

Summary

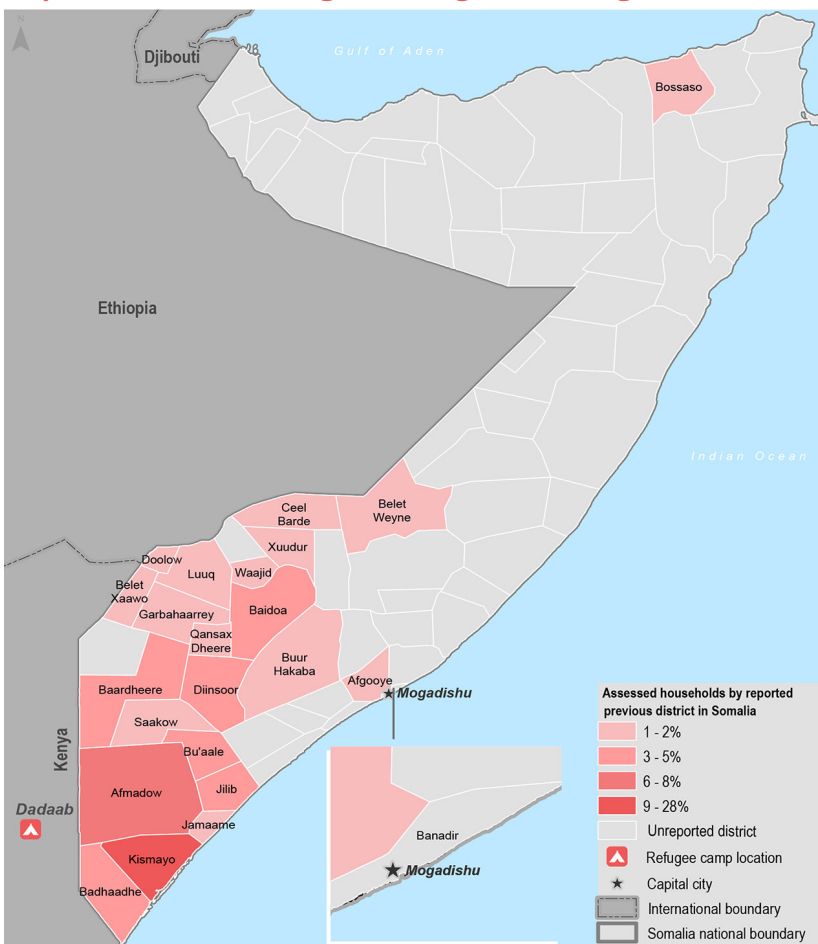
As of January 2019, a total of 209,979¹ mostly Somali refugees resided in Dadaab refugee complex (Dagahaley, Ifo and Hagadera camps). With continued conflict, instability and drought causing new displacement in Somalia, in addition to reduced humanitarian funding in Dadaab, there is a need to strengthen information on humanitarian needs and access to assistance and services in the camps. This information will support the planning of immediate refugee responses and inform the development of long term response strategies including government-led Comprehensive Refugee Response Framework (CRRF) annual plans. Since May 2017, REACH has worked in collaboration with the Norwegian Refugee Council (NRC) and in support of camp management and operational partners to provide secondary information and guidance on developing tools and methodologies for data collection in Dadaab refugee complex.

This factsheet provides an overview of the third round of multi-sector needs assessment across the three camps of the Dadaab refugee complex. It provides an analysis of refugee humanitarian needs, access to shelter, protection, food security, health, water, sanitation and hygiene (WASH) and livelihoods.

Primary data was collected through household (HH) surveys from 19 February to 8 March, 2019. A total of 1,125 HHs (376 in Dagahaley, 374 in Hagadera and 375 in Ifo) were randomly selected and interviewed. The assessment was sampled to fulfill a confidence level of 95% and a margin of error of 5% at the camp level. This level is guaranteed for all questions that apply to the entire surveyed population of each camp. Findings relating to a subset of the surveyed population may have a wider margin of error.

Additional data from a facility mapping exercise conducted between 18-26 October 2018 and updated on 24 January 2019 has been used to complement the household data. A total of 1,403 facilities were mapped, including 740 water points, 405 street lights, 97 schools, 60 non-governmental organization (NGO) offices and 19 health facilities. Secondary data on available facilities from agencies operating in Dadaab was used to triangulate primary data collected.

Reported districts of origin of refugees residing in Dadaab



Demographics

Distribution of population by age and sex:



Country of origin as reported by HHs:



57% of the assessed HHs were male-headed while 43% were female-headed.

Education

Proportion of school-aged children enrolled at school per education level in Dadaab:

	Boys	Girls
Pre-primary	23%	19%
Primary	39%	42%
Secondary	7%	5%
Not attending	31%	34%

Top reported barriers for children not attending school in Dadaab:²

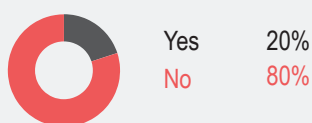
	Boys	Girls
Too young to go to school	1	1
School is too far	2	2
Domestic chores	3	3
Fear of violence on the way to school	4	4

Shelter

% of HHs that had proof of allocation for the plots they live in:



% of HHs whose shelter had been damaged in the 3 months prior to the assessment:



% of HHs with the following parts of shelter damaged, for the 20% of HHs that had their shelter damaged in the 3 months prior to the assessment:²



1. UNHCR Statistics package, November 2018.

2. Households could choose multiple answers



Funded by European Union Civil Protection and Humanitarian Aid

In partnership with:

NRC

NORWEGIAN REFUGEE COUNCIL

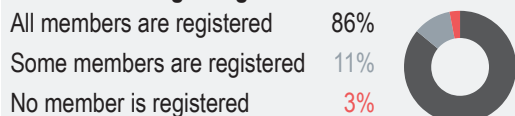
REACH

Informing more effective humanitarian action

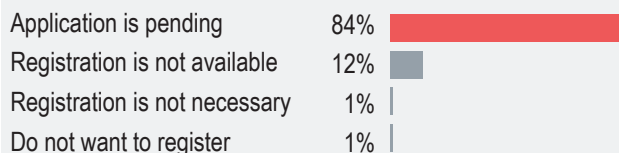
Protection

Registration and documentation

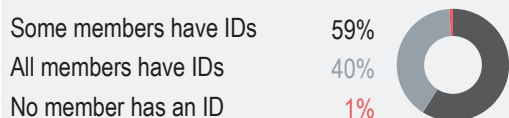
Household refugee registration status in Dadaab:



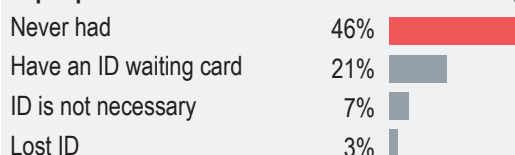
Top reported reasons for not being registered as refugees:



Household members that had identity documents (IDs):

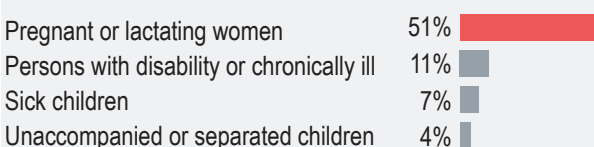


Top reported reasons for HH members not having IDs:



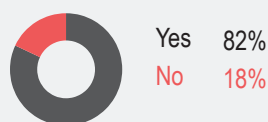
Persons with specific needs

% of HHs with at least one member having the following specific needs:²

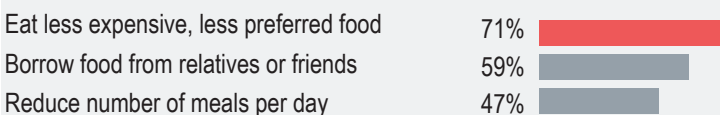


Food security

% of HHs in Dadaab perceived to have access to sufficient food in the seven days prior to the assessment:

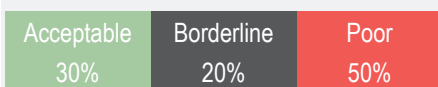


Top reported food coping strategies adopted by HHs that did not have access to sufficient food in the seven days prior to the assessment:²



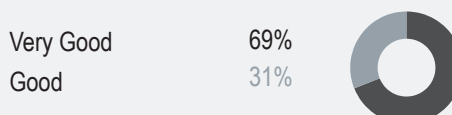
81% of HHs reported humanitarian assistance as their main source of food in the seven days prior to the assessment.

% of HHs with the following food consumption scores (FCS):⁴

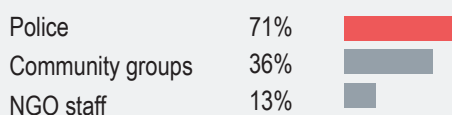


Security

Security perception by HHs in Dadaab:



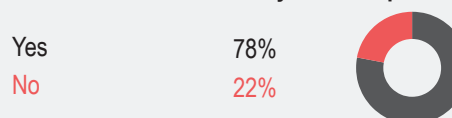
% of HHs that reported insecurity cases³ to the following security providers when they experienced insecurity incidents:²



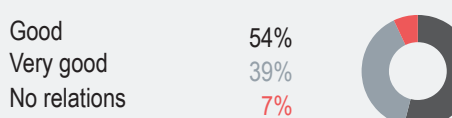
% of HHs that reported insecurity cases³ to the police in the six months prior to the assessment:



% of HHs whose insecurity cases³ reported to the police were solved:

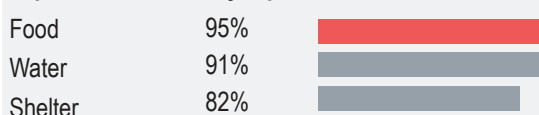


Refugees' perception of relations with the host community in Dadaab:

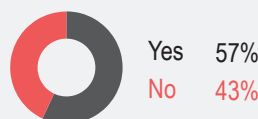


Humanitarian assistance

Top 3 most commonly reported HH needs in Dadaab:²

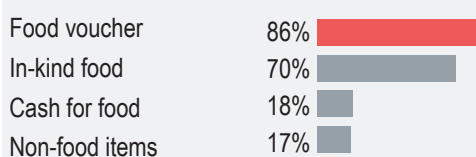


% of HHs that received humanitarian assistance in the 6 months prior to the assessment:⁵



Of the 57% of HHs that reported receiving assistance, 86% said they were satisfied with the assistance provided.

Top reported types of assistance received by HHs that received humanitarian assistance in the 6 months prior to the assessment:²



3. Insecurity cases include theft, sexual and gender based violence, domestic violence, etc.



4. The FCS is an index used as proxy for HH food security and is a composite score based on 1) dietary diversity 2) food consumption frequency and 3) relative nutritional importance of the various food groups consumed by HHs. The FCS is calculated from a 7-day recall and is based on 8 weighted food groups. The FCS is used to classify households into three groups: poor, borderline or acceptable food consumption. The thresholds used here are as follows: > 42 - Acceptable; >28 <=42 - Borderline; < =28 - Poor.

5. The findings from this question vary from that related to reporting assistance as a main source of food. This may be due to a bias in the responses given, or under-reporting of assistance received.



Health & Nutrition

Number of health facilities per type in Dadaab:

	Hospital	6
	Health post	13

% of HHs able to access nutrition services if needed:



Top reported health issues experienced by at least one HH member aged 4 years and over in the month prior to data collection:²



% of HHs with children under 15 years of age that have all received polio vaccination:⁶



% of HHs with children under 15 years of age that have all received measles vaccination:⁶



67% of HHs reported that at least one member aged 0-3 years had experienced a health issue during the month prior to the assessment.




Top reported health issues experienced by at least one child (0-3 years) in the HH in the month prior to data collection:²



61% of HHs reported that they had at least one member of their HH aged 4 years and over who had experienced a health issue during the month prior to the assessment.

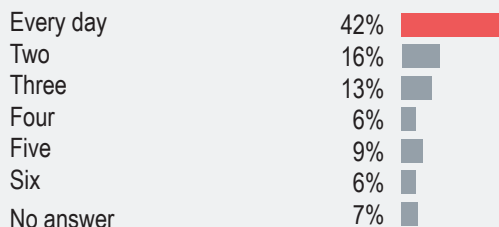
Water, Sanitation & Hygiene

Water facility types in Dadaab:

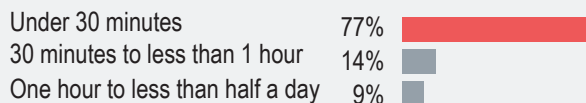
	Public tap stand	683
	Elevated tank	36
	Borehole	21

96% of HHs perceived to have adequate water in the 30 days prior to the assessment.

Number of days per week a HH member collects water:



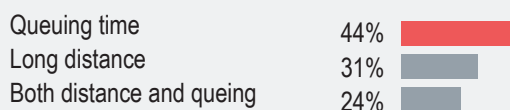
Average time taken by a HH member to walk to their main waterpoint:



56% of HHs took an average of 30 minutes or less at the water collection points to queue and collect water.

50% of HHs reported that they had encountered a problem when collecting water

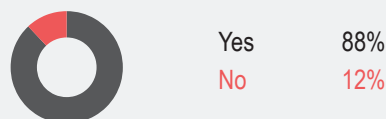
Main problems encountered by HH members while collecting water:



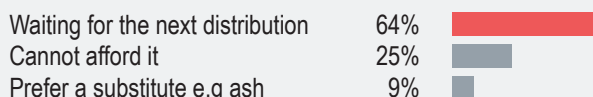
% of HHs whose members received hygiene promotion messages in the following timelines:

In the last 30 days	45%
More than 1 month and less than 3 months ago	11%
More than 3 months and less than 6 months ago	9%
More than 6 months and less than one year ago	3%
More than one year ago	3%
Never received	29%

% of HHs that had soap for hand-washing in Dadaab at the moment of data collection:



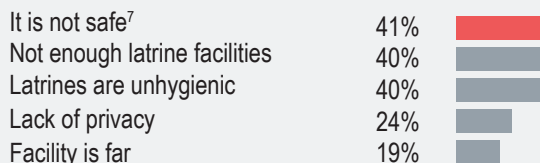
Top reported reasons for HHs not to have soap:



% of HHs whose members had access to and used a latrine:

All members have access and use it	89%
Only some members have access to a latrine	7%
All members have access but only some use it	4%

% of HHs reporting latrine accessibility problems where not all members had access to a latrine:²



6. Total number of HHs with children under the age of 15 years is 875

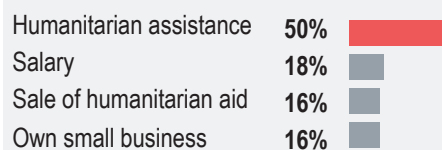
7. Means that latrines do not have a lock or door or no light during the night



Livelihoods

Income and trade

Top reported primary sources of income in Dadaab:²

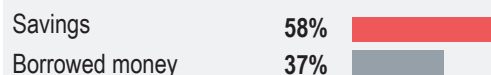


Of the 11% of HHs that reported to have a business, 18% did not have business permits for their business at the time of data collection.

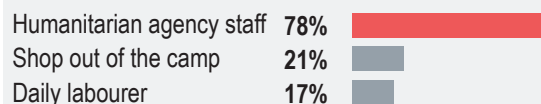
Main reported types of business run by HHs in Dadaab:



Main reported sources of capital for starting a business:

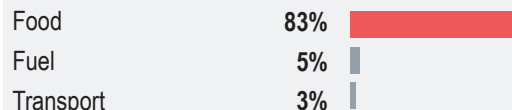


Top reported types of employment reported by HHs whose primary source of income was salary:

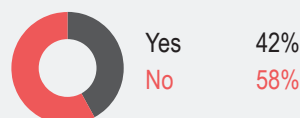


HH expenditure and debt

Top 3 reported HH expenditures:²



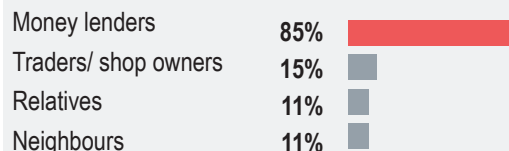
% of households that had borrowed money (from traders, family, etc.):



Top reported use of the borrowed money:²

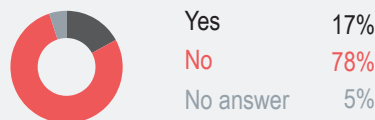


People that HHs are indebted to:²



Skills of HH members

% of HHs with at least one member who participated in vocational training in the 6 months prior to the assessment:



Among the 17% of HHs that had a member that participated in vocational training, 86% reported that these members completed the training.

38% of the households reported that they had at least one male with a skill, while 31% of the households reported that they had at least one female with a skill.

Top reported skills possessed by HH members:

Skills possessed by males

Domestic work
Tailoring
Teacher
Construction

Skills possessed by females

1 Domestic work
2 Tailoring
3 Cooking
4 Construction

15% of the households that had males with skills reported that these members were not using these skills, while 32% of the households with skilled females reported that these members were not using these skills.

Top reported barriers to using skills possessed by HH members:

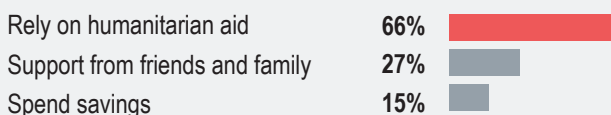
Barriers encountered by males

No suitable job available⁸
Lack of tools
No job vacancy
Lack of transport

Barriers encountered by females

1 Other responsibilities
2 No suitable job available⁸
3 No job vacancy
4 Religious reasons

Top reported livelihood coping strategies by HHs:²



⁸ "No suitable job available" means that there is no job that matches the skills possessed.