

# KAZO ANGOLA NEIGHBORHOOD PROFILE

## Urban community assessment

Kampala, Uganda - July 2018



Funded by  
European Union  
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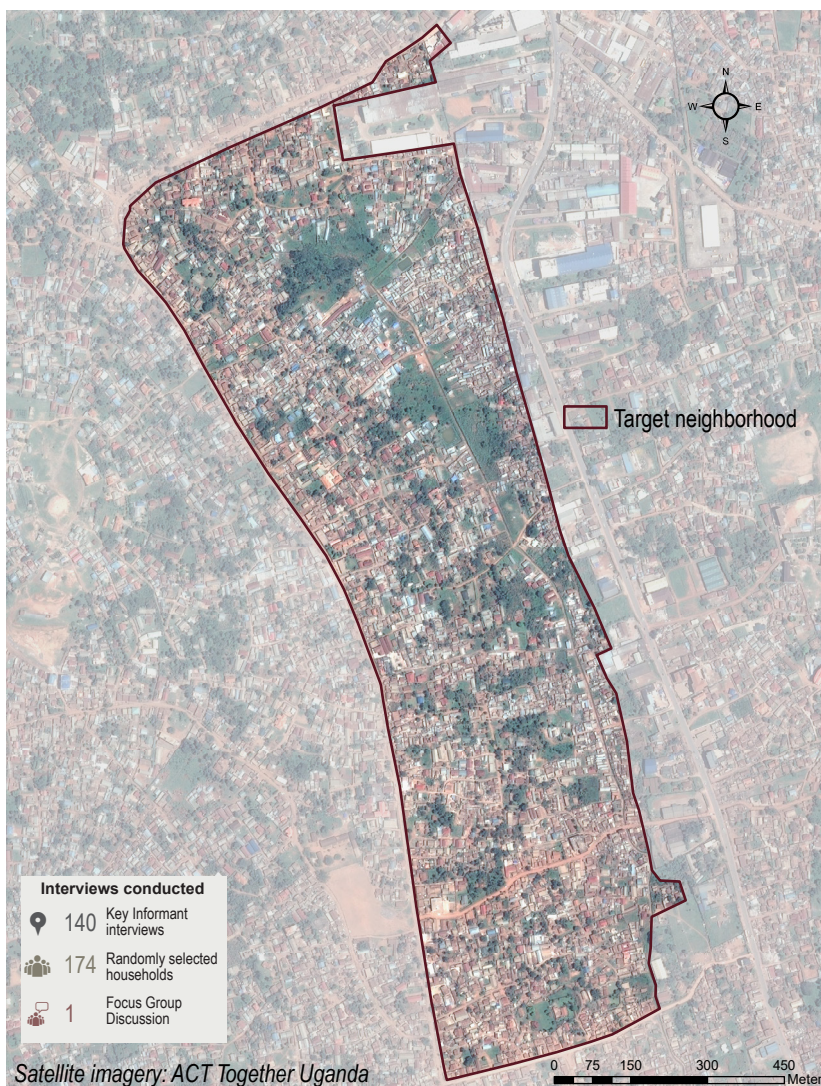


## CONTEXT

Surrounded by countries facing political instability, Uganda is the primary destination for refugees from South Sudan, the Democratic Republic of the Congo, Somalia, among others. In face of this influx, Uganda has introduced a progressive refugee-hosting policy,<sup>1</sup> allowing freedom of movement and the right to work to over 1.4 million refugees settled within its boundaries.<sup>2</sup> Large numbers of refugees seek opportunities in urban centres, and many make their way to Kampala, the capital city and political, social and economic centre of Uganda. Home to 1.5 million inhabitants,<sup>3</sup> including approximately 100,000 refugees,<sup>4</sup> the city of Kampala keeps attracting rural migrants and refugees. While vulnerable refugees, who have the right to access the same basic services as Ugandans, tend to settle in sub-standards neighborhoods across the city, the continuous influx of vulnerable urban dwellers is putting pressure on already overburdened basic services.

To support the Kampala Capital City Authority (KCCA) and aid organisations to better localise and understand the needs and conditions of access to services for refugees and other vulnerable populations living in precarious urban neighborhoods, IMPACT Initiatives, together with ACTED, in the framework of their AGORA initiative, in partnership with the Norwegian Refugee Council and ACTogether Uganda, have undertaken an area-based multisector needs assessment in Kazo Angola, along with eight other neighborhoods in Kampala, between February and June 2018.

Map 1: Overview of the neighborhood of Kazo Angola and of the survey methodology used



### Overview of Kazo Angola neighborhood

Kazo Angola is a vulnerable urban neighborhood in Kampala. It lies in Kawempe Division. The neighborhood comprises 3 cells, the lowest administrative unit for urban settings in Uganda. It is home to vulnerable socio-economic population groups, including refugees.

## KEY FINDINGS

In Kazo Angola, 25% of households reported that the quality of basic services available to them including schools, public health centres and shared sanitation facilities was poor. Poor sanitation is a major concern reported by residents and community leaders. 77% of households do not have access to private toilets, while poor waste management resulting into blockages of drainage channels is reported by community leaders as a key public concern, contributing to increased risks of floods in Kazo Angola.

The lack of income is a major concern reported by all population groups. As a consequence, the cost of services is commonly reported as a barrier to access basic services. For example, in Kazo Angola, most residents reported that they preferred to go to private health centres for health care because of the cost involved and lack of medicine in the available public health centres. Female-headed households are less wealthy than their male counterparts, regardless of their status. In face of financial difficulties, most households in Kazo Angola prefer relying on their savings in order to afford basic services. The biggest challenge faced by residents of Kazo Angola is insecurity.

<sup>1</sup> Grandi praises Uganda's 'model' treatment of refugees, urges regional leaders to make peace  
J. Clayton for United Nations High Commissioner for Refugees (UNHCR), January 2018

<sup>2</sup> While this report was being edited, a verification process of the refugee registration figures undertaken by the Office of the Prime Minister and the UNHCR was on-going.

<sup>3</sup> Uganda National Bureau of Statistics, National Census, 2014

<sup>4</sup> Office of the Prime Minister, Refugee Information Management System database database, 2018

## METHODOLOGY

To measure the dynamics of access to and delivery of basic services in the neighborhood of Kazo Angola, the assessment comprised several phases.

### Phase 1: Key Informant Interviews with service providers

The first phase of data collection aimed at mapping the supply of basic services commonly used by residents of Kazo Angola, located both inside and outside the neighborhood. On 20th February 2018, 140 Key Informants interviews were conducted with service providers, including education and health care facilities, as well as shared and public water sources and sanitation facilities. Key informants were people who were especially knowledgeable on the services targeted by this survey.

### Phase 2: Household surveys with resident households

The second phase of data collection aimed at assessing access to services and socio-economic characteristics of refugees and host community residing in Kazo Angola. During Phase 2 undertaken on 16th March 2018, 174 household interviews<sup>1</sup> were administered to randomly selected households (HHs), including all population groups residing in Kazo Angola. This random household sample captured 2 refugee households, 53 female-headed households and 127 female respondents. Given the low proportion of refugee households among the resident population of Kazo Angola, the third phase of the survey which aimed at collecting more information about refugees specifically, was not conducted in Kazo Angola, but focused on other neighborhoods that have a higher concentration of refugees, namely Katwe II, Kansanga, Mengo, Nakulabye and Kisenyi III.

### Phase 5: Focus Group Discussions with community leaders

Focus group discussions (FGDs) with refugees undertaken during phase 4 in other neighborhoods were not conducted in Kazo Angola, as the random household survey demonstrated that this population group tends to concentrate in higher numbers in other neighborhoods. During the 5th phase of the assessment, the research presented and validated the key findings with community leaders of the target neighborhood during one FGD, conducted on 25th June 2018. During this exercise, community leaders shared their views to prioritize needs and future interventions in Kazo Angola.

### Limitations

Findings from the household surveys are meant to illustrate the specific situation of various population groups residing in Kazo Angola. As the number of refugees identified through the random sampling technique is too small to allow representativeness, the findings will not be disaggregated for this population group in the analysis. Findings from the random household survey conducted during phase 2 are representative of the whole population of the neighborhood, with a 90% confidence level and 10% margin of error.

## DEMOGRAPHICS

30,000

Estimated number of inhabitants in Kazo Angola<sup>2</sup>

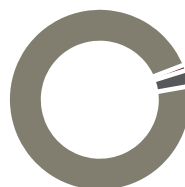
3.9

Average number of people per household

30%

Of households are headed by a female.

### Proportion of households by reported status:



97% National residents

1% Refugees

2% Foreigners and migrants<sup>3</sup>

### Most common reasons reported by households for choosing to settle in Kazo Angola:<sup>4</sup>

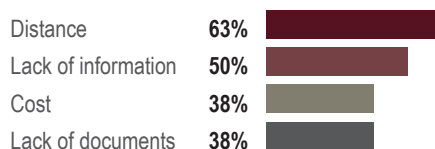


## ACCESS TO SERVICES

### Perception of quality and accessibility of services:



### Most common barriers to service accessibility reported by households who reported access is difficult:<sup>4,5</sup>



## PRIORITY NEEDS

Based on the research findings, community leaders from the neighborhood identified key priorities to improve living conditions in the community:

- Improvement and expansion of the drainage and sewage system
- Improvement of the routine garbage collection system and sites
- Stock public health centres with medical supplies
- Increase the number of schools and vocational centres
- Support the creation of small businesses for low-skilled residents
- Revive local defence units to reduce criminality
- Construction of additional pre-paid water taps

<sup>1</sup> The survey questionnaire has been contextualised from the Urban Multi sector Vulnerability Assessment Tool (UMVAT), introduced in 2017 by the Stronger Cities Consortium.

<sup>2</sup> Uganda National Bureau of Statistics, National Census, 2014

<sup>3</sup> Foreigners are respondents who define themselves as non-nationals without the refugee status. Migrants are respondents who define themselves as nationals who have been long-term displaced from other locations in the country.

<sup>4</sup> Respondents could give multiple answers to this questions, therefore the total exceeds 100%.

<sup>5</sup> Due to a small sample size, results for this indicator are indicative.



EDUCATION

Existing education facilities accessed by residents of Kazo Angola:

7

Nursery schools

12

Primary schools

5

Secondary schools

Key Informants for education facilities reported that **overcrowded classrooms** was the main challenge for schools, followed by **lack of access to school materials**.

School attendance:

**4%** of primary school-aged children (7-12 years old) residing in Kazo Angola were not attending school, as well as **9%** of secondary school-aged children (13-17 years old), as revealed by the random household survey. **Inability to pay school fees** was the most common reason given by both households and Key Informants for education facilities to explain school non attendance and drop-out.

Share of education expenses in households' budget:

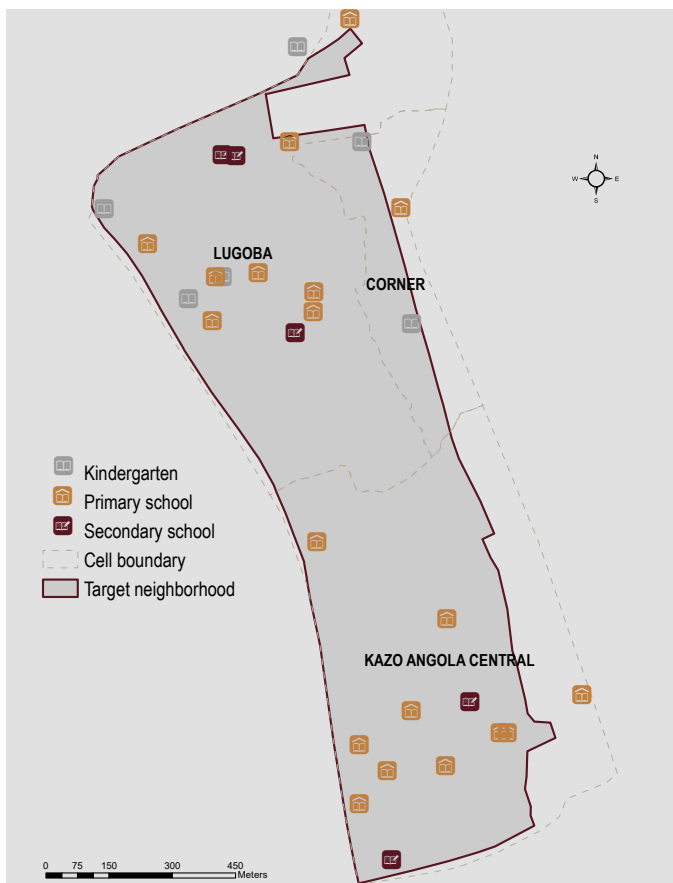
28%

Of households reported education as their largest expense.

23%

Of households were willing to spend more on education costs.<sup>1</sup>

Map 2: Location of education facilities used by residents of Kazo Angola:



<sup>1</sup> Households declaring they would prioritise education or health expenses if they benefited from an additional amount of 200,000 UGX. It is equivalent to 54 USD. www.xe.com, as of 16th July 2018.

HEALTH

Most commonly used health care providers by households:<sup>2</sup>

Public Health centre

36%

Private Health centre

56%

Hospital

41%

Pharmacy

12%

32%

Of health centres **had no professional doctor** among their staff according to Key Informants.

Most commonly reported issues in accessing health care for households:<sup>2</sup>

Cost

67%

Lack of medication

46%

Distance

26%

Community leaders reported that most residents of Kazo Angola go to private health centres because the quality of medical care is better in clinics than in public facilities, which lack supplies, qualified staff and are congested.

Importance of health expenses in households' budget:

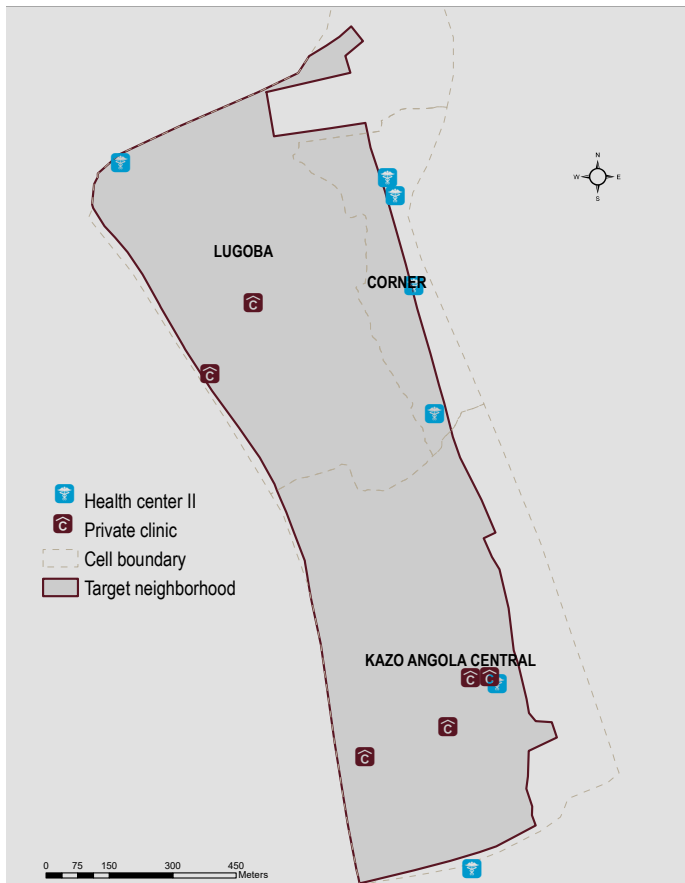
73,000 UGX

Average household expenditure for medical care in the last 90 days<sup>3</sup>

6%

Of households were willing to spend more on health care.<sup>1</sup>

Map 3: Location of health facilities used by residents of Kazo Angola:

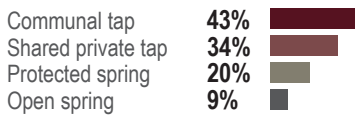


<sup>2</sup> Respondents could give multiple answers to this questions, therefore the total exceeds 100%.

<sup>3</sup> 1 USD = 3,688 UGX and 1 EUR = 4,328 UGX, xe.com as per 16nd July 2018

## WATER AND SANITATION

### Primary drinking water sources used by households:



9% of households reported that the quality of these water sources was not good enough to drink. 74% of communal taps were constructed directly by the community, according to water points Key Informants.

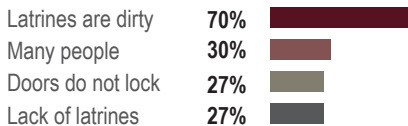
### Access to sanitation reported by households:

**77%** Of households reported having no private access to sanitation.

**6** Average number of households sharing one toilet

**20%** Of households reported being dissatisfied with the quality of toilets.

### Most common issues with sanitation reported by households:



## HOUSING LAND AND PROPERTY

### Housing conditions reported by households:

**2,1** Average number of rooms per housing unit

**69%** Of households are tenants.

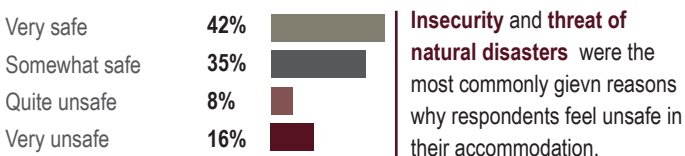
**50%** Of national tenants reported spending over **100,000 UGX monthly** for rent.

**31%** Of households reported housing is their largest expense.

**10%** Of households were willing to spend more for housing.<sup>2</sup>

**22%** Of households considered that their accommodation or location in the area put them at risk of disasters (like floods).

### Perception of housing safety reported by households:



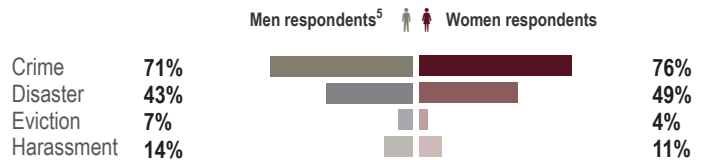
17% of households considered that forced evictions are common in Kazo Angola. 11% reported they have been directly threatened of eviction in the year prior to the assessment. Lack of awareness of tenancy right is a major cause of eviction according to community leaders.

## PROTECTION & SOCIAL COHESION

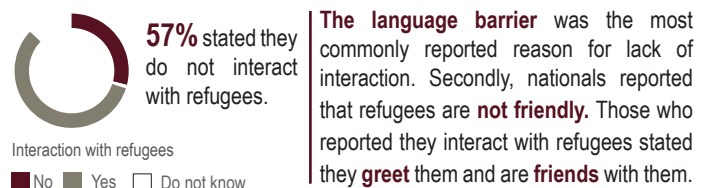
### Proportion of respondents who declared they feel safe:<sup>3</sup>



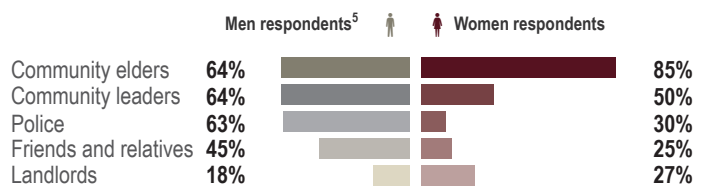
### Most common reasons why respondents reported feeling unsafe:<sup>1-3-4-6</sup>



### Dynamics of social cohesion with refugees reported by Ugandan respondents:



### Most common interlocutors chosen by respondents who seek support to deal with a safety issue:<sup>1-3-6</sup>

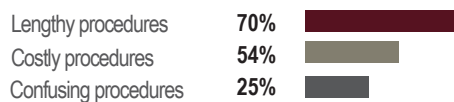


## LEGAL ASSISTANCE

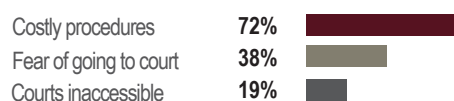
### Challenges to access legal entitlement and formal justice mechanisms reported by respondents:

**40%** of respondents reported that obtaining official documents is difficult, while **38%** shared a similar opinion about access to formal justice mechanisms.

### Most common factors of difficulty to access legal entitlement reported by respondents:<sup>1-4-6</sup>



### Most common factors of difficulty to access formal justice mechanisms reported by respondents:<sup>1-4-6</sup>



<sup>1</sup> Respondents could give multiple answers to this questions, therefore the total exceeds 100%.

<sup>2</sup> Households declaring they would prioritise expenses for accommodation if they benefited from an additional amount of 200,000 UGX. It is equivalent to 54 USD. www.xe.com, as of 16th July 2018.

<sup>3</sup> These indicators reflect the respondents' perception of their safety rather than this of the household they belong to. For this reason, this indicator relates to the gender of the respondents rather than to the gender of the household's head.

<sup>4</sup> Among respondents who reported they do not feel safe or find access to legal entitlement or access to formal justice difficult. As the sample sizes for this indicator are small, results are indicative.

<sup>5</sup> Men respondents comprise 27% of all respondents for Kazo Angola, with 47 cases. As the sample size for this category of respondent is small, results are indicative.

<sup>6</sup> As the sample sizes for this indicator are small, results are indicative.

## \$ INCOME

Half of households reported earning below the following amount per week, in UGX:<sup>1</sup>

Male-headed HHs

140,000

Female-headed HHs<sup>2</sup>

100,000

Most common sources of income reported by households:<sup>1</sup>

Male-headed HHs

1. Sales
2. Driver
3. Construction

Female-headed HHs<sup>2</sup>

1. Sales
2. Cooking
3. Barber / Hairdresser / Tailor

Proportion of households which reported earning no income:<sup>1</sup>

Male-headed HHs

1%

Female-headed HHs<sup>2</sup>

6%

Most common barriers to work reported by households:

Male-headed HHs

1. Low wages
2. Lack of opportunities
3. Lack of capital

Female-headed HHs<sup>2</sup>

1. Low wages
2. Competition
3. Lack of capital

Proportion of households which reported they can not afford basic services:

Male-headed HHs

58%

Female-headed HHs<sup>2</sup>

64%

Proportion of households which reported resorting to one or more coping strategies to mitigate against lack of income:

	Average number of coping strategies	Low use of coping strategies (1-2)	Medium use of coping strategies (3-4)	High use of coping strategies (5+)
Overall	2.1	57%	28%	5%
Female-headed HHs <sup>2</sup>	2.4	62%	26%	8%
Male-headed HHs	2.1	56%	28%	4%

Most common coping strategies used by households:

Male-headed HHs

- 56% Spending savings
- 44% Borrowing money
- 39% Help from relatives

Female-headed HHs<sup>2</sup>

- 57% Help from relatives
- 43% Borrowing money
- 40% Spending savings

## \$ EXPENDITURE

Proportion of households which reported the following expenses as their largest expenditure:

Male-headed HHs

- 37% Food
- 27% Education
- 27% Rent

Female-headed HHs<sup>2</sup>

- 38% Rent
- 32% Education
- 21% Food

Proportion of households which reported the following expenses as their second largest expenditure:

Male-headed HHs

- 47% Food
- 16% Rent
- 15% Education

Female-headed HHs<sup>2</sup>

- 45% Food
- 23% Health care
- 15% Rent

## NGO ASSISTANCE

Proportion of households reporting a need for assistance:

Male-headed HHs



Female-headed HHs<sup>2</sup>



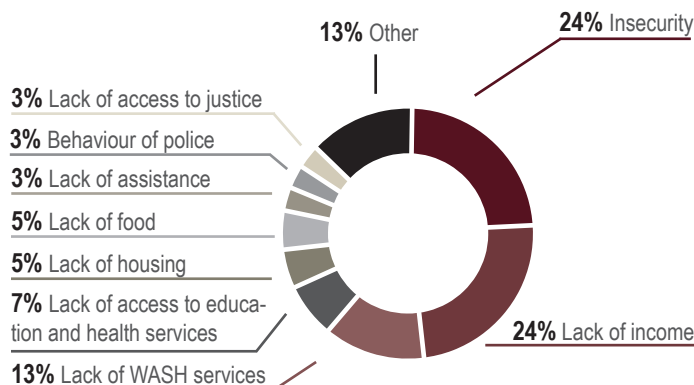
Preferred kind of assistance reported by households:

	Male-headed HHs	Female-headed HHs <sup>2</sup>
Food items	30%	31%
School fees	37%	52%
Housing	33%	32%
Business training	30%	21%
Credit	47%	40%

Preferred modes of assistance reported by households:

Direct cash assistance and a combination of in-kind and cash assistance are the modes of support that were reported the most by households residing in Kazo Angola. Respectively **68%** and **59%** of households mentioned these types of assistance among their preferred modes of assistance.<sup>3</sup>

Challenges faced by the community in Kazo Angola reported by households:



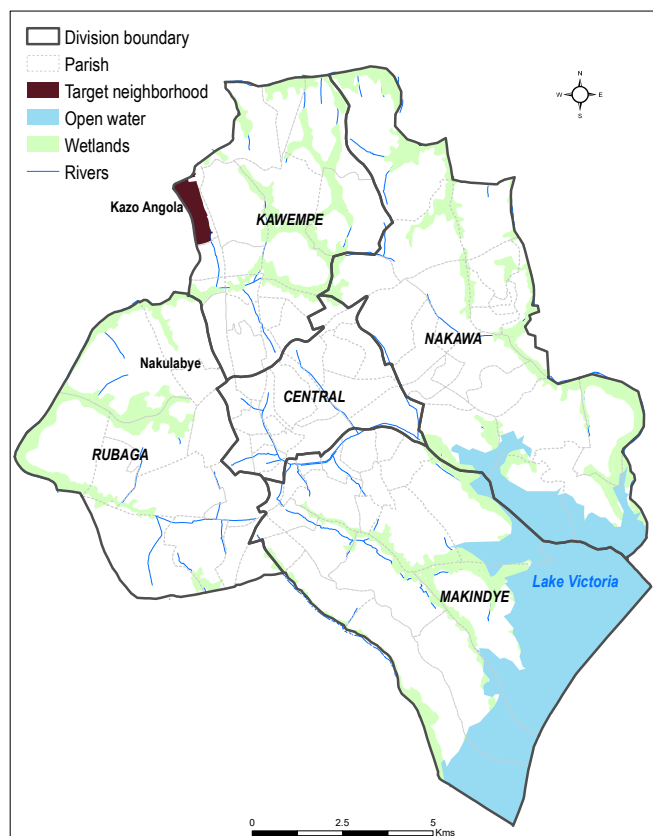
<sup>1</sup> In the month prior to the assessment

<sup>2</sup> Female-headed households represent 30% of the total random sample in Kazo Angola, with 53 cases. Due to small sample size, these findings are indicative only.

<sup>3</sup> The total percentage exceeds 100% as respondents could give multiple answers to the question.



Map 4: Location of the vulnerable neighborhood of Kazo Angola in Kampala:



Kampala Capital City Authority, (KCCA) is the body that is charged with administration of Kampala on behalf of the Central Government. It was established by an act of the Ugandan Parliament in 2011 (KCC Act, 2010), giving Kampala a special political and administrative status.

The Executive Director oversees the regulation and/or delivery of basic services in the community. Currently, KCCA oversees 79 free public schools with an enrolment of more than 65,000 pupils and students and 11 free public Health Centres and Hospitals attending to 65% of its 1,500,000 residents. In addition, the Authority manages Development Control, Revenue Collection, Waste management and Sanitation among other services. Effectively, Kampala now has a dedicated Cabinet Minister, and KCCA has the licence and responsibility to oversee the provision of all public services in its jurisdiction.

With a growth rate of 3.6%, Kampala is the 13th fastest growing city in the World, projected to be a mega-city of more than 10 million inhabitants in the next 20 years. The refugee population in Kampala has significantly increased in the last few years, and KCCA is currently drafting a comprehensive plan to deal with the challenges and exploit the opportunities presented with this changing demographic reality.



NORWEGIAN  
REFUGEE COUNCIL

The Norwegian Refugee Council (NRC) works in both new and protracted crises across 31 countries. Our 6,000 employees provide life-saving and long-term assistance to millions of people every year. NRC specialises in six areas: livelihoods and food security, education, shelter, legal assistance, camp management, and water, sanitation and hygiene. NRC is a determined advocate for displaced people. We promote and defend their rights and dignity in local communities, with national governments and in the international arena. NRC has been implementing projects for internally displaced persons and refugees in Northern Uganda, West Nile and South West since 1997, helping to create a safer and more dignified life for refugees and internally displaced people. NRC advocates for the rights of displaced populations and offers assistance within the shelter, education, emergency food security and livelihoods, legal assistance, and water, sanitation and hygiene sectors.

## AGORA

**Leveraging local capacities  
Promoting settlement approaches  
Enabling integrated response**

AGORA is a joint initiative of ACTED and IMPACT Initiatives, founded in 2016. AGORA promotes efficient, inclusive and integrated local planning, aid response and service delivery in contexts of crisis through applying settlement-based processes and tools.

AGORA enables more efficient and tailored aid responses to support the recovery and stabilization of crisis-affected communities, contributing to meet their humanitarian needs, whilst promoting the re-establishment of local services and supporting local governance actors. AGORA promotes multi-sectoral, settlement-based aid planning and implementation, structured around partnerships between local, national and international stakeholders.

AGORA's core activities include community mapping, multisector and area-based assessments, needs prioritisation and planning, as well as support to area-based coordination mechanisms and institutional cooperation.

This area profile represents a key product within a global AGORA program supported by the European Civil Protection and Humanitarian Aid Operations (ECHO), targeting cities in crisis to inform area-based response and recovery plans, and provide support to information management and coordination efforts.



ACTogether is the national support NGO charged with providing technical and financial assistance to the National Slum Dwellers Federation of Uganda (NSDFU). ACTogether, established in 2006, facilitates processes that develop organizational capacity at the local level and promote pro-poor policy and practice in Uganda's urban development arena. ACTogether strives to create inclusive cities with united and empowered communities of the urban poor who have the capacity to voice, promote, and negotiate for their collective interests.