Multi-Sector Needs Assessment: Adjumani District
Uganda, August, 2018

UNHCR The UN Refugee Agency

Background & Methodology

Due to its proximity to three major humanitarian emergencies in South Sudan, Burundi, and the Democratic Republic of Congo (DRC), its progressive refugee hosting and settlement policies, and the ease of border crossings, Uganda has received a large number of refugees over the past 3 years.

With over 1 million refugees in Uganda[1], humanitarian needs across the country are significant with little capacity for actors to clearly map the landscape of needs across refugee and host communities alike. UNHCR, with support from REACH, conducted a Multi-Sector Needs Assessment with the aim to address this information gap by providing evidence-based analysis to inform the Refugee Response Plan (RRP) for 2019-2020.
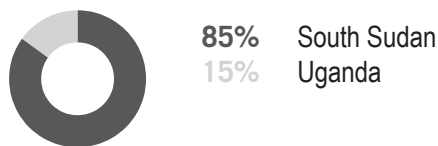
A total of 6,809 household (HH) level surveys were conducted across all 30 refugee settlements and 11 refugee hosting districts. Households were randomly sampled with a confidence level of 95% and 10% margin of error and generalisable at the settlement level for refugees and at the district level for the host communities.

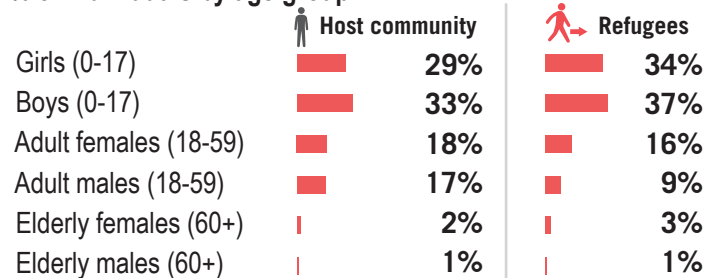**1,545** surveys were conducted in Adjumani District between 24 April and 9 June 2018.

Assessed district
District boundary

Demographics

% of assessed HHs by area of origin:

85% South Sudan
15% Uganda

% of refugee HHs that have lived in the settlement for:

| <6 months | 7 - 11 months |
| 1 - 2 years | > 2 years |

2% 31%
2% 65%

% of individuals by age group:

	Host community	Refugees
Girls (0-17)	29%	34%
Boys (0-17)	33%	37%
Adult females (18-59)	18%	16%
Adult males (18-59)	17%	9%
Elderly females (60+)	2%	3%
Elderly males (60+)	1%	1%

Average HH size:[2] 7.6 members 7.6 members

Gender distribution of the head of the HHs:

		Female / Male
Host community	50% 50%	Female
Refugees	84% 16%	Male
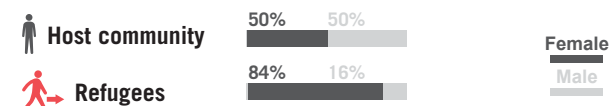
Top 3 sectors with most reported HH needs:[3]

Host community		Refugees	
Food	**63%**	Food	**61%**
Education	**59%**	Education	**58%**
Health and nutrition	**47%**	Shelter	**43%**
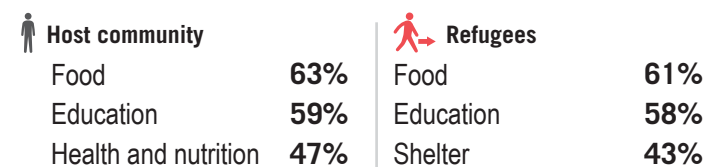
Note: For questions asked only to a subset of households, a lower confidence level and a wider margin of error may apply.

Protection

**% of HHs with at least one vulnerable member:**

|	👤	🏃
Unaccompanied or separated children	52%	57%
Individuals with chronic illnesses	26%	33%
Individuals with disabilities	31%	32%
Pregnant and/or lactating women	56%	40%
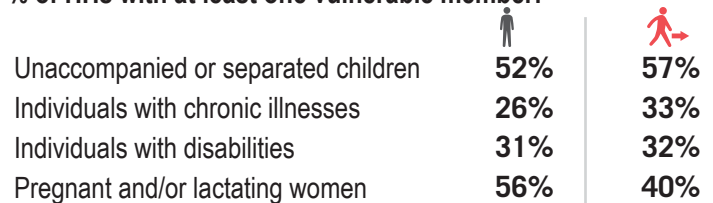
97% of the refugee HHs reported being registered in a settlement in the district.[4]

% of HHs reporting at least one member with psychological distress:

Host community		Refugees	
7%	Yes	**10%**	Yes
93%	No	**90%**	No
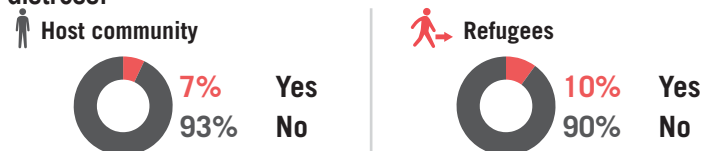
50% of the host community HHs and **51%** of the refugee HHs reported that they had not received/were unable to receive psychological care.

% of HHs that reported being reached by the following protection awareness campaigns:

	👤	🏃
SGBV	55%	80%
Child protection	57%	75%
Psycho-social	44%	64%
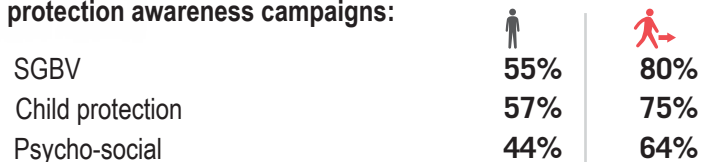
24% of the host community HHs and **46%** of the refugee HHs with at least one woman or girl of reproductive age reported that one or more women in the HH could not access sanitary pads.

1) OPM RIMS statistics, June 2018, Uganda Comprehensive Refugee Response Portal.
2) The MSNA found the average size of refugee and host community HHs to be larger than previous assessments conducted in Uganda. HH was defined as a group of members who regularly share resources, such as water, food, and living space.
3) Respondents could select multiple options.
4) Refugees are registered in settlements by Uganda's Office of the Prime Minister (OPM).

REACH Informing more effective humanitarian action

🍲 Livelihoods & Environment

Top 3 reported income source over the 30 days prior to data collection:[1]

Host community		Refugees	
Agriculture	87%	Remittances	34%
Casual labour	39%	Small business	30%
Selling natural resource	39%	Casual labour	26%

% of HHs that had access to agricultural land in the most recent harvest season:

Host community: 98% Yes, 2% No

Refugees: 68% Yes, 32% No

Top 3 reported ways HHs accessed land for agricultural purposes, for HHs that reported access to land:[1]

Host community		Refugees	
Owns the land	96%	Free through OPM	69%
Free access	3%	Free access	15%
Rents the land	1%	Rents the land	13%

72% of refugee HHs and **21%** of host community HHs that had access to land reported that it did not provide sufficient food for the entire HH in the most recent harvest season.[2]

3% of refugee HHs and **1%** of host community HHs that had access to agricultural land did not cultivate or plant crops in the most recent harvest season.

Top 3 reported reasons why HHs did not cultivate or plant crops in the most recent harvest season, of HHs that reported no cultivation:[1]

Host community		Refugees	
Lack of tools	67%	Lack of tools	43%
Lack of seeds	33%	Lack of seeds	32%
Poor cultivating season	33%	Poor cultivating season	33%

Top 3 reported livelihood coping strategies used by HHs over the 30 days prior to data collection:[1]

Host community		Refugees	
Spent savings	56%	Sold assistance	41%
Borrowed money	42%	Spent savings	27%
Sold assets	26%	Borrowed money	25%

% of HHs with access to local markets within walking distance:

Host community: 41% Yes, 59% No

Refugees: 95% Yes, 5% No

23% of refugee HHs and **69%** of host community HHs reported that they faced challenges accessing markets in the 30 days prior to data collection.

% of HHs that reporting the following primary fuel sources:

	Host community	Refugees
Firewood	89%	87%
Charcoal	11%	12%

73% of refugee HHs and **69%** of host community HHs reported having an improved cook stove.[2]

📖 Education

5% of refugee HHs with school-aged children and **12%** of host community HHs with school-aged children have at least one child not enrolled in school.

% of HHs with at least one school-aged child not enrolled in school, by age and gender:

Host community		Age	Refugees	
36%	35%	3 - 5	12%	12%
4%	2%	6 - 12	2%	2%
9%	8%	13 - 18	4%	7%

% of HHs with at least one school aged children enrolled in school, by school type:

	Host community	Refugees
ECD	13%	21%
Primary	67%	68%
Secondary	9%	6%
Other[3]	0%	0%
Not enrolled	12%	5%

Top 3 reported barriers to education for HHs with at least one school-aged child not enrolled in school:[1]

Host community		Refugees	
High costs	51%	The child is too young	43%
The school is too far	29%	High costs	28%
The child is too young	27%	New arrival	7%

Of the HHs that reported cost as a barrier to accessing education, **98%** of refugee households mentioned **tuition** while **100%** of the host community HHs reported **tuition** as the most commonly reported cost barrier.

1) Respondents could select multiple options.
2) Improved cooking stove or energy saving stoves are designed to consume less firewood and produce less fumes.
3) Other types of education include accelerated learning programme, non-formal skills training, and vocational training

Health & Nutrition

Top 3 reported health issue among HH members during the 2 weeks prior to data collection:[1]

Host community		Refugees	
Malaria	63%	Malaria	70%
Diarrhoea	26%	Diarrhoea	23%
Respiratory infection	14%	Respiratory infection	19%

Of the HHs that reported having a member with health issues in the past year and sought treatment, **38%** of refugee HHs and **52%** of host community reported facing challenges when they sought treatment.

Top 3 reported challenges in accessing health care:[2]

Host community		Refugees	
No medicine available	61%	No medicine available	57%
Distance	38%	High cost of medicine	23%
High cost of medicine	32%	Distance	22%

6% of the refugee HHs reported language barriers as a challenge when accessing health care.

% of HHs with pregnant and/or lactating women that received the following services:

	Host	Refugees
Counselling on infant and young child feeding	98%	96%
Iron and folic acid supplements or micro-nutrient supplements	92%	91%
At least 2 doses of fansidar[3]	88%	89%

Of the HHs with children, % reporting:[4]

	Host community	Refugees
Polio vaccination	98%	95%
Measles vaccination	76%	78%

% of HHs reporting owning mosquito nets:

Host community			Refugees		
93%	Yes		67%	Yes	
7%	No		33%	No	

Average number of HH members sleeping under nets:

Host community	Refugees
5.6	3.5

1) Respondents could select multiple options.
2) The question was asked to HHs that had sought health care treatment in the past year.
3) Fansidar is used to prevent and treat malaria. It can be used for pregnant women with less risks to the mother and fetus.
4) Polio vaccination is given to children between 0-5 years old. Measles vaccination is given to children aged 15 or younger .
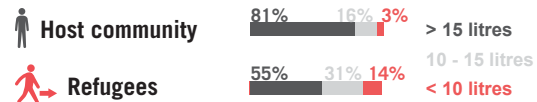5) Basic HH needs include having enough water for drinking, cooking, bathing, etc.

Water, Sanitation & Hygiene

Top 3 reported sources of drinking water:

Host community		Refugees	
Borehole	89%	Borehole	78%
Public tap	5%	Public tap	21%
Surface water	4%	Surface water	1%

% of HHs, by litres of water/person/day:

Host community	81% 16% 3%	> 15 litres
		10 - 15 litres
Refugees	55% 31% 14%	< 10 litres

Average litres of water/person/day is **18** for refugee HHs and **21** for the host community HHs.

73% of refugee HHs and **80%** of host community HHs reported not having enough water to cover the basic HH needs during the 7 days prior to data collection.[5]

Top 3 reported strategies for coping with insufficient quantity of water during the 7 days prior to data collection:[6]

Host community		Refugees	
Fetch from further point	78%	Use less for bathing	55%
Use less for bathing	24%	Fetch from further point	54%
Use non-drinking water	2%	Use less for drinking	9%

% of HHs reported challenges to collecting water:

	Host community	Refugees
Distance	20%	6%
Queuing	13%	30%
Distance and queuing	10%	13%
None	57%	50%

% of HHs with access to a functioning HH latrine:

Host community		Refugees	
81%	Yes	73%	Yes
19%	No	27%	No
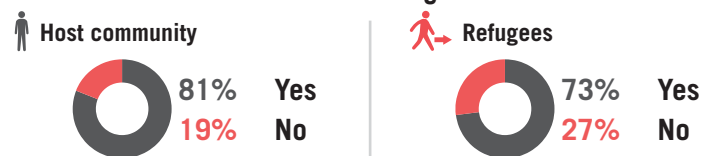
35% of the refugee HHs and **21%** of the host community HH did not have soap during data collection.

Top 3 most commonly reported reasons for HHs not to have soap in the HH:[1]

Host community		Refugees	
Soap is too expensive	45%	Soap is too expensive	84%
Other	24%	They prefer a substitute	10%
Market is too far away	16%	Waiting for distribution	3%

6)The question was asked to HHs that reported not having enough water during the 7 days prior to data collection

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🌾 Food Assistance

Top 3 reported primary source of food during the 7 days prior to data collection:

🧍 Host community		🚶 Refugees	
Own production	**62%**	Food distribution	**70%**
Bought with cash	**38%**	Bought with cash	**25%**
		Own production	**2%**
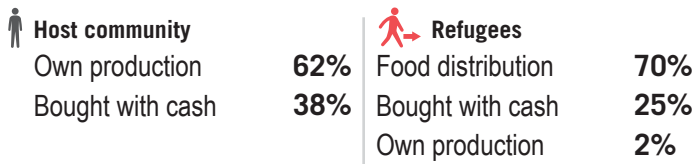
The refugee HHs that had been living in the settlement for less than one year relied less on humanitarian aid (**65%**) than refugee HHs that had lived there for one year or more (**71%**).[1]

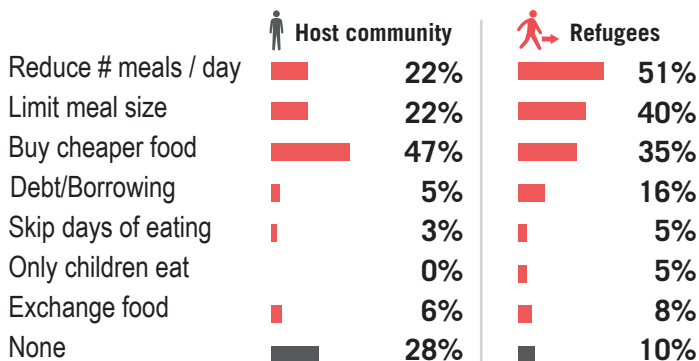**% of HHs with the following Food Consumption Scores (FCS):[2]**

🧍 Host community		🚶 Refugees
90%	**Acceptable**	81%
8%	**Borderline**	18%
2%	**Poor**	1%
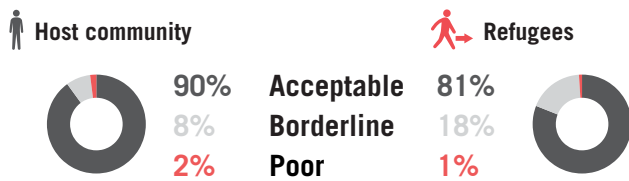
HH average food consumption score:

🧍 Host community	51	🚶 Refugees	46

% of HHs FCS by time spent in the settlement:[1]

	<6 months	7 - 11 months	1 - 2 years	>2 years
Acceptable	**74%**	**76%**	**80%**	**83%**
Borderline	**26%**	**24%**	**19%**	**16%**
Poor	**0%**	**0%**	**1%**	**1%**

% of HHs who reported having access to sufficient food for all members over the 7 days prior to data collection:

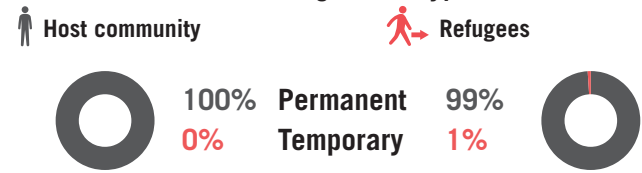| 🧍 Host community		🚶 Refugees	
78%	Yes	**45%**	Yes
22%	No	**55%**	No

% of HHs reported using food coping strategies during the 7 days prior to the data collection:

	🧍 Host community	🚶 Refugees
Reduce # meals / day	**22%**	**51%**
Limit meal size	**22%**	**40%**
Buy cheaper food	**47%**	**35%**
Debt/Borrowing	**5%**	**16%**
Skip days of eating	**3%**	**5%**
Only children eat	**0%**	**5%**
Exchange food	**6%**	**8%**
None	**28%**	**10%**

🏠 Shelter & NFIs

% of HHs with the following shelter types:[3]

🧍 Host community		🚶 Refugees
100%	**Permanent**	99%
0%	**Temporary**	1%

% of HHs that reported owning their shelter:

🧍 Host community		🚶 Refugees	
99%	Yes	98%	Yes
1%	No	2%	No

% of HHs reporting their shelters are vulnerable to leakage from rain:

🧍 Host community		🚶 Refugees	
34%	Yes	**68%**	Yes
66%	No	32%	No

15% of the host community HHs and **16%** of the refugee HHs reported that their shelter experienced flooding in the year prior to data collection.

Top 3 most commonly reported NFI priorities:

🧍 Host community		🚶 Refugees	
Bedding	**70%**	Bedding	**76%**
Water storage	**70%**	Mosquito nets	**60%**
Kitchen tools	**56%**	Water storage	**48%**
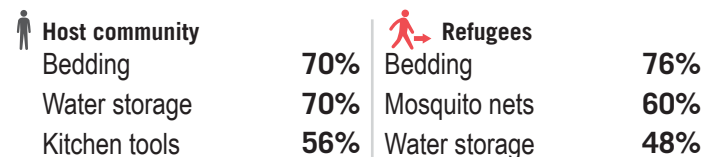
1) Disaggregation by time spent in settlement only applies to refugee households, as host community households do not live in settlements.

2) The FCS is used as proxy for HH food security and is a composite score based on 1) Dietary diversity 2) Food frequency and 3) Relative nutritional importance of the various food groups consumed by HHs. The FCS is recorded from a 7-day recall and is based on 9 weighted food groups. The FCS is used to classify households into three groups: poor, borderline or acceptable food consumption. In the Ugandan context the thresholds used are as follows: ≥ 31 – Acceptable; 28 - 30 – Borderline; ≤ 27 - Poor.

3) Permanent shelters includes mudbrick, tukul and concrete brick. Temporary shelters includes emergency tent and makeshift shelter.

For more information on this profile please contact:

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