

ACCOUNTABILITY TO AFFECTED POPULATIONS (AAP)

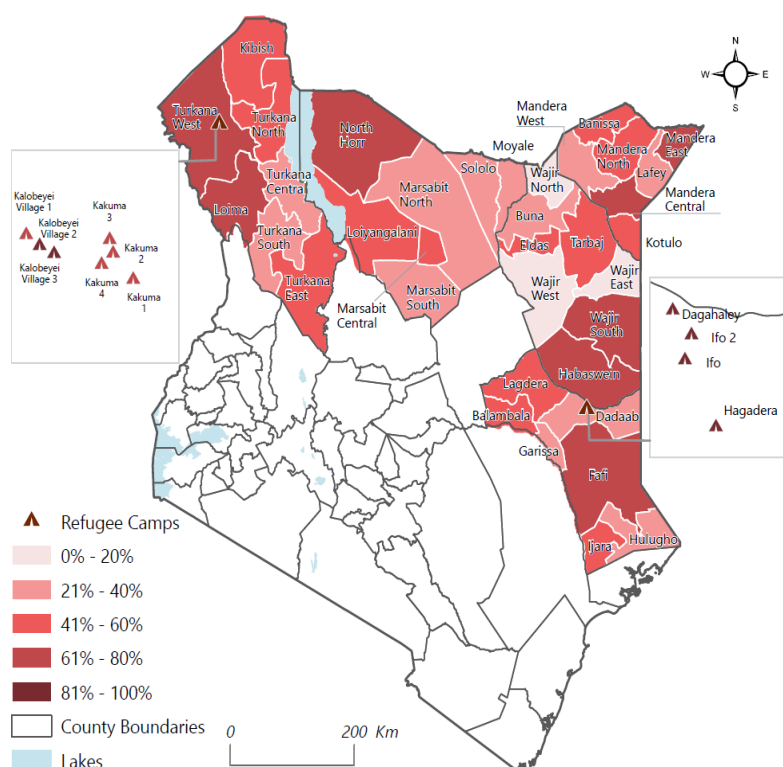
Key Findings from the 2026 Multi-Sectoral Needs Assessment

Publication: October 2026 - Data Collection: June 2026

KEY MESSAGES

- **Needs remained widespread across assessed households:** 97% were classified as being in need according to the 2026 Multi-Sectoral Needs Index (MSNI), including 59% in severe need.
- **Unrestricted cash was the most preferred assistance modality, selected as a first preference by 75% of households, followed by in-kind food (17%).** Households mainly expected assistance to address food-related needs, access to safe drinking water and lack of income.
- **Overall, 48% of assessed households reported receiving humanitarian assistance in the 12 months prior to data collection.** Among recipient households, 58% reported receiving unrestricted cash.
- **More than half (58%) of households felt that assistance reached those most in need.**

Households reporting receipt of humanitarian assistance in the 12 months prior to data collection, by locations (n=4,896)*



CONTEXT

Kenya's arid and semi-arid lands (ASALs) entered 2026 under continued humanitarian pressure following the below-average and erratic October–December 2025 short rains.¹ Poor rainfall contributed to crop losses, limited pasture regeneration and livestock losses. By early 2026, approximately 3.3 million people were estimated to be food insecure, with high needs reported in Mandera, Wajir, Garissa, Turkana and Marsabit.² Although the March–May long rains improved water and pasture conditions, depleted herds, previous livelihood losses and high costs continued to constrain household recovery.³

Refugee households faced distinct pressures. As of August 2026, Kenya hosted close to one million refugees and asylum-seekers, mainly in Dadaab, Kakuma and Kalobeyei.⁴ Limited livelihoods, reliance on humanitarian assistance, and changes in aid policy and targeting constrained households' ability to meet basic needs.⁵ Food security is one example of these wider challenges, with recent IPC findings estimating that around 351,000 refugees were facing Crisis or worse acute food insecurity (IPC Phase 3 or above).⁶

With needs remaining high and resources constrained, understanding households' experiences and preferences is important. This factsheet examines assistance receipt, adequacy, preferred modalities, perceived targeting and reported difficulties associated with assistance.

METHODOLOGY

The 2026 Multi-Sectoral Needs Assessment (MSNA) used a quantitative household survey to assess humanitarian needs among refugee, host and affected populations in selected locations in Kenya. Data were collected through 4,896 face-to-face household interviews between 9 and 25 June 2026, including 3,796 interviews with host and affected populations and 1,100 with refugee households.

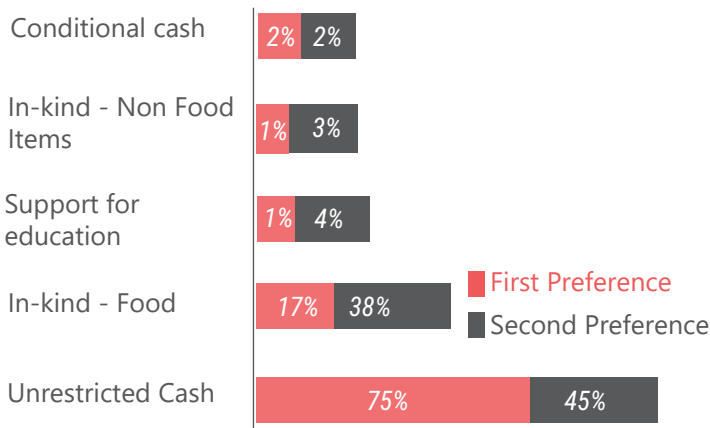
The assessment covered refugee households in Dadaab and Kakuma camps and Kalobeyei settlement; host community households in Garissa and Turkana counties; and affected households in Wajir, Mandera and Marsabit counties.

Findings are representative at a 95% confidence level with a $\pm 10\%$ margin of error at the sub-county level for host and affected populations and at the sub-camp level for refugee populations. Results are representative only of the assessed populations and locations.

* Findings reflect household-reported receipt of assistance among assessed populations and should not be interpreted as programme coverage

HUMANITARIAN ASSISTANCE PREFERENCES AND PRIORITY NEEDS

Most reported type of humanitarian assistance households would prioritise, by % of households*



Priority needs households would address, by first choice of preferred assistance modality.*

	Unrestricted Cash	Conditional Cash	In-kind foods	In-kind NFIs
Lack of access to sufficient quantity or quality of food	66%	70%	83%	60%
Lack of access to safe water for drinking	46%	24%	33%	55%
Lack of (or not enough) income to sustain life	34%	28%	25%	24%
Lack of access to lighting and cooking fuel	15%	15%	12%	20%

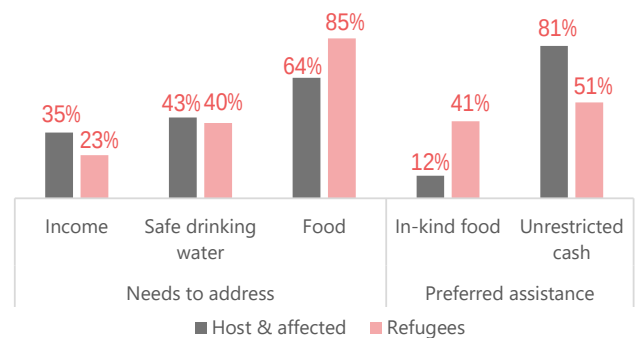
89%

Among households preferring any kind of cash assistance (n=4,337) **of households prefer mobile money as a way of receiving cash assistance**

Unrestricted cash was the most preferred first priority assistance modality (75%), while in-kind food was more prominent as a second preference (38%) than a first (17%). Preferences varied across locations, particularly in refugee settings. In Dadaab, 68% preferred unrestricted cash, compared with 26% in Kakuma and 39% in Kalobeyei, where in-kind food was preferred by 61% and 43%, respectively. **These differences highlight the importance of considering location-specific preferences when determining appropriate assistance modalities.**

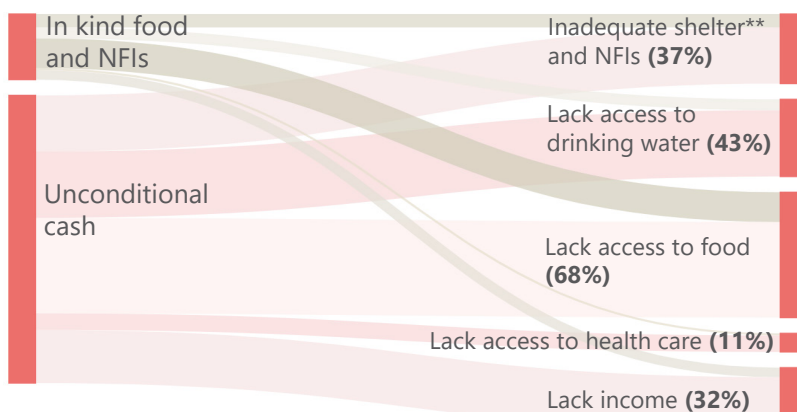
Food-related needs were linked to multiple modalities, including in-kind food (83%), restricted cash (70%) and unrestricted cash (66%), suggesting that households may consider different forms of assistance suitable for addressing the same priority need.

First priority household needs, preferred assistance modalities and by population



Food, safe drinking water and income were the main needs households expected assistance to address, although these varied by preferred modality. This suggests that households may expect assistance to address multiple needs, highlighting the importance of considering both the assistance modality and the needs it is intended to meet.

FIRST PREFERRED ASSISTANCE MODALITIES AND PRIORITY NEEDS*



For the mentioned modalities on the visual, lack of access to food (68%) was most commonly reported, followed by drinking water (43%), inadequate shelter/NFIs (37%), lack of income (32%) and healthcare (11%).

Households identified food, safe drinking water and income-related needs among the main priorities they would seek to address through assistance, although the needs varied by preferred assistance modality.

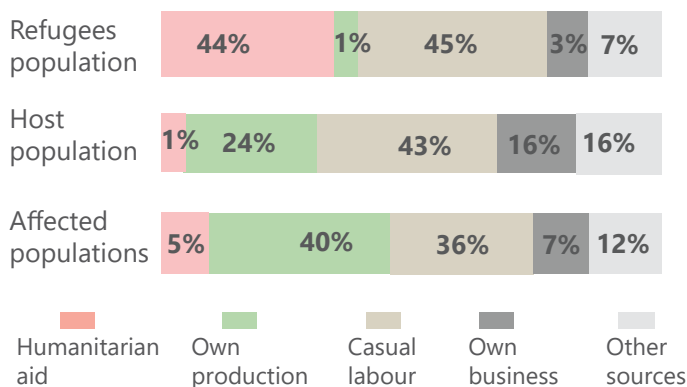
Note: The modalities and needs sections should be interpreted jointly to understand both what people need as assistance and the problems they aim to address. A single modality can be linked to multiple needs across affected populations. The thickness of the connections reflects the proportion of households expressing a given linkage.

*These are multiple answer questions, respondents could select multiple options hence the findings exceed 100%

** Inadequate Shelter and NFI needs combine gaps related to shelter and living space, household energy for lighting and cooking, safe and easy access to a clean toilet, clothing and footwear, bedding and blankets, and access to water and soap for laundry.

RECEIVED ASSISTANCE

Main source of household income in the 30 days prior to data collection



Humanitarian assistance was reported as the main source of income by 44% of refugee households, compared with 5% of affected households and 1% of host-community households. Host and affected households were more likely to rely on own production, business activities and other sources.

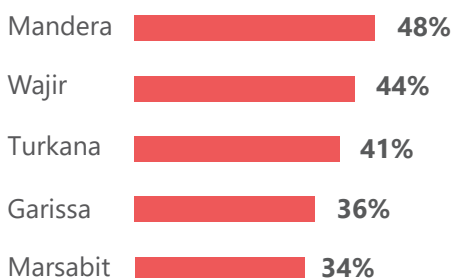
Households reporting receipt of humanitarian assistance in the previous 12 months

48% of assessed households reported receiving humanitarian assistance in the 12 months prior to data collection.

81% refugee households reported receiving assistance (n=878)

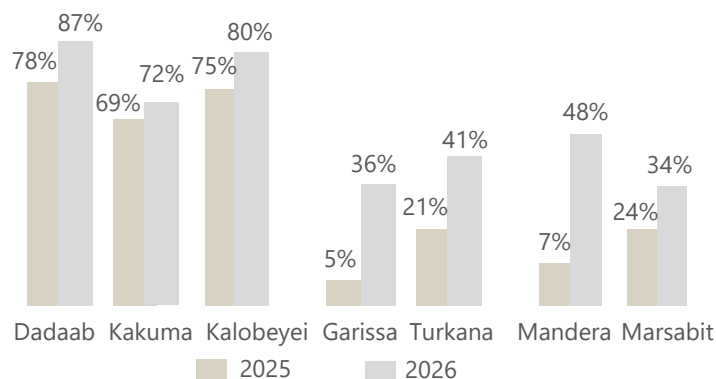


41% of host and affected households reported receiving assistance (n=1,664)



Reported receipt of humanitarian assistance also varied by population group and location, with refugee households (81%) more likely to report receiving assistance than host and affected households (44%). This difference should be understood within the different livelihood and assistance environments of the assessed populations, particularly the greater role of humanitarian assistance in refugee household incomes.

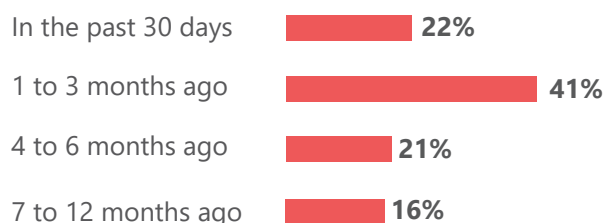
% of households reporting having received humanitarian assistance in the 12 months prior to data collection, by year



Wajir is excluded due to the absence of a comparable 2025 value.

Reported receipt of assistance increased across all comparable assessed locations between 2025 and 2026. The largest increases were observed in Mandera, from 7% to 48%, Garissa, from 5% to 36%, and Turkana, from 21% to 41%. Receipt remained comparatively high across refugee locations, reaching 87% in Dadaab, 80% in Kalobeyei and 72% in Kakuma in 2026. The increase occurred during a period of humanitarian and government scale-up of drought-response assistance.⁵ However, many households remain unreached, and assistance often does not fully meet recipients' needs.

% of households, by time since last receiving humanitarian assistance (n=2,542)



Nearly two-thirds (63%) of recipient households reported receiving assistance within the three months prior to data collection.

% of households reporting that received assistance in the past 12 months - per main type of received assistance (n=2,542)*

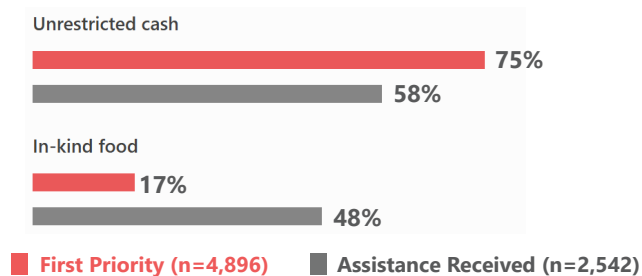
	Unrestricted cash	In-kind food	Conditional cash	In-kind NFIs
Refugee households	29%	73%	26%	9%
Host community households	62%	42%	2%	3%
Affected community households	79%	33%	0%	2%

Note: Comparisons with 2025 are broadly comparable due to similar timing and methodology. Findings are indicative of household-reported assistance receipt and should not be interpreted as programme coverage.

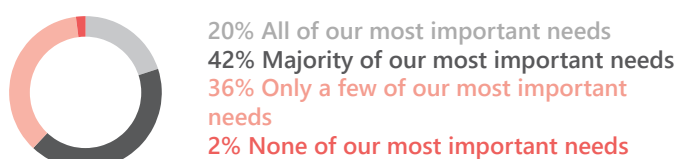
*These are multiple answer questions, respondents could select multiple options hence the findings exceed 100%

AID ALIGNMENT

Preferred versus received assistance modalities



Proportion of recipient households by extent to which assistance met their most important needs (n=2,542):

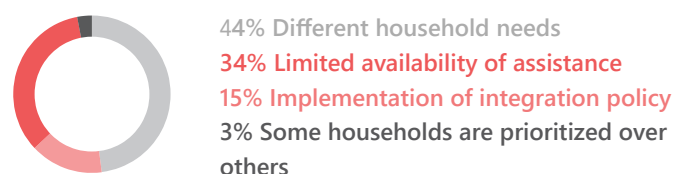


Overall, 62% of recipient households reported that assistance met all or the majority of their most important needs. This was substantially higher in Garissa (86%) than in Turkana (35%) among host populations, and higher in Dadaab (87%) than in Kalobeyei (43%) and Kakuma (33%) among refugee households.

Perceptions of assistance targeting

58% of all assessed households (n=4,896) households feeling that assistance goes to the people who need it most

Differences in household needs (44%) and limited availability of assistance (34%) were the most commonly perceived reasons for variations in assistance received. While most households perceived humanitarian assistance as reaching those most in need, over one-third expressed a different view. This highlights the importance of transparent targeting criteria and accessible feedback mechanisms to address concerns about assistance allocation.



Endnotes

1. NDMA, [National Drought Early Warning Bulletin](#), January 2026
2. IPC, [Acute Food Insecurity Situation](#), March 2026
3. UN, [How drought is reshaping life across northern Kenya](#), April 2026
4. UNHCR, [Refugee population](#), September 2026
5. NDMA, [Cash transfer to households in ASALs](#), September 2025
6. IPC, [Acute Food Insecurity Situation](#), September 2026

*These are multiple answer questions, respondents could select multiple options hence the findings exceed 100%

OUTCOME

Reported improvements associated with assistance received (n=2,542)*

	Improved food consumption	77%
	Access to safe drinking water and sanitation	25%
	Access to healthcare and ability to cover health-related expenses	11%
	Ability to maintain adequate shelter or housing conditions	10%
	Improved access to nutrition (treatment services)	9%
	No area is better than it would have been without the assistance	7%
	Ability to keep children in school and cover education related costs	6%

% of recipient households (n=2,542) reporting difficulties associated with assistance (16% reported at least one)*

Increased dependency on assistance	9%
Tensions within community members	2%
Tensions within household	2%
Increased prices for essential items	1%
Reduced opportunities to work	1%

Reported difficulties were generally limited, though increased dependency was more common in Kakuma and Kalobeyei. In Turkana host communities, some households also reported dependency and tensions within their households.

AID QUALITY

Perceived quality of assistance received, among households that received assistance

	Better quality than expected	As expected	Worse than expected	No expectation
Refugee HHs (n=878)	8%	73%	16%	4%
Host community HHs (n=624)	43%	45%	4%	8%
Affected community HHs (n=1040)	35%	42%	7%	16%

About REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, Acted and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).