education services and risk of statelessness. Protection monitoring confirmed children are the most vulnerable population among returnees and the lack of reintegration and protection support in return areas impacts their wellbeing considerably. Despite the lack of official child protection data/assessments, actors have noted a significant increase in numbers of children at risk of violence, psychological abuse, sexual exploitation, abuse and trafficking, exacerbated by the difficult socio-economic situation in the return areas in 2020.

In addition, Burundi has one of the highest rates of stunting in the world, with more than half of children under 5 years suffering from chronic malnutrition. According to UNICEF, more than 63,000 Burundian children are at risk of severe acute malnutrition (SAM). The nutritional situation of Burundian returnee children deteriorated among the returnee new arrivals in 2020 with cases of SAM found and treated at the transit centres.

After return, the biggest protection risks faced by Burundian children are the lack of education opportunities, with only 48 per cent of returnee children attending school upon return. There are very limited reintegration opportunities for adolescents and young adults, particularly those aged 15-17 years, who face greater challenges in integrating into the national education systems in formal high schools or institutions for vocational training. This results in children abandoning their homes and traveling to other regions and neighbouring countries in search of better opportunities. According to protection monitoring activities and information provided by key informants in all the 18 provinces of return, school infrastructure is insufficient in all communes (21 communes). There are basic / primary schools in most municipalities, but very few or no vocational training schools for young people.

Additional statistics include:

- **3,141** unaccompanied and separated children (UASC) were repatriated from Tanzania, Rwanda, DRC and Kenya by 31 December 2020
- **52 percent** of returnee children do not have access to schooling.
- **50 percent** of returnee girls do not have access to schooling.
- **53 percent** of returnee households report their children do not have a birth certificate.

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1 According to Protection monitoring to spontaneous returnees’ activities conducted by Danish Refugee Council DRC between August and November 2020. For more information contact DRC Burundi Céline Lefebvre celine.lefebvre@drc.ngo

64% of returnees do not have access to land or a house upon return. This remains, without question, one of the major challenges preventing an effective reintegration. For most of these cases, their homes were destroyed and damaged while seeking asylum outside of Burundi. Most of the temporary shelters where returnees live are noted to be in very poor conditions (60 per cent), relatively good/medium condition (38 per cent) and only 2 per cent in good condition. For households that have access to land (82 per cent), most of them do not have enough resources to develop and live on them (93 per cent of households practiced agriculture as their main source of income).

According to the protection monitoring findings, returnees and residents do have conflicts over land expropriation or occupation. The cases are referred to the local authorities and the local courts systems in the return areas and in general the authorities support and favour the returnees to regain their house or land. However, woman still experience difficulties in the face of “custom law” which discriminates against them by excluding them from family succession. Expropriation of land is common for returnee women but very difficult to monitor given the lack of protection support to women after return. Returnees need information and understanding of relevant laws, procedures, and systems.

For those who have no access to land, support is provided by a counterpart from the community, either in cash or in exchange for work (mostly in farms and for agricultural production). This leaves the returnee families extremely vulnerable to labor exploitation and limited livelihood opportunities, especially after the initial three months of assistance provided by UNHCR and partners has run out. With all the time spent in asylum, some returnees found their homes or land occupied by third parties upon return (12 per cent).

Protection monitoring activities conducted by DRC with spontaneous returnees have shown similar results to UNHCR protection monitoring data. Some 71 per cent said to have access to land/houses versus 29 per cent who did not, and the majority of those who did not have access (64 per cent) saw their house completely destroyed upon return. Half of the houses are made with straw and require urgent repair/rehabilitation. To address their lack of housing access, returnees construct or rehabilitate new houses, rent (for the majority of them), or live in houses provided temporarily by family/relatives or neighbors. There are others who have preferred to return to their parents’ place to share the house, and others who have separated with their partners or children while waiting to receive another house of their own from the local administration[3].

[3] According to Protection monitoring to spontaneous returnees’ activities conducted by Danish Refugee Council DRC between August and November 2020 for more information contact DRC Burundi Céline Lefebvre celine.lefebvre@drc.ngo
LIVELIHOOD AND FOOD SECURITY

The returnee population consists mainly of farmers, however agricultural production remains extremely low due to various constraints. Since the beginning of 2020, the population has been suffering from an unfavourable rainfall for agriculture, particularly in the northern and eastern provinces of the country. Despite the desire of the heads of households to work to achieve a sufficient level of food security, the lack of financial means to acquire the necessary tools and to hire a large workforce, climatic hazards and pests, make this difficult. The priority for this rural population would be assistance in seeds and foods during the lean period. The vulnerability and displacement-related poverty negatively impacts on integration in general.

Most of returned households obtain food from their own gardens and / or fields. For this reason, households find enormous difficulties to get food if they have no access to land upon return or during the period they do not produce. Additionally, returned households need assistance in agricultural inputs and seeds to relaunch income generating activities and provide adequate subsistence to their families.

Unless interventions are implemented to promote more sustainable livelihoods and ensure community cohesion, there is a likelihood of increasing tension between the returnee and resident communities. The shrinking economy, compounded by worsening unemployment of youth (65 per cent in 2020) and cuts in basic services are further affecting the self-reliance of the most vulnerable households in the six targeted provinces (Kirundo, Muyinga, Ruyigi, Makamba, Cankuzo and Rutana).

Consequently, there is a need to consider the provision of targeted assistance beyond the three-months food assistance, especially for returnees who have limited or no access to land or who arrive in the agricultural off-season. Additional livelihoods assistance may further contribute to the reintegration of returnees, thus mitigating multiple challenges they face, especially during the lean season.

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HEALTH AND NUTRITION

In 2020, 58 per cent of household’s report that they eat once per day, versus 41% who eat twice per day. Access to health care is difficult in the return provinces due to lack of infrastructure, staffing and resources. The Ministry of Health introduced the Medical Insurance Card (CAM), to allow all Burundian citizens without insurance to have access to health care. The card costs 5000 FBU (2.67 USD) and covers the card holder and their dependants under eighteen. The card is supposed to give access to medical consultation and basic healthcare to returnees at public health institutions, however health facilities are generally far from the return locations and returnees sometimes do not have the financial means to buy the card. Among those that do not have access to health services, 92 per cent of households responded that the reason is lack of financial resources.

Additionally, many services are not available in public health institutions in the return areas and people have to request services (examinations, medicines, etc.) from private providers. Some 33 per cent of heads of households raised the fact that medical assistance is inadequate, while 25 per cent of households reported having children in their household who were not vaccinated against measles.

Among the results of protection monitoring conducted of spontaneous returns, DRC also confirms the lack of access to health services as a major gap, which respondents also linked to lack of hygiene and drinking water in the return areas. DRC also reported that even when the services such as health facilities are available, most respondents declared lacking the financial means to procure them (90% of respondents)[4].

WATER, SANITATION AND HYGIENE

Water access is available in almost the whole country and 93 per cent of returnee households have access to water for domestic use. However, returnees report challenges raised related to a lack of technical maintenance of the water supplying sources (the fountains, developed sources of water) and climatic hazards during the rainy season. Floods and violent currents of water destroy the developed sources of water at the communes and they take a long time to be replaced or repaired.

In light of the pandemic, targeted community outreach activities on COVID-19 prevention and response are needed to returnee and local communities in the main provinces of return, targeting both returnee and local communities. This activity can also mitigate the stigmatisation and discrimination problems that some returnees experience upon return related with the pandemic. In partnership with the Government, support is provided for the construction of hand-washing stations and WASH supplies are given to benefit returnees upon return. Additionally, there is the provision of special support and case management services to vulnerable individuals who are more likely to become seriously ill than others, including elderly people and those with chronic diseases.

TOWARDS SUSTAINABLE REINTEGRATION

Some 34 per cent of returnees declared being unsatisfied with the level of reintegration. An integral part of ensuring the sustainability of returns is to enhance local protection mechanisms and promote self-reliance and social cohesion. According to the assessment, returnees question why nothing has been done since 2017 when their problems are known. It is vital to examine critically the life and coping mechanisms in communities of return. Through the JRRRP partners, reintegration activities would include health, education, social welfare and human rights.

[4] According to Protection monitoring to spontaneous returnees’ activities conducted by Danish Refugee Council DRC between August and November 2020. For more information contact DRC Burundi Céline Lefebvre celine.lefebvre@drc.ngo
CONCLUSION

During 2020, the overall return and reintegration situation in Burundi remained complex. Returnees ability to return in safety and dignity and reintegrate within their communities became even more challenging in 2020 compared to previous years, mainly for three important factors:

1) **Covid-19 global pandemic:** The negative impact of COVID-19 has exacerbated the already precarious socio-economic situation of the country. The closing of the borders paralyzed commerce trade and caused shortages and the rise in the prices of basic necessities and food. This made it more difficult for returnees to reintegrate and increased the risk of food insecurity and malnutrition, but also potentially created serious protection risks including gender-based violence and child labour.

2) **The general legislative and presidential elections that took place on the 20th of May 2020:** After the results and outcome of the general elections, the number of Burundian refugees within the region who expressed their desire to return to their country of origin increased. This is combined with the coercive asylum conditions in Tanzania which push refugees to return.

3) **The exponential increase of refugee returns in 2020 and lack of funding and coordination support to enhance reintegration activities:** According to all the different monitoring sources, the main challenges that prevent people from reintegrating upon return is the lack of livelihood and reintegration support from government and other humanitarian/development actors. The needs are enormous in terms of empowerment programs in the areas of return, including the very vulnerable host communities who are also very impacted by the return of Burundian refugees.

Protection monitoring activities of assisted and spontaneous returnees in 2020 have shown that the increasingly restrictive approach towards refugees in refugee camps and limited refugee access to livelihoods and self-reliance activities leaves them almost totally dependent on humanitarian assistance. Both spontaneous (92% of spontaneous returnees interviewed by DRC in Burundi) and facilitated returnees (reported they made the decision to return based on lack of access to basic services in the camps, including 92 per cent of spontaneous returnees interviewed by DRC in Burundi[5]) and facilitated returnees interviewed by DRC in Burundi[5]. Among the returnees whose return was facilitated by UNHCR, 19 per cent indicated they made the decision to return based on the difficult socio-economic situation in the country of asylum and other reasons including pressure from the camp authorities. In total, 81 per cent interviewed reported their decision was voluntary.

Among the spontaneous returnees, 51 per cent of respondents (according to DRC’s PIM report) reported return was driven by other factors such as delays in the repatriation process, as well as lack of information on the repatriation process in the country of asylum.

[5] According to Protection monitoring to spontaneous returnees’ activities conducted by Danish Refugee Council DRC between August and November 2020. For more information contact DRC Burundi Céline Lefebvre, celine.lefebvre@drc.ngo
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