Objectives and Methodology
General Objective

• To provide a deeper understanding of settlement-urban and cross-border migratory patterns, durable solutions, refugee livelihoods, and pressures on and barriers to access to basic services in Adjumani town.

• To inform the local authorities, and humanitarian and development actors engaged in the refugee response in Adjumani town.
Research questions

1. Migration Patterns:
   • What are the primary push factors driving refugees to migrate to Adjumani town from settlements, country of origin, and other locations within Uganda?
   • What are the pull factors that attract households to settle in Adjumani town?
   • What are the future movement plans of refugees settled in Adjumani town in the next 6 months?

2. Livelihoods:
   • What needs are priority to refugees in Adjumani town?
   • What kinds of livelihoods programming are currently being implemented across Adjumani town?
   • What are the predominant livelihood sources for households in Adjumani town?
   • What are the main challenges or barriers that refugee households face in accessing livelihood services in Adjumani town?
Research questions

3. Access to Basic Services:
   • How has the influx of refugees and settlement patterns impacted the demand for and provision of basic services in Adjumani town?
   • What basic services (Health, Education, WASH, Protection) are currently available and accessible for refugees in Adjumani town?
   • What are the main challenges or barriers that refugee households face in accessing the basic services (Health, Education, WASH, and Protection) in Adjumani town?
   • What are the gaps faced by service providers in providing basic services to both the refugees and the host communities in Adjumani town?

4. Durable Solutions:
   • What are the factors that facilitate or hinder the integration of refugees into the social fabric of Adjumani town?
   • How do community attitudes influence the prospects of integration for refugees?
Methodology

426 quantitative household surveys and 19 Key informant interviews were conducted between 22nd February 2024 and 13th March 2024, in 3 divisions in Adjumani, including Cesia, Central and Biyaya.

Quantitative Sampling

- A 95% confidence level, and a 7% margin of error were employed for quantitative data collection.
- Respondent households were randomly selected in areas pre-identified with support from Adjumani town Council staff.

Research Design

- December- January
  - Research design and TOR publishing - Field team training

Data collection

- February - March
  - Tool piloting - data collection

Data analysis

- March - April
  - Final analysis – prelim presentations

Reporting

- April - June
  - Outputs and presentation of final results
Demographics

Total number of interviewed households, per community, per location:

<table>
<thead>
<tr>
<th>Division</th>
<th>Refugees</th>
<th>Host</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biyaya</td>
<td>122</td>
<td>90</td>
<td>212</td>
</tr>
<tr>
<td>Central</td>
<td>44</td>
<td>58</td>
<td>102</td>
</tr>
<tr>
<td>Cesia</td>
<td>52</td>
<td>73</td>
<td>125</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>218</strong></td>
<td><strong>221</strong></td>
<td><strong>439</strong></td>
</tr>
</tbody>
</table>

Proportion of heads of household by gender among households interviewed, per community:

- Refugees:
  - Female: 72%
  - Male: 28%

- Host Community:
  - Female: 58%
  - Male: 42%
Demographics

Education status of the head of household, per community and gender of the head of household:

<table>
<thead>
<tr>
<th>Education status</th>
<th>Refugee</th>
<th>Host</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female HoH</td>
<td>Male HoH</td>
</tr>
<tr>
<td>University tertiary education</td>
<td>4%</td>
<td>20%</td>
</tr>
<tr>
<td>Vocational studies</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>Upper secondary education</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>Lower secondary education</td>
<td>25%</td>
<td>46%</td>
</tr>
<tr>
<td>Primary school</td>
<td>54%</td>
<td>30%</td>
</tr>
<tr>
<td>None</td>
<td>13%</td>
<td>3%</td>
</tr>
</tbody>
</table>

*HoH: Heads of household

Age range of respondents, per community:
Key Messages
Key messages

Migration: The findings show that refugees come to Uganda seeking safety, security, and refuge from conflicts, persecution, and instability in their home countries. The hospitable environment in Adjumani, and access to basic services and livelihoods, coupled with Uganda's progressive refugee policies, attracts refugees to the area.

Basic Services Access: Such access is a key driver to settle in Adjumani town, especially education and healthcare. While efforts have been made to provide basic services such as healthcare, education, and water and sanitation facilities to both refugees and host communities, potential challenges persist. Issues like limited infrastructure, inadequate staffing, and funding constraints are some of the reported issues that hinder the effective delivery of services, impacting both refugees and hosts.
Livelihoods: It is reported that access to livelihood opportunities remained a challenge for refugees, with barriers such as language barriers, limited job opportunities, and lack of identification documents hindering their ability to secure employment and financial stability. Livelihood coping strategies findings reveal that both refugee and host community households had a reliance on borrowing money and spending savings to manage financial stress, although nuances in the percentages indicate variations in the economic pressures or resource availability between the two groups. Other coping strategies are also found to be applied.

Durable Solutions: It is generally reported that refugees and hosts in Adjumani lived together harmoniously, with minimal conflicts, supported by a hospitable host community and a mutual commitment to adhere to Ugandan laws. Cultural similarities between refugees and hosts facilitate smooth integration, often strengthened through intermarriage and community engagement. Despite not having voting rights, refugees actively participate in village-level planning meetings alongside hosts, showing a degree of civic integration.
03

Migration
Country of origin

Location where refugee households were reportedly residing prior to arriving in Adjumani town, by gender of the head of household:
Top reported reasons for refugee households’ decision to settle in Adjumani town:

- Access to education: 72%
- Access to healthcare: 37%
- Availability of food: 29%
- Access to livelihood opportunities: 25%
- Access to land: 22%
- Safety considerations: 15%
- Family and friends were already here: 14%
- Quality of food: 14%
- Price of food: 12%
- Access to trainings: 4%

Respondents could choose multiple answers, findings may therefore exceed 100%.
91% of the refugee households who settled in Adjumani reported a positive change in their livelihoods, describing the improvement as a bit or a lot better.

Perceived impact on livelihoods among refugee households after settling in Adjumani, by gender of head of household:

- Positively, a lot better: 21% (Male: 13%, Female: 21%)
- Positively, a bit better: 72% (Male: 76%, Female: 68%)
- No impact: 2% (Male: 7%, Female: 2%)
- Negatively, a bit worse: 5% (Male: 3%, Female: 5%)
- Negatively, a lot worse: 1% (Male: 1%, Female: 1%)

Among the very small proportion of refugee households who reported that their livelihoods became worse (4%, n=9), the most frequently mentioned reasons were inability to access livelihoods, failure to access land, and inability to access loans.
Access to Basic Services
Impact on access to basic services

Most-commonly reported services influenced (negatively or positively) by the presence of refugees, per service group, according to host respondents:

- Healthcare: 93%
- Education: 31%
- Employment: 3%

KIs reported some negative impacts of the arrival of refugees on healthcare services:
- Strained infrastructure.
- Insufficient funding.
- Prolonged waiting times.
- Overcrowded facilities.
- Limited medical supplies.

Respondents could choose multiple answers, findings may therefore exceed 100%
Most commonly reported types of impact on access to social services due to refugees’ presence, according to host respondents:

- Positively, KIs cited improvement in some services, especially the construction of the Health Center 3 in Adjumani, the influx of specialized medical personnel, and the installation of equipment such as X-ray machines.

- Negatively, KIs cited some shortages of medical supplies and overcrowding in health facilities strain resources. Similarly, overcrowded schools and infrastructural shortages hindered learning.

- KIs also cited inadequate WASH infrastructure, and challenging hygiene and sanitation management.
# Health needs

Reported health needs in the 6 months before data collection, per community:

<table>
<thead>
<tr>
<th>Health Need</th>
<th>Refuges</th>
<th>Host</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication</td>
<td>88%</td>
<td>83%</td>
</tr>
<tr>
<td>Medical consultation</td>
<td>47%</td>
<td>43%</td>
</tr>
<tr>
<td>Dental</td>
<td>16%</td>
<td>5%</td>
</tr>
<tr>
<td>Ante-natal or post-natal</td>
<td>11%</td>
<td>14%</td>
</tr>
<tr>
<td>Mental health related needs</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Surgery</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>No needs</td>
<td>8%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Respondents could choose multiple answers, findings may therefore exceed 100%.
Barriers to accessing health services

Top 3 most-commonly reported barriers to healthcare in the 3 months prior to data collection, per community:

<table>
<thead>
<tr>
<th>Barrier</th>
<th>Host (35%)</th>
<th>Refugee (40%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No barriers</td>
<td>33%</td>
<td>40%</td>
</tr>
<tr>
<td>Specific medicines and treatment unavailable</td>
<td>36%</td>
<td>35%</td>
</tr>
<tr>
<td>Long waiting time for the service</td>
<td>27%</td>
<td></td>
</tr>
<tr>
<td>Specific health care service needed unavailable</td>
<td>17%</td>
<td>19%</td>
</tr>
<tr>
<td>Could not afford cost of consultation treatment</td>
<td>14%</td>
<td>17%</td>
</tr>
<tr>
<td>Lack of documentation</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Not enough staff at health facility</td>
<td>10%</td>
<td>5%</td>
</tr>
</tbody>
</table>

Respondents could choose multiple answers, findings may therefore exceed 100%
Child enrollment status among households with at least one school-aged child, per community (ref n=191, host n=194):

- Yes all are enrolled: 69% (Refugee) vs 88% (Host)
- Some of the children are enrolled: 28% (Refugee) vs 11% (Host)
- No: 3% (Refugee) vs 2% (Host)

Child attendance status among households with at least one school-age child, per community (ref n=182, host n=190):

- Yes all attend school: 73% (Refugee) vs 88% (Host)
- Some attend school: 25% (Refugee) vs 12% (Host)
- No: 2% (Refugee) vs 1% (Host)
Most commonly reported reasons for school-age children not attending school, among households with at least one school-age child not attending, per community (ref n=79, host n=31):

<table>
<thead>
<tr>
<th>Reason</th>
<th>Refugee</th>
<th>Host</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of education too high</td>
<td>54%</td>
<td>56%</td>
</tr>
<tr>
<td>Below school age</td>
<td>49%</td>
<td></td>
</tr>
<tr>
<td>Disability or serious medical issue</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>Child is pregnant</td>
<td>3%</td>
<td></td>
</tr>
<tr>
<td>Child doing domestic work</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Cost of transport too high</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Language barrier</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Bullying</td>
<td>0%</td>
<td></td>
</tr>
<tr>
<td>Not aware of procedures to register</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>Harassment from teachers</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

49% (n=31) of refugees and 19% (n=5) of host households reported that their children were not yet of school age, which might be due to potential perception differences between host and refugee communities at which age a child should enroll into school or educational activities.
88% of all surveyed households had at least one school-aged child. This proportion was higher in female-headed households than male ones in both community groups (ref n=191, host n=194).

- 34% of those refugee households reported having at least one child engaged in work (ref n=65).

- 38% of those host community households reported having at least one child engaged in work (host n=73).

Most-commonly reported types of work done by child/children, among households who reported having at least one child engaged in work, per community (n=138):

- Help on the family plot/garden: 68%
- Helping in a family business: 33%
- Grazing cattle: 27%
- Selling things around the community: 19%
- Working in someone’s garden for money: 17%
- Other activity in return for income in cash or in kind: 14%
- Domestic work: 10%
- Catching fish or animals: 10%
- Repairing things: 9%

Respondents could choose multiple answers, findings may therefore exceed 100%.
Identification documents

53% of refugee households reported having some or all members without refugee IDs.

Challenges faced due to lack of refugee ID, by % of households, among those who reported missing documents*:

- Difficulty accessing essential services healthcare: 60%
- Difficulty accessing essential services education: 42%
- Inability to prove identity for official purposes (e.g., access employment, gov’t assistance): 38%
- Limited mobility or restrictions on travel: 26%
- Exclusion from certain rights or benefits: 14%
- Challenges in opening bank accounts or accessing financial services: 14%
- Difficulty in proving eligibility for refugee status or asylum: 6%
- Difficulty accessing essential services shelter: 6%

*Subset: Refugee households with no refugee ID documentation or having some members without an ID document n = 112.

Key informants highlighted that the lack of identification for refugees could pose some challenges, hindering their access to essential services like healthcare, and education, limiting their employment opportunities, and access to financial services.
Water access

The main sources of water for drinking/cooking mostly reported were public boreholes and piped water.

Proportion of households reporting problems accessing water, per community:

Key informants also mentioned some challenges related to access to water in Adjumani, including:

1. Water scarcity during dry seasons, leading to limited access to clean water.
2. Inadequate water distribution points and infrastructure, resulting in long waiting times at water points.
3. Inconsistent water supply and frequent water cuts, disrupting daily routines and water access.
4. High connection fees for water services, posing financial barriers to accessing clean water.
43% of refugee households and 42% of host community households reported sharing a latrine with other households.

Reported types of problems related to, per community:

- **No problem**: 54% Host, 63% Refugee

- **Lack of toilet facilities / facilities too crowded**: 9% Host, 18% Refugee

- **Sanitation toilet facilities are not segregated between men and women**: 15% Host, 16% Refugee

- **Sanitation toilet facilities are not private (no locks/door/walls/lighting)**: 13% Host, 11% Refugee

- **Sanitation toilet facilities are unclean/unhygienic**: 14% Host, 12% Refugee

- **Sanitation toilet facilities are not functioning or full**: 6% Host, 6% Refugee

- **Going to the toilet facilities is dangerous**: 3% Host, 4% Refugee

Key informants also identified some challenges related to access to latrines in Adjumani, including:

1. Inadequate public latrine facilities.
2. Poor maintenance and cleanliness of existing latrines, increasing the risk of disease transmission.
3. Lack of gender-specific latrines, particularly affecting the privacy and safety of women and girls, especially in school.
4. Insufficient provision of latrines in schools and healthcare facilities, impacting the hygiene and well-being of students and patients.

Respondents could choose multiple answers, findings may therefore exceed 100%
Type of shelter

Type of reported household shelter, per community:

4% of refugee households and 9% of host community households reported sharing a shelter with other households (ref n=8, host n=20).
15% of refugee households and 5% of host community households experienced eviction from their dwelling in the 6 months before data collection.

Most-commonly reported reason for eviction, among household who reported having been evicted within 6 months prior to data collection, per community (ref. n=42, host n=10), were as follows:

**Refugee households:**
- Have not paid rent
- Rent was increased
- Pressure from neighborhood to leave
- Development projects; forcing tenants to vacate

**Host households:**
- Rent was increased
- Pressure from neighborhood to leave
- Demolition
- Eviction due to government decision
- Family misunderstanding
- Owner no longer wanted to rent out the property / return of owner
05
Access to Livelihoods
Primary income source

Primary reported source of income, per community:

- Own business (e.g., a shop, hairdressing, tailoring, providing services) (34% Host, 40% Refugee)
- Casual or daily labour (non-farming: e.g., boda-boda, stone quarrying, construction) (14% Host, 19% Refugee)
- Crop production on own land (2% Host, 18% Refugee)
- Crop production on land of others (3% Host, 10% Refugee)
- Salaried employment with the government (non-farming) (3% Host, 10% Refugee)
- Salaried employment with an NGO (non-farming) (10% Host, 10% Refugee)
- Remittances (2% Host, 7% Refugee)
- None (6% Host, 5% Refugee)
- Salaried employment in a business (non-farming) (2% Host, 5% Refugee)
- Livestock farming on own land (2% Host, 0% Refugee)
- Food ration from the settlement (3% Host, 1% Refugee)
- Brewing alcohol (1% Host, 2% Refugee)
Remittances

In terms of remittances, 39% (n=84) of refugee households received UGX 624,000 on average, and 22% (n=48) of host community households received UGX 403,750 on average. In both communities, female-headed households typically received higher remittances than male-headed households.

Proportion of household heads reportedly receiving remittances, per community:
Key messages on ‘Stress’ Livelihood coping strategies:

• A higher proportion of refugee households (15%) compared to host community households (10%) had to sell assets as a coping strategy, which may reflect an economic strain.

• 17% of the host households resorted to selling more animals than usual as a coping mechanism, while 7% of refugee community households did the same.

• 50% of both refugee and host community households reported having borrowed money, indicating a similar reliance on this coping strategy across both groups.

• 68% of host community households used their savings as a coping mechanism, compared to 61% of refugee households, indicating a slightly higher tendency among the host communities to spend their savings.

Note: coping strategies pertain to the 30 days prior to the interview
Livelihoods Coping Strategies - Stress

Reported sale of household assets and goods to get money, per community:

- 15% Yes
- 10% No, had no need to use this coping strategy
- 14% Not applicable / This coping strategy is not available to me
- 5% No, have already exhausted this coping strategy and cannot use it again

Reported sale of more animals than usual, per community:

- 15% Yes
- 10% No, had no need to use this coping strategy
- 14% Not applicable / This coping strategy is not available to me
- 5% No, have already exhausted this coping strategy and cannot use it again

Note: coping strategies pertain to the 30 days prior to the interview.
Livelihoods Coping Strategies - Stress

Reported borrowing of money, per community:

- 50% Yes
- 50% No, had no need to use this coping strategy
- 44% Not applicable / this coping strategy is not available to me
- 11% No, have already exhausted this coping strategy and cannot use it again
- 5% 0%

Reported expenditure of savings, per community:

- 61% Yes
- 28% No, had no need to use this coping strategy
- 29% No, have already exhausted this coping strategy and cannot use it again
- 8% Not applicable / This coping strategy is not available to me

Note: coping strategies pertain to the 30 days prior to the interview.
Key messages crisis Livelihood coping strategies:

- Refugee households (39%) more often reported cutting back on health and education expenses than host communities (15%), which might have long-term implications on health and educational attainment.

- Host community households (9%) reported selling productive assets or means of transport to a similar proportion as refugee households 6%.

- School withdrawal rates were notably higher among refugee households (17%) than the refugee households (9%), tying into the cutting of expenditure on non-food expenses.

Note: coping strategies pertain to the 30 days prior to the interview.
Livelihoods Coping Strategies - Crisis

Reported reduced expenditure on health and education, per community:

- 39% Yes
- 15% No, had no need to use this coping strategy
- 49% Not applicable / This coping strategy is not available to me
- 80% No, have already exhausted this coping strategy and cannot use it again

Note: coping strategies pertain to the 30 days prior to the interview
Livelihoods Coping Strategies - Crisis

Reported sale productive assets or means of transport, per community:

- Yes: 6% (Refugee), 9% (Host)
- No, had no need to use this coping strategy: 66% (Refugee), 24% (Host)
- Not applicable/this coping strategy is not available to me: 24% (Refugee), 7% (Host)
- No, have already exhausted this coping strategy and cannot use it again: 5% (Refugee), 1% (Host)

Reported withdrawal of children from school, per community:

- Yes: 17% (Refugee), 9% (Host)
- No, had no need to use this coping strategy: 63% (Refugee), 82% (Host)
- Not applicable/this coping strategy is not available to me: 14% (Refugee), 8% (Host)
- No, have already exhausted this coping strategy and cannot use it again: 6% (Refugee), 0% (Host)

Note: coping strategies pertain to the 30 days prior to the interview.
Key messages on emergency Livelihood coping strategies:

- Refugee households (34%) more often reported relying on sending family members to search for work outside their village as a coping mechanism in times of crisis, compared to host community households (17%).

- 43% of refugee households reported purchasing food on credit as a coping strategy, indicating reliance on credit facilities, which was likely due to insufficient immediate resources. In contrast, 29% of host community households used this strategy, suggesting a lower but still considerable reliance on credit for essential needs.

- A contrast is observed in the reliance on charity or begging, with 33% of refugee households having reported using this strategy compared to only 5% of host community households.

Note: coping strategies pertain to the 30 days prior to the interview.
Reported instances of households having increased the number of family members searching for work outside the village, per community:

34% Yes
17% No, had no need to use this coping strategy
49% Not applicable / this coping strategy is not available to me
75% No, have already exhausted this coping strategy and cannot use it again

Note: coping strategies pertain to the 30 days prior to the interview.
Livelihoods Coping Strategies - Emergency

Reported purchase of food on credit, per community:

- Yes: 43% (Refugee), 29% (Host)
- No, had no need to use this coping strategy: 41% (Refugee), 47% (Host)
- Not applicable / This coping strategy is not available to me: 12% (Refugee), 7% (Host)
- No, have already exhausted this coping strategy and cannot use it again: 3% (Refugee), 1% (Host)

Reported begged or reliance on charity, per community:

- Yes: 33% (Refugee), 5% (Host)
- No, had no need to use this coping strategy: 47% (Refugee), 81% (Host)
- Not applicable / This coping strategy is not available to me: 11% (Refugee), 12% (Host)
- No, have already exhausted this coping strategy and cannot use it again: 9% (Refugee), 2% (Host)

Note: coping strategies pertain to the 30 days prior to the interview
Durable Solutions & Social Cohesion
Movement restrictions

Proportion of refugee households reporting feeling unrestricted in movement and association or interaction with others:

- Not feeling restricted: 61%
- Feeling restricted: 39%

Key informants highlighted that the open-door policy enables refugees to settle freely anywhere within Adjumani, rent or acquire land, and actively participate in business activities.

This unrestricted movement and opportunity for economic engagement contribute to refugees' integration into the local community and their ability to access livelihood opportunities and essential services.
Refugee discrimination

Proportion of refugee households feeling discriminated against, or observed instances of discrimination against refugees within the community:

- Yes, in school: 2%
- Yes, in hospital: 5%
- Yes, on the street or marketplace: 6%
- Yes, in the workplace: 8%
- No: 78%

According to most KIIIs, refugees can access social and leisure spaces without feeling insecure, indicating a welcoming environment that supports refugee inclusion.

However, some KIIIs reported that sometimes refugees face discrimination in the community. Discrimination can occur within healthcare services, where some doctors may allocate more time to host community members, potentially leading to unequal access to medical care for refugees.
Thank you for your attention

Please click the links to access more information in the Terms of Reference, qualitative and quantitative analysis

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