Summary
As of January 2019, a total of 209,979 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 in Hagadera refugee camp. 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 374 households (HHs) 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 502 facilities were mapped, including 215 water points, 185 street lights, 46 schools, 19 non-governmental organization (NGO) offices and 7 health facilities. Secondary data on available facilities from agencies operating in Hagadera was used to triangulate primary data collected.

Demographics

Distribution of population by age and sex:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>HHs</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 years and above</td>
<td>1%</td>
</tr>
<tr>
<td>18-59 years</td>
<td>19%</td>
</tr>
<tr>
<td>5-17 years</td>
<td>17%</td>
</tr>
<tr>
<td>7 months-4 years</td>
<td>5%</td>
</tr>
<tr>
<td>0-6 months</td>
<td>2%</td>
</tr>
<tr>
<td>18-59 years female</td>
<td></td>
</tr>
<tr>
<td>5-17 years female</td>
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</tr>
</tbody>
</table>

Country of origin as reported by HHs:

- Somalia: 94%
- Ethiopia: 5%
- Kenya: 1%

50% of households were male-headed while 50% were female-headed.

Shelter

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

- Yes: 34%
- No: 66%

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

- Yes: 6%
- No: 94%

% of HHs with the following parts of shelter damaged, for the 6% of HHs that had their shelter damaged in the 3 months prior to the assessment:

- Structural damage: 77%
- Wall: 23%
- Floor: 14%
- Roof: 9%


1. UNHCR Statistics package, November 2018.
2. Households could choose multiple answers.
### Protection

#### Registration and documentation

**Household refugee registration status in Hagadera:**
- All members are registered: 78%
- Some members are registered: 12%
- No member is registered: 10%

#### Top reported reasons for not being registered as refugees:
- Application is pending: 76%
- Registration is not available: 22%
- Registration is not necessary: 1%
- Do not want to register: 1%

#### Household members that had identity documents (IDs):
- Some members have IDs: 68%
- All members have IDs: 31%
- No member has an ID: 1%

#### Top reported reasons for HH members not having IDs:
- Never had: 74%
- ID is not necessary: 32%
- Have an ID waiting card: 11%

#### Persons with specific needs

**% of HHs with at least one member having the following specific needs:**
- Pregnant or lactating women: 69%
- Persons with disability or chronically ill: 10%
- Sick children: 4%
- Unaccompanied or separated children: 2%

### Food security

**% of HHs in Hagadera perceived to have access to sufficient food in the seven days prior to the assessment:**
- Yes: 76%
- No: 24%

#### Top reported food coping strategies adopted by HHs that did not have access to sufficient food in the seven days prior to the assessment:
- Eat less expensive, less preferred food: 100%
- Borrow food from relatives or friends: 66%
- Reduce number of meals per day: 65%

### Security

**Security perception by HHs in Hagadera:**
- Very Good: 68%
- Good: 31%
- Poor: 1%

#### % of HHs that reported insecurity cases to the following security providers when they experienced insecurity incidents:
- Police: 81%
- Community groups: 51%
- NGO staff: 23%

#### % of HHs that reported insecurity cases to the police in the six months prior to the assessment:
- Yes: 31%
- No: 69%

#### % of HHs whose insecurity cases reported to the police were solved:
- Yes: 60%
- No: 40%

### Humanitarian assistance

**Top 3 most commonly reported HH needs in Hagadera:**
- Food: 86%
- Water: 81%
- Shelter: 66%

#### % of HHs that received humanitarian assistance in the 6 months prior to the assessment:
- Yes: 56%
- No: 44%

#### Top reported types of assistance received by HHs that received humanitarian assistance in the 6 months prior to the assessment:
- Food voucher: 88%
- In-kind food: 84%
- Cash for food: 45%
- Non-food items: 14%

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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.
63% of the HHs reported that they had at least one member of their HH aged 4 years and over who had experienced a health issue in the one month prior to the assessment.

### Health & Nutrition

#### Number of health facilities per type in Hagadera:

- Hospital: 3
- Health post: 4

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

- Yes: 68%
- No: 32%

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

- Yes: 71%
- No: 29%

#### % of HHs able to access nutrition services if needed:

- Yes: 41%
- No: 58%
- No answer: 1%

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

- Stomach pain: 28%
- Diarrhoea: 23%
- Malaria: 22%

#### 74% of the HHs reported that at least one member aged 0-3 years experienced a health issue in the one 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:

- Stomach pain: 38%
- Malaria: 33%
- Diarrhoea: 29%

### Water, Sanitation & Hygiene

#### Water facility types in Hagadera:

- Public tap stand: 199
- Elevated tank: 9
- Borehole: 7

88% of HHs in Hagadera perceived to have adequate water in the 30 days prior to the assessment.

#### Number of days per week a HH member collects water:

- Three: 3%
- Four: 3%
- Five: 14%
- Six: 11%
- Every day: 69%

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

- Under 30 minutes: 49%
- One hour to less than half a day: 29%
- 30 minutes to less than 1 hour: 21%

60% of HHs take an average of 30 minutes to 1 hour at the water collection points to queue and collect water.

61% of HHs reported that they had encountered a problem when collecting water.

#### Main problems encountered by HH members while collecting water:

- Queuing time: 63%
- Long distance: 26%
- Both distance and queuing: 11%

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

- Yes: 97%
- No: 3%

#### Top reported reasons for HHs not to have soap:

- Waiting for the next distribution: 46%
- Cannot afford it: 31%
- Prefer a substitute e.g. ash: 15%

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

- In the last 30 days: 41%
- More than 1 month and less than 3 months ago: 9%
- More than 3 months and less than 6 months ago: 6%
- More than 6 months and less than one year ago: 7%
- More than one year ago: 6%
- Never received: 31%

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

- All members have access and use it: 81%
- All members have access but only some use it: 9%
- Only some members have access to a latrine: 10%
- No member has access to a latrine: 1%

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

- Not enough latrine facilities: 68%
- Facility is far: 36%
- It is not safe: 28%
- Lack of privacy: 24%
- Latrines are unhygienic: 15%

#### % of HHs that had encountered a problem when collecting water:

6. Total number of HHs with children under the age of 15 years is 249

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 Hagadera:¹

- Humanitarian assistance: 51%
- Salary: 27%
- Own small business: 16%
- Sale of humanitarian aid: 15%

Of the 16% of HHs that reported to have a business, 28% did not have business permits for their business.

Main reported types of business run by HHs in Hagadera:

- Non-food item shop: 52%
- Food shop: 40%
- Mechanic shop: 5%

Main reported sources of capital for starting a business:

- Borrowed money: 55%
- Savings: 40%
- NGO grant: 5%

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

- Humanitarian agency staff: 85%
- Daily labourer: 17%
- Shop out of the camp: 9%

HH debt and expenditure

Top 3 reported HH expenditures:¹

- Food: 87%
- Education: 6%
- Fuel: 4%

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

- Yes: 41%
- No: 59%

Top reported use of the borrowed money:²

- Food: 97%
- Buying clothes and shoes: 46%
- To pay other debts: 39%

People that HHs are indebted to:²

- Money lenders: 97%
- Neighbours: 21%
- Family or relatives: 17%

Skills of HH members

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

- Yes: 24%
- No: 75%
- No answer: 1%

Among the 24% of HHs that had a member that participated in vocational training, 91% reported that these members completed the training.

38% of the households reported that they had at least one male with a skill, while 49% 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

1. Domestic work
2. Tailoring
3. Teacher
4. Construction

Skills possessed by females

1. Domestic work
2. Tailoring
3. Driver
4. Mechanic

17% of the households that had males with skills reported that these members were not using these skills, while 41% of the households with female skills reported that these members were not using these skills.

Top reported barriers to using skills possessed by HH members:

Barriers encountered by males

1. No job vacancy
2. Lack of tools
3. No suitable job available³
4. Lack of transport

Barriers encountered by females

1. Other responsibilities
2. No suitable job available³
3. Religious reasons
4. No job vacancy

Top reported livelihood coping strategies by HHs:²

- Rely on humanitarian aid: 64%
- Spend savings: 28%
- Support from friends and family: 15%

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