DETAILED SITE ASSESSMENT (DSA)

March 2022

SOMALIA

Context

The protracted humanitarian crisis in Somalia is multi-layered and complex. Limited development coupled with recurring climatic shocks, such as drought, riverine and flash-flooding, give rise to high levels of need among affected populations, while insecurity and incidents of conflict severely hinder access to humanitarian actors.[1] The majority of internally displaced persons (IDPs) reside in overcrowded shelters in densely populated urban areas, further increasing their exposure to the risks and impacts of COVID-19.

The Detailed Site Assessment (DSA) was initiated in coordination with the Camp Coordination and Camp Management (CCCM) cluster in order 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 humanitarian needs of residents. Data collection for the current round of the DSA took place from November 10th to December 20th, 2021 and assessed **2,986** IDP sites in 47 districts across Somalia.

Methodology

Findings are based on key informant (KI) interviews with purposefully sampled KIs who reported on the site level. In each assessed settlement, 3 to 4 KI interviews were conducted by REACH and CCCM partners' enumerators in accessible locations; detailed information on the KI profiles and a summary of the aggregation strategy can be found in Annex 1 at page 14 of this factsheet. In case of non consensus among KIs from a IDP site for a specific variable, "N/A" is used.

Targeted areas within districts were determined based on the October 2021 IDP master list which lists a total of 3,589 IDP sites across all regions of Somalia. Following identification of target urban areas, REACH located IDP settlement using very high spatial resolution (VHSR) satellite imagery, and triangulated information about IDP sites location by contacting the lowest level of governance.[2]

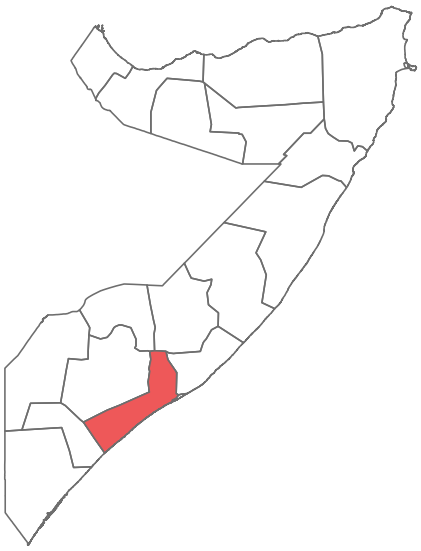
The methodology for the fitfh round of the DSA was developed in close consultation with clusters and partner organisations and updated to improve the quality and reliability of data collected regarding IDP settlement locations, estimated size of resident populations, and the severity of humanitarian needs. The severity scale goes from 1 to 4 and the severity phases are none/minimal, stress, severe, and extreme. For the list of indicators and the severity score calculations, see Annex 2 at page 15 of this factsheet. Where relevant, indicators have been aligned with the Minimum Standards for Camp Management, as specified in the footnotes. The full methodology and complete list of indicators can be found in the Terms of Reference, available on the REACH resource centre.

All findings presented on this factsheet relate to the proportion of assessed sites with a given response as reported by KIs, and should be considered **indicative** of, rather than generalisable to, the humanitarian situation in assessed sites. Therefore, it must be acknowledged the type of potential bias related to the choice of the KI in the analysis of data and presentation of results.

A complete list of the acronyms used in this factsheet can be found in Annex 1 at page 14 of this factsheet.

Lower Shabelle Region Key Findings

To provide a local, context-specific overview and allow more targeted responses, this section presents a summary of findings of assessed IDP sites in **Lower Shabelle** region.



Lower Shabelle Assessment information

58 assessed sites

10,322 reported households

46,398 reported individuals

Lower Shabelle Summary of severity scores

Overall cluster severity score and severity phase classification at regional level.[3]

Clusters	Severity Score	Severity Phase
Education	3	Severe
Food Security & Livelihoods	4	Extreme
Health	4	Extreme
Housing, Land & Property	4	Extreme
Nutrition*	2	Stress
Protection	4	Extreme
Shelter & Non-Food Items	3	Severe
Water, Sanitation & Hygiene	4	Extreme

Lower Shabelle Displacement figures

Average estimated number of IDP individuals that have reportedly arrived into a new site in Lower Shabelle in the 3 months prior to data collection: **32**

Average estimated number of IDP individuals that have reportedly departed from an old site in Lower Shabelle in the 3 months prior to data collection: **7**

Most commonly reported main reason for displacement:[4]

Conflict	59%
Drought	40%
Flooding	2%

Most commonly reported regions of origin of IDPs in the assessed sites:[4]

Lower Shabelle	79%
Bay	7%
Banadir	5%

[1] United Nations Office for the Coordination of Humanitarian Affairs (UNCOHA), Humanitarian Needs Overview – Somalia, January 2021, available here.
[2] District Office, Mayor's Office, etc.
[3] Please refer to Annexes 1 and 2 for the methodology and list of indicators included in the severity scores. Note: based on consultations with relevant clusters, indicators and thresholds have changed in 2022; hence, the severity scores cannot be directly compared with findings from previous years. Applies to all severity scores throughout the factsheet.
[4] Across all assessed sites.

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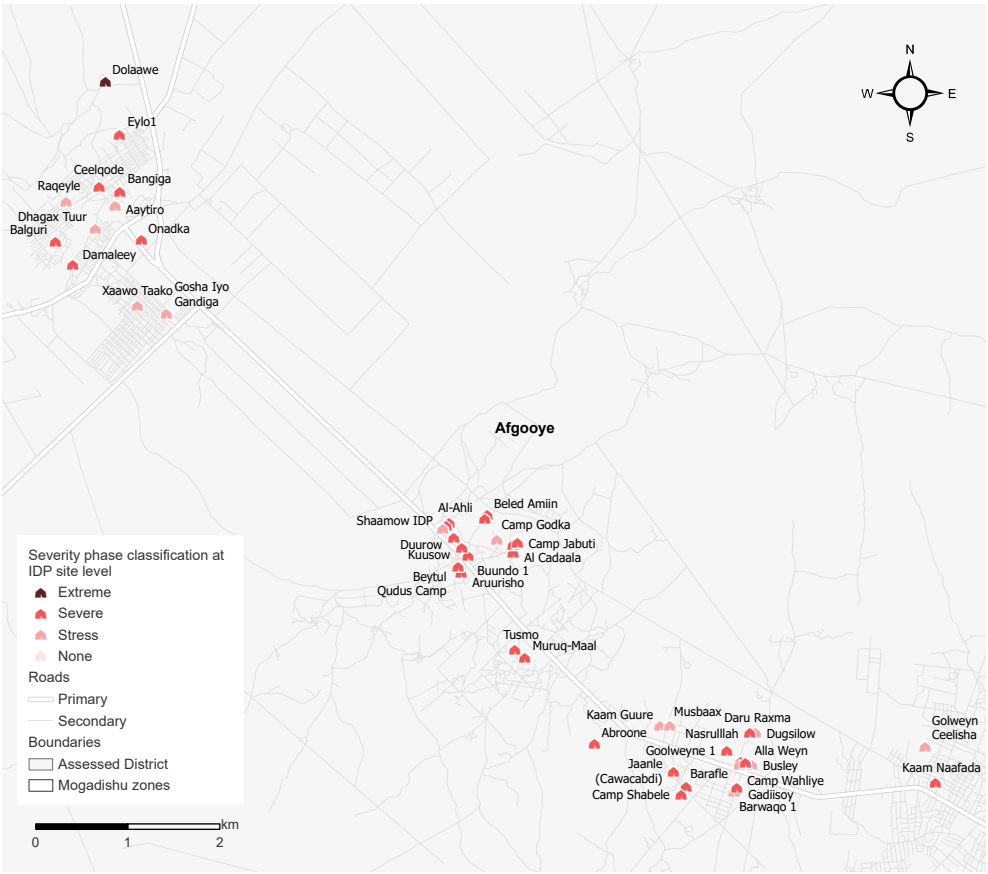
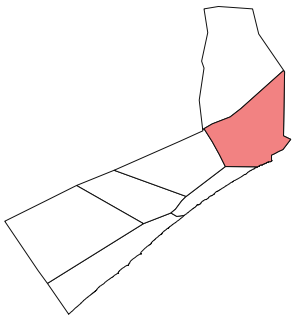
REACH Informing more effective humanitarian action

Afgooye district, Lower Shabelle region

COVERAGE AND SEVERITY MAP



To provide a local, context-specific overview and allow more targeted responses, this section presents a summary of findings of assessed settlements in **Afgooye** district only.



Afgooye Assessment information

47 assessed sites

9,208 reported households

41,968 reported individuals

Afgooye Summary of severity scores

Overall cluster severity score and severity phase classification at district level.[3]

Clusters	Severity Score	Severity phase
Education	3	Severe
Food Security & Livelihoods	4	Extreme
Health	4	Extreme
Housing, Land & Property	3	Severe
Nutrition*	2	Stress
Protection	4	Extreme
Shelter & Non-Food Items	3	Severe
Water, Sanitation & Hygiene	4	Extreme

Afgooye Displacement figures

Average estimated number of IDP individuals that have reportedly arrived into a new site in Afgooye in the 3 months prior to data collection: **37**

Average estimated number of IDP individuals that have reportedly departed from an old site in Afgooye in the 3 months prior to data collection: **8**

Most commonly reported main reason for displacement:[4]

Conflict	57%
Drought	40%
Flooding	2%

Most commonly reported district of origin of IDPs in the assessed sites:[4]

Qoryooley	30%
Afgooye	23%
Wanla Weyn	17%

Proportion of assessed sites where minority people[5] reportedly face impediments in accessing services: 11%

[5] Minority clan members (persons who do not belong on any of the four major clans in Somalia). Applies to all questions with reference '5'.

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FOOD SECURITY & LIVELIHOODS (FSL)

Proportion of assessed sites per FSL severity score:

None or minimal	Stress	Severe	Extreme
4%	6%	49%	40%

Proportion of assessed sites where food from markets was reportedly inaccessible:[8] 36%

Proportion of assessed sites where the nearest market was reportedly more than 60 minutes away on foot:[8] 0%

Most commonly reported primary sources of food:[6,7,8]

Market purchases	82%
Household production	16%
Borrowing/Debts	3%

Most commonly reported strategies used by most residents in the assesed sites to cope with lack of food:[6,7,8]

Borrow food or get help from a friend or	87%
Purchase food with borrowed money	87%
Asking non-relatives for food	74%

Most commonly reported reasons why most residents in the assessed sites cannot access food, by % of assessed sites where most people were reportedly not able to access sufficient food (83%):[6,7,8]

Economic causes	95%
No land or no livestock	87%
Natural causes	69%

HEALTH

Proportion of assessed sites per health severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	2%	98%

Proportion of assessed sites where the nearest healthcare facility is reportedly more than 60 minutes away on foot:[8] 23%

Proportion of assessed sites where all or almost all women reportedly gave birth while attended by unskilled personnel:[8] 0%

Most commonly reported types of health services available in the assessed sites:[6,7,8]

Vaccinations	70%
Basic primary healthcare	57%
Child healthcare	51%

Most commonly reported types of health facilities available in the assessed sites:[6,7,8]

Pharmacy	72%
District hospital	57%
NGO clinic	38%

NUTRITION

Proportion of assessed sites per nutrition severity score:*

None or minimal	Stress	Severe	Extreme
49%	38%	13%	N/A

Proportion of assessed sites where the nearest nutrition facility is reportedly more than 60 minutes away on foot:[8] 21%

Most commonly reported nutrition items received:[6,7,8]

Therapeutic and supplementary food	68%
MUAC tape	47%
Super cereal plus	38%

Most commonly reported barriers to accessing nutrition services:[6,7,8]

Transportation constraints	70%
Cost of services is too high	64%
Nutrition facility / service not open	38%

*Following cluster consultations, no critical indicators have been selected for nutrition, meaning that assessed sites cannot be classified as "extreme". This is because it is not possible to establish reliable Global Acute Malnutrition (GAM) using an area-level KI methodology.

PROTECTION

Proportion of assessed sites per protection severity score:

None or minimal	Stress	Severe	Extreme
2%	6%	15%	77%

Proportion of assessed sites reportedly having no child friendly spaces: 38%

Proportion of assessed sites reportedly having no designated spaces where women and girls can gather: 30%

Proportion of assessed sites where restrictions on movement during the day were reported: 51%

Most commonly reported types of incidents that occurred in the 3 months prior to data collection:[6,7]

Denied access to justice	38%
Don't know	36%
No protection incidents occurred	30%

Most commonly reported areas that people avoid for fear of insecurity :[6,7]

In shelters	72%
No areas that people avoid	49%
When leaving settlement/town	47%

[6] Respondents could select multiple options. Applies to all questions with reference '6'.
[7] This relates to most common responses. Applies to all questions with reference '7'.
[8] Standard 4.2 - Site service assessment. Applies to all questions with reference '8'.

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HOUSING, LAND & PROPERTY (HLP)

Proporiton of assessed sites per HLP severity score:

None or minimal	Stress	Severe	Extreme
2%	70%	9%	19%

Most commonly reported housing and land incidents occurred in the 3 months before data collection:[6,7]

Damaged and inadequate accommodation	62%
Don't know	36%
Encroachment and boundary disputes	4%

Proportion of assessed sites where KIs reported perceiving a very high risk of forced eviction: 0%

Most commonly reported types of land owner:[6,7]

Private owner	60%
Mixed landownership	28%
Local authority / government	11%

In those assessed sites where the site owner is known (98%), proportion where there reportedly is only an oral land tenure agreement, or no agreement at all, between the owner and the residents: 2%

SHELTER & NON-FOOD ITEMS (SNFI)

Proportion of assessed sites per SNFI severity score:

None or minimal	Stress	Severe	Extreme
4%	23%	72%	0%

Proportion of assessed sites where new IDPs[9] have reportedly received shelter assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (83%):[7] 0%

Proportion of assessed sites where new IDPs[9] have reportedly received NFI assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (83%):[7] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access NFI: 0%

Most commonly reported types of shelters:[6,7,10]

Buul	57%
CGI sheet wall and roof	26%
Mud and stick wall with CGI roof	10%

Proportion of assessed sites reportedly having access to markets selling NFIs within a 60 minutes walk:[8] 55%

Most commonly reported types of NFIs available at markets, by % of assessed sites where markets were reportedly available (55%):[6,7,8]

Medicines	96%
Local construction materials	92%
Clothes	85%

WATER, SANITATION & HYGIENE (WASH)

Proportion of assessed sites per WASH severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	21%	79%

Proportion of assessed sites where the nearest functioning water source is reportedly more than 60 minutes away on foot:[8] 9%

Most commonly reported primary sources of water:[6,7,8]

Water kiosk	54%
Piped system	32%
Vendors or shop	5%

Proportion of assessed sites where most residents reportedly have only access to an unimproved water source[11] and do not treat water:[8] NA

Most commonly reported barriers to access water, by % of assessed sites where most residents reportedly face water access barriers (85%):[6,7,8]

Waiting time at water points	65%
Water is too expensive	60%
Not enough container to store the water	53%

Proportion of assessed sites where the nearest functional latrine is reportedly more than 60 minutes away on foot:[8] 0%

Proportion of assessed sites where latrines are reportedly not accessible for persons with disabilities:[8] 35%

Most commonly reported strategies of disposing solid waste :[6,7,8]

Safely managed	94%
Collected and burnt in open spaces	81%
Collected and disposed in open grounds	28%

Most commonly reported groups facing impediments in accessing latrines:[6,7,8]

Older persons	96%
Persons with disabilities	92%
Children	85%

Proportion of assessed sites where many or all households reportedly have access to functioning hand-washing facilities with water and soap:[8] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access sanitation facilities: 7%

[9] New IDPs: IDPs who have arrived less than 3 months before data collection.

[10] Standard 3.2 - An appropriate environment. Applies to all questions with reference '10'.

[11] Unimproved water source: river, berkad, unprotected well.

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EDUCATION

Proportion of assessed sites per education severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	94%	6%

Proportion of assessed sites where the nearest education facility is reportedly more than 60 minutes away on foot:[8]

Most commonly reported types of schools available where children reportedly attend classes regularly:[6,7,8]

Primary	62%
Basic literacy	9%

Most commonly reported barriers accessing education for girls:[6,7,8]

School fees and/or cost of materials	98%
Distance to school	72%
Security concerns	68%

Most commonly reported barriers accessing education for boys:[6,7,8]

School fees and/or cost of materials	100%
Distance to school	75%
Security concerns	62%

Camp Coordination and Camp Management*

Most commonly reported types of site management:[6,7,12]

Residents themselves	62%
No management	53%
Community Leader	26%

Most commonly reported types of committees that are available in the assessed sites:[6,7,12]

Womens' committee	96%
Camp Management Committee	92%
Elder meeting	70%

Proportion of assessed sites where women are reportedly part of the decision making committee:[13]

Proportion of assessed sites where minority people[5] reportedly face barriers to access services:

Accountability to Affected Populations (AAP)*

Most commonly reported main sources of information used to receive information about humanitarian services:[6,7,14]

Radio	100%
Friends / Neighbourhood / Family	60%
Community leaders	23%

Most commonly reported sources of information for persons with disabilities:[6,7,14]

Radio	96%
Friends / Neighbourhood / Family	94%
Community leaders	28%

Most commonly reported barriers accessing humanitarian assistance:[6,7]

Lack of information	37%
No problems faced	32%
Don't know	16%

Proportion of sites where residents reportedly have access to a feedback mechanism:[15]

Proportion of assessed sites where minority people[5] are reportedly unwilling or unlikely to make use of complaints feedback mechanisms:

COVID-19 Knowledge, Attitude, and Practices (KAP)*

Proportion of assessed sites where most people reportedly think of COVID-19 as an important issue:

Yes	51%
No	49%

Most commonly reported actions taken by most people in the assessed sites to prevent the spread of COVID-19:[6,7]

Praying to god	51%
Wearing a face mask	32%
Keeping surfaces clean	32%

* The indicators for CCCM, COVID-19 KAP, and AAP are not part of the severity calculations across the sectors. Hence, the CCCM, COVID-19, and AAP sections in this factsheet do not present the severity scores.

[12] Standard 1.3 - Site management agency and team capacity. Applies to all questions with reference '12'.

[13] Standard 2.1 - Community participation. Applies to all questions with reference '13'.

[14] Standard 2.2 - Information sharing with communities. Applies to all questions with reference '14'.

[15] Standard 2.3 - Feedback and complaints. Applies to all questions with reference '15'.

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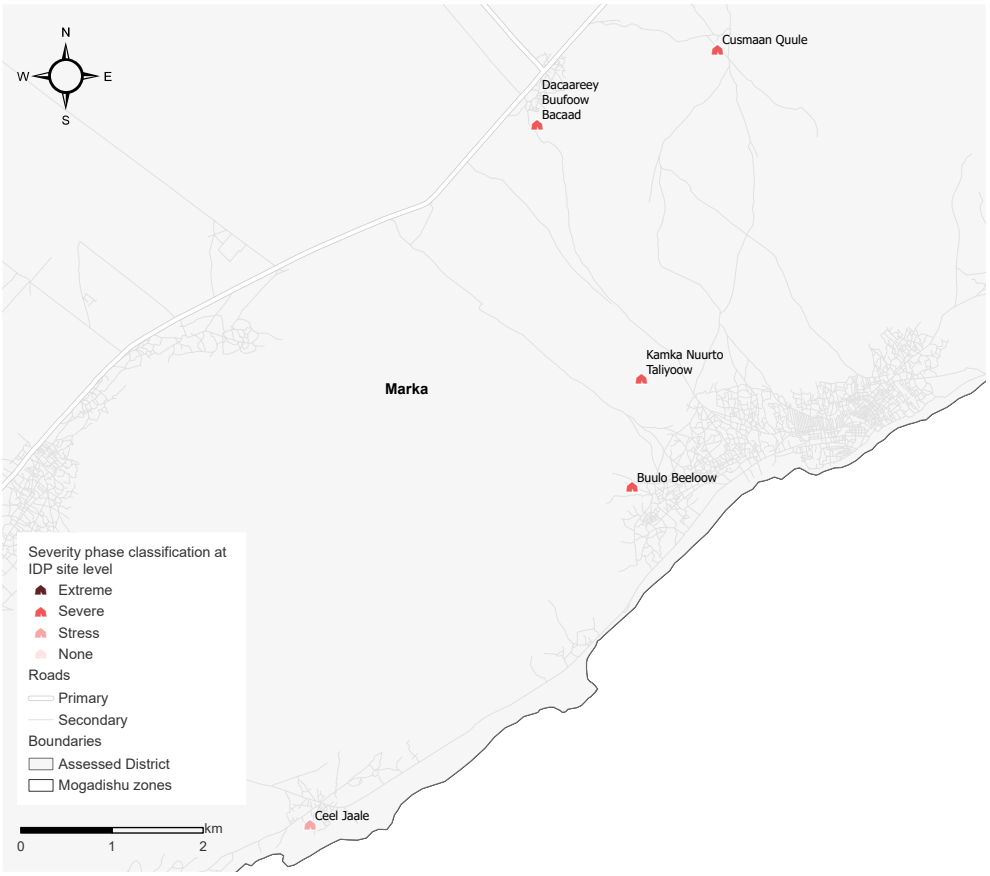
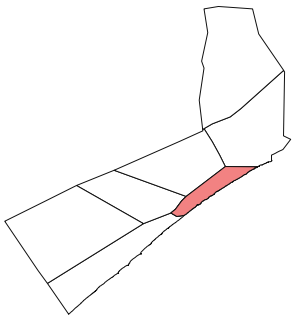
Marka district, Lower Shabelle region

COVERAGE AND SEVERITY MAP



To provide a local, context-specific overview and allow more targeted responses, this section presents a summary of findings of assessed settlements in **Marka** district only.



Marka Assessment information

5 assessed sites

568 reported households

2,859 reported individuals

Marka Summary of severity scores

Overall cluster severity score and severity phase classification at district level.[3]

Clusters	Severity Score	Severity phase
Education	3	Severe
Food Security & Livelihoods	4	Extreme
Health	4	Extreme
Housing, Land & Property	4	Extreme
Nutrition*	1	None
Protection	4	Extreme
Shelter & Non-Food Items	3	Severe
Water, Sanitation & Hygiene	4	Extreme

Marka Displacement figures

Average estimated number of IDP individuals that have reportedly arrived into a new site in Marka in the 3 months prior to data collection: **15**

Average estimated number of IDP individuals that have reportedly departed from an old site in Marka in the 3 months prior to data collection: **8**

Most commonly reported main reason for displacement:[4]

Conflict	**60%**
Drought	**40%**

Most commonly reported district of origin of IDPs in the assessed sites:[4]

Marka	**100%**

Proportion of assessed sites where minority people[5] **reportedly face impediments in accessing services:** **40%**

[5] Minority clan members (persons who do not belong on any of the four major clans in Somalia). Applies to all questions with reference '5'.

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FOOD SECURITY & LIVELIHOODS (FSL)

Proportion of assessed sites per FSL severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	20%	80%

Proportion of assessed sites where food from markets was reportedly inaccessible:[8] 20%

Proportion of assessed sites where the nearest market was reportedly more than 60 minutes away on foot:[8] 33%

Most commonly reported primary sources of food:[6,7,8]

Market purchases	100%

Most commonly reported strategies used by most residents in the assesed sites to cope with lack of food:[6,7,8]

No action was taken	75%
Asking non-relatives for food	25%
Don't know	25%

Most commonly reported reasons why most residents in the assessed sites cannot access food, by % of assessed sites where most people were reportedly not able to access sufficient food (80%):[6,7,8]

Security issues	100%
No land or no livestock	25%
Functional market not available	25%

HEALTH

Proportion of assessed sites per health severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	20%	80%

Proportion of assessed sites where the nearest healthcare facility is reportedly more than 60 minutes away on foot:[8] 25%

Proportion of assessed sites where all or almost all women reportedly gave birth while attended by unskilled personnel:[8] 0%

Most commonly reported types of health services available in the assessed sites:[6,7,8]

Basic primary healthcare	80%
Vaccinations	80%
Child healthcare	60%

Most commonly reported types of health facilities available in the assessed sites:[6,7,8]

First aid post	80%
Mobile clinic	60%
NGO clinic	20%

NUTRITION

Proportion of assessed sites per nutrition severity score:*

None or minimal	Stress	Severe	Extreme
100%	0%	0%	N/A

Proportion of assessed sites where the nearest nutrition facility is reportedly more than 60 minutes away on foot:[8] 25%

Most commonly reported nutrition items received:[6,7,8]

Therapeutic and supplementary food	100%
Super cereal plus	80%
Therapeutic milk products	80%

Most commonly reported barriers to accessing nutrition services:[6,7,8]

Nutrition facility / service not open	80%
No issues	20%
Staff refuse treatment	20%

*Following cluster consultations, no critical indicators have been selected for nutrition, meaning that assessed sites cannot be classified as "extreme". This is because it is not possible to establish reliable Global Acute Malnutrition (GAM) using an area-level KI methodology.

PROTECTION

Proportion of assessed sites per protection severity score:

None or minimal	Stress	Severe	Extreme
0%	20%	0%	80%

Proportion of assessed sites reportedly having no child friendly spaces: 20%

Proportion of assessed sites reportedly having no designated spaces where women and girls can gather: 0%

Proportion of assessed sites where restrictions on movement during the day were reported: 100%

Most commonly reported types of incidents that occurred in the 3 months prior to data collection:[6,7]

Illegal or forced taxation	80%
Don't know	80%
Incidents due to UXO	20%

Most commonly reported areas that people avoid for fear of insecurity :[6,7]

No areas that people avoid	100%
In shelters	80%
When leaving settlement/town	20%

[6] Respondents could select multiple options. Applies to all questions with reference '6'.
[7] This relates to most common responses. Applies to all questions with reference '7'.
[8] Standard 4.2 - Site service assessment. Applies to all questions with reference '8'.

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HOUSING, LAND & PROPERTY (HLP)

Proporiton of assessed sites per HLP severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	0%	100%

Most commonly reported housing and land incidents occurred in the 3 months before data collection:[6,7]

Confiscation of property	100%
Damaged and inadequate accommodation	20%

Proportion of assessed sites where KIs reported perceiving a very high risk of forced eviction: 0%

Most commonly reported types of land owner:[6,7]

Private owner	40%
Mixed landownership	40%
No owner	20%

In those assessed sites where the site owner is known (60%), proportion where there reportedly is only an oral land tenure agreement, or no agreement at all, between the owner and the residents: 0%

SHELTER & NON-FOOD ITEMS (SNFI)

Proportion of assessed sites per SNFI severity score:

None or minimal	Stress	Severe	Extreme
0%	60%	40%	0%

Proportion of assessed sites where new IDPs[9] have reportedly received shelter assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (100%):[7] 60%

Proportion of assessed sites where new IDPs[9] have reportedly received NFI assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (100%):[7] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access NFI: 0%

Most commonly reported types of shelters:[6,7,10]

Buul	100%

Proportion of assessed sites reportedly having access to markets selling NFIs within a 60 minutes walk:[8] 60%

Most commonly reported types of NFIs available at markets, by % of assessed sites where markets were reportedly available (60%):[6,7,8]

Medicines	100%
Hygienic menstruation materials	100%
Soap	33%

WATER, SANITATION & HYGIENE (WASH)

Proportion of assessed sites per WASH severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	0%	100%

Proportion of assessed sites where the nearest functioning water source is reportedly more than 60 minutes away on foot:[8] 50%

Most commonly reported primary sources of water:[6,7,8]

Berkad	75%
Water kiosk	25%

Proportion of assessed sites where most residents reportedly have only access to an unimproved water source[11] and do not treat water:[8] 100%

Most commonly reported barriers to access water, by % of assessed sites where most residents reportedly face water access barriers (100%):[6,7,8]

No problem	60%
Waiting time at water points	40%
Poor quality of water	20%

Proportion of assessed sites where the nearest functional latrine is reportedly more than 60 minutes away on foot:[8] 0%

Proportion of assessed sites where latrines are reportedly not accessible for persons with disabilities:[8] 0%

Most commonly reported strategies of disposing solid waste :[6,7,8]

Safely managed	80%
Collected and disposed in open grounds	40%
Collected and burnt in open spaces	40%

Most commonly reported groups facing impediments in accessing latrines:[6,7,8]

Women	100%
Children	100%
Older persons	80%

Proportion of assessed sites where many or all households reportedly have access to functioning hand-washing facilities with water and soap:[8] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access sanitation facilities: 0%

[9] New IDPs: IDPs who have arrived less than 3 months before data collection.

[10] Standard 3.2 - An appropriate environment. Applies to all questions with reference '10'.

[11] Unimproved water source: river, berkad, unprotected well.

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EDUCATION

Proportion of assessed sites per education severity score:

None or minimal	Stress	Severe	Extreme
0%	60%	40%	0%

Proportion of assessed sites where the nearest education facility is reportedly more than 60 minutes away on foot:[8]

Most commonly reported types of schools available where children reportedly attend classes regularly:[6,7,8]

Primary	80%

Most commonly reported barriers accessing education for girls:[6,7,8]

No barriers	80%
Poor school infrastructure/facilities	60%
Schools closed	40%

Most commonly reported barriers accessing education for boys:[6,7,8]

No barriers	80%
Poor school infrastructure/facilities	60%
Schools closed	40%

Camp Coordination and Camp Management*

Most commonly reported types of site management:[6,7,12]

Local NGO	100%
Gatekeeper	60%
Local authority	20%

Most commonly reported types of committees that are available in the assessed sites:[6,7,12]

Camp Management Committee	100%
Womens' committee	100%

Proportion of assessed sites where women are reportedly part of the decision making committee:[13]

Proportion of assessed sites where minority people[5] reportedly face barriers to access services:

Accountability to Affected Populations (AAP)*

Most commonly reported main sources of information used to receive information about humanitarian services:[6,7,14]

Radio	80%
Aid Workers	80%
Community leaders	60%

Most commonly reported sources of information for persons with disabilities:[6,7,14]

Radio	100%
Aid Workers	80%
Community leaders	60%

Most commonly reported barriers accessing humanitarian assistance:[6,7]

No problems faced	67%
Don't know	33%

Proportion of sites where residents reportedly have access to a feedback mechanism:[15]

Proportion of assessed sites where minority people[5] are reportedly unwilling or unlikely to make use of complaints feedback mechanisms:

COVID-19 Knowledge, Attitude, and Practices (KAP)*

Proportion of assessed sites where most people reportedly think of COVID-19 as an important issue:

Yes	60%
No	40%

Most commonly reported actions taken by most people in the assessed sites to prevent the spread of COVID-19:[6,7]

Wearing a face mask	80%
No, no action taken	20%
Not leaving the house at all	20%

* The indicators for CCCM, COVID-19 KAP, and AAP are not part of the severity calculations across the sectors. Hence, the CCCM, COVID-19, and AAP sections in this factsheet do not present the severity scores.

[12] Standard 1.3 - Site management agency and team capacity. Applies to all questions with reference '12'.

[13] Standard 2.1 - Community participation. Applies to all questions with reference '13'.

[14] Standard 2.2 - Information sharing with communities. Applies to all questions with reference '14'.

[15] Standard 2.3 - Feedback and complaints. Applies to all questions with reference '15'.

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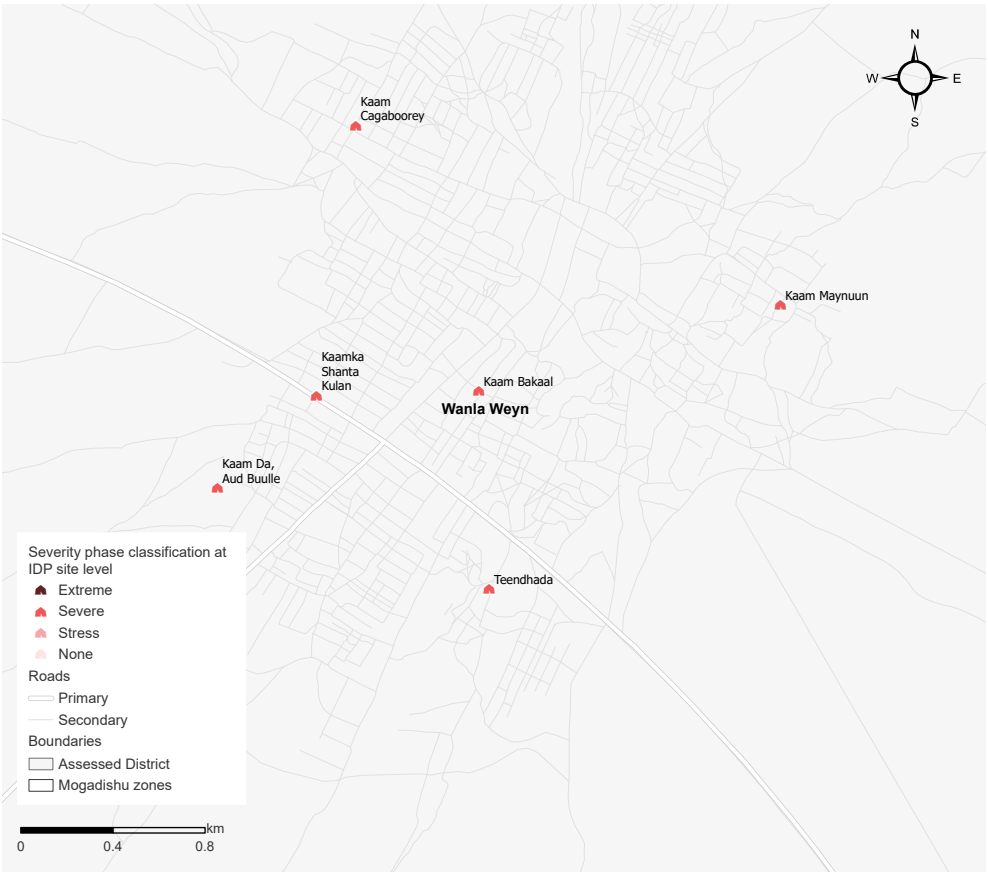
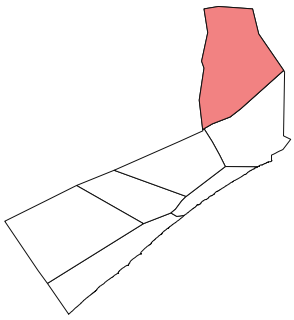
COVERAGE AND SEVERITY MAP



To provide a local, context-specific overview and allow more targeted responses, this section presents a summary of findings of assessed settlements in **Wanla Weyn** district only.



Wanla Weyn Assessment information

6 assessed sites

546 reported households

1,571 reported individuals

Wanla Weyn Summary of severity scores

Overall cluster severity score and severity phase classification at district level.[3]

Clusters	Severity Score	Severity phase
Education	3	Severe
Food Security & Livelihoods	4	Extreme
Health	4	Extreme
Housing, Land & Property	4	Extreme
Nutrition*	1	None
Protection	4	Extreme
Shelter & Non-Food Items	3	Severe
Water, Sanitation & Hygiene	4	Extreme

Wanla Weyn Displacement figures

Average estimated number of IDP individuals that have reportedly arrived into a new site in Wanla Weyn in the 3 months prior to data collection: **6**

Average estimated number of IDP individuals that have reportedly departed from an old site in Wanla Weyn in the 3 months prior to data collection: **1**

Most commonly reported main reason for displacement:[4]

Conflict	**67%**
Drought	**33%**

Most commonly reported district of origin of IDPs in the assessed sites:[4]

Qoryooley	**50%**
Kurtunwaarey	**17%**
Laas Caanood	**17%**

Proportion of assessed sites where minority people[5] **reportedly face impediments in accessing services:** **50%**

[5] Minority clan members (persons who do not belong on any of the four major clans in Somalia). Applies to all questions with reference '5'.

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FOOD SECURITY & LIVELIHOODS (FSL)

Proportion of assessed sites per FSL severity score:

None or minimal	Stress	Severe	Extreme
0%	17%	50%	33%

Proportion of assessed sites where food from markets was reportedly inaccessible:[8] 17%

Proportion of assessed sites where the nearest market was reportedly more than 60 minutes away on foot:[8] 0%

Most commonly reported primary sources of food:[6,7,8]

Market purchases	75%
Household production	25%

Most commonly reported strategies used by most residents in the assesed sites to cope with lack of food:[6,7,8]

Borrow food or get help from a friend or	100%
Asking non-relatives for food	100%
Purchase food with borrowed money	100%

Most commonly reported reasons why most residents in the assessed sites cannot access food, by % of assessed sites where most people were reportedly not able to access sufficient food (67%):[6,7,8]

No land or no livestock	100%
Natural causes	100%
Economic causes	75%

HEALTH

Proportion of assessed sites per health severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	0%	100%

Proportion of assessed sites where the nearest healthcare facility is reportedly more than 60 minutes away on foot:[8] 34%

Proportion of assessed sites where all or almost all women reportedly gave birth while attended by unskilled personnel:[8] 17%

Most commonly reported types of health services available in the assessed sites:[6,7,8]

Vaccinations	100%
Don't know	50%
Maternal healthcare	33%

Most commonly reported types of health facilities available in the assessed sites:[6,7,8]

Pharmacy	100%
Private clinic	33%
NGO clinic	33%

NUTRITION

Proportion of assessed sites per nutrition severity score:*

None or minimal	Stress	Severe	Extreme
83%	17%	0%	N/A

Proportion of assessed sites where the nearest nutrition facility is reportedly more than 60 minutes away on foot:[8] 50%

Most commonly reported nutrition items received:[6,7,8]

Therapeutic and supplementary food	100%
Super cereal plus	17%

Most commonly reported barriers to accessing nutrition services:[6,7,8]

Cost of services is too high	50%
Staff refuse treatment	50%
Don´t know	33%

*Following cluster consultations, no critical indicators have been selected for nutrition, meaning that assessed sites cannot be classified as "extreme". This is because it is not possible to establish reliable Global Acute Malnutrition (GAM) using an area-level KI methodology.

PROTECTION

Proportion of assessed sites per protection severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	0%	100%

Proportion of assessed sites reportedly having no child friendly spaces: 100%

Proportion of assessed sites reportedly having no designated spaces where women and girls can gather: 83%

Proportion of assessed sites where restrictions on movement during the day were reported: 50%

Most commonly reported types of incidents that occurred in the 3 months prior to data collection:[6,7]

Armed violence	100%
Abductions	67%
Friction between communities	67%

Most commonly reported areas that people avoid for fear of insecurity :[6,7]

In shelters	100%
No areas that people avoid	50%
When leaving settlement/town	33%

[6] Respondents could select multiple options. Applies to all questions with reference '6'.
[7] This relates to most common responses. Applies to all questions with reference '7'.
[8] Standard 4.2 - Site service assessment. Applies to all questions with reference '8'.

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HOUSING, LAND & PROPERTY (HLP)

Proporiton of assessed sites per HLP severity score:

None or minimal	Stress	Severe	Extreme
0%	17%	0%	83%

Most commonly reported housing and land incidents occurred in the 3 months before data collection:[6,7]

Confiscation of property	50%
Encroachment and boundary disputes	50%
Illegal occupation of property	17%

Proportion of assessed sites where KIs reported perceiving a very high risk of forced eviction: 60%

Most commonly reported types of land owner:[6,7]

Private owner	50%
Mixed landownership	33%
Prefer not to answer	17%

In those assessed sites where the site owner is known (83%), proportion where there reportedly is only an oral land tenure agreement, or no agreement at all, between the owner and the residents: 0%

SHELTER & NON-FOOD ITEMS (SNFI)

Proportion of assessed sites per SNFI severity score:

None or minimal	Stress	Severe	Extreme
0%	50%	50%	0%

Proportion of assessed sites where new IDPs[9] have reportedly received shelter assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (83%):[7] 0%

Proportion of assessed sites where new IDPs[9] have reportedly received NFI assistance in the 3 months prior to data collection, by % of assessed sites where new IDPs have arrived (83%):[7] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access NFI: 0%

Most commonly reported types of shelters:[6,7,10]

Buul	25%
Shelter constructed using shelter kit	25%
CGI sheet wall and roof	25%

Proportion of assessed sites reportedly having access to markets selling NFIs within a 60 minutes walk:[8] 83%

Most commonly reported types of NFIs available at markets, by % of assessed sites where markets were reportedly available (83%):[6,7,8]

Medicines	100%
Hygienic menstruation materials	100%
Local construction materials	100%

WATER, SANITATION & HYGIENE (WASH)

Proportion of assessed sites per WASH severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	0%	100%

Proportion of assessed sites where the nearest functioning water source is reportedly more than 60 minutes away on foot:[8] 20%

Most commonly reported primary sources of water:[6,7,8]

Water kiosk	50%
Berkad	50%

Proportion of assessed sites where most residents reportedly have only access to an unimproved water source[11] and do not treat water:[8] 100%

Most commonly reported barriers to access water, by % of assessed sites where most residents reportedly face water access barriers (50%):[6,7,8]

Waterpoints are difficult to reach and use	67%
Fetching water is a dangerous activity	67%
No problem	33%

Proportion of assessed sites where the nearest functional latrine is reportedly more than 60 minutes away on foot:[8] 0%

Proportion of assessed sites where latrines are reportedly not accessible for persons with disabilities:[8] 50%

Most commonly reported strategies of disposing solid waste :[6,7,8]

Collected and burnt in open spaces	100%
Safely managed	17%

Most commonly reported groups facing impediments in accessing latrines:[6,7,8]

Older persons	100%
Women	50%
Children	50%

Proportion of assessed sites where many or all households reportedly have access to functioning hand-washing facilities with water and soap:[8] 0%

Proportion of assessed sites where minority people[5] reportedly face barriers to access sanitation facilities: 0%

[9] New IDPs: IDPs who have arrived less than 3 months before data collection.

[10] Standard 3.2 - An appropriate environment. Applies to all questions with reference '10'.

[11] Unimproved water source: river, berkad, unprotected well.

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EDUCATION

Proportion of assessed sites per education severity score:

None or minimal	Stress	Severe	Extreme
0%	0%	83%	17%

Proportion of assessed sites where the nearest education facility is reportedly more than 60 minutes away on foot:[8]

Most commonly reported types of schools available where children reportedly attend classes regularly:[6,7,8]

Primary	83%
Basic literacy	83%

Most commonly reported barriers accessing education for girls:[6,7,8]

School fees and/or cost of materials	100%
Security concerns	50%
Distance to school	50%

Most commonly reported barriers accessing education for boys:[6,7,8]

School fees and/or cost of materials	100%
Distance to school	67%
Parents don't value education	67%

Camp Coordination and Camp Management*

Most commonly reported types of site management:[6,7,12]

No management	100%
Gatekeeper	83%
Residents themselves	17%

Most commonly reported types of committees that are available in the assessed sites:[6,7,12]

Residents' committee	100%
Womens' committee	83%
Don't know	67%

Proportion of assessed sites where women are reportedly part of the decision making committee:[13]

Proportion of assessed sites where minority people[5] reportedly face barriers to access services:

Accountability to Affected Populations (AAP)*

Most commonly reported main sources of information used to receive information about humanitarian services:[6,7,14]

Radio	100%
Community leaders	100%
Friends / Neighbourhood / Family	33%

Most commonly reported sources of information for persons with disabilities:[6,7,14]

Radio	100%
Friends / Neighbourhood / Family	17%

Most commonly reported barriers accessing humanitarian assistance:[6,7]

No problems faced	100%

Proportion of sites where residents reportedly have access to a feedback mechanism:[15]

Proportion of assessed sites where minority people[5] are reportedly unwilling or unlikely to make use of complaints feedback mechanisms:

COVID-19 Knowledge, Attitude, and Practices (KAP)*

Proportion of assessed sites where most people reportedly think of COVID-19 as an important issue:

Yes	83%
No	17%

Most commonly reported actions taken by most people in the assessed sites to prevent the spread of COVID-19:[6,7]

No, no action taken	50%
Reducing movement outside the house	17%
Stopping physical contact	17%

* The indicators for CCCM, COVID-19 KAP, and AAP are not part of the severity calculations across the sectors. Hence, the CCCM, COVID-19, and AAP sections in this factsheet do not present the severity scores.

[12] Standard 1.3 - Site management agency and team capacity. Applies to all questions with reference '12'.

[13] Standard 2.1 - Community participation. Applies to all questions with reference '13'.

[14] Standard 2.2 - Information sharing with communities. Applies to all questions with reference '14'.

[15] Standard 2.3 - Feedback and complaints. Applies to all questions with reference '15'.

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ANNEX 1: METHODOLOGY

For a more detailed overview of the methodology, including a detailed data analysis plan, you can access the terms of reference (ToR).

SEVERITY SCORE CALCULATION

The severity scores for a given sector is produced by aggregating unmet needs indicators per sector. For this round of the DSA, a simple aggregation methodology has been identified, building on the Multidimensional Poverty Index (MPI) aggregation approach. Using this method, each site is assigned a deprivation score according to its deprivations in the component indicators. The deprivation score of each site is obtained by calculating the percentage of the deprivations experienced, so that the deprivation score for each site lies between 0 and 100. The method relies on the categorisation of each indicator on a binary scale: does ("1") / does not ("0") have a gap. The threshold for how a site is considered to have a particular gap or not is determined in advance for each indicator. The DSA V aggregation methodology outlined below can be described as "MPI-like", using the steps of the MPI approach to determine an aggregated needs severity score, with the addition of "critical indicators" that determine the higher severity scores. The section below outlines guidance on how to produce the aggregation using KI data.

1) Identify indicators that measure needs ('gaps') for each sector, capturing the following key dimensions: accessibility, availability, quality, use, and awareness. Set binary thresholds: does ("1") / does not ("0") have a gap;
2) Identify critical indicators that, on their own, indicate a gap in the sector overall;
3) Identify individual indicator scores (0 or 1) for each site, once data had been collected;
4) Calculate the severity score for each site, based on the following decision tree (tailored to each sector);

a. **Critical indicators**: using a decision tree approach, a severity class is identified based on a discontinued scale of 1 to 4 (1, 2, 3, 4) depending on the scores of each of the critical indicators;
b. **Non-critical indicators**: the scores of all non-critical indicators are summed up and converted into a percentage of possible total (e.g. 3 out of 4 = 75%) to identify a severity sector;
c. The **final severity score** is obtained by retaining the highest score generated by either the critical or non-critical indicators.
The indicators for each cluster were selected in coordination with all the clusters. In total, 18 critical indicators and 51 non-critical indicators were selected to assess the severity of needs across 7 clusters ans 1 sub-cluster.

KEY INFORMANT PROFILES

Assessment activity	Sampling	Key Informant Profile
Key Informant 1	Purposive	Community Leader / Camp Manager / Gate Keeper or any other resource person deemed relevant to the context of each IDP site. These key informants were selected based on their role in the community as a figure of authority including community leaders, elders, and religious leaders. In cases where multiple key informants were available, priority was given to the Community Leader and/or Camp Manager, followed by the Gate Keeper.
Key Informant 2	Purposive	Women representative, based on their role as a community representative of a particularly vulnerable population group.
Key informant 3	Purposive	Minority group representative, based on their role as a community representative of a particularly vulnerable population group. A contact list was shared by the Protection Cluster, to identify focal points in each settlement. In case there was no focal point, a member of a settlement committee was identified (elder committee, child committee, resident committee, health or wash committee, etc.). In case there was no committee within the site, and that the previous key informant profiles could not be found at the settlement level, then, a key informant was randomly identified amongst individuals who had been in the settlement for the longest.
Key Informant 4	Purposive	A representative for persons with disabilities. However, because REACH did not have a contact list of focal points, REACH field teams did not manage to interview this fouth key informant profile each time.

A comprehensive aggregation strategy to aggregate findings at the site level has been developed based on the type of variable (select multiple, select one, integer), which can be consulted in the ToR. In the specific case of a "select one" variable, in case of non-consensus among KIs, responses from KIs with the most relevant experience or profile for that specific question was taken. If the question was general and could not be associated with a specific KI profile, and if there were multiple mode values for that variable, the variable's result was listed as N/A. For this reason, some N/As are present in this factsheet.

LIST OF ACRONYMS

CCCM: Camp Coordination and Camp Management
CGI: Compacted Graphite Iron
DSA: Detailed Site Assessment
IDP: Internally Displaced Persons
KI: Key Informant
MUAC: Mid-Upper Arm Circumference
NGO: Non-Governmental Organisation
UXO: Unexploded Ordnance

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ANNEX 2: INDICATORS FEEDING INTO SEVERITY SCORES

CRITICAL INDICATORS

Sector	Indicator	Severity Scores			
		None/Minimal	Stress	Severe	Extreme
		1	2	3	4
Education	% of sites by main barrier accessing education for girls	No barriers (cannot select with any other option) Language issues Parents don't value education Parents don't approve of curriculum Cultural beliefs Parents unaware of education opportunities available	Distance to school too far / lack transportation Schools closed (for any reason) Poor school infrastructure/facilities Lack of qualified teaching staff Insufficient WASH facilities in schools Schools overcrowded Lack of male / female separation Child helping at home / farm	Security concerns of child travelling or being at school Children lack documentation needed to register School fees and/or cost of materials Children psychologically distressed Child working outside home Marriage and/or pregnancy Flooding / weather events	Children join/recruited by armed groups Displacement due to conflict
Education	% of sites by main barrier accessing education for boys	No barriers (cannot select with any other option) Language issues Parents don't value education Parents don't approve of curriculum Cultural beliefs Parents unaware of education opportunities available	Distance to school too far / lack transportation Schools closed (for any reason) Poor school infrastructure/facilities Lack of qualified teaching staff Insufficient WASH facilities in schools Schools overcrowded Lack of male / female separation Child helping at home / farm	Security concerns of child travelling or being at school Children lack documentation needed to register School fees and/or cost of materials Children psychologically distressed Child working outside home Marriage and/or pregnancy Flooding / weather events	Children join/recruited by armed groups Displacement due to conflict
FoodSec	% of sites by reason of not accessing food	-	No land for cultivation Perceptions or beliefs of families/ community and humanitarian service providers and other actors make it difficult/impossible to access distribution /items Economic causes Social and cultural causes	Natural causes Accessing aid but required to pay a proportion to landlord leaving household hungry Accessing aid but required to pay a proportion to gatekeeper leaving household hungry Inability to access/refusal of government food aid Inability to access/refusal of NGO food aid Functional market not available	Security issues Fear of harassment/violence/abuse on the way to market or at the distribution site

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CRITICAL INDICATORS

Sector	Indicator	Severity Scores			
		None/Minimal	Stress	Severe	Extreme
		1	2	3	4
FoodSec	% of sites by type of coping strategy	-	Borrow food or get help from a friend or relative Asking non-relatives for food Purchase food with borrowed money Send children to eat with neighbors Rely on less preferred and less expensive food (i.e. cheaper, lower quality food	Sell home assets to get money for food Selling more livestock than usual for this time of year to get money for food Slaughtering more cattle, camel or goat/sheep than normal for this time of year More hunting than normal for this time of year More fishing than normal for this time of year	Gather wild food Collecting firewood in dangerous places to get money for food Consume seed stock meant for next season or harvest crops that are not yet ready Sending families out to displacement camps to receive food aid Limit portion sizes at meal times Adults do not eat so children can eat Reduce number of meals eaten in a day Skip entire days without eating
Health	% of sites by time it takes to reach the nearest healthcare facility	Less than 15 minutes	Between 15 and 30 minutes	Between 31 minutes and one hour	More than 1 hour
Health	% of sites by the types of health problems that are common amongst MALE residents	1 Problem OR No health issues	2 problems	3 problems	4 or more problems
Health	% of sites by the types of health problems that are common amongst FEMALE residents	1 Problem OR No health issues	2 problems	3 problems	4 or more problems
Health	% of sites by proportion of women given birth while attended by unskilled personnel	None (0%)	A few (1-25%)	Some (26-50%), Many (51-75%)	All or almost all (76-100%)
HLP	% of sites per type of reported housing and property incident	Don't know	Damaged and inadequate accommodation	Encroachment and boundary disputes	Confiscation of property Illegal occupation of property
HLP	% of sites where an eviction notice have been issued	No	-	-	Yes
HLP	% of sites by level of risk of forced eviction	Low	-	Moderate	Very high

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ANNEX 2: INDICATORS FEEDING INTO SEVERITY SCORES

CRITICAL INDICATORS

Sector	Indicator	Severity Scores			
		None/Minimal	Stress	Severe	Extreme
		1	2	3	4
Protection	% of sites per reported protection incident	No protection incidents occurred	Illegal or forced taxation by non-government actors Friction between community and surrounding host communities Land grabbing Denied access to justice	Gender based violence Arrests and detention Abductions Displacement Violence during aid distribution Destruction of property Cases of unaccompanied and separated children Exploitation and abuse related to access to assistance	Disappearances Forced military recruitment Armed violence Incidents due to UXO ("Unexploded ordnance (UXO) is any sort of military ammunition or explosive ordnance which has failed to function as intended"
Protection	% of sites per reported avoided areas	There are no areas that people avoid for fear of insecurity	-	When leaving settlement/town Markets On the way to markets Health centres Nutrition/feeding centres Humanitarian aid distribution points	In shelters At Water points At Latrines Bathing areas Schools On the way to schools
SNFI	% of sites with significant proportion of resident sleeping in open air/no shelter	None (0%)	A few (1-25%)	Some (26-50%), Many (51-75%)	All or almost all (76-100%)
WASH	% of sites by access to an improved water source	Water kiosk (Provided by humanitarian aid), Vendors or shop, Piped system, Protected well with hand pump, Water tank and tap, Protected well without hand pump, Water trucking distribution point, Borehole with submersible pump	-	Unprotected well Berkad	River
WASH	% of sites by distance to the nearest water point	Less than 15 minutes	Between 15 and 30 minutes	Between 31 minutes and one hour	More than one hour
WASH	% of sites by distance to the nearest functional latrine	Less than 15 minutes	Between 15 and 30 minutes	Between 31 minutes and one hour	More than one hour
WASH	% of sites where residents have limited access to hand washing facilities	All or almost all (76-100%)	Some (26-50%), Many (51-75%)	A few (1-25%)	None (0%)

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ANNEX 2: INDICATORS FEEDING INTO SEVERITY SCORES

NON-CRITICAL INDICATORS

Sector	Indicator	Classification	
		Not in Need (0)	In Need (1)
Education	% of sites by type of available education facilities	Primary, Basic Literacy and Numeracy Classes	No learning facilities available
Education	% of sites by amount of schools opened	>=1	0
Education	% of sites by proportion of gender segregated latrines in schools or learning facilities	More than 25%	25% or less
Education	% of sites by proportion of fences and clear demarcation in schools or learning facilities	More than 25%	25% or less
Education	% of sites by distance to nearest education facility	Less than 1 hour	More than 1 hour
Education	% of sites by proportion of Boys 5-12 attendance	Boys 5-12 >25%	Boys 5-12 <=25%
Education	% of sites by proportion of Girls 5-12 attendance	Girls 5-12 >25%	Girls 5-12 <=25%
Education	% of sites by proportion of Boys 13-17 attendance	Boys 13-17 >25%	Boys 13-17 <=25%
Education	% of sites by proportion of Girls 13-17 attendance	Girls 13-17 >25%	Girls 13-17 <=25%
FoodSec	% of sites per type of primary source of food	Market purchases, Household production, Own livestock Fishing / Foraging / Hunting, Trade for labour	Food assistance from NGO aid, Food assistance from government aid Gifts from family / friends / neighbors, Borrowing/Debts
FoodSec	% of sites where a significant proportion of male residents are involved in crop production	Some, Any, All or almost all	None, A few
FoodSec	% of sites where a significant proportion of female residents are involved in crop production	Some, Any, All or almost all	None, A few
FoodSec	% of sites where a significant proportion of male residents are involved in livestock rearing	Some, Any, All or almost all	None, A few
FoodSec	% of sites where a significant proportion of female residents are involved in livestock rearing	Some, Any, All or almost all	None, A few
FoodSec	% of sites where a significant proportion of residents are involved in fishing	Some, Any, All or almost all	None, A few
FoodSec	% of sites where residents do not have access to a food market	Yes	No
FoodSec	% of sites where residents take more than one hour to reach the nearest market place	Less than one hour	More than one hour
FoodSec	% of sites where there has been a cash OR food distribution in the site in the 3 months before data collection	Food distribution OR cash distribution	No food nor cash distribution

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NON-CRITICAL INDICATORS

Sector	Indicator	Classification	
		Not in Need (0)	In Need (1)
Health	% of sites by type of health facilities available	First aid post, Pharmacy, District hospital Mobile clinic, Private clinic, NGO clinic, Government run clinic	No access to any health facility
Health	% of sites by type of health services available	Basic primary healthcare, Vaccinations, Child healthcare, Maternal healthcare, Nutrition counselling / services, HIV Counselling and testing ,Mental health services	None of the above
Health	% of sites by proportion of MALE with serious problems with their physical health due to Sickness/illness/disease	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of FEMALE with serious problems with their physical health due to Sickness/illness/disease	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of MALE with serious problems with their physical health due to Injuries/wounds	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of FEMALE with serious problems with their physical health due to Injuries/wounds	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of MALE with serious problems with their physical health due to Disabilities	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of FEMALE with serious problems with their physical health due to Disabilities	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of MALE with serious problems with their physical health due to Mental health issues	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of FEMALE with serious problems with their physical health due to Mental health issues	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of MEN living in the site UNABLE to get adequate healthcare	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by proportion of WOMEN living in the site UNABLE to get adequate healthcare	"None (0%) A few (1-25%)"	"Some (26-50%) Many (51-75%) All or almost all (76-100%)"
Health	% of sites by the most commonly reported difficulties people in the site encounter when attempting to access health services or treatment	No issues	Cost of services and/or medicine is too high No access to qualified health staff at the health facilityProblems with civil documents, Public health clinic does not provide referral ,Public health clinic not open, The treatment center is too far away/Transportation constraints Medical staff refuse treatment without any excuse No medicine available at health facility/pharmacy No treatment available for the disease at the health facility Health services not inclusive of people with disabilities

For more information on this factsheet please contact:
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ANNEX 2: INDICATORS FEEDING INTO SEVERITY SCORES

NON-CRITICAL INDICATORS

Sector	Indicator	Classification	
		Not in Need (0)	In Need (1)
HLP	% of sites per type of land owner	All other response options	No owner Owner not known
HLP	% of sites by available security of tenure	Written	yes_oral no_agreement
Nutrition	% of sites by received nutrition items	At least one nutrition item	None of the above
Nutrition	% of sites by time taken for most households to walk to nutrition services	Less than 1 hour	More than one hour
Nutrition	% of sites by most common barriers to accessing nutrition services	2 or less issues	3 or more issues
Protection	% of sites by the availability of designated space where women and girls can gather	Yes	No
Protection	% of sites by the availability of child friendly space	Yes	No
Protection	% of sites by restrictions of movement during the day	No	Yes
Protection	% of sites by restrictions of movement during the night	No	Yes
Protection	% of sites where minority groups are reported to face barriers to access support	Any response except for "Minorities"	Minorities (persons who are not members of any of Somalia's four major clans)
SNFI	% of sites where residents have access to market and are within an acceptable distance from SNFI market	Answered YES to Q1 AND Answered Less than 1h to Q2	Answered NO to Q1 OR Answered more than 1h to Q2
SNFI	% of sites where basic NFIs are available in the local market	5 Or more of the following NFI items: Sleeping mats, Plastic sheets, Blankets, Jerry cans or buckets, Cooking utensils, Mosquito nets, Solar lamp	4 Or Less of the following NFI items: Sleeping mats, Plastic sheets, Blankets, Jerry cans or buckets, Cooking utensils, Mosquito nets, Solar lamp
SNFI	% of sites where new IDPs (people who have arrived less than 3 months ago) have received shelter assistance	Answered less than 3 months to Q1 AND Answered "Provision of shelter kits" to Q2	Answered more than 3 months to Q1 AND Did not answered "Provision of shelter kits" to Q2
SNFI	% of sites where new IDPs (people who have arrived less than 3 months ago) have received NFI assistance	Answered less than 3 months to Q1 AND Answered "Provision of NFI kits/items" to Q2	Answered more than 3 months to Q1 AND Did not answered "Provision of NFI kits/items" to Q2
SNFI	% of sites by available public lighting	Yes	No

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NON-CRITICAL INDICATORS

Sector	Indicator	Classification	
		Not in Need (0)	In Need (1)
WASH	% of sites where residents report sanitation issues	No problem	• Lack of sanitation facilities (latrines/toilets) / facilities too crowded • Sanitation facilities (latrines/toilets) are not functioning or full • Sanitation facilities (latrines/toilets) are unclean/unhygienic • Sanitation facilities (latrines/toilets) are not private • Sanitation facilities (latrines/toilets) are not segregated between men and women • Sanitation facilities (latrines/toilets) are too far • Sanitation facilities (latrines/toilets) are difficult to reach (especially for people with a lot of difficulties in seeing, hearing, walking, communicating, self-caring and understanding (for reasons other than the language spoken)) • Going to the sanitation facilities (latrines/toilets) is dangerous • Some groups (children, women, elderly, minority clan members or marginalized clan members etc.) do not have access to sanitation facilities (latrines/toilets)
WASH	% of settlements facing water access problems	No problem	Waterpoints are difficult to reach and use (especially for people with persons with disability Fetching water is a dangerous activity Some groups (children, women, elderly, minority clan members, marginalized clan members, etc.) do not have access to the waterpoints Insufficient number of water points
WASH	% of sites by solid waste management system	Safely managed by households or community by burial in pit	Collected in garbage bins by households/communal and disposed in open grounds, Collected and burnt in open spaces, Not managed
WASH	% sites where residents report not treating water	(Unprotected well OR Berkad OR River) AND (Some OR Many OR All)	(Unprotected well OR Berkad OR River) AND (None OR A few)
WASH	% of sites where a limited proportion of latrines are accessible for PwD	Some, Many, All	None, A few

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ASSESSMENT CONDUCTED IN THE FRAMEWORK OF:

Somalia Assessment Working Group

Somalia Information Management Working Group

FUNDED BY:

Funded by
European Union
Humanitarian Aid

WITH THE SUPPORT OF:

Protection Cluster Somalia

SOMALIA NUTRITION CLUSTER

WASH Cluster Somalia

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10 Mercy Corps
11 Norwegian Refugee Council (NRC)
12 Oxfam
13 Social-life and Agricultural Development Organisation (SADO)
14 Save the Children International (SCI)
15 Somali Community Concern (SCC)
16 Shabelle Community Development Organization (SHACDO)
17 Somali Humanitarian Organization (SHO)
18 Sustainable Development and Peace Building Initiative (SYPD)
19 Secours Islamique Français (SIF)
29 Somali Charity
21 SOS
22 SOSTA PD
23 Save Somali Women and Children (SSWC)
24 Sustainable Development and Peace Building Initiatives (SYPD)
25 World Vision International (WVI)

About REACH:

REACH 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). For more information please visit our website: www.reach-initiative.org. You can contact us directly at: geneva@reach-initiative.org and follow us on Twitter @REACH_info.

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