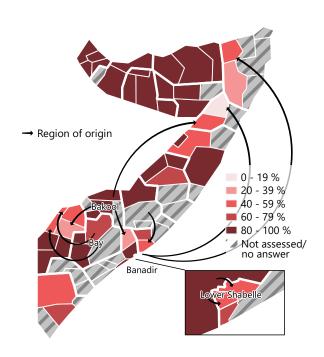
# **DETAILED SITE ASSESSMENT**

FEBRUARY, 2023 SOMALIA

#### **KEY MESSAGES**

- 68% of the assessed sites reported that the high cost of nutrional services and/or medicine such as nutritional supplements was a barrier to accessing nutrition services in Somalia.
- Of the 66% of the sites that reported having access to a market where Non-Food Items (NFIs) and/or construction materials can be purchased, 51% reported that people with disabilities faced barriers to accessing NFIs and/or construction materials.
- Of the 93% of sites that reported that residents had problems related to access to water, 42% of the assessed sites reported that women and 35% reported that marginalised clan members did not have access to water points.

### **REGION OF ORIGIN MAP**



 $<sup>^{\</sup>rm 1}$  IPC Acute Food Insecurity and Acute malnutrition analysis, September 2022.

### **CONTEXT & RATIONALE**

Conflict, droughts, floods, and limited development have driven protracted displacement across Somalia. The failure of multiple rainy seasons in 2021 and 2022 has led to widespread crop loss, livestock deaths, and further mass displacement.<sup>1</sup>

The Protection and Return Monitoring Network reported 1,816,470 internally displaced persons (IDPs) in the year 2022.<sup>2</sup> According to the Multi-Sectoral Needs Assessment (MSNA) 2022 preliminary results, drought (reported by 50% of interviewed households - HHs), conflict in the community (16%) and lack of livelihood opportunities (7%) are the main drivers of displacement.<sup>3</sup> Additionally, IDPs from minority clans, or those with weak social connections in host communities, are at particular risk of marginalisation, exploitation, aid exclusion, and eviction.<sup>4</sup> This factsheet provides a snapshot of needs across different sectors in Somalia to inform humanitarian programming.

#### **ASSESSMENT OVERVIEW**

The Detailed Site Assessment (DSA) was initiated in coordination with the Camp Coordination and Camp Management (CCCM) cluster to provide the humanitarian community with up-to-date information on the location of IDP sites, the conditions and capacity of the sites, and an estimate of the severity of the humanitarian needs of residents.

The DSA aims to provide a reliable evidence base to inform humanitarian responses in IDP sites, by collecting data on the locations of sites, estimated IDP population, levels of access to, availability, and quality of, basic services in IDP sites.

Data collection for the current round of the DSA took place from 30 November 2022 to 9 February 2023 in Somalia and assessed 3,028 sites across 49 districts. The reported findings indicate 642,061 households with 3,018,700 individuals living in the assessed IDP sites in Somalia.\*





<sup>&</sup>lt;sup>2</sup> Protection and Return Monitoring Network (PRMN), UNHCR, 2022.

<sup>&</sup>lt;sup>3</sup> REACH, Multi Sectoral Needs Assessment, 2022.

<sup>&</sup>lt;sup>4</sup> UNOCHA, Humanitarian Needs Overview, January 2022.

<sup>\*</sup>PRMN data indicates 120,027 IDPs displaced owing to conflict post the DSA VI data collection in February 2023.

### **METHODOLOGY**

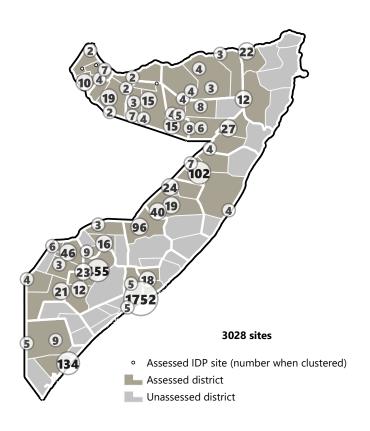
Findings are based on key informant (KI) interviews with purposefully sampled KIs. In each assessed settlement, 3 to 4 KI interviews were conducted by REACH and CCCM partners' enumerators in accessible locations. These interviews from 3 to 4 KIs per site were aggregated and findings are reported at the site level. In case of non-consensus among KIs from an IDP site for a specific variable, "N/A" is used. Targeted areas within districts were determined based on the October 2022 IDP master list which lists a total of 3,028 IDP sites across all regions of Somalia. Following the identification of target urban areas, REACH located IDP settlements using very high spatial resolution (VHSR) satellite imagery, and triangulated information about IDP sites location by contacting the lowest level of governance\*.

The methodology for the sixth round of the DSA was developed in close consultation with clusters and partner organisations and updated to improve the quality and reliability of data collected regarding IDP settlement locations, estimated size of resident populations, and the severity of humanitarian needs. The full methodology and complete list of indicators can be found in the <u>Terms of Reference</u>, available on the REACH resource centre.

#### **LIMITATIONS**

All findings presented in this factsheet relate to the proportion of assessed sites with a given response as reported by Kls, and should be considered indicative of, rather than generalisable to, the humanitarian situation in assessed sites. Therefore, the type of potential bias related to the choice of the Kl in the analysis of data and presentation of results must be acknowledged. In addition, for some sectors, such as food security, health, and nutrition, site-level data collection does not allow for the inclusion of outcome indicators. Hence, severity scores for such sectors are based on contributing/underlying factors (e.g., access and availability).

### ASSESSMENT COVERAGE



District	Surveys
Afgooye	26
Afmadow	14
Baardheere	21
Baki	5
Balcad	2
Baydhaba	467
Belet Weyne	96
Belet Xaawo	4
Berbera	2
Borama	8
Bossaso	22
Burco	16
Burtinle	4
Buuhoodle	19
Cabudwaaq	17
Cadaado	7
Caynabo	9
Ceel Afweyn	7
Ceel Barde	3
Ceel Waaq	4
Ceerigaabo	7
Deyniile	831
Dharkenley	12
Dhuusamarreeb	59
Diinsoor	12

District	Surveys
Doolow	2
Gaalkacyo	102
Galdogob	7
Garbahaarey	3
Garoowe	27
Hargeysa	23
Hobyo	4
Jowhar	17
Khada	882
Kismaayo	134
Laas Caanood	12
Laasqoray	3
Lughaye	8
Luuq	46
Marka	5
Owdweyne	13
Qansax Dheere	10
Qardho	12
Sheikh	1
Waajid	9
Wanla Weyne	5
Xudun	8
Xudur	16
Zeylac	5

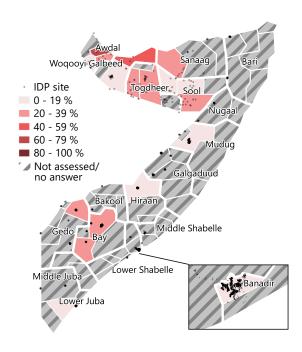
<sup>\*</sup> District Office, Mayor's Office, etc.





### **FOOD SECURITY & LIVELIHOODS**

Proportion of sites where the nearest functioning market place or grocery store is more than an hour away using regular mode of transportation:<sup>7</sup>



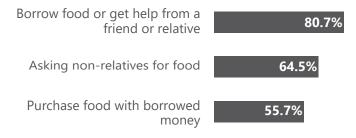
Proportion of assessed sites with reportedly no land 70.5% available to residents for 70.5% raising livestock:7

Proportion of assessed sites with reportedly no land available to residents for agriculture/cultivation purposes:<sup>7</sup>

Proportion of assessed sites by share of women involved in small scale crop production:<sup>8</sup>



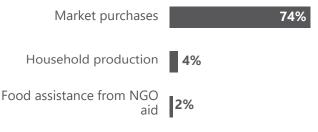
Most commonly reported strategies used by most residents in the assessed sites to cope with the lack of food (in the 30 days prior to data collection):<sup>5,6,7</sup>



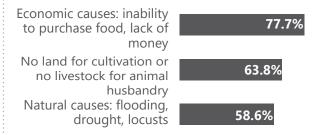
Proportion of assessed sites where food from markets reportedly was inaccessible:<sup>7</sup>



Most commonly reported primary sources of food, by % of assessed sites:<sup>5,6,7</sup>



Most commonly reported reasons why most residents in the assessed sites could not access food, by % of assessed sites where many or all residents were reportedly not able to access sufficient food (14%):<sup>5,6,7</sup>



<sup>&</sup>lt;sup>5</sup> Respondents could select multiple options. Applies to all questions with reference '5'





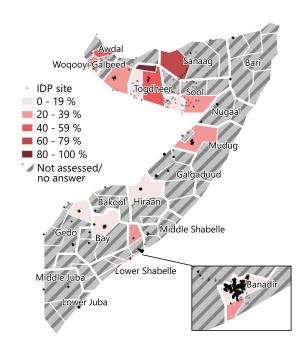
<sup>&</sup>lt;sup>6</sup> This relates to the most common responses. Applies to all questions with reference '6'.

<sup>&</sup>lt;sup>7</sup> Standard 4.2 - Site service assessment. Applies to all questions with reference '7'.

<sup>8</sup> All or almost all (76%-100%), Many (51%-75%), Some (26%-50%), A few (1%-25%), None (0%). Applies to all questions with reference '8'.

# **\$ HEALTH**

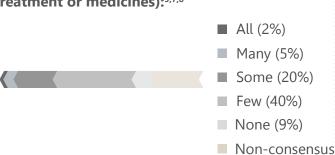
Proportion of sites where it reportedly takes more than an hour to reach the nearest healthcare facility using a regular mode of transportation:<sup>7</sup>



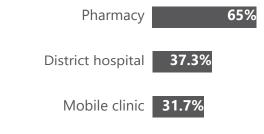
Proportion of assessed sites by share of women and girls unable to access adequate healthcare (e.g. treatment or medicines):<sup>5,7,8</sup>



Proportion of assessed sites by share of men and boys unable to access adequate healthcare (e.g. treatment or medicines):5,7,8



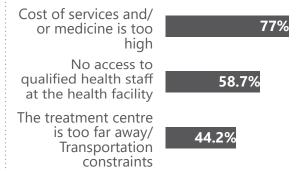
Most commonly reported types of health facilities available in and around (within 15 minutes radius) the assessed sites, by % of assessed sites:<sup>5,6,7</sup>



Most commonly reported types of health services available in and around (within 15 minutes radius) the assessed sites, by % of assessed sites:<sup>5,6,7</sup>



Most commonly reported barriers faced by most residents in the assessed sites when attempting to access health services or treatment, by % of assessed sites:<sup>5</sup>



Proportion of assessed sites where all or almost all women reportedly gave birth while attended by unskilled personnel or with no help at all in the 30 days prior to data collection:<sup>7</sup>

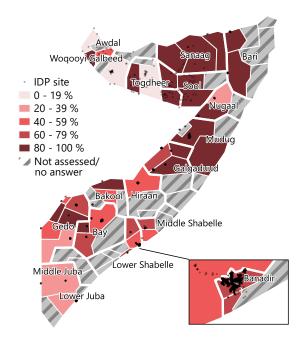
1.1%

among site KIs

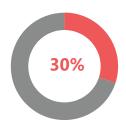
(25%)

### **PROTECTION**

designated spaces where women and girls can movement during the day were reported: gather:



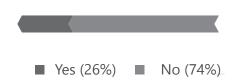
Proportion of sites reportedly having no Proportion of assessed sites where restrictions on



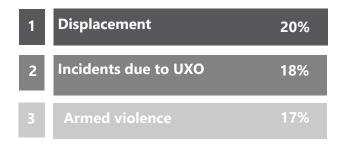
Proportion of assessed sites where restrictions on movement during the night were reported:



Presence of child-friendly spaces in the assessed sites:



Most commonly reported protection incidents, by % of assessed sites\*:5



Proportion of assessed sites where women or girls were the target victims of armed violence, by % of sites where there was reported armed violence (17%):

Proportion of assessed sites where people with disabilities were the target victims of displacement (20%):

Proportion of assessed sites where a minority clan member was the target victim of incidents due to UXO, by % of sites where there was reported **UXO** incidents (18%):

38%

22%

**17%** 

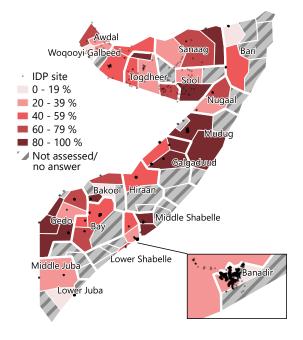
<sup>\*35.5%</sup> reported no protection incident had occurred and 21% did not





### **M** SHELTER & NON-FOOD ITEMS

Proportion of sites where residents had access to a market and were within an acceptable distance from shelter and non-food items (SNFI) market:



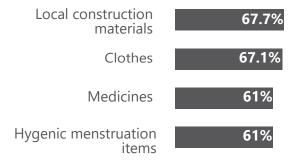
**Proportion of assessed sites reportedly** not having access to markets selling NFIs/construction materials within or around (15 minutes radius) the site:7

34%

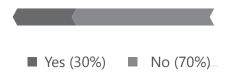
Proportion of assessed sites where minority people<sup>10</sup> reportedly faced barriers to accessing NFIs:

10%

Most commonly reported types of NFIs available at markets, by % of assessed sites where markets were reportedly available within or around the sites (66%):5,6,7



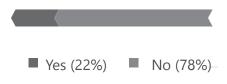
assessed sites:9



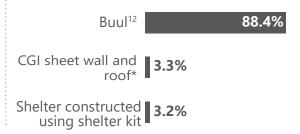
Presence of public lighting throughout the Proportion of assessed sites where new IDPs<sup>11</sup> have reportedly received NFI assistance in the 3 months prior to data collection, by % of sites where new IDPs had reportedly arrived (29%):6



Occurrence of floods in sites in the 6 months: Most commonly reported types of shelters in the prior to the data collection:9



assessed sites, by % of assessed sites:6,7







<sup>\*</sup>CGI: Compact Graphite Iron

Standard 3.1 - A safe and secure environment. Applies to all questions with reference '9'.

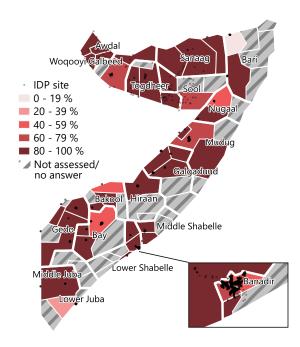
<sup>10</sup> Minority clan members (persons who do not belong to any of the four major clans in Somalia). Applies to all questions with reference '10'.

<sup>&</sup>lt;sup>11</sup> New IDPs: IDPs who have arrived at the site less than 3 months before data collection.

Buul is an emergency shelter of rotund shape made with local and recycled materials like twigs and branches, having plastic sheets and blankets as cover.

### **HOUSING, LAND & PROPERTY**

Proportion of sites with available security of tenure:



Proportion of assessed sites where encroachment and boundary disputes, confiscation of property or damaged, and inadequate accommodation of property was reported:<sup>5</sup>



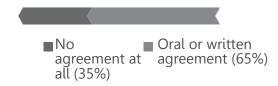
Proportion of assessed sites where an eviction notice has been issued in the 3 months prior to data collection:



Proportion of assessed sites where KIs reported perceiving a very high risk of forced evictions:

6.5%

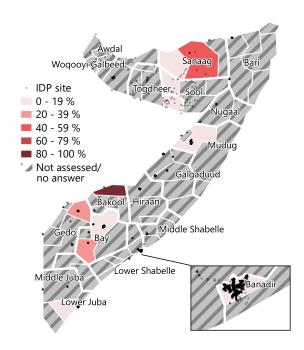
Presence of agreements between the site owner and the residents, by % of sites where the owner is known (96%):





# **WATER, SANITATION & HYGIENE**

Proportion of sites where it reportedly takes more than an hour to reach the nearest water source using a regular mode of transportation:<sup>7</sup>



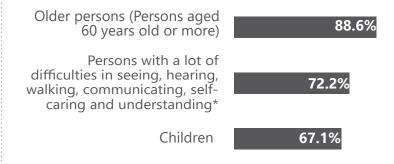
Proportion of assessed sites where residents reportedly have access to an unimproved drinking water source<sup>13</sup> only:

Proportion of assessed sites where no households reportedly have access to functioning handwashing facilities with water and soap:<sup>7</sup>

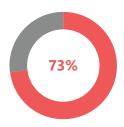
Proportion of assessed sites where residents reportedly have no access to functional sanitation facilities or they are overcrowded, by % of assessed sites with sanitation barriers (97%):



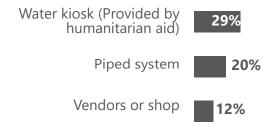
Most commonly reported groups facing impediments in accessing latrines, by % of sites with existing latrines (88%):<sup>5,6,7</sup>



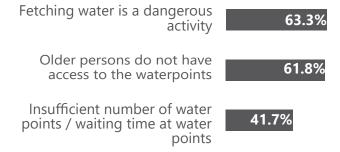
Proportion of assessed sites where none of the latrines reportedly are accessible for persons with disabilities, by % of assessed sites with existing latrines (88%):<sup>7</sup>



Most commonly reported primary sources of water, by % of assessed sites: 5,6,7



Most commonly reported barriers to access water, by % of assessed sites where residents reportedly face water access barriers (93%):<sup>5,6,7</sup>



<sup>\*</sup> For reasons other than the language spoken.

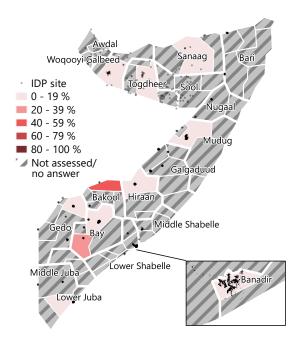




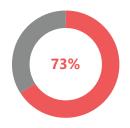
<sup>&</sup>lt;sup>13</sup> Unimproved water sources: river, berkad, unprotected well.

# **EDUCATION**

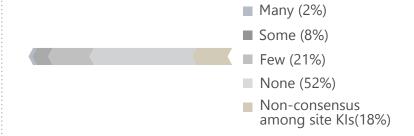
functioning education facility is more than an hour | facilities had no hand-washing facilities:7 away using a regular mode of transportation:7



Proportion of assessed sites where the nearest | Proportion of assessed sites where schools/learning



Proportion of assessed sites where one or more learning facilities present physical damage (walls, roof, floor damaged):7,8



Proportion of assessed sites by share of learning facilities reportedly not having gendersegregated latrines:7,8



**Proportion of assessed sites** reportedly having few or no sufficient furniture in learning facilities available:7

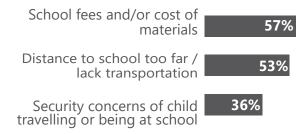
Proportion of assessed sites learning facilities where reportedly have no fences and clear demarcation:7

72%

Most commonly reported barriers to accessing education for girls, by % of assessed sites:<sup>5,6,7</sup>



Most commonly reported barriers to accessing education for boys, by % of assessed sites:5,6,7

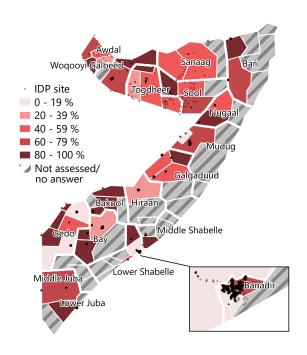






### **MUTRITION**

Proportion of sites where there is Mid-Upper Arm Circumference (MUAC)<sup>15</sup> screening by a community health worker:



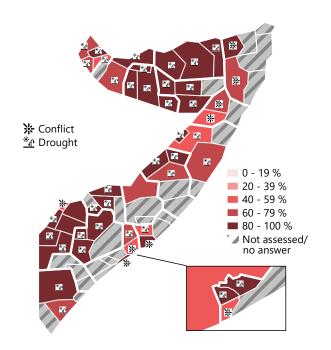
Most commonly reported barriers to accessing nutrition services, by % of assessed sites:<sup>5,6,7</sup>

68.4%	Cost of services and/or medicine is too high
50.9%	No access to qualified staff at the nutrition facility
48.8%	Nutrition facility/service not open
43%	The treatment centre is too far away/Transportation constraints

### **CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)**

for :

Most commonly reported reasons displacement, by % of assessed sites:



Proportion of assessed sites by reported type of site management: 5,6,14

1	Gatekeeper*	60.9%
2	Community Leader	58.2%
3	Residents themselves	42.4%

Proportion of assessed sites by committees reportedly available in the assessed sites:<sup>5,6</sup>

1	Women's committee	97.7%
2	Camp Management committee	93.9%
3	Resident's committee	78.8%



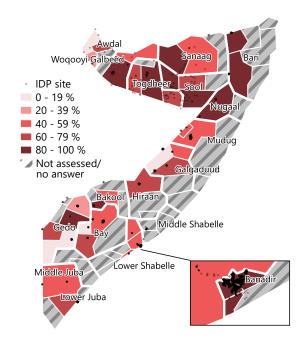


<sup>&</sup>lt;sup>14</sup> Standard 1.3 - Site management agency and team capacity. Applies to all questions with reference '14

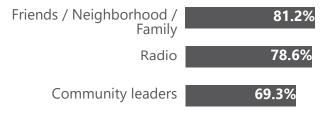
<sup>\*</sup> Gatekeepers are a diverse group "ranging from community leaders, to businessmen, to militias, to landlords/owners – some are from the IDP communities while others are not.

### ACCOUNTABILITY TO AFFECTED POPULATIONS

Proportion of assessed sites where residents reportedly have access to a feedback mechanism:16



Most commonly reported sources of information for persons with disabilities, by % of assessed sites:<sup>7,8,17</sup>



Proportion of assessed sites where women reportedly were more likely than other residents to be unwilling or unlikely to make use of the complaint feedback mechanisms:

**24%** 

Most commonly reported main sources of information used to receive information about humanitarian assistance, by % of assessed sites:<sup>5,6,17</sup>

1	Radio	85%
2	Friends / Neighborhood / Family	73.6%
3	Community leaders	65.6%

Most commonly reported barriers that most residents faced when trying to access humanitarian aid, by % of assessed sites:<sup>5,6,17</sup>

1	Lack Of Information	76.3%
2	Physically Unable To Access Points Of Aid Distribution	36.4%
3	Insecurity On Route To Points Of Aid Distribution	35.7%

### **ABOUT REACH**

Initiative facilitates 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).

reference 16.

The standard 2.2 - Information sharing with communities. Applies to all questions with reference 17.





<sup>&</sup>lt;sup>16</sup> Standard 2.3 - Feedback and complaints. Applies to all questions with