

## Key Findings

## SOMALIA

### CONTEXT

Somalia continues to experience recurrent droughts, floods, and armed conflict, driving large-scale displacement. The high levels of displacement have resulted in fluctuating population estimates of Internally Displaced Persons (IDPs) in both formal and informal settlements, thereby complicating the provision of basic services to address their needs.

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 2019 to February 2020 and assessed 2,344 IDP settlements in 61 districts across Somalia.

The full dataset, analysis, and outputs of previous DSA are available [here](#).

### METHODOLOGY

Primary data collection employed a Key Informant (KI) methodology with KI interviews conducted by REACH enumerators in locations directly accessible by REACH Field Officers (FOs) and by CCCM partner organizations. Targeted urban areas within districts were determined based on a secondary literature review of previous assessments conducted on IDP populations<sup>1</sup>. Following the identification of target urban areas, REACH contacted the lowest level of governance<sup>2</sup> in each area to identify the locations of IDP settlements.

The methodology for the third 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 score goes from 1-5 and the severity phases are none/ minimal, stress, severe, extreme and catastrophic. For the list of indicators and the severity score calculations, see the annex on this factsheet.

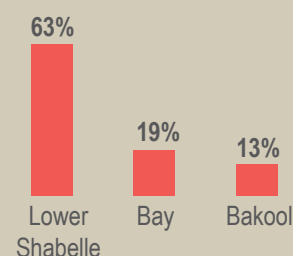
### Assessment information

Total assessed sites	2,344
Districts	61 (out of 74)
Regions	17 (out of 18)

### Displacement

Total number of IDPs households arriving into a new settlement:	36,512
Total number of IDPs households departing from an old settlement:	11,744

### Most common regions of origin for IDPs



### ASSESSMENT COVERAGE MAP



### Summary of severity score

Overall cluster severity score and severity phase classification at district level:

Clusters	Severity Score	Severity phase
Food security / Livelihoods	4	Extreme
Nutrition	4	Extreme
Health	4	Extreme
Protection	3	Severe
Shelter and Non-food items	4	Extreme
Education	4	Extreme
Water, Sanitation/ Hygiene	3	Severe

Top five districts with higher number of clusters in severe and extreme categories :

Districts	Severe clusters	Extreme clusters
Daynile Mogadushu	2	5
Kahda Mogadushu	2	5
Wadajir Mogadushu	2	5
Gaalkacyo	2	5
Beletweyne	3	4

<sup>1</sup>Previous REACH DSA, JMCNA and CCCM Partner Organization Population Estimates

<sup>2</sup>District Office, Mayor's Office, etc.



# FOOD SECURITY & LIVELIHOODS (FSL)

DSA | 2020  
Somalia

% of sites by FSL severity score:



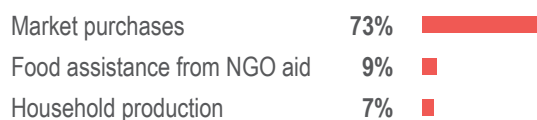
Proportion of sites with no access to food markets, as reported by KIs:



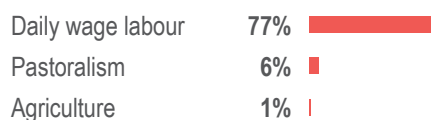
Average time taken to travel to nearest food market, as reported by KIs<sup>3</sup>:

24 minutes

Three most common reported primary sources of food<sup>4</sup>:



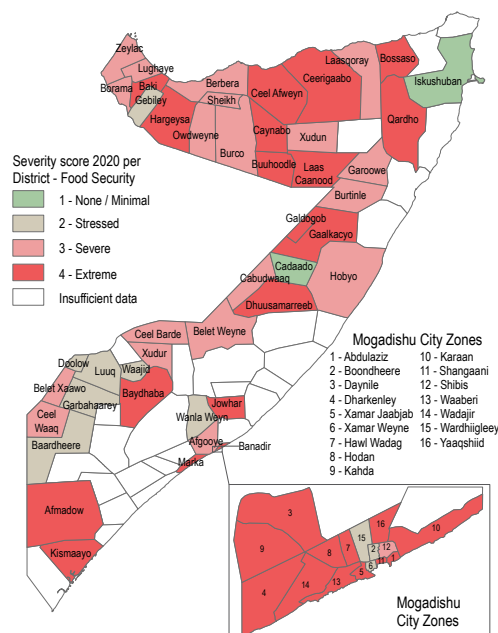
Three most common reported livelihood activities conducted by the majority of residents<sup>4</sup>:



Proportion of sites where the population was reportedly not able to receive food assistance:



District severity score in FSL:



# NUTRITION

% of sites per nutrition severity score:



Proportion of sites with no access to nutrition services, as reported by KIs:



Average time taken to travel to nearest nutrition service, as reported by KIs<sup>5</sup>:

29 minutes

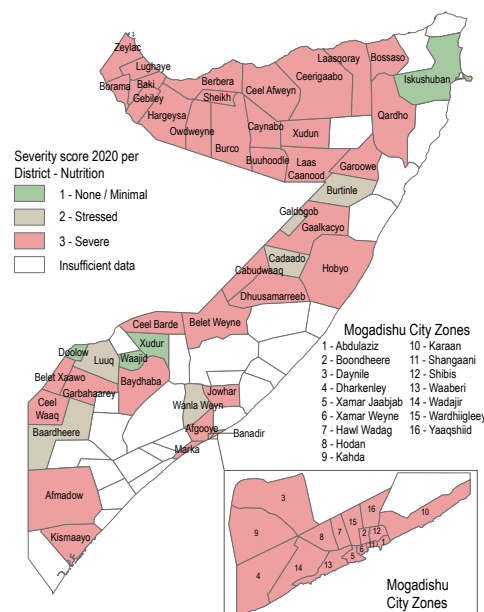
Proportion of sites reporting nutrition items distributed in the past 3 months:



Proportion of sites where the population was reportedly not able to receive nutrition support:



District severity score in Nutrition:



<sup>3</sup>The findings related a subset of 1,190 sites where KIs reported having access to food markets.

<sup>4</sup>Respondents could select multiple options. Applies to all questions with reference '4'.

<sup>5</sup>The findings related a subset of 1,396 sites where KIs reported having access to nutrition services.

<sup>6</sup>F75 or F100.



# HEALTH

DSA | 2020  
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% of sites per health severity score:



Proportion of sites with no access to healthcare facilities, as reported by KIs:



Average time to travel to nearest health facility, as reported by KIs:<sup>7</sup>

9 Minutes

Proportion of sites where KIs reported women are not able to access skilled personnel while giving birth:



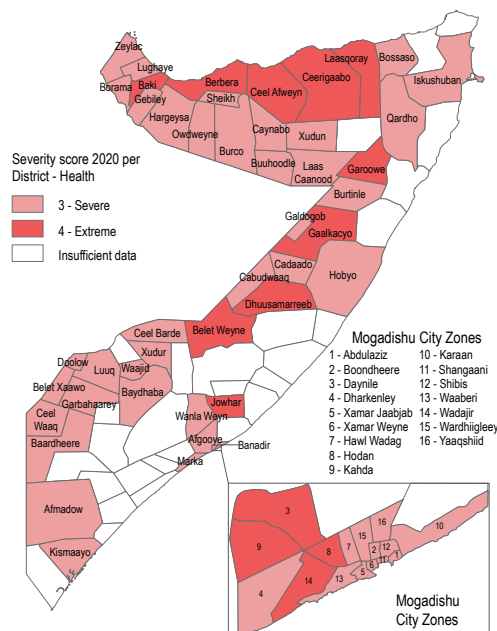
Proportion of sites where the population was reportedly not able to receive healthcare support:



Three most common reported types of health facilities available at sites<sup>4</sup>:

Pharmacy	43%	<div style="width: 43%;"></div>
NGO clinic	23%	<div style="width: 23%;"></div>
Mobile clinic	21%	<div style="width: 21%;"></div>

District severity score in Health:



# PROTECTION

% of sites per protection severity score:



Proportion of sites reportedly having no child friendly spaces:



Proportion of sites reportedly having no women spaces:



Proportion of sites where restrictions on movement was reported:



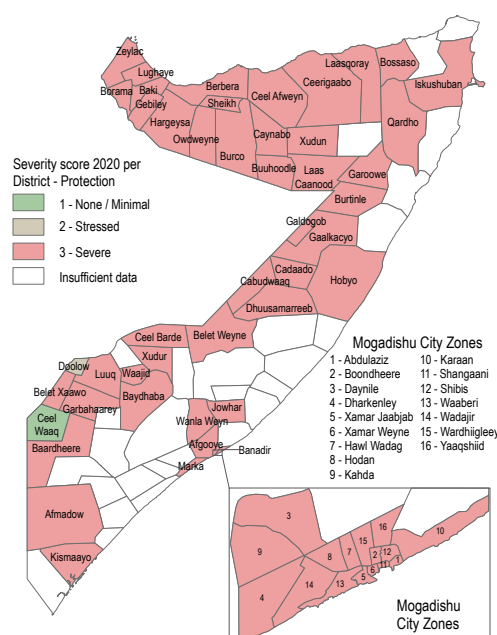
Three most common reported types of safety and security incidents<sup>4</sup>:

Gender based violence	12%	<div style="width: 12%;"></div>
Displacement	8%	<div style="width: 8%;"></div>
Armed violence	8%	<div style="width: 8%;"></div>

Three most common reported locations of safety and security incidents<sup>4</sup>:

In shelters	14%	<div style="width: 14%;"></div>
When leaving settlement/town	13%	<div style="width: 13%;"></div>
On the way or at water sources	7%	<div style="width: 7%;"></div>

District severity score in Protection:



<sup>7</sup>The findings related a subset of 1,717 sites where KIs reported having access to health facilities.



# SHELTER & NON-FOOD ITEMS

DSA | 2020  
Somalia

% of sites per shelter severity score:



Proportion of sites reportedly having no access to markets selling non-food items (NFI):



Three most common reported types of non-food items available at markets<sup>4</sup>:

Jerry cans or buckets	49%
Plastic sheets	48%
Blankets	43%

Proportion of sites where KIs reported shelters damaged by fires or floods 3 months prior to data collection:



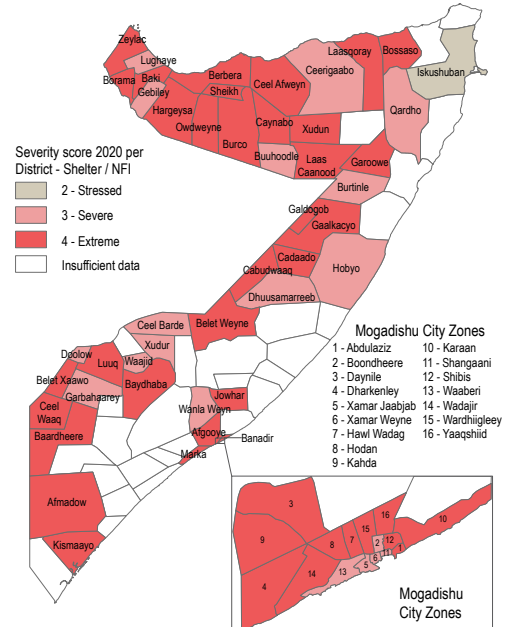
Proportion of sites where KIs reported cases of evictions 3 months prior to data collection:



Proportion of sites where the population was reportedly not able to receive shelter and NFI support:



District severity score in Shelter and NFIs:



# EDUCATION

% of sites per education severity score:



Proportion of sites reportedly having no access to learning facilities:



Average time taken to travel to nearest learning facilities, as reported by KIs:<sup>8</sup>

18 Minutes

Reported type of learning facilities available at sites:

Primary	58%
Secondary	16%
Quoranic	72%
Basic Literacy/ Numeracy	8%

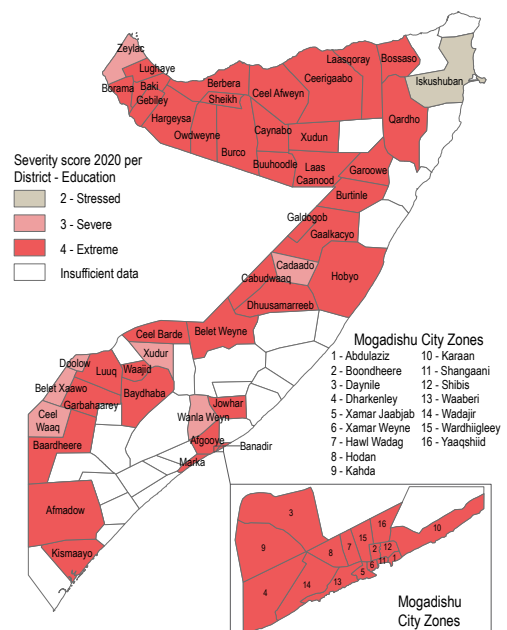
Average proportion of learning facilities at sites reportedly having no gender segregated latrines:



Average proportion of learning facilities at sites reportedly having no fences and clear demarcation:



District severity score in Education:



<sup>8</sup>The findings related a subset of 1,790 sites where KIs reported having access to education facilities.



# WATER, SANITATION & HYGIENE (WASH)

DSA | 2020  
Somalia

% of sites per WASH severity score:



1%	Extreme	(severity score 4)
96%	Severe	(severity score 3)
3%	Stress	(severity score 2)
0%	No or minimal	(severity score 1)

## Water

Proportion of sites reportedly having no access to functioning water sources:



Average time taken to travel to nearest water source, as reported by KIs:<sup>9</sup> **20 minutes**

Three most common reported primary source of water:

Vendors or shop	17%
Piped system	15%
Water kiosk (humanitarian aid)	12%

The most common reported types of water treatments were **chlorine tablets/aquatabs (87%)**, **boiling (37%)** and **cloth filter (4%)**.

Proportion of sites where the population was reportedly not able to receive water support:



## Sanitation:

Proportion of sites where KIs reported no access to functioning latrines:



Proportion of sites where KIs reported open defecation:



Proportion of sites with toilets in which KIs reported having:<sup>10</sup>

Handwashing facilities	14%
Locks on the inside	20%
Internal lighting	13%

## Hygiene:

Proportion of sites reportedly having no access to bathing facilities:

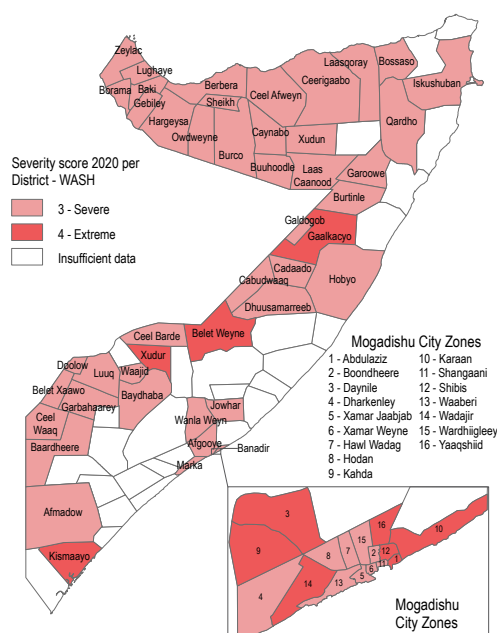


Average time taken to travel to nearest bathing facility, as reported by KIs:<sup>11</sup> **6 Minutes**

Proportion of sites where the population was reportedly not able to receive hygiene support:



District severity score in WASH:



## Camp Management and Accountability to Affected Populations

Three most common (used/preferred) sources of information, as reported by KI:

Radio	62%
Friends / neighborhood / family	51%
Community / religious leaders	27%

Three most common sources of information for persons with disabilities, as reported by KIs:

Word of mouth	50%
Community meetings	45%
Meetings in person	37%

Proportion of sites where KIs reported they have access to a feedback mechanism: **38%**

Proportion of sites where KIs reported to have women present in committees: **88%**

Three most common reported problems experienced in the delivery of humanitarian assistance:

Not enough for all entitled	22%
Some population groups not receiving aid	17%
Fighting between recipients	14%

Three most common reported site management at sites:

Local authority	30%
Community Leader	27%
Gatekeeper <sup>12</sup>	24%

Three most common reported established committees at sites:

Women's committee	74%
Camp Management Committee	73%
Residents' committee	59%

<sup>9</sup>The findings related a subset of 1,981 sites where KIs reported having access to water source facilities.

<sup>10</sup>The findings related a subset of 1,864 sites where KIs reported having access to latrine access.

<sup>11</sup>The findings related a subset of 117 sites with bathing facilities, as reported by KIs:

<sup>12</sup>Gatekeeper is a person who controls access in services in some IDP settlements.





The indicators and method for calculating the severity scores for each cluster were developed in coordination with CCCM partners. The indicators of each cluster were composed of a set of indicators and a method for scoring these indicators was developed to evaluate the severity of needs. The scoring of the indicators was based on the responses from the key informant interviews. Forty-two (42) indicators were selected to assess the severity of needs across seven clusters. Each indicator was granted a severity score from 1 to 4 with 1 being the least severe and 4 being the most severe. For each cluster, the overall score was determined by calculating the median score of all indicators included in the cluster. At the national level, the final severity score for each cluster was determined by selecting the severity score in which at least 20% of the total population fall in.

## Indicators per cluster:

**Shelter / NFI:** Access to and availability of NFI and building material in local/nearby markets; Basic NFIs available; Shelter occupation and density; Shelter quality; Shelter & NFI support activities; Security of tenure; Hazards; Public lighting

**WASH:** Access to and availability of functional water sources; Access to and availability of functional toilets; Access to and availability of bathing facilities; Primary; secondary; and domestic water sources; Toilets with locks; Toilets with internal lighting; Toilets with handwashing facilities; WASH support activities; Water treatment; Presence of open defecation; Disposal of solid waste

**Health:** Access to and availability of health facilities; Health services available; Skilled health personnel for women giving birth; Health support activities; Health problems common

**Nutrition:** Access to and availability of nutrition services; Distribution of nutrition items; Nutrition support activities

**Education:** Access to and availability of learning facilities; Learning facilities available; Gender segregated latrines; Fences and clear demarcation

**Food Security:** Access to and availability of food markets; Primary and secondary food sources; Food security support received; Land available

**Protection:** Covered spaces; Women spaces; Child-friendly spaces; Types of safety and security incidents; Locations of safety and security incidents; Restrictions to movement

For a more detailed overview of the methodology and a comprehensive list of all the composite indicators that were used, you can access the terms of reference (ToR) [here](#). The indicators and their respective thresholds are included in the annex section of the ToR, page 56-78.

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### 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](http://www.reach-initiative.org). You can contact us directly at: [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) and follow us on Twitter @REACH\_info.