

# DROUGHT PROTECTION NEEDS ASSESSMENT REPORT LAMU COUNTY



**HIAS**

Welcome the stranger.  
Protect the refugee.

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## LIST OF ACRONYMS

ACC	Assistant County Commissioner
ADR	Alternative Dispute Resolution
AMN	Acute Malnutrition
ASALs	Arid and Semi-Arid Lands
CBOs	Community-Based Organizations
CHS	Core Humanitarian Standards
COVID-19	Coronavirus Disease of 2019
CSG	County Steering Group
CSO	Civil Society Organizations
FGDs	Focus Group Discussions
GAM	Global Acute Malnutrition
GBV	Gender-Based Violence
IDPs	Internally Displaced Persons
IEC	Information, Education, and Communication
IPC	Integrated Phase Classification
KFSSG	Kenya Food Security Steering Group
KIIs	Key Informant Interviews
KNBS	Kenya National Bureau of Statistics
KRC	Kenya Red Cross
LGBTQI+	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and more
LAWA	Lamu Women Alliance
LTA	Long-Term Average
MEAL	Monitoring, Evaluation, Accountability, and Learning
MHPSS	Mental Health and Psychosocial Support
MUHURI	Muslims for Human Rights
NEMA	National Environment Management Authority
NDMA	National Drought Management Authority
NGOs	Non-Governmental Organizations
NRT	Northern Rangelands Trust
ONA	Organizational Network Analysis

PWDs	Persons with Disabilities
QDA	Qualitative Data Analysis
RAs	Research Assistants
SGBV	Sexual and Gender-Based Violence
SPSS	Statistical Package for the Social Sciences
UNICEF	United Nations Children’s Fund
UNESCO	United Nations Educational, Scientific and Cultural Organization
WASH	Water, Sanitation, and Hygiene
WHO	World Health Organization
WHZ	Weight-for-Height Z-Score



## EXECUTIVE SUMMARY

### INTRODUCTION

The drought situation in Kenya has a profound impact on the arid and semi-arid regions of the country. The vulnerability of the population, especially pastoralists and small-scale agriculturalists, is exacerbated by multiple factors, including climate change, insecurity, limited livelihood diversification, and poor infrastructure. The irregular distribution of rainfall, exemplified by the sporadic long rains in 2023, has resulted in significant challenges to food and nutrition security. While there have been improvements in nutrition attributed to response efforts and favorable long rains, persistent factors such as recurrent shocks, inadequate dietary intake, and elevated food prices impede sustained progress.

The situation in Lamu, characterized by a tropical monsoon and arid steppe hot climate influenced by monsoon winds, involves economic activities such as agriculture, livestock, fisheries, forestry, mining, and tourism. Lamu depends on groundwater, rainwater, and desalinated seawater for various needs.

Lamu exhibits a 67% literacy rate and an impressive 92% preschool enrollment rate, surpassing the national average of 72%. Gross enrollment rates in primary and secondary schools stand at 75% and 43%, respectively. However, the county is classified as "stressed" (IPC Phase 2), indicating minimally inadequate food consumption. This underscores the importance of continued monitoring, particularly in critical areas like nutrition, disease outbreaks, and the anticipated impact of a scaled-down drought response.

Moreover, residents in Lamu face protection issues, including child protection, violence against children, gender-based violence (GBV), and teen pregnancies. This emphasizes the necessity for comprehensive programming priorities addressing legal protection, mental health, economic inclusion, and gender-based violence for affected populations. The multifaceted challenges in Lamu necessitate a holistic and sustained approach to mitigate the impacts of drought and enhance the well-being of its inhabitants.

### METHODOLOGY

The needs assessment employed a mixed-method approach which integrated both qualitative and quantitative data collection methods within a cross-sectional study design. An inception meeting convened between the consultant and key project and Monitoring, Evaluation, Accountability, and Learning (MEAL) staff from HIAS. To determine the number of quantitative respondents, the study applied the Yamane formula through a simple random sampling method, while a purposive sampling approach was used to identify qualitative respondents. Prior to data collection, 26 research assistants (RAs) underwent comprehensive two-day training.

The household survey questionnaire engaged a total of 425 respondents, surpassing the initial target of 398. Additionally, 24 Key Informant Interviews (KIIs) and 18 Focus Group Discussions (FGDs) were conducted. Quantitative data underwent analysis using Statistical Package for the Social Sciences (SPSS), while qualitative data was processed using the Excel gridding method. The insights gleaned from both quantitative and qualitative data informed the comprehensive situational analysis report.

Considerations for gender equality, social inclusion, and adherence to core humanitarian standards were incorporated throughout the study. However, the assessment encountered certain limitations, including the unavailability of some respondents, considerable distances, and security concerns. These challenges were addressed by extending the data collection period, allocating supplementary transport resources, and modifying the fieldwork plan.

### FINDINGS

#### A. Demographic Characteristics of Respondents

In terms of immigration status, the study reveals a diverse composition, with 33.9% from the host community, 29.9% internally displaced persons (IDPs), 28.9% registered refugees, 6.6% unregistered migrants, and 0.7% asylum seekers. Most refugees, asylum seekers, and unregistered migrants come from Somalia and

Ethiopia. The respondents' distribution across different Wards illustrates varying concentrations, with Kinga (23.5%) and Witu (22.6%) having the highest representation.

The age distribution shows a diverse range, with 20.0% falling in the 35-40 age group and varying percentages across other age categories. Gender composition indicates a slight majority of male respondents (51.1%), and education levels exhibit a range from no formal schooling (20.9%) to completion of college/university (4.5%). Marital status shows that 54.6% of respondents are married. Regarding household disability status, 12.5% of households have persons with disabilities, with physical disabilities being the most prevalent (56.6%).

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## B. Needs Protection Assessment Findings

### i. Early Warning Systems and Preparedness

The National Drought Management Authority (NDMA) and the Kenya Meteorological Department play pivotal roles in providing early warning information, issuing monthly bulletins to indicate drought risk levels. However, despite the existence of these systems, challenges hinder their effectiveness, including a lack of community awareness, language barriers, illiteracy, unreliable dissemination channels, and financial constraints. The flow of information from authorities to the local community faces delays, impacting response times.

The study identifies inefficiencies in response strategies and emphasizes the need for improved communication, sensitization, and awareness campaigns using local radios, chief Barazas, community dialogues, and other channels. Various organizations exhibit adaptability in responding to drought emergencies, with World Vision Kenya redirecting funds for cash transfers and relief food. Specific protection needs arise during droughts, affecting vulnerable populations, including youth, women, refugees, and persons with disabilities (PWDs). Protection issues include school dropouts, teenage pregnancies, malnutrition, wildlife-human conflicts, and sexual and gender-based violence. In the absence of formal protection services, the community actively addresses needs through platforms like Radio Lamu and Community-Based Organizations (CBOs).

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### ii. Livelihoods and Economic Inclusion

The study reveals that 52.0% of survey participants in Lamu County have a source of income, with 58.4% engaged in farming and livestock rearing, 29.9% in business, and 18.1% in casual jobs. Economic impacts of recurring droughts affect various sectors, including agriculture, industries, and transportation, leading to financial losses, increased costs, and food price hikes. Insecurity in Lamu has resulted in population displacement, disrupting livelihoods, contributing to food insecurity, and heightening protection concerns. Respondents without income attribute it to factors like lack of capital, documentation, market access, and business ideas. Economic and livelihood support services provided to refugees and displaced populations include cash boxes, training, bee hives, and seeds, with varying effectiveness. Key contributors to financial support include Kenya Red Cross (KRC), United Nations Children's Fund (UNICEF), and the Government. Challenges faced by businesses include lack of capital, markets, high living costs, insecurity, and transportation issues. Respondents propose solutions like lowering living costs, job creation, business management training, improved transportation, establishment of learning institutions, provision of capital, market linkages, drilling wells, and enhanced security to address barriers faced by refugees, displaced populations, and vulnerable communities in their businesses.

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### iii. Food and Nutrition Security

The study reveals that communities experience food insecurity due to limited access to sufficient, safe, and nutritious food. The survey indicates that 85% of respondents reported uncertainty in their household food supply during droughts. Financial constraints, geographical barriers, and logistical challenges contribute to difficulties in accessing food, leading to price surges. The unavailability of food has severe consequences, including prolonged hunger and potential health risks. Recurring droughts exacerbate food shortages, poor dietary habits, malnutrition, and waterborne diseases. Security challenges in Basuba and Kiunga wards further complicate relief efforts, with attacks by Al-Shabaab and sea-based terrorists affecting the transfer of relief food.

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#### iv. Gender-Based Violence

The study highlights significant safety and security concerns faced by women and girls in Lamu County, particularly during drought periods. The findings reveal alarming percentages of respondents reporting various forms of gender-based violence (GBV), including physical violence (55.3%), emotional abuse (39.1%), sexual violence (31.8%), forced and early marriages (29.4%), sexual exploitation (19.5%), denial of resources, opportunities, or services (17.6%), and intimate partner violence (6.4%). Displaced women and girls face heightened vulnerability due to the lack of secure accommodations during displacement, exposing them to exploitation and potential harm.

The study emphasizes the urgent need for increased education and awareness to address GBV, with respondents recommending community-wide education on human rights and the harmful effects of GBV. Additionally, the study underscores challenges in accessing information on rights and services and seeking support for GBV cases, citing barriers such as fear of judgment, social stigma, corruption, language barriers, and the distant location of support service offices. A comprehensive and inclusive approach is recommended to overcome these barriers and address the multifaceted issues hindering the reporting and resolution of GBV cases in the community.

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#### v. Legal Protection

The study established those individuals' seeking asylum, primarily non-Kenyans, face distinct challenges and qualifications related to legal protection. Asylum is granted to those who can demonstrate a well-founded fear of persecution based on factors such as race, religion, nationality, membership in a particular social group, or political opinion. While asylum primarily applies to non-Kenyans, internally displaced persons (IDPs) within Kenya also encounter legal protection issues, including challenges related to property rights, access to basic services, and security concerns. The asylum process involves a thorough examination, with eligibility criteria based on persecution fears. The study established that 35.6% of respondents were aware of asylum procedures, while barriers beyond awareness include lack of education, discrimination, and economic constraints.

Respondents who were aware of asylum procedures mentioned consulting community elders, acquiring refugee identity cards, seeking government support, and engaging with local authorities as avenues for acquiring asylum. Barriers to obtaining legal asylum extended beyond awareness, encompassing lack of education, discrimination, and economic constraints such as low income and unemployment. The study emphasized the pivotal role of knowledge and education in navigating asylum procedures and recommended targeted initiatives to bridge the knowledge gap.

In addressing the protection needs of individuals and families affected by drought in Lamu County, the study identified key priorities, including security concerns, access to water rights, health and sanitation, and access to basic needs. Security challenges were attributed to factors like unemployment, militant attacks, land disputes, and inadequate security services.

Access to basic needs, including shelter, work, health, and education, posed challenges for diverse groups. Education and awareness of legal rights were underscored as crucial, with organizations like MUHURI playing a role in creating awareness. However, discrimination towards refugees by some institutions was noted, emphasizing the need for inclusivity initiatives. Water scarcity emerged as a significant concern, leading to children dropping out of school and engaging in labor activities to address immediate survival needs during droughts.

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#### vi. Mental Health and Psychosocial Support (MHPSS)

The needs assessment reveals pressing MHPSS challenges and priorities among vulnerable populations. 82.1% of respondents indicated that there is low awareness on the existing counseling services. This thus indicates a critical need for increased awareness efforts. Discrimination against PWDs during registration processes, youth unemployment, and climate-related emergencies further compound mental health issues. The broader community faces stressors related to insecurity, economic challenges, and health issues,

necessitating targeted interventions. Distinct patterns in MHPSS needs across demographic groups highlight the importance of tailored interventions.

The intricate link between environmental factors and mental health underscores the need for holistic approaches. Socioeconomic factors, including food insecurity, high living costs, and unemployment, significantly impact mental well-being. Changes observed after displacement, such as psychosomatic symptoms and altered behavior, emphasize the profound impact of displacement on mental health. Limited awareness of MHPSS services (17.9%) necessitates enhanced awareness strategies.

## CONCLUSIONS AND RECOMMENDATIONS

### Major Conclusions

The study underscores conclusions regarding the vulnerabilities and challenges faced by the Lamu community in the context of drought. The ineffectiveness of early warning systems, relying on the NDMA, reveals significant gaps in timely information dissemination, exacerbated by low response rates. Heavy dependence on agriculture and livestock among Lamu residents heightens vulnerability during prolonged drought, leading to losses, human-wildlife conflicts, and limited livelihood diversification.

Despite available GBV support services, persistent cases result from survivors' challenges in reporting, including stigmatization and corruption. Legal protection needs are multifaceted, urging urgent action on insecurity, water rights, health, human rights, and education. Varied perceptions of security highlight the necessity for comprehensive legal frameworks. MHPSS needs are influenced by insecurity, discrimination, and youth unemployment, stressing the importance of targeted interventions and collaborative efforts.

### Recommendations

The study suggests the implementation of the following recommendations:

- **Microfinance and Savings Groups:** Implement a program combining seed capital, access to informal financial services, and support for the establishment of savings and loan groups.
- **Community-led, Trauma-informed Approach to GBV:** Foster a community-based GBV prevention approach through capacity building, training on trauma-informed practices, and support for educational materials. This multifaceted strategy involves building community capacity through workshops and specialized training for various stakeholders, fostering trauma-informed practices in all interventions, and disseminating educational materials to raise awareness about GBV and available support services. Additionally, community engagement and empowerment, establishment of confidential reporting mechanisms, and continuous monitoring and evaluation of interventions are crucial components. By adopting this holistic approach, the community can be resilient to actively rejects violence, supports survivors, and promotes a culture of respect and equality.
- **Ensuring Access to Water Rights:** Develop and enforce legal frameworks for equitable water access. Collaborate on sustainable water projects, including public awareness campaigns on water conservation.
- **Improving Health and Sanitation Services:** Advocate for resources to improve healthcare infrastructure, collaborate for support in advanced medical conditions, and strengthen legal frameworks for health crises. Intensify public health awareness campaigns.
- **Enhancing Human Rights Protection:** The identified the need to safeguard fundamental rights, encompassing areas such as shelter, employment, healthcare, and education, particularly in the context of drought situations. In collaboration with legal aid organizations and NGOs, HIAS can address the unique challenges faced by diverse demographic groups. Specifically, education programs should be implemented to disseminate information about access to basic rights and legal procedures, focusing on vulnerable populations. This will enhance awareness and understanding among these groups.
- **Education and Awareness of Rights:** Implement targeted educational programs, collaborate with organizations providing paralegal services, and promote advocacy groups for vulnerable groups.
- **Enhancing Awareness and Accessibility of Mental Health and Psychosocial Support (MHPSS) Services:** Collaborate with local leaders, NGOs and government entities to raise awareness about

counseling services. Leverage community-level initiatives and existing organizations to ensure the availability and accessibility of mental health support. Additionally, address stigma surrounding mental health through targeted awareness campaigns and educational programs to encourage a more open and accepting community approach.

- **Inclusive Practices and Accessible Infrastructure for PWDs:** Address discrimination through inclusive practices and accessible infrastructure. Collaborate with local leaders, government agencies, and NGOs specializing in disability rights.
- **Targeted Interventions for Youth Unemployment:** Mitigate youth unemployment through job opportunities, skills development, and public-private partnerships.
- **Specific MHPSS Support Systems for PWDs during Emergencies:** Collaborate for specific MHPSS support systems during climate-related emergencies, providing accessible healthcare, financial assistance, and tailored services for PWDs.
- **Implement Resilience-Building Programs to Address Persistent Drought Shocks and Enhance Livelihoods:** Introduce interventions for sustainable water management, including the development of rainwater harvesting systems, establishment of community water reservoirs, and promotion of efficient irrigation techniques. Encourage the cultivation of drought-resistant crops through training programs, providing seeds, and supporting the adoption of resilient agricultural practices. Implement community-based early warning systems that incorporate technology and local knowledge to proactively monitor and respond to impending drought conditions. These programs should not only aim at enhancing agricultural practices but also focus on diversifying livelihood activities to reduce dependence on climate-sensitive sectors. This approach will contribute to the overall resilience of communities by promoting alternative sources of income and sustainable resource management practices.
- **Tailoring MHPSS Interventions to Diverse Community Needs in Lamu County:** Strategically align MHPSS services with specific needs identified in each community, recognizing and responding to unique psychosocial challenges faced by different populations.
- **Holistic Child Protection Strategy:** Embracing a multifaceted approach involving awareness creation, legal support, counseling, psychosocial assistance, advocacy, and fostering strategic partnerships and collaborations.



## 1.0 INTRODUCTION

### 1.1 Background and Context of the Drought Situation in Kenya

In Kenya, approximately 70% of the landmass is affected by drought, primarily in regions like the Rift Valley, Northeastern, and Eastern provinces, and the coast, which are classified as arid and semi-arid. With a total land area of 582,644 square kilometers, less than 3% is covered by forests. A significant 75% of Kenya's population relies on agriculture, which is highly dependent on rainfall. The vulnerability to food insecurity is most pronounced among pastoralists and small-scale agriculturalists in these arid and semi-arid lands (ASALs).<sup>1</sup>

The frequency of droughts in Kenya is on the rise due to the visible impacts of global climate change. Severe droughts have far-reaching consequences, affecting millions of people and resulting in significant economic losses. Frequent droughts leave communities with insufficient time to recover, and this impact is exacerbated by factors such as insecurity, limited livelihood diversification, inadequate infrastructure, poor market systems, and high volatility and risks leading to low capacity to attract investments. These factors make the population more susceptible to the effects of climate change.<sup>2</sup>

In March to May 2023, the long rains exhibited uneven patterns in their onset and distribution across the country. While most areas experienced an early to normal onset, some regions, like the southern Rift Valley and the Coastal cluster, faced delayed onset of 2-4 dekads. Additionally, parts of northwestern Marsabit, localized parts of Samburu, Turkana, Kitui, Tana River and Garissa had a late onset by 1–3 dekads. Cumulative rainfall was near or above average, {between 75% and 125% of the long-term average (LTA)} in the northern and southern Rift Valley, coastal and central parts of the country. Across the rest of the country, particularly the northern and eastern parts, above average (above 125% of the LTA) was received. However, the distribution of rainfall was uneven across the ASALs, with some areas receiving short-lived high rainfall events in late April and below-average rainfall with early cessation in May.<sup>3</sup>

A food and nutrition security assessment conducted in July 2023, using the Integrated Food Security Phase Classification (IPC), identified approximately 2.8 million people in need of humanitarian assistance, an improvement from the 4.4 million estimated during the short rains analysis in February 2023. The food security situation is expected to improve with the onset of the 2023 October to December rainfall, where the current forecast shows over 90% likelihood of an El-Nino hence above-normal rainfall is expected. The number of people requiring assistance during this period is anticipated to decrease to about 1.5 million during the October 2023 to January 2024 period when another IPC analysis will be conducted to establish the actual outcomes of the performance of the short rainy season and consequently update of the food security situation<sup>4</sup>.

The Integrated Phase Classification for Acute Malnutrition (IPC AMN) analysis in July 2023 indicated that while the situation had improved in most arid counties compared to the previous year, malnutrition levels remained elevated due to the cumulative effects of prolonged drought. There is an extremely critical situation in Turkana South, Turkana County, with an IPC AMN Phase 5 and a Global Acute Malnutrition Weight-for-Height Z-Score (GAM WHZ) of over 30%. Turkana North, Turkana West, Turkana Central in Turkana County, North Horr, and Laisamis in Marsabit County, as well as West Pokot, Mandera, Wajir, Garissa, Tana River, Samburu, East Pokot in Baringo County, and Isiolo, are experiencing a critical phase (IPC AMN Phase 4 - GAM WHZ 15 to 29.9%). Saku Subcounty in Marsabit and Laikipia County are experiencing a serious phase (IPC AMC Phase 3 - GAM WHZ 10 to 14.9 %) of acute malnutrition. Moyale, Baringo North and South, Kwale, Kitui, Kilifi, Kajiado- Rural, Meru North, Tharaka, Makeni, and Mbeere in Embu are in an alert phase (IPC

<sup>1</sup> <https://meteorology.uonbi.ac.ke/sites/default/files/cbps/sps/meteorology/Project%20on%20Disasters.pdf>

<sup>2</sup> <https://ndma.go.ke/africa-climate-summit/acs-overview-of-ndma/>

<sup>3</sup> The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

<sup>4</sup> The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

AMN Phase 2 – GAM WHZ 5 to 9.9 %). Taita Taveta, Narok, Lamu, Kajiado -urban and Kieni in Nyeri are in an acceptable phase (IPC AMN Phase 1- GAM WHZ 0 to 4.9 %)⁵.

The improving nutrition situation is mainly attributed to scale-up of response to address immediate and underlying malnutrition causes and cumulative effects of drought as well as improved food security situation, including milk availability and food stocks resulting from the good performance of the long rains in several counties. However, factors such as the cumulative effects of the five failed previous seasons, poor dietary intake among children, high morbidity, poor Water Sanitation and Hygiene (WASH), unfavorable terms of trade, high food prices and multiple recurrent shocks have slowed down the positive effects of the long rains. Over the August to October 2023 projection period, the nutrition situation is expected to improve within the same phase, except for Isiolo and Tana River which are expected to improve from Critical to Serious phase, and Saku from Serious to Alert phase⁶.

The intricate dynamics between climate, agriculture, food security, and nutrition in Kenya are evident. Despite overall improvements, the nation continues to grapple with ongoing challenges. This underscores the urgency of developing and implementing self-recovery strategies to enhance livelihoods, food, and nutrition security, thereby equipping communities to better navigate future shocks.

## 1.2 The Context of Drought Situation in Lamu County

Lamu County, comprises of Lamu East and Lamu West constituencies, has 10 County Assembly Wards, with Lamu West having 7 (Shella, Mkomani, Hindi, Mkunumbi, Hongwe, Witu, and Bahari) and Lamu East having 3 (Faza, Basuba, Kiunga).⁷ Based on Kppen-Geiger climate classification Lamu County can be said to be a mix of Tropical Monsoon and Arid Steppe Hot climate, with rainfall patterns influenced by Monsoon winds. Notably, the county faces climate change hazards linked to drought, affecting crop harvests and food prices.⁸

The county's main water sources are ground water, rainwater, and desalinated seawater with most places having saline underground water. 55% of the population have access to clean drinking water, with 31% of the households having access to piped water. Meanwhile, household energy sources vary, with 71% using firewood and charcoal. The literacy rate is 67%, and the county sees 92% preschool enrollment which is higher than the national average of 72%. The gross enrollment rates in primary and secondary schools are 75 and 43 percent, respectively.⁹

Economic activities in Lamu involve agriculture, livestock, fisheries, forestry, mining, and tourism, with agriculture being the primary sector engaging 73% of the population. The livestock sector is a means of livelihood for about 30% of the population. The county also benefits from the Indian Ocean which supports about 75% of the county's fishing, estimated to yield 1500 MT per year. The key tourist attraction areas are the Boni-Dodori National Reserve, Kiunga Marine Reserve, Takwa and Pate ruins, the Maulid, and Lamu cultural festivals. The Bajuni and Boni people depend on the forest as a source of food; they also sell honey and other wood products. Forty-five percent of the population's labour force is in the informal sector while 15 percent is in the formal Sector. Sixty-five and 88 percent of the males and females are actively involved in the economic activities of the county.¹⁰

Assessments conducted bi-annually by the Kenya Food Security Steering Group (KFSSG) in conjunction with Lamu County Steering Group (CSG) after the long rains (March-April-May) and the short rains (October-December), established that rainfall performance and insecurity are the main drivers of food insecurity. According to the Drought Early Warning Bulletin for July 2023, the dry seasons were experienced in the month of January to March, long rains April to June; dry cool season July September and short rains will be

⁵ The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

⁶ The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

⁷ [https://en.wikipedia.org/wiki/Lamu\\_County#:~:text=The%20county%20has%202%20constituencies,Faza%2C%20Basuba%20and%20Kiunga%20divisions](https://en.wikipedia.org/wiki/Lamu_County#:~:text=The%20county%20has%202%20constituencies,Faza%2C%20Basuba%20and%20Kiunga%20divisions).

⁸ [https://www.scirp.org/journal/paperinformation?paperid=129738#:~:text=According%20to%20the%20K%3B6ppen%2DGeiger%20climate%20classification%2C%20Lamu%20county%20is,540%20mm%2C%20\(KMD\)](https://www.scirp.org/journal/paperinformation?paperid=129738#:~:text=According%20to%20the%20K%3B6ppen%2DGeiger%20climate%20classification%2C%20Lamu%20county%20is,540%20mm%2C%20(KMD)).

⁹ [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_Long\\_Rain\\_Assessment\\_202320230926101906.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_Long_Rain_Assessment_202320230926101906.pdf)

¹⁰ Climate Risk Profile Lamu County

experienced in October to December 2023. The onset of the long rains was late by four dekads, occurring during the first dekad of May compared to the third dekad of March normally. The cumulative amounts received in the county was 363.2 millimeters (mm) being 47 percent above the long-term average of 246.7mm. The rains were poorly distributed in time and unevenly distributed in space across all Livelihood Zones.<sup>11</sup>

It is noted that there has been loss of crop harvest for the 5 consecutive seasons as a result of below average precipitation, high food commodity prices in markets coupled with low purchasing power of the poor & middle-income households. These factors all contribute to food insecurity.<sup>12</sup>

According to the July 2023 early warning bulletin, the proportion of children under five at risk of malnutrition with Mid Upper Arm Circumference below 135mm was stable compared to the previous month. The proportion of children under five with severe category was zero percent during the month under review, indicating decrease in the number of children with severe category. This was attributed to the provision of nutritional porridge by KRC and NSCODR and other partners.<sup>13</sup>

The rates of malnutrition cases reduced in Agro pastoral and Mixed farming Zones of Witu, Hindi and Mpeketoni areas. Improved childcare practices, increased number of integrated health outreaches delivering essential nutrition services to the malnutrition hotspots area have stabilized the condition of children under the age of five.<sup>14</sup>

According to the July bulletin 2023, the proportion of households with poor, borderline, and acceptable in the county recorded 30, 68 and two percent respectively compared to the previous month that recorded, 21,76 and three per cent respectively. There was an increase in poor food consumption households by nine, and a decrease of eight and one per cent when compared to the previous month. The population with the highest poor food consumption in the county was mixed farming with 60 per cent while Fishing zone had the highest borderline food consumption of 97 per cent, owing to reduced availability of food at households. The very poor and the poor Households have low purchasing power, thus consuming one to two meals per day with one to two food groups Food commodity prices are high in all livelihood zones. However, food prices are highest in fishing zones due to the high cost of sea travel.<sup>15</sup>

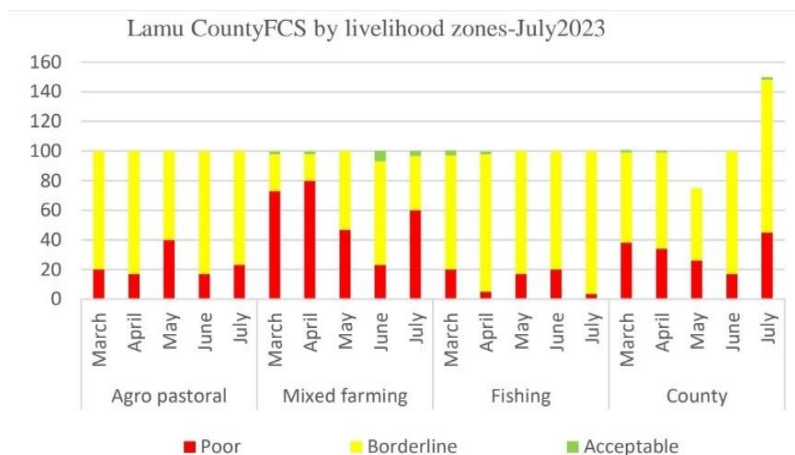


Figure 1: Lamu County FCS by Livelihood zones-July 2023

The mean coping strategy Index in the month of July recorded 14.39 showing slight increase of one per cent, when compared with the previous month of 13.85. This indicates increase in coping strategies at household level in all livelihood zones. The Agropastoral Zone had coping index of 12.1, Mixed Farming livelihood zone had 8.4 while Fishing Livelihood zone had highest coping strategy of 24.6. Common coping strategies

<sup>11</sup> Lamu County 2023 long rains food and nutrition security assessment report

<sup>12</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)

<sup>13</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)

<sup>14</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)

<sup>15</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)



employed by food insecure households in the month of July included: a reduction in the number of meals, purchase on credit, remittances from relatives, borrowing food from friends or relatives, and adopting less preferred or less expensive food.<sup>16</sup>

The bulletin also indicates that temperatures are likely to be above average through 2023. Due to the forecast of El Nino occurrence, the 2023 short rains are likely to be above average. The distance to water sources for both human and livestock is likely to decline in open water sources due to below average off seasonal rainfalls and influx, hence decline in both quality and quantity of water. Tsetse fly and tick infestation are likely to impact livestock body conditions and production, leading to a unstable livestock retain prices, particularly for cattle. This may lead to a decline in household income. Food and milk intake for children under the age of five is likely to improve, less acute malnutrition levels. Essential food commodity prices are likely to remain high, following the failure of five consecutive poor seasons and exacerbated by an upsurge in fuel prices. Households with Poor income sources are likely to continue employing food based coping mechanisms to access food from markets and shops. High influx of livestock from neighboring counties are likely to deplete the forage earlier than expected<sup>17</sup>.

The County is classified under “Stressed” (IPC Phase 2) of food security classification with most of the households having minimally inadequate food consumption, engaging in stressed and crisis coping strategies thus unable to afford some essential food and non-food expenditures due to low purchasing powers. The County is projected to remain in (IPC phase 2) between October 2023 and January 2024. According to the Kenya National Bureau of Statistics (KNBS) the county’s population projection is 167,332. The proportion of people in need of urgent humanitarian assistance reduced from 16,700 in February 2023 to 8,350 in August 2023. Factors to monitor will be (i) Nutrition situation given the high levels of acute malnutrition in arid counties. ii) Disease outbreak, water sanitation and hygiene (WASH) especially in flood prone areas given the predicted El Nino. iii) The effect of the expected drought response scale down on access to health and nutrition services to ensure continued access to services by hard-to reach populations<sup>18</sup>.

The Lamu County 2023 long rains food and nutrition security assessment report identifies protection issues affecting communities in Lamu County. Child protection is essential in providing children with a conducive environment for an all-round growth and development. However, the community and county at large have been grappling with diverse child protection issues, the main ones being family separation, child marriages, violence against children and gender-based violence and teen pregnancies, among others. The report noted that 60% of community members acknowledged the occurrence of family breakdown in their localities resulting in a high number of child separation from one or both parents. There were, however, few cases of unaccompanied children and children headed households.<sup>19</sup>

Violence against children and gender-based violence are pervasive issues within local communities. According to the 2022 Kenya Demographic and Health Survey Fact Sheet for Lamu County, alarming statistics reveal the extent of these problems. The data indicates that 34% of women aged 15 to 49 have encountered physical violence since the age of 15, 15% have experienced sexual violence, and a concerning 44% have encountered physical, sexual, or psychological/emotional violence from their most recent husband or partner if ever married or in an intimate relationship. These figures underscore the urgent need for targeted interventions and comprehensive strategies to address and mitigate the high prevalence of violence in the region.<sup>20</sup>

### 1.3 Purpose and Objectives of the Needs Assessment

The objectives for conducting the drought protection needs assessment in Lamu County were to:

- Conduct a context analysis of drought affected Lamu, including food security, livelihood, nutrition, and existing feedback/response mechanisms.

<sup>16</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)

<sup>17</sup> [http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu\\_DEW\\_Bulletin-\\_July\\_202320230825120128.pdf](http://knowledgeweb.ndma.go.ke/Content/LibraryDocuments/Lamu_DEW_Bulletin-_July_202320230825120128.pdf)

<sup>18</sup> The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

<sup>19</sup> The 2023 Long Rains Season Assessment Report by the Kenya Food Security Steering Group July 2023

<sup>20</sup> <https://dhsprogram.com/pubs/pdf/GF57/GF57Lamu.pdf>

- Identify existing protection services and gaps; evaluate challenges to access rights and services.
- Map partner organizations' contingency capacity and partner logistical capacity
- Identify protection needs and risks of vulnerable populations, particularly girls, boys, youth, women, GBV survivors, older persons, persons and with disabilities, and Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and more (LGBTQI+) specific to the drought situation.
- Determine immediate/priority needs for the local community.
- Recommend immediate programming priorities for legal protection, MHPSS, economic inclusion (including cash & voucher assistance), and GBV for refugees, internally displaced persons, and host communities.
- To conduct an assessment on early warning system for drought.

## 1.4 Scope of the Protection Needs Assessment

The study exclusively took place within the boundaries of Lamu Country. The planning and execution of the needs assessment were in full alignment with ethical and quality standards related to protection. A primary focus was placed on amplifying the voices and experiences of the affected communities.

## 2.0 STUDY METHODOLOGY

### 2.1 Evaluation Design and Approach

The needs assessment utilized a mixed-method approach, integrating both qualitative and quantitative data collection methods within a cross-sectional study design. The quantitative data was collected through use of household questionnaire while the qualitative data collection approach used participatory data collection techniques through KIIs with stakeholders and FGDs with IDPs, Asylum seekers, Refugees and the Host Community drawn from vulnerable populations, particularly women and girls, PWDs, elderly persons, youths, community leaders and community health promoters in both Lamu West and East wards in Lamu County.

### 2.2 Planning and Inception

An inception meeting was held between the consultant and key project and MEAL staff from HIAS. The inception meeting served as a platform to align on a unified approach for conducting the drought protection needs assessment. Subsequently, the consultants conducted a desk review of previous studies conducted in Lamu, articles, policies, and bulletins before developing the inception report and data collection tools. The draft inception report and tools were shared with HIAS, which provided feedback. The feedback was incorporated into the inception report and data collection tools. The revised versions were then approved by HIAS before commencing the actual data collection process.

### 2.3 Sampling Design and Approach

Participants for both the quantitative and qualitative components of the study were chosen using distinct sampling methods. Simple random sampling was employed for the selection of respondents contributing to the quantitative data, ensuring a random and representative sample. In contrast, purposive sampling was utilized to deliberately select participants for the qualitative aspect, allowing for a targeted and purposeful inclusion of individuals with specific characteristics or experiences relevant to the study objectives.

Government officials and local administrators played a vital role in facilitating the mobilization of respondents within each ward. The respondents were gathered at central locations, where research assistants engaged some of them as survey respondents and others as participants in FGDs. Additionally, KII participants were engaged through face-to-face interactions. Phone and zoom interviews were also accommodated upon request by the respondents.

#### A. Simple Random Sampling

The Yamane formula applied for infinite large population (more than 10,000) was utilized. The study respondents were randomly selected at the household level from vulnerable IDPs, refugees and host communities. The sampling frame was prorated in accordance with the refugee population in Lamu East and West constituencies. The formula was considered since little was known about the population of interest<sup>21</sup>.

$$n = \frac{N}{1 + \frac{N}{N^2}}$$

Where:

- $n$  is the required sample size.
- $N$  is the total population size.

$$n = N / (1 + N(e)^2).$$

<sup>21</sup> [https://study.com/academy/lesson/how-to-determine-sample-size.html#:~:text=What%20is%20the%20formula%20for,%2BN\(e\)2.](https://study.com/academy/lesson/how-to-determine-sample-size.html#:~:text=What%20is%20the%20formula%20for,%2BN(e)2.)

$$n=143,920/(1+143920(0.05)^2)$$

Where;

n = the sample size

N =143,920 the population of Lamu County as per the 2019 Kenya Population and Housing Census report<sup>22</sup>.

e = 0.05, which is the margin error in the calculation

n ≈ 398

## B. Purposive Sampling

Purposive sampling was used to identify key respondents to participate as KIIs. The KII respondents were drawn from government representatives, Non-Governmental Organizations (NGOs), International NGOs, and CBOs. The KII identification process involved mapping respondents within each category through desk reviews, with additional individuals identified through the snowballing technique.

The purposive sampling technique was also applied in the selection of FGD respondents. Participants for FGDs were categorized as IDPs, Refugees, and members of the Host Community, with a focus on vulnerable populations, specifically targeting women and girls, PWDs, elderly individuals, youths, community leaders, and community health promoters.

## 2.4 Data Collection Approach and Techniques

A two-day training of 26 RAs was conducted. The RAs were trained on the purpose and objectives of needs assessment, data collection tools and techniques, how to administer the household questionnaires and FGD guides to the affected communities, and how to accurately record the respondents' feedback. The team was also trained in safeguarding and ethical considerations to ensure protection of study respondents during the data collection process.

Throughout the study a combination of primary and secondary data collection approaches, incorporating both qualitative and quantitative methods were utilized. Mobilization of study respondents was done prior to the commencement of the data collection, thus strategically minimizing potential challenges and inconveniences during the study. The primary data collection tools used during the study include:

### i) Survey Questionnaire

The survey questionnaire was successfully administered to a total of 425 respondents (217 males, 206 females while 2 preferred not to reveal their gender), surpassing the initial target of 398, resulting in 106.8% response rate. The survey questionnaire was physically administered by the RAs where they first explained the survey's purpose and sought verbal consent before conducting interviews. Utilizing web-based technology on the Organizational Network Analysis (ONA) platforms, the RAs recorded and captured responses, opinions, perceptions, comments, and submitted the data directly to central servers. Table 1 below shows the numbers reached per ward.

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<sup>22</sup> <https://www.knbs.or.ke/download/2019-kenya-population-and-housing-census-volume-ii-distribution-of-population-by-administrative-units/>

Name of Ward	Frequency	Percent
Shela	12	2.8%
Mkomani	18	4.2%
Hindi	76	17.9%
Mkunumbi	71	16.7%
Hongwe	21	4.9%
Witu	96	22.6%
Bahari	19	4.5%
Kiunga	100	23.5%
Other	12	2.8%
<b>Total</b>	<b>425</b>	<b>100%</b>

Table 1: Survey Respondents Disaggregated by Ward

## ii) Key Informant Interviews

A total of twenty-four KIIs drawn from government, CBOs, NGOs, and organizations providing protection services for refugees and vulnerable population in Lamu county and national level were conducted. The KIIs conducted are as shown in the table below.

No.	Designation	Institution
1.	Gender officer	County Government
2.	Chief Officer- Devolution, disaster management	County Government
3.	OCS Hindi Police Station	Kenya Police Service
4.	OC Crime Mokowe Police Station	Kenya Police Service
5.	OCS Amu Police Station	Kenya Police Service
6.	Program officer	Kiunga Youth organization
7.	Mental Health Doctor.	King Fahad Hospital Lamu
8.	Program director	Lamu Women Alliance (LAWA)
9.	Assistant County Director	National Drought Management Authority (NDMA)
10.	Assistant County Commissioner	National Government
11.	Tracing Officer	Kenya Red Cross (KRC)
12.	County coordinator	Muslims for Human Rights (MUHURI)
13.	Project Officer-Child Protection participation and safe-guarding	World Vision
14.	Child learning and Household Resilience officer	World Vision
15.	County Director	NDMA
16.	County Director	National Environment Management Authority (NEMA)
17.	County Director	Metrological Department

18.	Programme Coordinator	Lamu Organization for Youth and People with Disability
19.	Programme Coordinator	Sauti ya Wanawake Pwani
20.	Programme Coordinator	Wetlands International
21.	Director	Lamu women for peace and development
22.	Chairperson	Lamu youth assembly
23.	Chairperson	Lamu Youth Alliance
24.	Programme Coordinator	PAD-MAD KENYA

Table 2: Key Informants Engaged in the Drought Protection Needs Assessment

### iii) Focus Group Discussions

Eighteen FGDs were conducted, involving participants from vulnerable populations, including women, girls, youth, older persons, and individuals with disabilities. Each FGD was comprised of 8 to 10 participants, demonstrating a conscientious and inclusive methodology that recognized the importance of diversity and gender dynamics. Additional information pertaining to the executed FGDs is outlined in table 5.

No.	Group Description	Male	Female	Total Number of Respondents
1.	Women and Girls – Host Community in Mkomani	0	8	8
2.	People with Disabilities – Host Community in Mkomani	8	0	8
3.	People with Disabilities – Internally Displaced Persons in Hindi	9	0	9
4.	Elderly – Internally Displaced Persons in Hindi	6	4	10
5.	Persons with Disabilities – Host Community in Hindi	6	3	9
6.	Youths – Host Community in Hindi	4	4	8
7.	Women & Girls – Internally Displaced in Hindi	0	8	8
8.	Youths – Internally Displaced in Hindi	4	4	8
9.	Village Elders and Community Elders in Mkunumbi	7	1	8
10.	Community Health Promoters in Bahari Ward	1	9	10
11.	Youth – Internally Displaced Persons in Mkunumbi	3	5	8
12.	Elderly IDPs in Mkunumbi	5	3	8
13.	Community Leaders in Witu	4	4	8
14.	Youth in Witu	7	1	8
15.	Elderly IDPs in Witu	1	7	8
16.	Women IDPs in Witu	0	8	8
17.	Refugees and Displaced Populations in Kiunga	3	5	8

18.	Women and Girls in Kiunga – Refugees	0	8	8
<b>Totals</b>		<b>68</b>	<b>82</b>	<b>150</b>

Table 3: Focus Group Discussions Conducted in Lamu

## 2.5 Data Analysis and Management

The assessment incorporated a robust data management strategy to ensure the efficient and effective collection, processing, storage, and retrieval of information in the field. It employed a combination of quantitative and qualitative data analysis techniques to address specific evaluation questions. To analyze quantitative data, a thorough data cleaning process was executed to identify and rectify errors and inconsistencies. Descriptive analysis was then conducted to examine variations in the data across different groups, calculating measures such as mean, percentage, and frequency. The analysis of quantitative data was carried out using SPSS version 25.

For qualitative data analysis (QDA), the Excel Gridding Method was employed. This involved organizing, reviewing, and categorizing qualitative data to extract relevant ideas, themes, concepts, or phrases. Subsequently, qualitative data was triangulated with quantitative data to provide a comprehensive understanding of drought protection needs, backed by robust evidence and insights.

## 2.6 Report Development and Dissemination

Quantitative and qualitative information generated from the analysis and desk review served as the foundation for the development of the needs assessment report. The consulting team actively collaborated with HIAS in feedback sessions following the development of both the initial and revised draft reports, fostering a collaborative exchange of input and feedback.

To further enhance stakeholder involvement, a validation workshop was organized. The workshop served as a platform for key stakeholders to contribute additional insights to the reported findings and stay informed about the study's progress. The valuable feedback gathered during the validation meeting played a crucial role in shaping the final needs assessment report.

## 2.7 Study Considerations

The needs assessment keenly took into account ethical considerations, gender equality, social inclusion, and the core humanitarian standards outlined below:

### 2.7.1 Ethical Considerations

1. In the data collection phase, respondents were guaranteed the confidentiality of information collected from them, as clearly stated in the introductory section of all tools. Moreover, during FGD sessions, participant names were not documented, and video recordings were prohibited, thereby reinforcing the confidentiality measures. The data collected was also solely utilized for the study purposes.
2. Participation in the study was entirely voluntary and based on obtaining informed consent. This involved thoroughly explaining the study's purpose to the respondents and informing them of the potential direct or indirect of the data collection exercise.
3. The interactions between the consultants and the participants as well as among the respondents were based on mutual respect and trust.
4. To uphold confidentiality during data processing and reporting, precautions were taken to avoid making explicit references to study participants or indicating statements made by respondents. Additionally, personal information was intentionally excluded when processing data from KIIs.
5. The study strictly adhered to the "do no harm" principle, with consultants conducting their actions and activities with utmost sensitivity and respect for the diverse beliefs, customs, and values of all



stakeholders and participants. In alignment with the principles articulated in the UN Universal Declaration of Human Rights, any occurrences of discrimination were promptly addressed. Additionally, the consultants addressed instances of discrimination and actively promoted gender equality throughout the course of the study.

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### 2.7.2 Gender Equality and Social Inclusion

1. **Expertise in Gender Sensitivity:** The consultancy team, under the leadership of an experienced consultant well-versed in conducting gender-sensitive studies, ensured that every facet of the assignment adhered to the fundamental principles of gender inclusivity throughout the assessment process.
2. **Inclusivity in Team Composition:** The consulting team was deliberately structured to ensure gender inclusivity, with equitable representation of all genders across all levels of the assignment. The team comprised 5 consultants (4 males, 1 female), 2 field supervisors (1 male, 1 female), and 25 research assistants (8 males, 17 females).
3. **Inclusive Sampling Design:** Our sampling design considered gender diversity and aimed to achieve balanced representation of different genders among the study respondents.
4. **Gender-Sensitive data Analysis:** Throughout the data analysis process, we maintained a sensitivity to gender-related issues by ensuring the inclusion of diverse viewpoints from beneficiaries and respondents.
5. **Disaggregated Data Analysis:** The data collected during the assignment underwent a detailed disaggregation by age, sex, and gender, offering a thorough understanding of the diverse demographic groups involved and impacted by drought in Lamu County.
6. **Inclusive Voices:** The analysis gave priority to the perspectives and voices of both males and females, ensuring that gender considerations were effectively integrated into the assessment.

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### 2.7.3 The Core Humanitarian Standards

The needs assessment was carried out in strict adherence to the nine commitments that constitute the Core Humanitarian Standards (CHS). The application of the CHS on Quality and Accountability throughout the research, ensured the study's quality and effectiveness while promoting increased accountability to communities and individuals affected by the crisis during the protection needs assessment. The study team promoted respect for the fundamental human rights of refugees and vulnerable population by taking measures that guaranteed the protection, safety, and security of respondents during the data collection process. Staff engaged in the study received the necessary support to carry out their responsibilities effectively and were treated with fairness and equity. Local staff were recruited by the consulting team, and efforts were made to enhance their capacities while mitigating potential negative effects. Prompt attention was given to complaints from both staff and study respondents. The resources provided by HIAS for conducting the assessment were managed responsibly and utilized judiciously.

## 2.8 Study Limitations and Mitigations

1. **Modification of Field Work Plan:** Following an initial reconnaissance visit, the study had originally focused on the 7 Wards in Lamu West due to security concerns. However, a change in plans occurred after receiving guidance from the Assistant County Commissioner (ACC) in Hindi, who pointed out that Lamu West primarily houses internally displaced populations and has only a small number of refugees. The ACC further advised the study team that most refugees in Lamu are situated in Kiunga which is in Lamu East. As a result, data collection in Lamu West was compressed into two days, while a separate team was recruited and trained to carry out a one-day data collection in Kiunga to align with the new geographic focus.
2. **Respondents Availability:** Some of the mapped out and targeted key informants had busy schedules thus difficulty in engaging them during the planned data collection period. This has been mitigated by extending the data collection phase and engaging the respondents through phone interviews and online platforms such as Zoom.



3. **Extensive Geographical Coverage:** Lamu County encompasses a vast area, requiring research assistants to traverse considerable distances during data collection. To enhance their mobility and ensure efficiency, supplementary transportation resources were allocated to support them case by case.
4. **A Small Sample of Asylum Seekers:** The study acknowledges a potential limitation in its representation of asylum seekers in Lamu, as only three individuals from this demographic were reached through the research process which employed a simple random sampling approach. The small sample size of asylum seekers may impact the generalizability of findings to the broader asylum seeker population in Lamu. It is essential to recognize that the insights gained from this limited sample may not fully capture the diverse perspectives and experiences of the entire asylum seeker community in the region. Consequently, caution should be exercised in extrapolating the study's conclusions to the broader asylum seeker population in Lamu.

## 3.0 STUDY FINDINGS

### 3.1 Demographic Characteristics of Respondents

#### 3.1.1 Immigration Status of Survey Respondents

The study revealed that 33.9% of the respondents were members of the host community, 29.9% were IDPs, 28.9% were registered refugees, 6.6% were unregistered migrants, and only 0.7% were asylum seekers as illustrated by table 4.

Legal Status	Frequency	Percent
Host community	144	33.9%
Registered Refugee	123	28.9%
Internally Displaced Person	127	29.9%
Unregistered migrant	28	6.6%
Asylum seeker	3	0.7%
<b>Total</b>	<b>425</b>	<b>100%</b>

Table 4: Immigration Status of Respondents

The study further established that the refugees, asylum seekers, and unregistered migrants came from Somalia and Ethiopia where 77.1% of them arrived more than a year ago, 13.2% had arrived less than two months ago, 4.9% had arrived three to six months ago, and 4.9% had arrived six to twelve months ago.

The study also noted that IDPs had moved from Barigoni, Basuba, Bobo, Bothei, Chalaluma, Chara, Danisa, Garissa, Garsen, Gede, Hindi, Hola, Ijara, Isiolo, Juhudi, Kaisari, Kilelengwani, Kilifi, Kipao, Kitumbini, Kwa sasi, Lamu, Magogoni, Mandera, Mangai, Meru, Milimani, Mokowe, Msumarini, Murang'a, Nairobi area, Ndununi, Nyadha, Pangani, Poromoko, Riketa, Roka, Salama, Tana River, Turkana, Witu while others moved within their local areas. 77.2% of the IDPs had arrived more than one year ago, 16.5% had arrived six to twelve months ago, 5.5% had arrived three to six months ago and only 0.8% had arrived less than two months ago.

Distribution of respondents by wards revealed that 23.5% were from Kiunga, 22.6% from Witu, 17.9% from Hindi, 16.7% from Mkunumbi, 4.9% from Hongwe, 4.5% from Bahari, 4.2% from Mkomani, and 2.8% from Shela.

	Frequency	Percent
Shela	12	2.8%
Mkomani	18	4.2%
Hindi	76	17.9%
Mkunumbi	71	16.7%
Hongwe	21	4.9%
Witu	96	22.6%
Bahari	19	4.5%
Kiunga	100	23.5%
Other	12	2.8%
<b>Total</b>	<b>425</b>	<b>100.0%</b>

Table 5: Distribution of Respondents by wards

### 3.1.2 Age Category of Survey Respondent

Survey findings revealed that 20.0% of respondents' ages ranged from 35 to 40 years, 15.8% of the respondents' ages ranged from 25 to 30 years, 15.5% of the respondents' ages ranged from 31 to 34 years, 15.3% of the respondents' ages ranged from 18 to 24 years, 12.5% of the respondents' ages ranged from 41 to 45 years, 7.1% of the respondents' ages ranged from 50 to 55 years, 7.1% of the respondents were above 55 years, 6.6% of the respondents' ages ranged from 46 to 49 years, and only 0.2% of the respondents did not know their ages.

Age Category	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Between 18-24 years	22.2%	10.6%	12.6%	10.7%	33.3%	15.3%
Between 25-30 years	21.5%	8.1%	16.5%	10.7%	66.7%	15.8%
Between 31-34 years	18.8%	17.1%	11.0%	14.3%	0.0%	15.5%
Between 35-40 years	13.2%	26.8%	18.1%	35.7%	0.0%	20.0%
Between 41-45 years	13.2%	14.6%	10.2%	10.7%	0.0%	12.5%
Between 46-49 years	6.9%	6.5%	7.9%	0.0%	0.0%	6.6%
Between 50-55 years	2.8%	7.3%	11.8%	7.1%	0.0%	7.1%
Above 55 years	1.4%	8.9%	11.8%	7.1%	0.0%	7.1%
Don't know	0.0%	0.0%	0.0%	3.6%	0.0%	0.2%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 6: Age Distribution of Respondents

### 3.1.3 Gender of Survey Respondents

The study established that 51.1% (64.3% unregistered migrants, 53.5% IDPs, 49.6% registered refugees, 47.9% host community and 33.3% asylum seekers) of the respondents were male, 48.5% (66.7% asylum seekers, 52.1% host community, 49.6% registered refugees, 46.5% IDPs, and 32.1% unregistered migrants) were female and only 0.5% (3.6% unregistered migrant, and 0.8% registered refugees) preferred not to say as illustrated in figure 1.

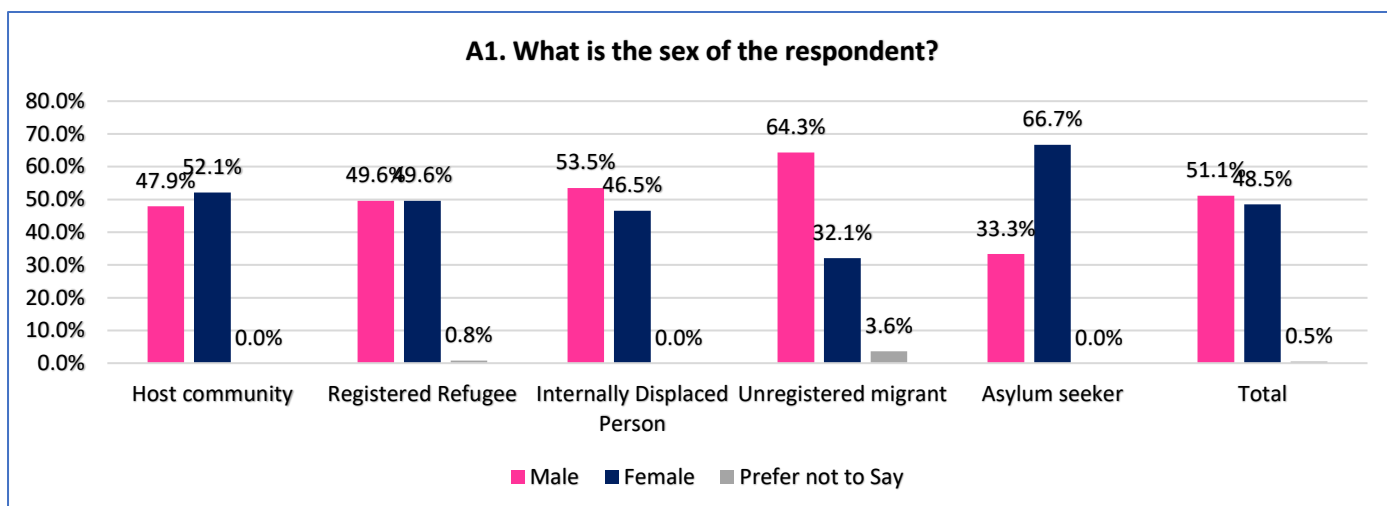


Figure 2: Gender Composition of Respondents

### 3.1.4 Education Level of Survey Respondents

Survey findings informed the study that 20.9% of the respondents had no formal schooling, 20.2% of the study respondents had completed primary school, 19.3% of the study respondents had completed secondary school, 18.1% of the study respondents had not completed primary school, 11.1% of the study respondents had not completed secondary school, 4.5% of the study respondents had completed college/ university, 2.6% of the study respondents had not completed college/ university, 2.1% of the study respondents had completed madrasa/ duksi while only 1.2% of the study respondents preferred not to say.

Educational Level	Host community	Registered Refugee	Internally Displaced Person	Unregistered migrant	Asylum seeker	Total
No formal schooling	9.7%	38.2%	15.7%	21.4%	66.7%	20.9%
Primary school incomplete	13.2%	14.6%	27.6%	17.9%	0.0%	18.1%
Primary school completed	18.8%	18.7%	26.0%	7.1%	33.3%	20.2%
Secondary school incomplete	10.4%	13.0%	11.0%	7.1%	0.0%	11.1%
Secondary school completed	30.6%	8.9%	15.7%	25.0%	0.0%	19.3%
College/University incomplete	4.2%	1.6%	0.8%	7.1%	0.0%	2.6%
College/University completed	11.1%	0.0%	2.4%	0.0%	0.0%	4.5%
Prefer not to say	0.7%	1.6%	0.0%	7.1%	0.0%	1.2%
Madfrassa/ Duksi	1.4%	3.3%	0.8%	7.1%	0.0%	2.1%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 7: Education Status of Household Respondents

### 3.1.5 Marital Status of Survey Respondents

The survey findings showed that 54.6% of the survey respondents were married, 19.8% were never married, 8.5% were divorced, 8.2% were separated, 5.2% were widowed, and 3.8% preferred not to say as shown in table 7.

<b>Marital Status</b>	<b>Host community</b>	<b>Registered Refugee</b>	<b>IDPs</b>	<b>Unregistered migrant</b>	<b>Asylum seeker</b>	<b>Total</b>
Never married	30.6%	13.0%	15.0%	14.3%	33.3%	19.8%
Currently married	52.1%	52.8%	59.1%	53.6%	66.7%	54.6%
Separated	5.6%	11.4%	7.1%	14.3%	0.0%	8.2%
Divorced	6.9%	13.8%	6.3%	3.6%	0.0%	8.5%
Widowed	2.8%	4.1%	8.7%	7.1%	0.0%	5.2%
Prefer not to say	2.1%	4.9%	3.9%	7.1%	0.0%	3.8%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 8: Marital Status of Household Heads

### 3.1.6 Household Disability Status

The study revealed that only 12.5% (14.3% unregistered migrants, 14.2% IDPs, 13.0% registered refugees, and 10.4% host community members) of the respondents' households had PWDs while 87.5% of the respondents' households did not have PWDs as shown by figure 2.

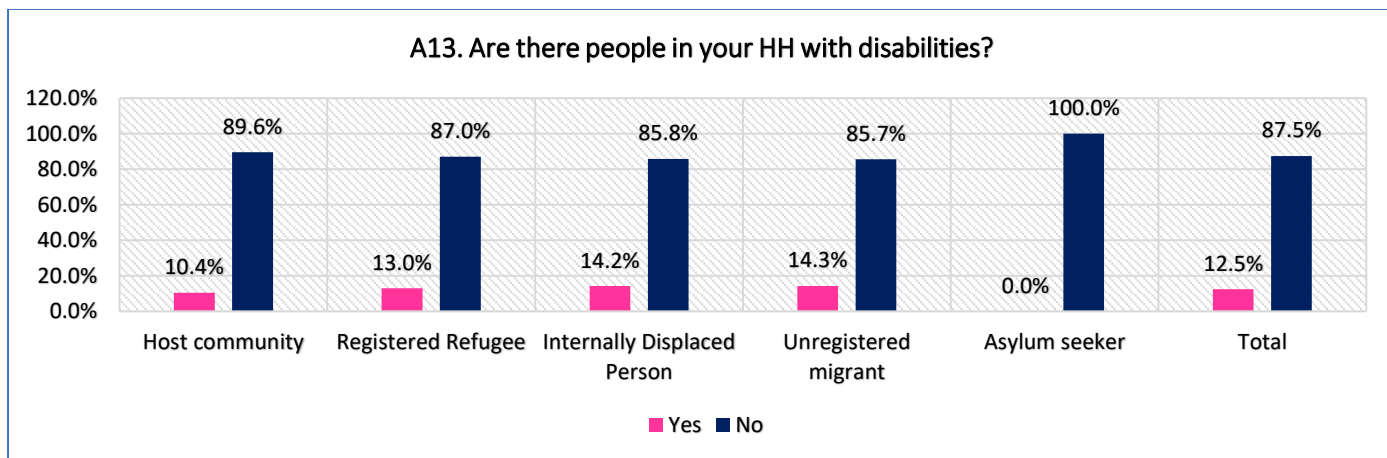


Figure 3: Household Disability Status

The study also revealed that 56.6% of the PWDs had physical disabilities, 34.0% of the PWDs had mental disabilities, 11.3% of the PWDs had hearing impairments, 11.3% of the PWDs had vision impairments and only 5.7% of the PWDs had other disabilities.

### 3.1.7 Size of the household

The assessment established that, on average, the largest household size for both males and females is in the 18-59 years age group; the smallest household size is for females aged 60 years and above; the age group with the smallest household size for males is also 60 years and above while the 18-59 years age group has the highest mean household size for both males and females.

Table 9: Mean Household size by gender

Mean Household size by gender	
<b>Males in the HHs</b>	
0-4 years	0.87
5-17 years	1.33
18-59 years	1.97
60+ years	0.84
<b>Females in the HHs</b>	
0-4 years	0.94
5-17 years	1.3
18-59 years	1.4
60+ years	0.62

## 3.2 Needs Protection Assessment Findings

### 3.2.1 Early Warning Systems and Preparedness

**#Existence of early warning systems:** The NDMA is a public body established by the NDMA Act, 2016, with a mandate for overall coordination of matters related to drought risk management in Kenya. The NDMA, either independently or in collaboration with stakeholders, is tasked with establishing mechanisms to alleviate drought emergencies.<sup>23</sup> The drought protection needs assessment conducted in Lamu revealed that the existing early warning systems, primarily rely on the NDMA and the Kenya Meteorological Department.

Study respondents highlighted the critical role played by the NDMA in drought protection and early warning systems. The NDMA performs key functions such as generating, consolidating, and disseminating early warning information on drought risk. Monthly drought monitoring bulletins are issued, indicating the current level of drought risk, ranging from Normal to Alert, Alarm, and Emergency. The NDMA collaborates with stakeholders, including the meteorological department and the county government, to plan and implement strategic projects enhancing drought preparedness and climate change adaptation.

*As of now, we use Drought Information, and Assessments- which are used to inform Response and build Resilience. We also do data collection and information to produce monthly bulleting. The combined monthly bulleting and Assessment inform Response interventions and Response building and reconnaissance. – KII with Government Representative in Lamu*

**#Effectiveness of the Systems:** Despite the presence of early warning systems, discussions with KII respondents revealed challenges affecting their effectiveness. Challenges include the community's lack of awareness about early warning systems and preparedness measures, translation of early warning information into local languages during information dissemination; illiteracy, unreliable dissemination channels such as television, radio, sensitization meetings conducted by NDMA and Kenya Meteorological department, and messengers with donkeys on the island and parts of the mainland who address people to let them know what to expect during drought; and financial constraints, creating a gap between existing mechanisms and the practical understanding and preparedness of the local population.

*The following are the current early warning systems for drought in Lamu and their effectiveness; Risk Knowledge: Risk assessment gives useful data to set precedence for alleviation and avoidance mechanisms and design timely warning systems. Monitoring and Predicting: Systems with monitoring and predicting abilities give a timely approximation of the Likely risk that the communities face, economies, and the surroundings. Disseminating Information: Communication systems are useful for giving warning alerts to the likely affected areas to sensitize local and regional governmental bodies. The alerts must be dependable, Synthetic, and straightforward for the public to understand. Response: Coordination, proper Power, and suitable act plans are major in successful early warning in Lamu County. – KII with NGO Representative in Lamu*

The study further identified inefficiencies in the flow of information from authorities to the local community. Delays in the dissemination process from top offices, such as the Meteorological Department, to local authorities, and subsequently to the community, contribute to late or non-existent responses. People's ignorance of warning systems, lack of knowledge on preserving farm products, and managing livestock during water scarcity periods were also cited as factors reducing the effectiveness of early warning systems.

*“The county government informs the agriculture department and the local members about drought. This system is not effective as most people don't get informed about the information being passed on as some live too far away or their areas are inaccessible. Sometimes the information is passed from the top offices of the metrological department and delays before they pass the same to the local authority for them to tell the community. Improvements needed include that follow-up should be strictly followed and no information to remain undelivered”- KII with Mental Health Doctor in Lamu*

<sup>23</sup> <https://ndma.go.ke/about-ndma/>

*The early warning system in Lamu County is not effective, this is because people are not taking it seriously. The local mwananchi doesn't know how to prepare him/herself for drought resilience. This is because they are not educated on the methods to preserve or the kind of crops to farm to get a good harvest during drought season. There should be communication sensitization and awareness of preparedness for drought. They should use local radio stations, chief Barazas, community dialogue, maskani dialogues, sports, and games in the dissemination of information. They should also use the stakeholders in the dissemination of the information, which will be more effective. – KII with NGO Representative in Lamu*

**#Drought Response Strategies:** While some organizations, like World Vision Kenya, do not have specific projects for drought response, they demonstrate flexibility and resourcefulness by repurposing funds during emergencies. For instance, in 2022, World Vision Kenya redirected funds to implement cash transfers and provide relief food in response to the drought. Red Cross Kenya, with over thirty years of experience, takes a proactive approach by training the community on drought preparedness, emphasizing strategies such as preserving farm products and avoiding construction in vulnerable areas. The variations in drought response strategies underscore the adaptability and resourcefulness of organizations in addressing unforeseen challenges.

Despite having drought response strategies, the study revealed specific protection needs during such periods, particularly among vulnerable populations such as youth, women, refugees, and PWDs. Issues of inclusion and the neglect of PWDs were noted. Other protection issues include a high rate of school dropouts and teenage pregnancies, malnutrition among underage children, loss of lives due to attacks in Lamu County, water shortages, wildlife-human conflicts, and an increase in sexual and gender-based violence. Vulnerable communities, especially in Boni areas, were highlighted as the most affected.

*We've heard cases where a PWD has been left alone or just moved from one family member to another since the parent who is the father has to go herding looking for pasture for the cattle due to drought. Family and we PWDs facing difficulties in making ends meet due to poverty caused by drought. – FGD with IDP PWDs in Lamu*

*During drought season, every community suffers. The immediate need is wildlife-human conflicts, whereby they fight over natural resources, there is an increase in sexual and gender-based violence whereby most girls are being used to get money and uneven distribution of resources. The community should be sensitive to the effects of not reporting or not taking action on GBV cases. The government should set an effective criterion for distributing resources to the community such as to wildlife, there should be allocation of boundaries and control of the wildlife from interfering with human activities. – KII with NGO Representative in Lamu.*

In the absence of formal protection services, the community in Lamu County actively addresses protection needs during droughts. Local radio stations, such as Radio Lamu, serve as platforms for disseminating information and addressing community needs. Additionally, Community-Based Organizations (CBOs) conduct regular meetings to educate people on various topics, providing training on surviving droughts and other challenges. Some organizations, particularly those serving people with disabilities, maintain records and stay in regular contact with individuals in the interior areas.

*In Lamu, we have a famous radio station called Radio Lamu which has presenters who are used to address the local community about their needs during drought. CBOs also do regular meetings to educate people on different topics where people are able to get training on what to expect during drought and possible techniques to survive when any pandemic befalls the county. We serve as an organization for people with disabilities and we have their records in our offices each one of them well recorded and their families. We have advanced up to the interior areas and we were successful in reaching a good number who we always keep in touch with to make sure they are good. – KII with NGO Representative in Lamu*

### 3.2.2 Livelihoods and Economic Inclusion

**#Source of Income:** Quantitative analysis informed the study that 52.0% of the survey participants had a source of income and only 48.0% did not. Those with a source of income disclosed the primary avenues through which they earned a living. The majority, representing 58.4%, were engaged in farming and livestock rearing, 29.9% in business such as selling “*viazi kara*”, “*bodaboda*” and fishing, 18.1% in casual jobs, 8.6%



in formal employment, 3.6% received reliefs and donations, 1.4% received remittances from family and friends, and 0.5% were involved in mining activities, as indicated in Table 9.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Farming/ livestock	36.1%	59.4%	92.7%	50.0%	100.0%	58.4%
Business/ self-employment	45.8%	20.3%	18.2%	22.2%	100.0%	29.9%
Formal employment	14.5%	9.4%	0.0%	5.6%	0.0%	8.6%
Casual jobs	16.9%	12.5%	21.8%	33.3%	0.0%	18.1%
Relief / donation	3.6%	4.7%	3.6%	0.0%	0.0%	3.6%
Remittances from family and friends	0.0%	1.6%	1.8%	5.6%	0.0%	1.4%
Mining	1.2%	0.0%	0.0%	0.0%	0.0%	0.5%
Other	6.0%	7.8%	0.0%	5.6%	0.0%	5.0%

Table 10: Respondents' Sources of Income by legal status

Further disaggregation by gender revealed the disparities that exist among the different genders when it comes to sources of income. This is as illustrated by table 10.

	Male	Female	Nonbinary	Prefer not to Say	Total
Farming/ livestock	64.8%	50.5%	0.0%	0.0%	58.4%
Business/ self-employment	26.6%	35.2%	0.0%	0.0%	29.9%
Formal employment	8.6%	8.8%	0.0%	0.0%	8.6%
Casual jobs	14.8%	22.0%	0.0%	50.0%	18.1%
Relief / donation	2.3%	5.5%	0.0%	0.0%	3.6%
Remittances from family and friends	0.8%	2.2%	0.0%	0.0%	1.4%
Mining	0.8%	0.0%	0.0%	0.0%	0.5%
Other	3.1%	6.6%	0.0%	50.0%	5.0%

Table 11: Respondent's Sources of Income by Gender

KIIs revealed that Lamu County faces recurring droughts with severe economic repercussions, affecting various sectors and stakeholders. Farmers and ranchers incur financial losses due to crop and livestock destruction, necessitating investments in irrigation and establishment of new wells. Industries linked to agriculture, such as tractor manufacturing and food production, experience reduced business due to damaged crops and livestock. Timber industry workers are impacted by wildfires, and water-based activities face challenges as lakes dry up. Hydroelectric power-dependent power companies must seek alternative fuel sources, potentially increasing costs. The economic strain extends to transportation, affecting barges and ships navigating low water levels. The rising food prices, linked to drought, increase financial burdens on both employed and unemployed individuals.

*Economic impacts are those impacts of drought that cost people (or businesses) money. Here are just a few different examples of economic impacts: Farmers may lose money if a drought destroys their crops; If a farmer's water supply is too low, the farmer may have to spend more money on irrigation or to drill new wells. Ranchers may have to spend more money on feed and water for their animals. Businesses that depend on farming, like companies that make tractors and food, may lose business when drought damages crops or livestock. People who work in the timber industry may be affected when wildfires destroy stands of timber. Businesses that sell boats and fishing equipment may not be able to sell some of their goods because drought has dried up lakes and other water sources. – KII with NGO Representative in Lamu*

The study also noted that Lamu's insecurity has led to population displacement and disruption of livelihoods. This has consequently contributed to food insecurity and heightened protection concerns, necessitating interventions such as emergency food assistance, access to safe drinking water, distribution of relief commodities, and diverse initiatives in health, nutrition, protection, shelter, water, sanitation, and hygiene. The limitations on people's access to fundamental services have adversely affected both the displaced population and the vulnerable host communities.

*Lamu Insecurity has resulted in population displacement, disrupted livelihoods, food insecurity, and protection concerns. Insecurity continues to restrict access to basic services, and both displaced people and vulnerable host communities are in need of emergency food assistance, safe drinking water, relief commodities, as well as health, nutrition, protection, shelter, water, sanitation, and hygiene interventions. The majority of internally displaced persons in Lamu are in areas like Kiunga. – KII with NGO Representative in Lamu*

Further insights from FGDs with refugees and displaced populations informed the study that they received economic and livelihood support services, including cash boxes, training, bee hives, and seeds from organizations like World Vision and the county government. However, the effectiveness of these interventions varied, especially when the livestock provided was incompatible with the environment, and normal seeds outperformed those provided by the government. This negatively impacted the income of those dependent on agriculture, as their yields were affected by drought.

*Individuals encounter a particular challenge when it comes to accessing an income that is not enough to meet their daily needs. For instance, some individuals resort to casual labor, earning 200 shillings or less per day, an amount insufficient to provide for their families' basic food requirements. Moreover, vulnerable groups impacted by drought face impediments in sustaining their businesses. These groups heavily rely on their livestock to generate income through the sale of milk and meat. Unfortunately, the adverse effects of drought significantly hinder their ability to conduct these business activities effectively. – FGD with Refugees in Lamu*

Respondents without a source of income attributed it to factors such as lack of business capital, insufficient documentation, absence of a market, high cost of living, lack of land, illiteracy, and a shortage of business ideas.

**#Sources of Business Capital:** Further insights from discussions with survey respondents who had established businesses shed light on the origins of their capital. A considerable proportion, comprising 57.8% of respondents, indicated that they obtained their capital from family members. Household savings played a pivotal role for 23.3% of respondents, while 10.6% sourced capital from donations. Additionally, 7.3% accessed funds from microfinance institutions and cooperatives, 5.6% secured loans from voluntary savings groups, 5.6% utilized proceeds from the sale of household assets, and 3.0% acquired capital through bank loans.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Family members	45.5%	60.7%	64.2%	71.4%	100.0%	57.8%
Sale of household Asset	10.1%	2.4%	4.2%	4.8%	0.0%	5.6%
Loan for Bank	5.1%	3.6%	0.0%	4.8%	0.0%	3.0%
Loan from Voluntary savings group	7.1%	4.8%	5.3%	4.8%	0.0%	5.6%
Loan from Micro-finance and cooperative	8.1%	9.5%	4.2%	9.5%	0.0%	7.3%
Household savings	33.3%	17.9%	17.9%	23.8%	0.0%	23.3%

Donation	9.1%	7.1%	16.8%	4.8%	0.0%	10.6%
Cash transfer/Voucher	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other	13.1%	13.1%	6.3%	4.8%	0.0%	10.3%

Table 12: Respondents' sources of business capital by legal status

Gender disaggregation revealed the different proportions of respondents by gender and their sources of business capital as shown by table 12.

	Male	Female	Nonbinary	Prefer not to Say	Total
Family members	58.2%	57.4%	0.0%	0.0%	57.8%
Sale of household Asset	9.2%	2.0%	0.0%	0.0%	5.6%
Loan for Bank	2.6%	3.4%	0.0%	0.0%	3.0%
Loan from Voluntary savings group	5.2%	6.1%	0.0%	0.0%	5.6%
Loan from Micro-finance and cooperative	5.9%	8.8%	0.0%	0.0%	7.3%
Household savings	22.9%	23.6%	0.0%	0.0%	23.3%
Donation	11.8%	9.5%	0.0%	0.0%	10.6%
Cash transfer/Voucher	0.0%	0.0%	0.0%	0.0%	0.0%
Other	8.5%	12.2%	0.0%	0.0%	10.3%

Table 13: Respondents' sources of business capital by gender.

The respondents also identified key institutions such as KRC, UNICEF, and the Government as key contributors providing financial support to refugees and vulnerable populations.

**#Business Training:** Only 20.5% of the survey r informed the study that they or their family members had undergone business training. In contrast, 79.5% indicated that neither they nor any family members had undergone any form of training, as illustrated in the figure below.

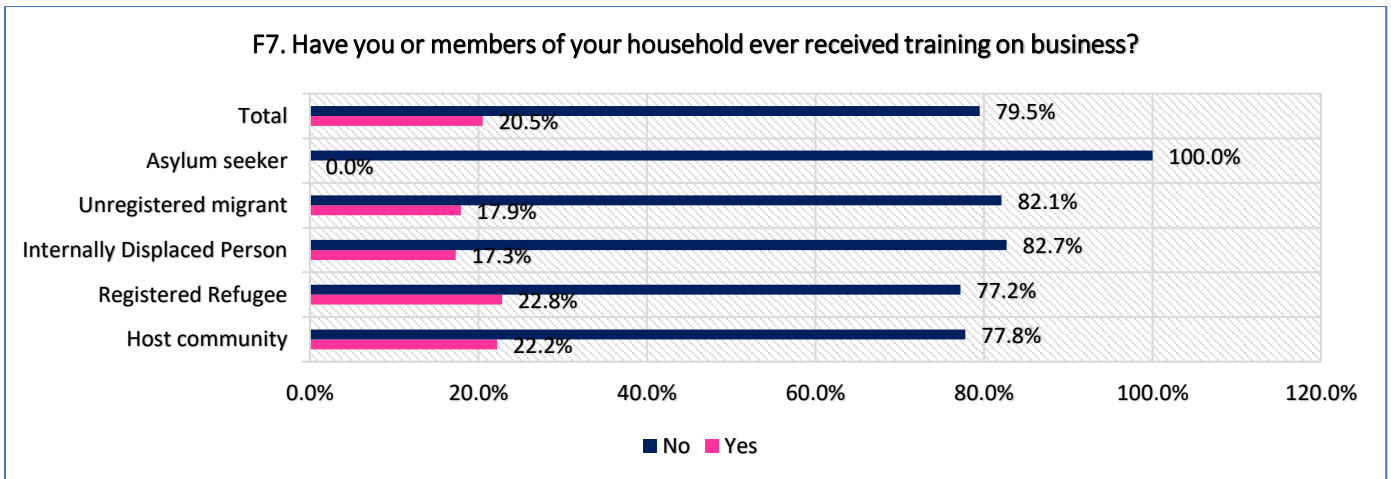


Figure 4: Business Training

Further discussions with participants who had undergone business training offered insights into the nature of their training. Among those trained, 83.9% received training on business skills, 31.0% on savings and loan management, 28.7% on record-keeping, 24.1% on financial literacy, and 20.7% on capital sourcing.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Business skills	87.5%	75.0%	90.9%	80.0%	0.0%	83.9%
Financial literacy	37.5%	25.0%	9.1%	0.0%	0.0%	24.1%
Savings and loaning	62.5%	7.1%	18.2%	20.0%	0.0%	31.0%
Record keeping	53.1%	7.1%	22.7%	20.0%	0.0%	28.7%
capital sourcing	50.0%	7.1%	0.0%	0.0%	0.0%	20.7%
Other	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Table 14: Business Training Attended by Respondents or Members of their Households.

The survey respondents also highlighted various challenges faced by business enterprises in their various communities. Some of the challenges include lack of capital, lack of markets, high cost of living, insecurity, transportation problems, high prices of commodities, lack of knowledge and business skills. To address these challenges the respondents suggested lowering the cost of living, job creation, business management training, improved transportation, establishment of learning institutions, provision of business capital, market linkages, drilling of a well, and improved security will help address the barriers encountered by refugees, displaced populations and vulnerable communities while running their businesses.

### 3.2.3 Food Security

Food security applies when all people, always, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.<sup>24</sup>

**#Food Access:** The study established that the communities experience cases of food insecurity during periods of drought because there is limited access by all people to enough food for an active, healthy life.

The survey findings disclosed that overall, 85% of respondents interviewed reported uncertainty in the food supply in their households because of drought. In comparison, the three most affected by drought are the asylum seekers (100%), host community (87.2%), IDPs (85.9%), registered refugees (84.1%) and unregistered refugees (72.2%).

<sup>24</sup><http://www.fao.org/ag/agn/nutrition/ICN/icnhfs.htm>

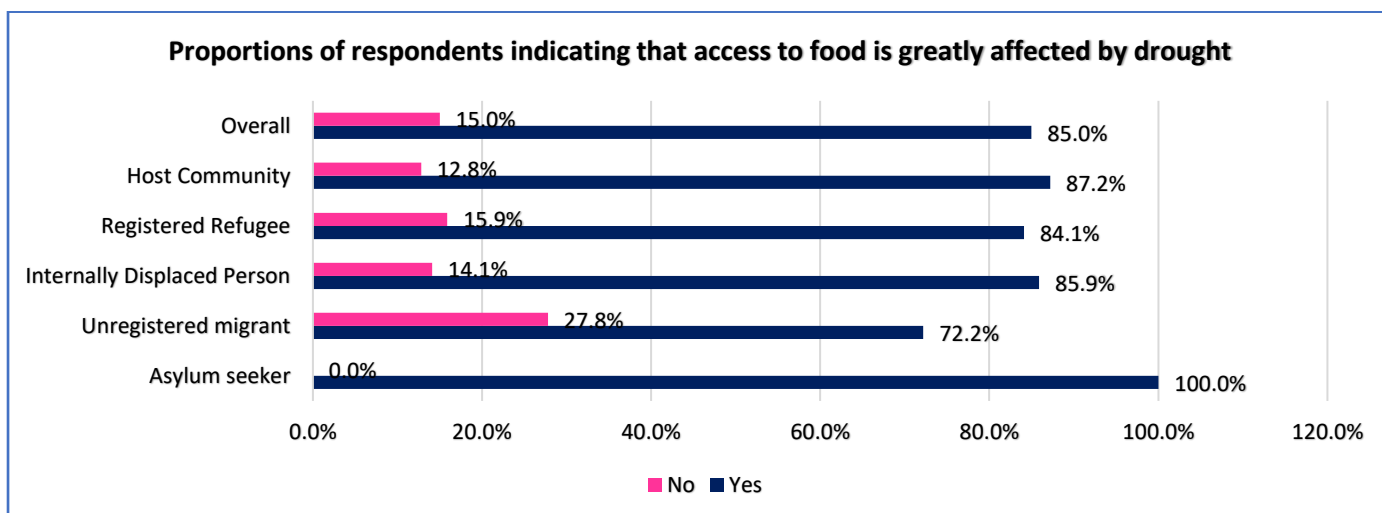


Figure 5: Access to food is greatly affected by drought.

According to the survey, 43.1% of the respondents said they sometimes did not have enough to eat, 33.9% of the respondents had enough to eat but not always the kinds of food they need, 14.4% had enough to eat and the kinds of food they need while 8.7% of the respondents often didn't have enough to eat. It can therefore be estimated that about 15% of the respondents had favorable food access. This is consistent with the 85% reporting access to food affected by drought.

The majority of the respondents (89.1%) indicated a lack of financial capacity to purchase sufficient food, highlighting a pervasive economic strain on the community. This financial constraint is aggravated by the geographical barriers, with respondents expressing difficulties accessing the main towns, where there are more economic opportunities. The logistical challenges, coupled with increased transport costs, result in a significant price surge for locally sourced food, rendering it prohibitively expensive for many households.

*The only town to access food from is Mpeketoni and that is a bit far. We can't afford the transport and the food, so, in our local 'vibandas' they go bring the food but by the time it gets here, it's now double the price and again too expensive to afford. We end up sleeping hungry for even 2-3 nights, it's so bad and sometimes there is nothing we can do about it. We leave it to God. – FGD with IDP youths in Lamu*

**#Food Availability:** Agriculture is a vital sector in Lamu County, contributing approximately 90 percent of household incomes, however production is mostly small scale, on an average of four (4) ha land holdings and highly dependent on rain fed agriculture<sup>25</sup>.

The study identified climate vulnerabilities across the agricultural value chain in Lamu County as a result of drought. A review of the Climate Risk profile for Lamu County revealed that the most significant climate change hazards in the region are associated with depressed rains and drought. Stakeholders in the county highlighted key hazards, including depressed rains, uncertainty in seasons (onset and duration), moisture stress, increased temperatures, reduction in rainfall, and an increase in the frequency of droughts<sup>26</sup>.

For example, cotton, a drought-tolerant crop, is impacted by uncertainties in seasons and moisture stress during crucial growth stages. Specific areas, such as Bahari, Hindi, parts of Basuba, and Kiunga, are more susceptible to these threats. While uncertainty in seasons has minor effects on input procurement, it significantly affects cotton yields, leading to reduced utilization of storage and processing facilities. Moisture stress increases pesticide use, impacting costs, and literacy and economic status play a role in addressing these challenges.

<sup>25</sup> <https://cgspace.cgiar.org/bitstream/handle/10568/2186/KACCAL%20Final%20Report.pdf?sequence>

<sup>26</sup> <https://cgspace.cgiar.org/bitstream/handle/10568/2186/KACCAL%20Final%20Report.pdf?sequence>

Cashew nut cultivation also faces uncertainties in seasons and a decreased length of the growing season. Areas around Witu, Hongwe, Bahari, parts of Basuba near Kiduruni, and Mangai are susceptible. Unpreparedness affects seedling acquisition, fertilizers, and extension services, resulting in late planting, increased pests, and diseases. Decreased length of the season affects various production practices, compromising nut quality, affecting marketing, and decreasing incomes.

Indigenous chicken farming is also impacted by increased temperatures and drought spells. Hot temperatures affect feed procurement, breeding, and housing material, leading to increased costs and reduced growth rates. Drought spells reduce feed availability and affect breeding stocks, increasing costs. Post-harvest, hot temperatures impact meat quality and shelf life, affecting marketing and sales.

The fish value chain faces challenges from increased temperatures and reduced rainfall. Hot temperatures impact fish catching and spoilage during postharvest activities. The cold chain is severely affected, increasing fish spoilage and unit prices. Lamu's remoteness amplifies these challenges, making local fish less competitive in markets compared to fish harvested in closer regions<sup>27</sup>.

The study revealed critical challenges in food availability among households in Lamu County during drought situations. Just like many ASAL and non-ASAL areas, it is common for food availability to be constrained – and that many groups experience different vulnerabilities. FGD with IDPs revealed that the impact of insufficient food availability goes beyond economic constraints. Respondents articulated the dire consequences of prolonged hunger, narrating instances where they slept hungry for multiple nights. This paints a picture of the harsh realities faced by the community, where access to necessities like food becomes a daily struggle, and the situation is heightened during drought seasons.

The June 2023 report from the NDMA underscored the severe repercussions of recurring droughts on Lamu County, notably in terms of food insecurity and malnutrition<sup>28</sup>. Concurrently, the far-reaching effects of climate change, as detailed in the January 2020 report on Mainstreaming Climate Change in Counties<sup>29</sup>, extend to various facets of life, prominently impacting nutrition and health.

The ramifications of droughts on food security were noted, resulting in a substantial shortage of food resources in Lamu County. This scarcity exacerbates existing challenges related to poor dietary habits and malnutrition, particularly among children, intensifying issues related to nutritional deficiencies. Drought conditions exacerbate insufficient access to clean water, creating a conducive environment for the spread of these illnesses, further challenging the healthcare system<sup>30</sup>. Additionally, climate change has been noted to have contributed to a surge in waterborne diseases, including malaria and cholera – and the situation is not different in Lamu County.

FGD with refugees underscored the severity of the drought situations on their diets, with children resorting to consuming wild fruits as a coping mechanism. This poses insecurity and potential health risks. The long rains assessment 2023, based on the sentinel sites assessment, depicted that about 53.3% of the households employed stressed consumption based coping mechanisms to mitigate against food deficits, 39.3% employed crisis or worse coping strategies. Interviews conducted with the stakeholders highlighted the connection between resource conflicts, crime rates, and food scarcity emphasizing that during droughts, heightened competition for scarce resources exacerbates crime, including robbery and theft, further intensifying the challenges faced by the community.

*Because of insufficient food, malnutrition sets in. You find that when we move around families within our areas of work, we get to refer a lot of under five years old children who have different malnutrition conditions. That is the season we have children eating wild fruits that sometimes can cause them harm. Some of them end up being hospitalized. – FGD with Refugees in Lamu*

<sup>27</sup> <http://kulima.com/wp-content/uploads/2011/03/Climate-Vulnerability-and-Capacity-Analysis-of-the-Lamu-Sea-Landscape.pdf>

<sup>28</sup> <http://knowledgeweb.ndma.go.ke/Library/doclink.aspx?document=b75b5990-f3fc-4e06-8db7-732d83e865f7>

<sup>29</sup> <https://southsouthnorth.org/wp-content/uploads/2020/02/LAMU-COUNTY-PRESENTATION.pdf>

<sup>30</sup> <https://southsouthnorth.org/wp-content/uploads/2020/02/LAMU-COUNTY-PRESENTATION.pdf>



## Food Consumption Score (FCS)

The study's results highlighted that food emerged as the most frequently reported priority need, with a substantial percentage of 95.7%, and this is consistent with other drought-stricken counties, the ASALs. Based on this assessment (Figure 6), it was found that 36.9% of households reported an acceptable food consuming score, 37.5% fell into the borderline category, and 25.6% were classified as having poor dietary habits. This indicates that about 63% do not have acceptable food consumption score and may be on the verge of experiencing acute malnutrition, and especially children aged below 5 years of age as well pregnant and lactating women. According to the Long Rains Assessment (2023), nutrition status in the county has slightly improved compared to 2022 as a result of long rains which led to good harvest. The proportion of children who were moderately malnourished was 6.9 percent, being a percentage lower than the long-term average and three percent lower than the previous year in 2022. The overall phase classification for the County is thus “Stressed” (IPC Phase 2).

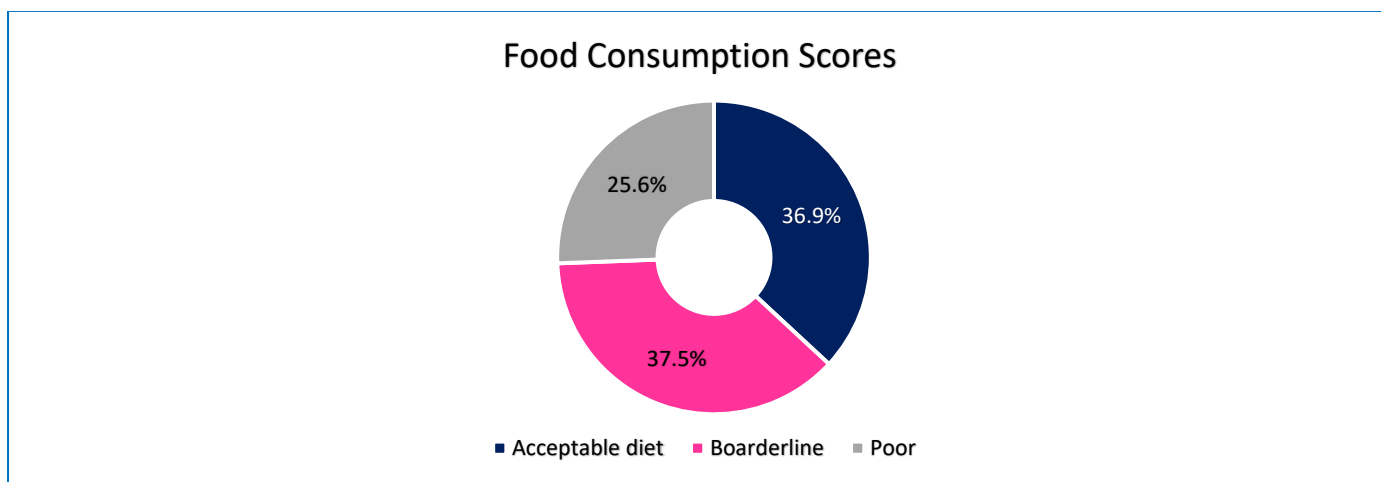


Figure 6: Food Consumption Scores

**# Challenges and Vulnerabilities in Relief Efforts:** Interviews with Security officials Security officials highlighted substantial protection needs in Lamu County, specifically in Basuba and Kiunga wards, during drought periods, primarily attributable to prevalent security challenges. The findings noted that Basuba faces insecurity through attacks by Al-Shabaab, while Kiunga experiences threats from sea-based terrorists, particularly when the sea is deemed impassable for fishing, forcing relief efforts to be channeled through the sea, making them susceptible to attacks. The assessment revealed that the total number of households in Kiunga is approximately 200, lacking village elders and relying solely on an area chief without a proper office.

Insecurity in Kiunga has hampered economic activity which negatively affected food access, and this is compounded by the increase in food prices. Those living in farming-favorable agro-ecological zones are also not able to farm due to insecurity – thus affecting food availability. The insecurity challenge has also affected the smooth transfer of relief food, compounded by the fact that only one organization conducts air transportation of relief, and it occurs infrequently, not exceeding three times a week. This limited frequency was attributed to the heightened risk of airplane explosions, undermining the effectiveness of relief efforts, and leaving the vulnerable population in dire need. The study findings indicated a pressing necessity for safeguards to address these challenges and ensure the protection of communities in Lamu County during drought situations.

*In Basuba and Kiunga ward, there are security challenges because Basuba is mostly facing insecurity by attacks of Alshabab. Kiunga on the other side faces the insecurity of terrorists from the sea and this happens mostly when the sea is dirty, and people can do fishing so relief has to be taken through the sea only for there to be attacked. Insecurities in Kiunga has treated the transfers of relief food to those areas and now having only one organization that flies relief food through air and is only done a few times a week not past 3 times since when it passes 4 times, we normally hear of the airplanes being exploded and all the efforts go in vain. – KII with Government Representative in Lamu*

### 3.2.4 Gender Based Violence

**#Safety and Security Concerns:** Study findings revealed that women and girls face several safety and security concerns such as physical violence as stated by 55.3% of the study respondents, emotional abuse as stated by 39.1% of the study respondents, sexual violence as stated by 31.8% of the study respondents, forced and early marriages as stated by 29.4% of respondents, sexual exploitation as stated by 19.5% of the study respondents, denial of resources, opportunities, or services as stated by 17.6% of the study respondents, and intimate partner violence as stated by 6.4% of the study respondents.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Physical violence	59.7%	47.2%	56.7%	57.1%	100.0%	55.3%
Emotional abuse	53.5%	13.8%	49.6%	32.1%	0.0%	39.1%
Sexual violence	44.4%	14.6%	29.1%	57.1%	0.0%	31.8%
Forced and early marriages	27.8%	23.6%	31.5%	57.1%	0.0%	29.4%
Sexual exploitation	29.2%	4.9%	21.3%	28.6%	0.0%	19.5%
Denial of Resources, Opportunities or Services	15.3%	8.1%	27.6%	28.6%	0.0%	17.6%
Intimate partner violence	9.7%	4.1%	6.3%	0.0%	0.0%	6.4%
Other	0.0%	8.9%	6.3%	0.0%	0.0%	4.5%

Table 15: Safety and Security Concerns Faced by Women and Girls.

FGD with IDPs further informed the study about the challenges faced by women and girls particularly in the drought context. The heightened vulnerability arises from a lack of secure accommodations during displacement, exposing them to exploitation and potential harm. Moreover, the need to cover long distances in search of water and food amplifies their exposure to risks, further compounding their protection needs.

*Drought brings about hunger, hunger brings about sickness, and sickness brings about a lot of problems and desperation. Everything becomes a mess. I would say, drought is the root cause of a lot of things. – FGD with IDPs Youths in Lamu*

**#Access to Information on Rights and Services:** According to the survey 50.4% of the respondents stated that women and girls can access information on rights and services while 49.6% of the respondents stated that women and girls were not able to access such information. Insights into the sources of this information were also highlighted, with 56.5% of the survey respondents citing media, 54.7% mentioning community events, 32.7% noting public campaigns, 13.1% referencing sports events, and 0.5% indicating the use of Information, Education, and Communication (IEC) materials.



	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Through media	69.0%	65.3%	18.8%	75.0%	0.0%	56.5%
During community events	50.6%	41.3%	81.3%	75.0%	0.0%	54.7%
During sports events	16.1%	9.3%	12.5%	25.0%	0.0%	13.1%
Public campaigns	39.1%	18.7%	43.8%	25.0%	0.0%	32.7%
Use of IEC Materials	1.1%	0.0%	0.0%	0.0%	0.0%	0.5%
Other	5.7%	1.3%	8.3%	0.0%	0.0%	4.7%

Table 16: Access of Information on Rights and Services

In addition, FGD respondents underscored the pressing need for increased education and awareness as crucial elements in addressing GBV. They emphasized the importance of educating the community on the human rights of both males and females and shedding light on the detrimental effects of GBV. The consensus among FGD participants was that an informed community is better equipped to contribute to the prevention and mitigation of GBV.

*We call out to respective initiatives and NGOs. They should come to the rescue of young girls since that is the major issue happening to them. The responsible initiatives should come and educate all of us as a community on the harmful nature of GBV and the importance of exercising our rights as humans both male and female. Help in creating awareness. Rescue the victims of GBV for a better future that we have always dreamt about.*

*Yes, as my friend has said we need a future where everyone is Enlightened. A healthy generation, where we don't have to worry about GBV anymore. They say knowledge is power, so we need that power in this community. Power to change the unhealthy norms. We need child protection offices to be established around here, even if it's not the main office but a branch will highly be appreciated. This will help in reducing more GBV cases in children. – FGD with IDPs Youths in Lamu*

**#GBV Support:** The study revealed that 50.8% of the survey respondents knew how to seek support for cases of violence against women and girls while 49.2% were not aware as demonstrated by the table 13 below.

	Male	Female	Prefer not to Say	Total
Yes	52.5%	49.0%	50.0%	50.8%
No	47.5%	51.0%	50.0%	49.2%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 17: Perception on how to seek support for cases of VAWG disaggregated by Gender.

Further disaggregation by age, revealed the varying levels of knowledge within different age groups regarding how to seek support in cases of violence against women and girls. This is as illustrated by table 14.

	Between 18-24 years	Between 25-30 years	Between 31-34 years	Between 35-40 years	Between 41-45 years	Between 46-49 years	Between 50-55 years	Above 55 years	Total
Yes	56.90%	53.70%	56.10%	35.30%	56.60%	53.60%	40.00%	63.30%	50.80%
No	43.10%	46.30%	43.90%	64.70%	43.40%	46.40%	60.00%	36.70%	49.20%
<b>Total</b>	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

Table 18: Perception on how to seek support for cases of VAWG disaggregated by Age groups.

The respondents also informed the study that such support is sought from the chief, police, Village Elders, Gender Office, Nyumba Kumi, Kadhi's Court, Local Health Facilities, Social Services Offices, CBOs such as Faza Youth Action Group, and NGOs working on GBV such as World Vision.

Further discussions revealed specific GBV support services available within the community. Some of the services mentioned include MHPSS services as stated by 47.1% of the survey respondents, medical care as stated by 44.9% of the respondents, legal services as stated by 29.9% of the respondents, provision of safe shelter as stated by 14.8% of the respondents, self-reliance training as stated by 14.6% of the respondents, and economic support as stated by 4.7% of the respondents. The limited awareness of these existing GBV support services underscores the imperative for more robust referral pathways and the fortification of survivor-centered approaches in the service delivery of all providers.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
MHPSS/counselling	54.2%	40.7%	45.7%	50.0%	0.0%	47.1%
Provision of safe space/ shelter	18.8%	16.3%	11.8%	3.6%	0.0%	14.8%
Medical care/ Health	48.6%	31.7%	52.0%	53.6%	33.3%	44.9%
Legal services	46.5%	21.1%	21.3%	17.9%	66.7%	29.9%
Provision of economic support	9.0%	4.1%	1.6%	0.0%	0.0%	4.7%
Training on self-reliance	21.5%	9.8%	13.4%	7.1%	0.0%	14.6%
Other	4.9%	7.3%	7.1%	10.7%	0.0%	6.6%

Table 19: Services Offered to Support GBV Survivors in the Community

However, insights from FGD respondents indicated a hesitancy among individuals to seek assistance, primarily driven by fears of judgment and social stigma, corruption within protection offices, fear of physical harm in remote areas, the lack of accessible protection offices, language barriers, and the distant location of support service offices contribute to these challenges. Participants further expressed concerns about potential damage to family honor, the risk of family dissolution, societal perceptions, and the apprehension of escalating abuse after reporting incidents. This fear of judgment not only deters survivors from reporting incidents but also contributes to their choice to endure the violence in silence.

These barriers underscore the need for a comprehensive and inclusive approach to address the multifaceted issues hindering the reporting and resolution of gender-based violence cases in the community.

*The fear of being judged. We don't know the exact place to go to seek help. Personally, I am not sure if I go seek help, I will get one so I would rather stay with my problems and persevere. Even if I report nothing will be done especially if the perpetrator is well known in the community. – FGD with Women from Host Communities in Lamu*

*Stigmatization. Most of the people whose cases are known face stigma. Cultural challenges are there because some believe a woman has no voice and should always listen to what her husband has to say. – FGD with The IDPs Youths in Lamu*

### 3.2.5 Legal Protection

**Legal Protection Issues and Qualification for Asylum:** Within the realm of legal protection, individuals seeking asylum face distinct challenges and qualifications. Asylum is typically granted to non-Kenyans who can demonstrate a well-founded fear of persecution in their home country based on factors such as race, religion, nationality, membership in a particular social group, or political opinion. The legal protection issues encompass ensuring a fair asylum process, safeguarding the rights of asylum seekers, and preventing refoulement – the forced return of individuals to a country where they might face persecution<sup>31</sup>.

**Legal Protection Issues for IDPs:** While asylum is primarily relevant to non-Kenyans, internally displaced persons (IDPs) within Kenya also encounter legal protection issues. IDPs may face challenges related to property rights, access to basic services, and security concerns within their own country. Legal protection for IDPs involves ensuring their rights to safety, shelter, and essential services, often necessitating effective national legislation and government intervention to address these issues adequately<sup>32</sup>.

**Asylum Process and Eligibility Criteria:** The asylum process involves a thorough examination of an individual's claim for protection. Those eligible for asylum are typically individuals who can demonstrate a well-founded fear of persecution based on the criteria. The process includes filing an application, attending interviews, and presenting evidence supporting the asylum claim. Exclusions from asylum may occur if the applicant poses a threat to national security, has committed serious crimes, or is considered a danger to the community. Importantly, asylum is not available to migrants seeking better economic opportunities; instead, it is reserved for those fleeing persecution and seeking refuge from specific threats in their home countries<sup>33</sup>.

The study assessed the awareness and understanding of asylum procedures and related legal processes among the registered refugees, unregistered migrants and the asylum seekers. The findings indicate that 35.6% were aware of how to access asylum, the procedures involved, and the related legal processes while 64.4% were not aware.

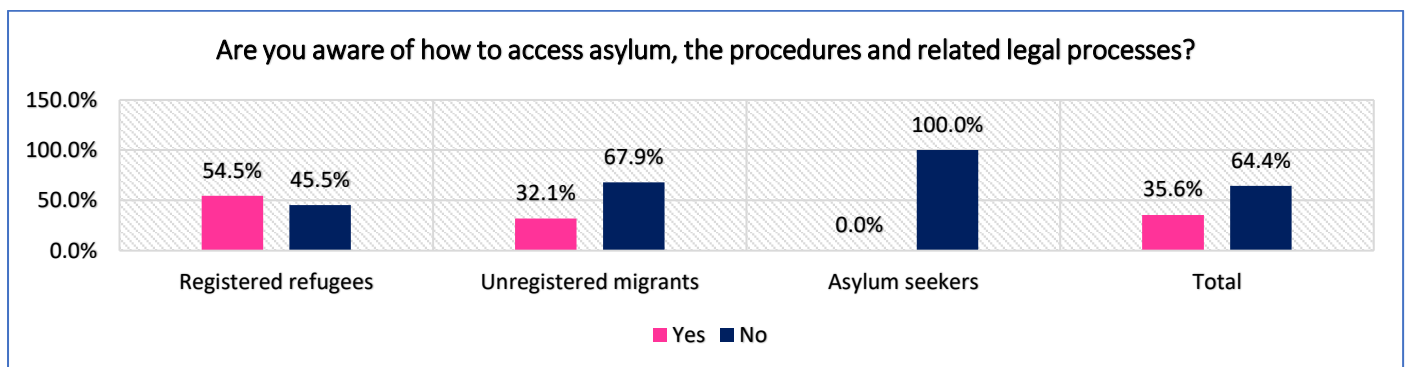


Figure 7: Awareness on how to access asylum, the procedures, and related legal processes.

Those who confirmed their awareness highlighted different options of acquiring asylum as:

<sup>31</sup> <https://help.unhcr.org/kenya/applying-for-asylum-in-kenya/#:~:text=If%20you%20are%20afraid%20to,can%20apply%20for%20asylum%20in>

<sup>32</sup> <https://www.rckkenya.org/internally-displaced-persons/>

<sup>33</sup> <https://immigrationequality.org/asylum/asylum-manual/asylum-law-basics-2/asylum-law-basics-elements-of-asylum-law/>

**Consulting with Community Elders:** Respondents mentioned that they often sought guidance from the community elders. These elders, known for their wisdom and experience, were considered trusted and valuable sources of information on the steps and procedures involved in acquiring asylum. They played a crucial role in providing cultural insights and navigating the complexities of the legal processes.

**Acquiring Refugee Identity Cards:** Another avenue highlighted by the respondents was the acquisition of refugee identity cards. The respondents denoted that this official documentation not only served as proof of refugee status but also facilitated access to various legal processes and services within the community such as healthcare, education, and employment opportunities. The identity cards were instrumental in establishing a sense of belonging and legitimacy.

**Seeking Government Support:** Some respondents mentioned actively seeking support from government agencies. This involved approaching government offices for assistance in navigating asylum procedures and accessing legal services such as legal aid, documentation processing, and information dissemination. Government support was seen as a formalized pathway to ensure adherence to legal requirements and to receive assistance in a structured manner.

**Engaging with Local Authorities:** Engaging with local authorities emerged as a proactive approach for those aware of asylum processes. This included participation in community meetings, interacting with local leaders, and leveraging community networks to gain insights into the legal avenues available. Respondents highlighted the importance of building positive relationships with local authorities, as it not only facilitated the exchange of information but also fostered a supportive environment for asylum seekers within the community.

#### **Barriers to obtaining legal asylum that extends beyond awareness.**

**Lack of Education and Knowledge on Legal Processes:** The surveyed respondents indicated that without formal education or an understanding of legal intricacies, they face significant hurdles in navigating the complexities of acquiring asylum. The lack of foundational knowledge poses challenges in comprehending legal procedures, filling out necessary paperwork, and understanding rights and responsibilities associated with the asylum-seeking process. They indicated that educational interventions are essential in empowering them with the requisite information to navigate the legal landscape effectively.

**Discrimination:** Respondents identified discrimination as a significant challenge in accessing asylum processes. Discrimination manifest in various forms, hindering them from seeking information or assistance without fear of bias or prejudice. It also impacts interactions with legal authorities, service providers, and community members, creating additional barriers for marginalized individuals<sup>34</sup>.

**Economic Constraints– Low Income and Unemployment:** Economic constraints were highlighted as a multifaceted barrier to accessing legal processes. Financial instability and joblessness created obstacles for individuals seeking asylum. The inability to afford legal representation, transportation to legal offices, or even basic necessities affected effective engagement with the asylum process.

The surveyed respondents emphasized the pivotal role of knowledge and education in navigating asylum procedures. They indicated a pressing need for targeted initiatives aimed at bridging this knowledge gap.

**#Addressing Discrimination and Enhancing Accessibility for Persons with Disabilities (PWDs):** The findings noted that people with disabilities (PWDs) face discrimination, particularly during registration processes for essential services. For example, some were refused registration due to the nature of their disability, leading to exclusion from crucial support systems.

Registration of PWDs in Kenya yields significant benefits, serving as a gateway to essential services and support systems. The process facilitates access to government assistance programs, providing financial support, subsidies, and grants to alleviate economic challenges faced by individuals with disabilities. Registered PWDs also gain access to specialized healthcare services, including rehabilitation programs, assistive devices, and medical treatments, enhancing their overall quality of life.

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<sup>34</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6553658/>

Moreover, registration can impact employment prospects as governments may implement affirmative action policies. Being registered is often a prerequisite for eligibility, promoting inclusivity in workplaces and providing equal opportunities for employment and career growth for PWDs.

Beyond tangible benefits, registration connects PWDs with advocacy groups and support networks, fostering a sense of community. This connection provides access to information, resources, and a platform for collective advocacy, contributing to a more inclusive and supportive society for PWDs in Kenya<sup>35</sup>.

Traveling also poses significant challenges for PWDs, especially during security check-ups, and bad roads exacerbate the situation. Limited access to offices for essential services and the lack of PWD-friendly infrastructure further hinders their well-being. The need for inclusive practices and accessible infrastructure was evident among PWDs narratives.

*“We're facing discrimination as people with disabilities. During recent registrations, some were denied simply because their disability wasn't congenital. This raises questions about the fairness for those with disabilities due to accidents. Traveling is a major challenge, especially during security checks. Insecurity in Lamu adds complexity, with military personnel requiring everyone to exit vehicles. For persons with disabilities, this process is a significant struggle, as there's little sympathy from the army.” – Focus Group Discussion with Persons with Disabilities in Lamu.*

## A. Priority Needs, Gaps and Challenges in Accessing Basic Rights

The study identified the current most pressing legal protection needs of individuals and families affected by drought in Lamu County.

### i) Addressing Security

**#Protection needs/priorities:** The findings noted that the perception of the security situation in the area varies among different categories of residents. The assessment revealed that 9.9% of the total respondents considered their environment very safe, while 52.7% deemed it safe. On the other hand, 26.1% expressed feelings of unsafety, with 8.0% indicating the environment as very unsafe. Notably, 3.3% found the security situation unknown.

	Host community	Registered Refugee	IDPs	Unregister ed migrant	Asylum seeker	Total
Very safe	8.3%	17.1%	2.4%	17.9%	33.3%	9.9%
Safe	47.2%	52.0%	59.8%	50.0%	66.7%	52.7%
Unsafe	27.1%	24.4%	30.7%	10.7%	0.0%	26.1%
Very unsafe	9.0%	6.5%	7.1%	14.3%	0.0%	8.0%
Unknown	8.3%	0.0%	0.0%	7.1%	0.0%	3.3%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 20: Respondents perception on the security situation of their areas

The study findings indicated that insecurity is attributed to numerous factors, such as idleness due to lack of employment, Al-Shabaab militant attacks, attacks from hostile individuals, land disputes, low numbers of security officers, poor security services, road attacks, inadequate transportation means, and theft.

Follow-up interviews with the elderly also noted that insecurity in Lamu County extends beyond the challenges posed by drought. The FGDs revealed that people in the community, especially the elderly, face significant fears related to insecurity, which hinders their traditional farming activities and even accessing the forest for hunting and gathering, activities that were previously commonplace. The respondents expressed

<sup>35</sup> <https://repository.kippira.or.ke/bitstream/handle/123456789/3722/SP32.pdf?sequence=1&isAllowed=y>

that the security situation has made it increasingly difficult for them to secure food, impacting their ability to put meals on the table.

The challenges extend to farming, where the fear of insecurity disrupts agricultural activities. The elderly also highlighted the economic consequences of insecurity, noting the impact on their ability to trade food products in the market. The Boni forest, a vital resource for harvesting honey, has become inaccessible due to security operations, depriving the community of an essential source of income. Additionally, water scarcity exacerbates conflicts between wild animals and humans, as the community, bordering the Boni forest, experiences a rise in incidents involving wild animals seeking water from shallow wells. The conflicts have resulted in harm to community members, hospitalizations, and even fatalities, causing fear and trauma within the community.

*Insecurity in our village is another challenge apart from the drought issues. People are afraid of doing farming activities and even going to the forest for hunting and gathering as used to do before. We now struggle to put food on the table. The insecurity issue in our land has made it difficult for us to use the alternatives of going hunting and gathering in the forest as we used to do before.*

*It has been difficult for us to afford proper meals. Since even in our farms, we can't afford to harvest much and, in the forest, where we can harvest our honey, we are unable to access the hives due to insecurity issues and security operations taking place in the Boni forest. As a community, we depend on that for trading with food products in the market. Also due to water scarcity, we do experience wild animals to human conflict. Since we are bordering the Boni forest, wild animals also move closer to our community searching for water from our shallow wells. – FGD with the elderly in Lamu*

**#Protection Gaps/Challenges:** The study revealed vulnerabilities and risks faced by the community, particularly during water scarcity and human-wildlife conflicts. This exposes vulnerable populations, including PWDs, youths, and women, to heightened risks and violations of their safety and well-being.

The community, especially women and girls who often have to travel long distances to access water points, is at risk of encounters with wildlife, as exemplified by the tragic incident involving a woman attacked by a buffalo while searching for water. This exposure to danger underscores the urgent need for legal protection measures that address the intersection of water scarcity, human-wildlife conflicts, and the safety of vulnerable community members.

To bridge this gap, there is a compelling need to consider legislative measures that directly address the challenges posed by water scarcity and wildlife conflicts. This might involve enacting laws or regulations to implement protective measures, such as the expansion of water points and strategic fencing around wildlife areas to manage and mitigate human-wildlife conflicts during periods of drought.

The legal remedies should aim not only to enhance the safety of community members but also to ensure that vulnerable populations, including PWDs, youths, and women, are specifically considered in the formulation and implementation of these protective measures. Enforcement of these laws would involve collaboration between relevant authorities, conservation agencies, and community stakeholders to ensure effective implementation and compliance to safeguard their rights.

The study also revealed that the absence of sufficient psychological support services exacerbates the mental health challenges faced by the community during droughts.

The study established that the ongoing drought has led to a scarcity of water and pasture which are a traditional sustenance sources for cattle. This has compelled families to cover larger distances in pursuit of grazing land and water sources crucial for the well-being of their livestock.

Children, recognized as valuable contributors to family labor, are increasingly needed to aid in the management of cattle, guiding them through the challenging search for water and grazing areas and hence forced to withdraw from school. This forced withdrawal of children from school to assist with cattle herding reflects a gap in protecting children's rights during drought.



*The problem of water scarcity forces us to go and search for the water at far end. The way to the water point is a wild animal zone, therefore that situation put our safety at risk the live story is that a woman who was looking for water was attacked by a buffalo and later she passed. After some days at receiving medication that incident really tensed up. Also, some of us forced our children to drop out of school and look after our cattle, therefore the children's rights are isolated. We request the government employ more psychological officers and construct more Jabia for maximum storage of water during the rainy season to avoid human-wildlife conflicts during the drought season. – FGD with Refugee Women and Girls in Lamu*

**ii) Health and sanitation**

**#Protection Needs/Priorities:** The findings revealed an overall health rights access rate of 38.6%, unveiling significant disparities among distinct population groups. Notably, the host community displayed a higher access rate at 52.1%, while registered refugees showed a 37.4% access rate. IDPs had a comparatively lower access rate at 29.1%, and unregistered migrants faced substantial challenges, with only 10.7% reporting access. Conversely, all surveyed asylum seekers (100%) reported having access to health rights as displayed in the chart below.

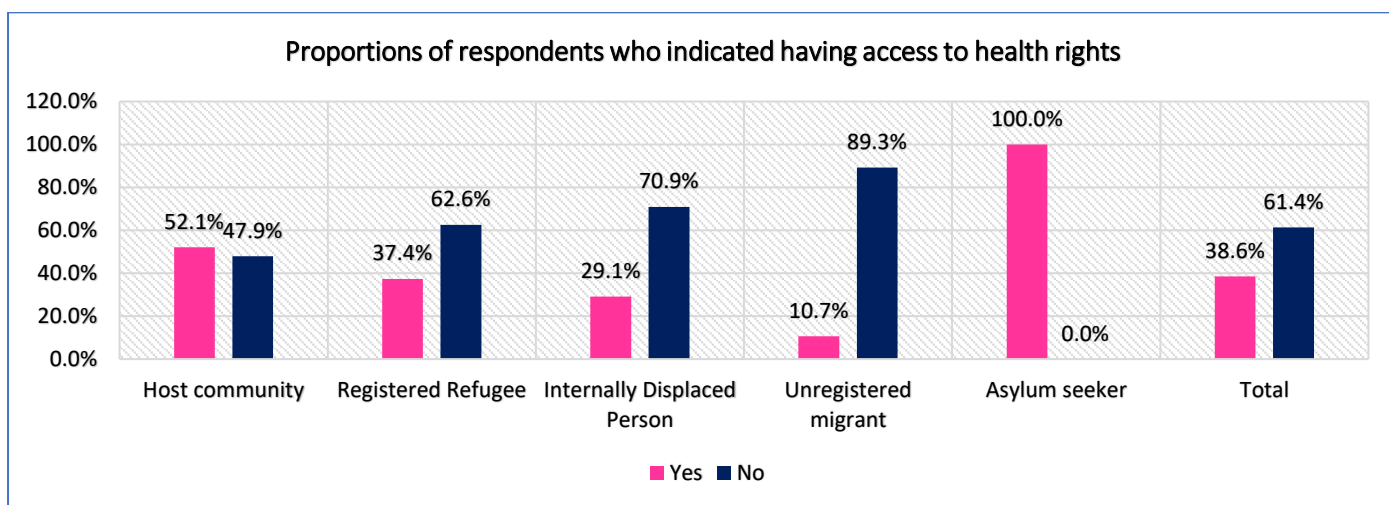


Figure 8: Proportions of respondents who indicated having access to health rights

The study findings indicated that the primary concerns include the need to address health-related issues such as waterborne diseases, skin infections, malnutrition, and diarrhea due to insufficient access to clean water.

The 2018 Environmental and Social Impact Assessment Report for the proposed Lamu Port access road established that the average distance to the nearest health center in Lamu County is approximately 5 kilometers. The findings established that the lack of proximity to healthcare facilities exacerbates these challenges, leading to increased mortality rates, particularly among vulnerable populations. For instance, community elders in Mkunumbi ward highlighted the impact of gastro-enteric diseases on their community members, emphasizing the delayed response from healthcare providers. Furthermore, the youth in Hindi ward noted that the agricultural dependence of residents makes them particularly vulnerable during drought, resulting in an increased prevalence of diseases due to a lack of nutritious food.

*We also experience waterborne diseases, skin infections, malnutrition, and even diarrhea diseases due to insufficiency of clean water. In the past, we have lost members of our community to gastro-enteric disease considering that the health facility is far. By the time we had a response from the healthcare providers, a lot of people had contracted it. – FGD with the Elderly in Lamu*

KII with various stakeholders, including the director of sports, a mental health doctor, and the county commissioner, underscored the prevalence of diseases such as malnutrition, Dengue fever, eye infections, asthma, measles, chikungunya, and cholera during droughts. The inadequacy of medical facilities, a shortage of healthcare professionals, and insufficient medications compound these health challenges. Additionally, the county's vulnerability to insecurity issues hampers the establishment of health facilities in certain areas, leaving residents without access to essential services.



The study also established that Lamu County faces challenges in dealing with advanced medical conditions like cancer due to the absence of specialized facilities. The protection needs identified emphasize the urgency of addressing health disparities, improving healthcare infrastructure, and ensuring equitable access to medical services, especially during drought-induced crises.

**#Protection Gaps/Challenges:** The protection gaps and challenges identified in Lamu County during drought instances are multifaceted. Key among them is the insufficient number of doctors and medications in healthcare facilities, exacerbated by insecurity issues. The absence of health facilities in certain areas, such as Basuba, poses a significant challenge, limiting access to medical services for the community. The lack of a hospital capable of treating conditions like cancer further underscored the inadequacies in the healthcare system.

The study also revealed that the existing healthcare infrastructure, including dispensaries, clinics, and one referral hospital, is insufficient to meet the needs of the population, particularly during drought-related health crises. The Metrological officer emphasized the prevalence of diseases like malaria, bilharzia, and kwashiorkor due to malnutrition caused by drought, with challenges like the scarcity of mosquito nets in some areas. Some environmental challenges highlighted during the interviews with stakeholders included the salinity of water sources and the drying up of drought-resistant trees, leading to potential future water crises and health issues. Some pointed out poor nutritional status among vulnerable groups, contributing to outbreaks and deteriorating health.

*The most prevalent disease during floods is Dengue fever and during the drought eye infections, and asthma due to dust and malnutrition. Healthcare services are enough in Lamu but the problem here lack of enough doctors and enough medicines in these facilities. An area like Basuba has no health facility because the area experiences insecurity issues often and doctors fear working in such an area. – KII with a medical mental doctor in Lamu*

### iii) Access to Basic Needs

**#Protection Needs/Priorities:** The findings noted that shelter, work, health, and education are crucial rights, however diverse groups encountered distinct challenges and reported the need to secure these fundamental rights. Specifically, 12.7% reported deficiencies in shelter, 45.2% expressed difficulties in accessing work, 29.2% faced challenges related to health, and 12.9% encountered obstacles in education.

	Host Community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Shelter	7.6%	20.3%	11.0%	14.3%		12.7%
Work	51.4%	43.1%	41.7%	39.3%	33.3%	45.2%
Health	32.6%	18.7%	34.6%	32.1%	33.3%	29.2%
Education	8.3%	17.9%	12.6%	14.3%	33.3%	12.9%
<b>Total</b>	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Table 21: Perceptions on some of the basic rights that are mostly lacking by legal status.

Disaggregation by gender revealed the disparities in how different gender encounter challenges in securing the basic rights as displayed below;

	Male	Female	Prefer not to Say	Total
Shelter	12.0%	13.6%	0.0%	12.7%
Work	44.7%	45.6%	50.0%	45.2%
Health	27.2%	31.1%	50.0%	29.2%
Education	16.1%	9.7%	0.0%	12.9%
<b>Total</b>	100.0%	100.0%	100.0%	100.0%

Table 22: Perceptions on some of the basic rights that are mostly lacking by gender.

### iv) Education and Awareness of Rights

The study emphasized the importance of education and awareness regarding legal rights among community members, particularly in the context of accessing appropriate legal protection during droughts. While organizations such as MUHURI play a crucial role in creating awareness and implementing programs to support the rights of displaced populations and refugees, the study indicates that there still exists discrimination by some institutions towards refugees.

*No one is aware that's why we go back to where we are requesting workshops that will help PWDs understand and be aware of their legal rights. MUHURI is one of the organizations that help with paralegal services, but I can promise we still feel like there is discrimination. I can test that since I have helped someone reach there and we never got help. They help those who have the most say in the community. – FGD with PWDs in Lamu*

The study also identified the importance of forming groups to advocate for rights and emphasized the need for inclusivity in various sectors, such as economic, political, and social, underscoring the principle that inability should not equate to disability.

*If we could help in forming groups that will help us fight for our rights. It could be of great help. We vote too when elections take place it's high time, we get included in all sectors either economic, political, or social. Inability is not disability. Personally, I have never encountered any initiative or organization that promote the right awareness, especially for us people with disability. – FGD with PWDs in Lamu*

**#Access to basic services and negative coping mechanisms:** Water scarcity emerged as a significant concern, forcing children to drop out of school, isolating their education rights. Faced with the imperative to address immediate survival needs and contribute to family livelihoods during the drought, children often found themselves drawn into labor activities.

### Child Protection

The assessment findings revealed that 12.9% of respondents reported that children in their community are engaged as child laborers.

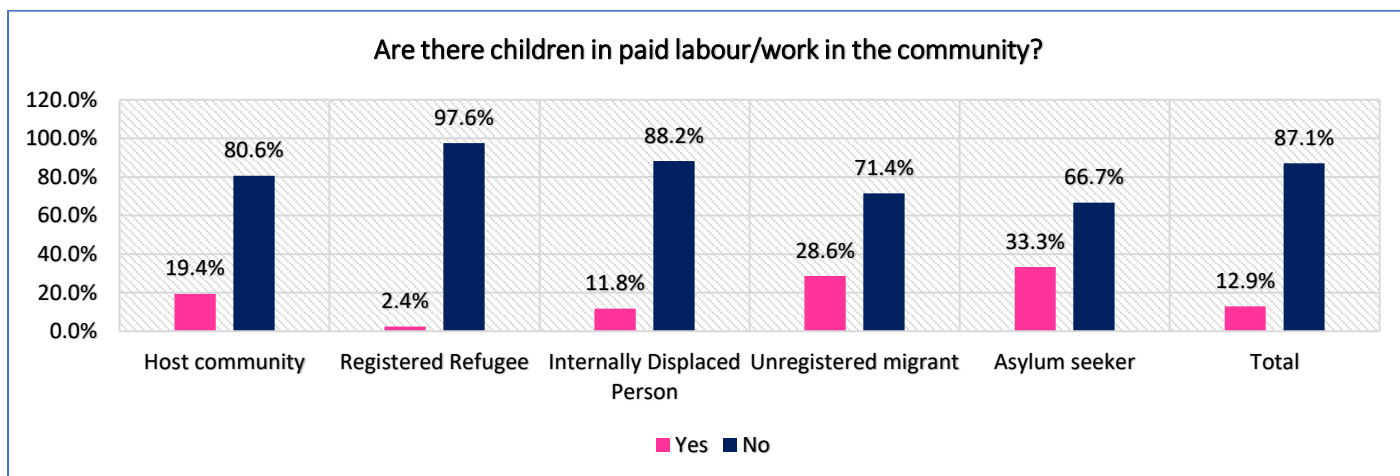


Figure 9: Children are involvement in paid labor in the community.

For the host community, children were reported to be involved in activities such as building and fishing, carrying luggage, harvesting watermelons, casual work, cattle keeping, and domestic work. Registered refugees indicated similar forms of child labor, including building, fishing, domestic work, farming, and herding livestock. Internally displaced persons reported children engaging in casual work, cattle keeping, domestic work, and even involvement in drug trafficking and forced labor. Unregistered migrants reported children participating in various forms of labor, including casual work, cattle keeping, farming, fishing, and casual labor. Asylum seekers reported children herding, engaging in manual work, including casual labor, and participating in farming activities.

The study also assessed the presence of cases of child marriages in the community. It was noted that 38.1% of the respondents acknowledged the existence of child marriages in the community.

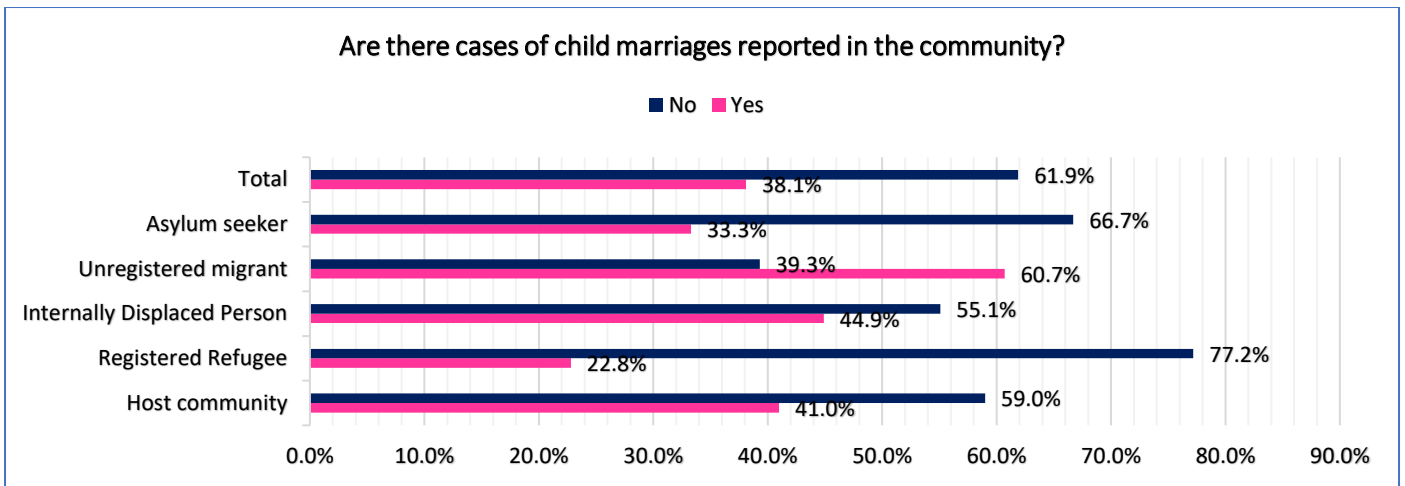


Figure 10: Presence of child marriages cases in the community.

KIIs with the respondents identified the need for educating children on reporting procedures related to child protection issues and enhancing the capacity of local law enforcement to respond effectively to cases of child violation.

The study also highlighted socio-economic factors, such as poverty and corruption, as contributors to injustice, emphasizing the necessity for services to be more accessible at the grassroots level. The identification of cultural taboos and the fear of reporting cases as barriers to justice, especially in instances of sexual and gender-based violence (SGBV), points to a critical area for intervention.

*“Local sensitization of the community on their rights and how to address protection challenges they face caused by drought. The children should be trained on the procedures for reporting when they are subjected to any child protection issues and be told their rights and how important they are in the community. The local police should also be trained, and their number increased so that they can have time to listen to the needs of the local community and deal with perpetrators as others work” -KII with Project Assistant, World Vision*

### C. Current Legal Protection Services Offered

**#Comprehensive Child Protection Services:** There are established structures to support the protection of children from abuse. Such structures include Court users committee and children advisory committee which facilitates the discussion and resolution of cases involving children. Furthermore, an initiative-taking approach to addressing child protection at different levels is evident through the organization of regular community dialogues, quarterly meetings facilitated by the Civil Society Organizations (CSO) committee, and monthly child protection meetings. Community members actively participate in these dialogues, engaging in discussions aimed at fostering a protective environment for children.

The CSO committee takes a lead role in coordinating and hosting quarterly meetings, ensuring that diverse perspectives are considered in the ongoing efforts to enhance child protection. Additionally, the monthly child protection meetings provide a platform for collaborative discussions and actions involving various stakeholders invested in safeguarding the well-being of children within the community.

**#Collaborative Efforts for Vulnerable Population Support:** The study revealed collaborative efforts by organizations like The Kenya Red Cross, World Vision, and LAWA, working with other NGOs and the government to devise plans for supporting the vulnerable population during drought. These plans encompass social support, restoration of social infrastructure, financing of social services, provision of transport, and special services for specific groups such as persons with mental disorders. Noteworthy organizations like World Wildlife Forum (WWF) and World Vision were also cited to contributing by providing foodstuffs and essential infrastructure to drought-affected communities. The Muhuri Foundation also focuses on legal protection through paralegals. The County government, was also cited to be involved the distribution of essential food items, including Baba lao cooking oil and rice, to various communities.

### 3.2.6 Mental Health and Psychosocial Support

## i) Protection Needs/Priorities

**#Raising awareness of MHPSS services:** The assessment revealed that the vulnerable population faced various mental health and well-being issues. These issues encompassed a range of challenges such as stress, insecurity, depression, substance use and abuse, and isolation. The findings noted that there was a low awareness of counselling services in the surveyed wards, with a significant majority (82.1%) indicating that they were not aware of the services.

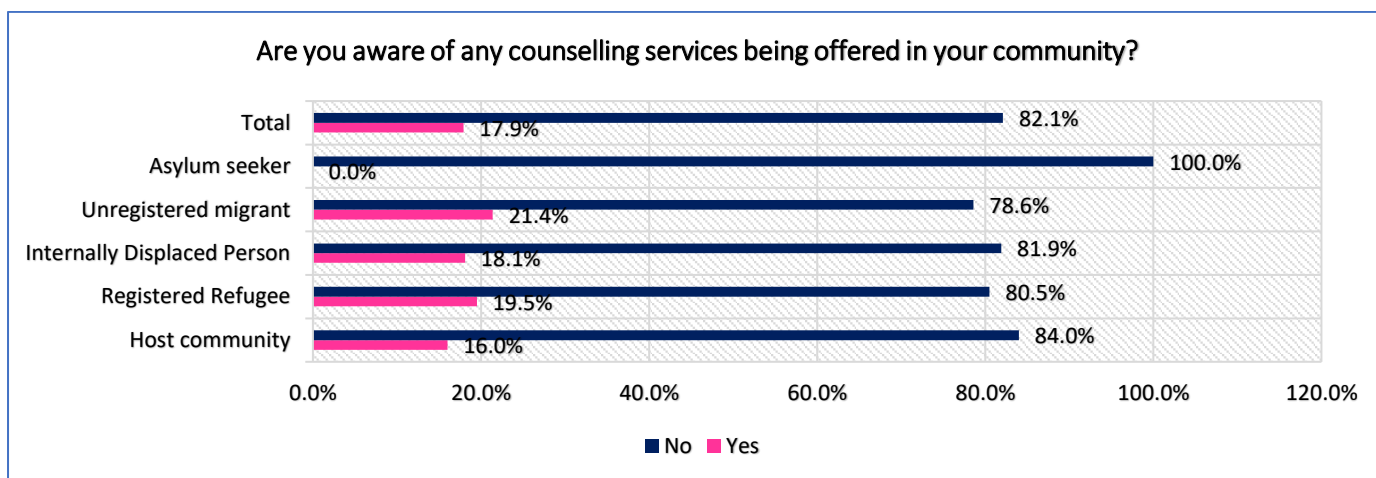


Figure 11 : Awareness of counselling services being offered in the community.

When asked about the MHPSS services available in their community, respondents mentioned, family counselling sessions, seminars on stress management, counselling by community elders, marriage counselling services, services addressing family issues, stress management programs among others. Additionally, there was a notable diversity in the organizations perceived to offer these services, including well-known entities such as Red Cross, United Nations Educational, Scientific and Cultural Organization (UNESCO), World Health Organization (WHO), World Vision, government bodies, and Community-Based Organizations (CBOs).

### **#Addressing vulnerability and negative coping mechanisms in the face of multiple challenges:**

The study underscored the urgent need to address mental health challenges, particularly among youth facing the dual burdens of unemployment and adverse climate conditions. Drought-induced poverty and a dearth of job opportunities have left many youths grappling with heightened stress. In response, they resort to detrimental coping mechanisms, including drug abuse and involvement in criminal activities.

*“I joined a group that smokes marijuana and cigarettes so that I can manage the stress of lack of money. But unfortunately, it never worked, after three months I decided to join a robbery group and eventually I was caught by the police, and I was arrested. I thank the Lord my family helped me to pay this debt. But I regret it because it was not my wish or vision to join such groups but the lack of financial support and high living costs made me become drug addicted and thief. –FGD with youths in Lamu*

Moreover, vulnerability is exacerbated for Persons with Disabilities (PWDs) during climate-related emergencies, as revealed in focus group discussions with the host community. PWDs encounter significant challenges in accessing essential resources like food and water, while wild animals invading their homes further heighten their vulnerability. The destruction of crops by animals, coupled with the lack of benefits from funds allocated for PWDs, intensifies their distress. The study underscored the crucial necessity for tailored support systems for PWDs during climate-related emergencies, emphasizing the provision of accessible healthcare and financial assistance.

The broader community also grapples with mental health stressors stemming from drought, insecurity, economic challenges, and health issues. Insecurity induces fear of attacks, negatively impacting sleep and overall well-being. Livelihood disruptions due to drought and conflicts between pastoralists and farmers, compounded by inadequate clean water availability, contribute to heightened stress levels. Although community-based activities such as religious gatherings and sports tournaments serve as coping

mechanisms, the study identified gaps in the availability and effectiveness of protective systems. Barriers, including ignorance and lack of consideration from authorities, hinder the implementation of robust support measures for the broader community.

**Sources of Psychosocial Distress:** The findings noted that, within the host community, registered refugees, internally displaced persons, unregistered migrants, and asylum seekers, there were significant stressors affecting women, girls, boys, and men. Lack of basic needs (56.9%) emerged as a predominant concern across all categories. The study revealed that, insecurity (54.1%), violence (48%), and segregation<sup>36</sup> (14.4%) were prevalent stressors.

	Host community	Registered Refugee	IDPs	Unregister ed migrant	Asylum seeker	Total
Violence	53.5%	42.3%	44.9%	53.6%	100.0%	48.0%
Segregation	16.7%	8.9%	15.7%	21.4%	0.0%	14.4%
Insecurity	65.3%	30.9%	63.0%	60.7%	33.3%	54.1%
Lack of basic needs	60.4%	43.1%	66.1%	60.7%	33.3%	56.9%
Other	0.7%	0.0%	2.4%	0.0%	0.0%	0.9%

Table 23: Mental Health Stressors/Strains/Burdens

**#Groups with most MHPSS needs:** The study established that there are distinct patterns in the perceived MHPSS needs across different demographic groups in the communities under consideration. The findings indicate that, women (54.8%) are identified as the group that mostly needs MHPSS, followed by girls (49.4%) and boys and men at 38.4%. The study further noted that 36.9% of respondents pointed to refugees, while 33.9% indicated persons with disabilities (PWDs) as the demographic with the highest MHPSS needs. Internally displaced persons (IDPs) (30.8%), children (29.4%), and elder people (25.4%) were also identified as groups perceived to have significant MHPSS needs. The study reveals variations in the prioritization of MHPSS needs across different communities and demographics, emphasizing the importance of tailoring mental health interventions to specific groups based on their unique challenges and vulnerabilities.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Women	60.4%	43.1%	62.2%	46.4%	33.3%	54.8%
Girls	55.6%	33.3%	57.5%	50.0%	66.7%	49.4%
Boys	42.4%	25.2%	47.2%	35.7%	33.3%	38.4%
Men	36.8%	30.1%	49.6%	35.7%	0.0%	38.4%
PWDs	45.8%	17.9%	33.1%	46.4%	33.3%	33.9%
Refugees	48.6%	38.2%	22.8%	39.3%	0.0%	36.9%
Internally displaced populations	30.6%	14.6%	40.9%	60.7%	0.0%	30.8%
Children	35.4%	7.3%	41.7%	39.3%	33.3%	29.4%
Older people	28.5%	11.4%	33.1%	32.1%	66.7%	25.4%
Other	0.7%	0.0%	2.4%	10.7%	0.0%	1.6%

Table 24: Groups that mostly needs MHPSS

<sup>36</sup> A form of social isolation or exclusion that contributes to psychosocial distress among the affected individuals



**Impact of Socioeconomic Factors on Mental Health in Vulnerable Populations.** The study identified a spectrum of MHPSS challenges within the community, each significantly influencing the mental well-being of individuals.

**#Food Insecurity:** Respondents consistently highlighted the impact of food insecurity, including fears related to unpredictable climate changes, high living costs, and meeting basic needs. This complex interplay significantly contributed to heightened stress and a pervasive sense of vulnerability within the community.

For refugees, lack of control over food sources and dependency on aid led to susceptibility to malnutrition, affecting physical and mental well-being. Internally displaced persons faced challenges accessing food due to disrupted livelihoods, relying on external assistance, impacting dignity and well-being. Women, bearing primary responsibility for household food security, prioritized family nutrition during food insecurity, negatively affecting their own health.

In drought and food-insecure environments, children faced the risk of malnutrition, impacting long-term physical and cognitive development. Men experienced stress and feelings of inadequacy when unable to provide sufficient food, challenging traditional gender roles. Persons with disabilities encountered barriers to food access, exacerbating health challenges. Food insecurity amplified difficulties faced by vulnerable populations, affecting overall well-being.

*Our young siblings suffer from malnutrition during the droughts, and we pity our parents, seeing the breastfeeding women suffering, they don't even have the energy in their bodies to produce milk for the babies. I don't think anyone will be in the right state of mind at that point no one is ever mentally stable – FGD with Refugee Youths in Lamu*

**#High cost of living:** The study established that escalating costs of essential goods and services during droughts create significant economic stress, restricting access to basic needs and compounding mental health challenges. Refugees, heavily reliant on humanitarian aid, face diminished purchasing power due to the rising cost of living, making it difficult to afford necessities like food, shelter, and healthcare. Women heading households bear a disproportionate burden, experiencing increased expenses for daily necessities, education, and healthcare.

This economic strain negatively affects children, leading to inadequate nutrition, limited access to quality education, and compromised healthcare, impacting their mental health and overall development. Men facing unemployment feel heightened stress and pressure to fulfill traditional provider roles. PWDs face compounded challenges, struggling to afford assistive devices, medical care, and support services. The economic pressure on the elderly results in social isolation, inadequate healthcare, and diminished quality of life in vulnerable situations.

*Children lack education since they help their parents to generate daily income. They risk their lives when they go for long distances to search for food and water for their animals and the areas are not secured because of terrorist groups i.e. Alshabab. Drought lowers their income since agriculture is the main source of their income. Due to drought, their animals die. – FGD with IDPs in Lamu*

**#Lack of employment:** Lack of employment emerged as a pervasive and overarching challenge within the community. A significant portion of community members expressed the detrimental impact of unemployment not only on their financial stability but also on their overall mental well-being. The pervasive sense of hopelessness and a lack of purpose associated with unemployment contribute substantially to the exacerbation of mental health issues.

The absence of employment opportunities among youths in particular was noted to perpetuate a cycle of frustration and disappointment. Unemployment limited their ability to gain financial independence and build essential life skills. FGD with youths indicated that this often led to increased susceptibility to negative influences, including involvement in risky behaviours, involvement in drug and substance abuse or even recruitment into illicit activities, posing long-term threats to their well-being and societal stability.

*We see a lot of men and youths resulting in drug abuse because of unhealthy habits of coping with stress due to lack of jobs. It starts with a cup of palm wine to now too much alcohol and drug intake. – FGD with Youths in Lamu*

KIIs conducted underscored the intricate link between environmental factors and mental health, emphasizing the need for holistic approaches to address the mental health challenges arising from environmental stressors.

The study also identified the changes that have occurred due to displacement caused by drought. Respondents cited psych somatization, feelings, thoughts, and behavior changes since displacement. For instance, registered refugees exhibited higher rates of sleeping disorders, eating disorders, and unexplained tiredness (47.2%) compared to other groups. Feelings of sadness, anxiety, fears, and loss of hope were prevalent among internally displaced persons (67.7%), and thoughts related to concentration difficulties, memory problems, and intrusive thoughts were reported more by the IDPs and unregistered migrant group (31.5%).

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Psych somatisation: sleeping disorder, eating disorder, unexplained tiredness,	0.0%	47.2%	53.5%	35.7%	100.0%	49.5%
Feelings (sadness, anxiety, fears, loss of hope)	0.0%	34.1%	67.7%	67.9%	33.3%	52.7%
Thoughts (difficult to concentrate, memory problems, intrusive thoughts, flash backs)	0.0%	20.3%	31.5%	25.0%	0.0%	25.6%
Behaviour (unusual actions, substance abuse, aggressively, isolation, loss of interest)	0.0%	20.3%	26.0%	17.9%	0.0%	22.4%
Other	0.0%	12.2%	5.5%	3.6%	0.0%	8.2%

Table 25: Identified changes that have occurred since displacement.

## ii) Protection Services

The study established that 17.9% of the surveyed respondents were aware of the MHPSS services being offered in the community. The respondents indicated that, during instances of drought in Lamu County, various MHPSS protection services were offered across different communities. Findings noted that the host community, for instance, prioritizes MHPSS services related to the effects of early marriages, child protection, counselling by elders, counselling from elders, family issues, and farming. Registered refugees, on the other hand, highlighted services such as child protection, counselling, medical services from doctors, counselling by elders, and education on awareness.

IDPs identified key Mental Health and Psychosocial Support (MHPSS) services as counseling by elders, education on awareness of potential stress triggers, job opportunities, and marriage counseling. Unregistered migrants and asylum seekers underscored the importance of services such as stress management, marriage counseling, addressing land problems, job opportunities, and support for family issues. Notably, different organizations, including Red Cross, LATI, UNESCO, WHO, World Vision and community-based organizations were noted to play essential roles in providing these MHPSS services by the surveyed respondents.

The assessment revealed that MHPSS services are accessed through various structures such as family support (54.8%). Community-level initiatives (37.6%) also played a vital role. Additionally, community



organizations (32.9%), NGOs (21.2%), and government entities (14.6%) were identified as providers of MHPSS services.

	Host community	Registered Refugee	IDPs	Unregistered migrant	Asylum seeker	Total
Family	62.5%	47.2%	54.3%	50.0%	66.7%	54.8%
Community	36.1%	26.8%	48.8%	42.9%	33.3%	37.6%
Community organizations	38.9%	28.5%	29.9%	35.7%	33.3%	32.9%
NGOs	27.8%	21.1%	16.5%	7.1%	33.3%	21.2%
Government	20.1%	17.9%	8.7%	0.0%	0.0%	14.6%
Other	2.8%	0.8%	3.1%	0.0%	0.0%	2.1%

Table 26: Existing structures that promote psychosocial well-being and resilience.

### #Stakeholders Providing Psychosocial Support:

Specific stakeholders contributing to psychosocial support were identified in each community. In the host community, services were provided by community leaders, community organizations, the chief's office, local leaders, the health centre, the mosque, and nyumba kumi. Registered refugees received support from organizations like Red Cross, Kenya Red Cross, Kiunga Youth Bunge, the Ministry of Health, and World Vision. IDPs benefited from the efforts of community leaders, Red Cross, government agencies, the police, and spiritual leaders. Unregistered migrants, on the other hand, mentioned the need for assistance.

## 4.0 CONCLUSIONS, AND RECOMMENDATIONS

### 4.1 Major Conclusions

The study highlights a critical gap in the effectiveness of early warning systems, particularly in swiftly disseminating information through various channels, with the system primarily relying on NDMA. Despite their existence, these systems face limitations, presenting significant challenges in timely information dissemination. Even when information is disseminated promptly, the response rate remains notably low, exacerbating the community's vulnerability to drought impacts. These gaps are intricately tied to financial constraints and prevailing insecurities in the Lamu region.

Furthermore, the needs assessment unveils that a significant majority of Lamu residents heavily depend on agriculture and livestock rearing, exposing them to heightened vulnerability during prolonged drought seasons. This reliance results in losses in livestock and harvests, escalating the risk of human-wildlife conflicts and tensions with neighbors over scarce resources. These limitations, coupled structural problems such as poor road network hampering access to markets and a lack of capital and investments, make difficult for the Lamu residents to diversify their livelihoods in order to adapt to the changing economic conditions.

Despite the availability of GBV support services and access to information on rights and services for women and girls, the persistence of GBV cases is linked to formidable challenges faced by survivors who choose to report. Issues such as stigmatization, potential family separation, and instances of corruption that enable certain perpetrators to elude the consequences of their actions. These factors jointly create an environment where survivors, fearing heightened danger, often opt to endure their suffering in silence.

The study also identified legal protection challenges and qualifications for asylum seekers, emphasizing the distinct challenges faced in pursuing asylum. Asylum, typically granted to non-Kenyans, necessitates demonstrating a well-founded fear of persecution based on factors like race, religion, nationality, membership in a particular social group, or political opinion. Core legal protection issues encompass ensuring a fair asylum process, safeguarding rights, and preventing refoulement – the forced return to a country where persecution may occur.

Notably, legal protection challenges extend to IDPs, involving property rights, service access, and security concerns. The asylum process involves a comprehensive examination, yet awareness remains limited, with 35.6% indicating awareness. Strategies for enhancing awareness include consulting community elders, obtaining refugee identity cards, seeking government support, and engaging with local authorities.

Barriers to obtaining legal asylum go beyond awareness, encompassing factors like lack of education, discrimination, and economic constraints. Discrimination hampers information-seeking, while economic constraints impede access to legal processes. The study underscored the urgent need for educational interventions, addressing discrimination, and mitigating economic barriers to bolster the effectiveness of the legal landscape.

Additionally, the study sheds light on critical MHPSS needs faced by diverse demographic groups in Lamu County during drought. The challenges, including insecurity, discrimination, youth unemployment, water scarcity, and high living costs, emphasize the need for targeted interventions to raise awareness, address discrimination, and provide specific support systems. Tailoring mental health interventions to unique challenges faced by different groups is crucial, revealing gaps in existing MHPSS services' awareness, accessibility, and effectiveness. Collaborative efforts, inclusive practices, and holistic approaches are recommended to bridge these gaps, contributing to individual well-being, community resilience, and sustainable development in the context of drought and climate-related emergencies.

## 4.2 Overall Recommendations

**#Microfinance and Savings Groups:** Securing financial support is crucial for initiating and sustaining the businesses. A program combining seed capital and access to informal financial services could provide some relief for the initial steps of income generating activities. To this end supporting the establishment of savings and loan groups could be considered. This can be achieved by training and capacity building for potential group members in financial literacy, encompassing fundamental aspects such as basic budgeting, saving strategies, and comprehension of interest rates. The implementation of such a mechanism will not only enhance household resilience but also foster a culture of savings, instilling sound financial discipline. This, in turn, enables households to effectively manage unforeseen expenses.

**#Food and nutrition security:** Due to constrained food availability and access as revealed by the assessment general food distribution is in need and this should consider all the groups including the host community. This, however, should be supported by the provision of security to the agencies involved in the distribution of food. To integrate emergency interventions and development and has also been recommended by the Lamu County Long Rain Assessment, cash for asset as a modality for delivering assistance to the most food insecure population should be adopted considering the county cultural and security context.

**#Community-led, Trauma-informed Approach to GBV:** A community-based GBV prevention approach leverages local expertise, actively involving the community, addressing trauma, and fostering collaborations. This makes interventions more culturally sensitive, promotes a holistic understanding, garners community buy-in, centers on survivors, ensures long-term impact, reduces stigma, and enhances resource efficiency. To realize this approach, HIAS should focus on capacity building for community members, leaders, educators, and volunteers, providing training on trauma-informed practices and GBV awareness and prevention strategies. Additionally, HIAS can support the development, translation, and dissemination of educational materials related to GBV prevention, legal rights, and available support services. This can be achieved through organizing workshops, seminars, and community events to raise awareness and encourage meaningful dialogue.

**#Improving Health and Sanitation Services:** The study identified deficits in the legal frameworks that impedes access to healthcare such as inadequate resources allocated to healthcare infrastructure, resulting in insufficient medical facilities, healthcare professionals, and essential medications. To address these issues, it is recommended that the government prioritize resource allocation to enhance healthcare infrastructure. This involves ensuring the availability of medical facilities, adequately trained healthcare professionals, and a consistent supply of essential medications.

Furthermore, collaboration between HIAS, NGOs, and international organizations is crucial to lobby for and enhance capacity to address advanced medical conditions. This collaboration can include efforts to establish specialized facilities for diseases such as cancer, catering to the specific healthcare needs of the community.

In addition to addressing resource inadequacies, there is a need to facilitate timely and effective responses to health crises, particularly during droughts. This involves reviewing and revising existing legal structures to ensure they are equipped to handle health emergencies efficiently.

To complement these efforts, the study recommends that public health awareness campaigns be intensified, particularly in remote areas. These campaigns play a pivotal role in promoting preventive measures and early intervention, fostering a proactive approach to healthcare that can mitigate the impact of health crises.

**#Enhancing Access to Basic Needs:** The identified the need to safeguard fundamental rights, encompassing areas such as shelter, employment, healthcare, and education, particularly in the context of drought situations. In collaboration with legal aid organizations and NGOs, HIAS can address the unique challenges faced by diverse demographic groups. Specifically, education programs should be implemented to disseminate information about access to basic rights and legal procedures, focusing on vulnerable populations. This will enhance awareness and understanding among these groups. Moreover, it is essential to tackle discrimination, communication barriers, and practices such as corruption that hinder access to essential legal services, including asylum application assistance, dispute resolution, and documentation

processes. The study further recommends a review and enhancement of existing mechanisms for obtaining asylum and legal documents, in ensuring accessibility and fairness in the application processes.

**#Education and Awareness of Rights:** The study recommends the implementation of targeted educational programs such as workshops and training sessions to enhance community members' understanding on non-discrimination, rights related to employment, education, and the rights associated with the asylum-seeking process. Special emphasis should be placed on vulnerable groups, such as persons with disabilities, ensuring that their unique rights and protections are effectively communicated.

Collaboration with organizations providing paralegal services, such as MUHURI, can be leveraged to conduct awareness campaigns. These campaigns should explicitly articulate the rights mentioned above, with paralegal services helping in navigating asylum-seeking processes, employment-related legal matters, and education rights. Paralegal support will be crucial in addressing discrimination concerns and ensuring individuals are well-informed and equipped to protect their rights in these specific areas.

**#Strengthening Awareness of MHPSS Services:** The study recommends raising awareness of counseling services in the surveyed wards, targeting the significant majority (82.1%) who were not aware of such services. Key stakeholders include local community leaders, NGOs, and government entities responsible for health and social services. Collaborative efforts should involve community-level initiatives, utilizing local networks, and leveraging existing community organizations. This is crucial to address a wide range of mental health and well-being issues, including stress, insecurity, depression, substance abuse, and isolation. Implementing this recommendation will enhance accessibility and utilization of MHPSS services, contributing to improved mental health outcomes.

**#Inclusive Practices and Accessible Infrastructure for PWDs:** To address discrimination faced by PWDs during registration processes for essential services, the study recommends inclusive practices and accessible infrastructure. Local leaders, government agencies responsible for social services, and NGOs specializing in disability rights should collaborate to implement this recommendation. Inclusive practices should be integrated into essential service registration processes, and infrastructure should be made PWD-friendly. This will foster inclusivity, ensuring equal access to support systems, and reducing the challenges faced by PWDs during travel, security check-ups, and in accessing offices for essential services.

**#Targeted Interventions for Youth Unemployment:** Mitigating youth unemployment and establishing secure coping mechanisms are crucial for addressing pressing mental health challenges among the youth. The study recommends targeted interventions involving educational institutions, local businesses, and government agencies responsible for youth development and employment. By creating job opportunities and fostering skills development, these stakeholders can contribute to breaking the cycle of frustration and disappointment among the youth. Additionally, engaging in public-private partnerships can enhance the effectiveness of these interventions, leading to positive mental health outcomes and creating safer coping mechanisms for the youth.

**#Specific MHPSS Support Systems for PWDs during Emergencies:** The study underscored the need for specific MHPSS support systems for PWDs during climate-related emergencies. Collaboration between organizations specializing in disability rights, local community leaders, and government agencies responsible for emergency response is essential to address this recommendation. Accessible healthcare, financial assistance, and tailored support services for PWDs during emergencies will mitigate their vulnerability and enhance overall community resilience. This will ensure that PWDs receive adequate support, particularly during challenging environmental conditions, contributing to their well-being and mental health.

**#Implement Resilience-Building Programs to Address Persistent Drought Shocks:** The study findings underscored the persistent threat of consistent drought on food security in Lamu County. To complement the gains in agriculture and enhance overall community resilience, it is crucial to introduce and reinforce interventions aimed at reducing the impact of recurring shocks. These should include the implementation of sustainable water management strategies, promotion of drought-resistant crop varieties, and the establishment of community-based early warning systems. By proactively addressing the long-term challenge

of drought, the community can build a more resilient foundation that goes beyond immediate food security concerns.

**#Tailoring MHPSS Interventions to Diverse Community Needs in Lamu County:** HIAS should strategically align its MHPSS services with the specific needs identified within each community in Lamu County. Tailoring interventions to address the distinct priorities highlighted by the host community, registered refugees, IDPs, and unregistered migrants can enhance the effectiveness and relevance of HIAS's programs.

The study findings reveal nuanced mental health and psychosocial support needs across different communities. The host community, for instance, prioritizes MHPSS services related to the effects of early marriages, child protection, counselling by elders, counselling from elders, family issues, and farming. Registered refugees focus on services such as child protection, counselling, medical services from doctors, counselling by elders, and education on awareness. Internally displaced persons identify counselling by elders, education on awareness of potential stress triggers, job opportunities, and marriage counselling as key MHPSS services. Unregistered migrants, including asylum seekers, emphasize services like stress management, marriage counselling, addressing land problems, job opportunities, and family issues.

Each community has specific stakeholders contributing to psychosocial support, such as community leaders, local organizations, health centers, and relevant agencies. Therefore, by recognizing and responding to the unique psychosocial challenges faced by different populations, HIAS can ensure that its services are targeted, impactful, and aligned with the diverse needs of Lamu County residents.

**Holistic Approach to Child Protection:** HIAS should take a multifaceted approach in addressing child protection needs within the community. Initiatives should include widespread community awareness campaigns, educational programs targeting caregivers and schools, and the establishment of accessible reporting mechanisms. Furthermore, HIAS should collaborate with local authorities, provide legal support, and create child-friendly spaces. Counseling and psychosocial support services should be offered, and partnerships with community leaders and law enforcement agencies strengthened. Additionally, HIAS should also advocate for the enforcement of child protection laws.

## 4.3 Specific Recommendations from various groups

### Recommendations from the Host Community

**Training and Capacity Building:** The study established that there is a lack of understanding among PWDs regarding economic development activities. In this regard, the study recommends engaging PWD in workshops and training sessions on economic development to facilitate their inclusion. Simultaneously, the community should be trained to enhance their understanding of matters concerning PWD.

**Water Infrastructure:** The study identified a lack of sufficient water infrastructure, impacting both the local community and refugees during drought seasons. To address this, the study recommends the government and NGOs collaborate to establish boreholes, water pans, and desalination machines. This will ensure water availability for both communities, enabling agriculture and mitigating the effects of drought.

**Fish and Fruit Processing Plants:** The study noted the absence of processing plants for fish and fruits, limiting income opportunities for the local population. The study recommends the introduction of fish and fruit processing plants to preserve products, reduce spoilage, and boost the economic activities of fishermen and fruit producers in Mpeketoni.

**Drought Preparedness:** Lack of community sensitivity to drought preparedness was identified in the study. The government should utilize local organizations for sensitization efforts to enhance community awareness and preparedness for drought response.

### Recommendations from Refugees & Displaced Population

**ID Cards and Land Ownership:** The study established that Refugees and displaced populations lack national identity cards and secure land ownership. The study recommends support from the government and the NGOs in obtaining national identity cards and collaborative efforts to establish long-term measures for land ownership to improve economic opportunities and livelihoods.

## Recommendations from Women & Girls

**Justice Advocacy:** Women and girls face challenges in accessing justice and human rights. The study recommends that Organizations like HIAS should actively support women and girls in advocating for justice. Additionally, more human rights organizations like MUHURI should introduce projects focused on justice for women and girls.

**Water Storage and Security:** Lack of sufficient water storage contributes to human-wildlife conflicts during drought seasons. The study recommends that the government should construct additional Jabia for water storage, minimizing conflicts and enhancing protection for women and girls who fetch water.

**Income Generating Projects:** The study identified limited economic independence for women and girls.

In regard, the study recommends an introduction of income-generating projects in the community to empower women and girls economically.

## Recommendations on Child Protection & Health

**Child Protection Awareness:** The study noted an insufficient awareness on child protection and rights.

In regard, the study recommends HIAS to collaborate with organizations specializing in child protection, like Bahari United Network, Lake Amu Joint Effort, and Game Road United Network, by providing training and funding for community sensitization programs.

## ANNEXES

### Annex One: Stakeholders in Lamu

#	Name	Scope
1.	Padman	Fighting period shame Environmental conservancy by providing reusable pads
2.	Lamu Women Alliance (LAWA)	Women Economic Empowerment Health and wellbeing of Women, Girls and PWDs Women and Girls Education Protection of Women and Children's rights Women in Climate Justice
3.	Kenya Red Cross	Livelihoods Refugee Operations Emergency Health Water & Sanitation Disaster Preparedness & Response Disaster Risk Reduction & Climate Change Adaptation Health Nutrition & Social Services Public Health in Emergencies
4.	MUHURI	Monitoring and documenting human rights abuses, providing legal assistance and support to victims, advocating for policy changes, and promoting education and awareness about human rights.
5.	World Vision	Focuses on child learning and household resilience, child protection and participation, community engagement and sponsorship, and integrated health & water, sanitation, and hygiene.
6.	NDMA	Overall coordination of matters related to drought risk management in Kenya.
7.	NEMA	Takes stock of the natural resources and their utilization and conservation.
8.	Lamu Organization for Youth and People with Disability	Ensures collective inclusion of the physically challenged in all matters social, political and economic decisions made and arrived at pertaining the community.
9.	Sauti ya Wanawake Pwani	Women's and Children's Rights, Governance and leadership, Health, and Education.
10.	Wetlands International	Restoration of mangrove forests. Preservation of Mangrove forests by providing alternative energy sources such as cooking stoves.
11.	Lamu women for peace and development	Fight against Gender based violence
12.	Lamu youth assembly	Strengthening community-led, CVE-relevant support and response structures in at-risk communities in Lamu County. Increasing trust and collaboration between community members and relevant local government and security actors in these high-risk areas.
13.	Muslim for Human Rights	Promote and protect human rights, especially the marginalized community by engaging in various



		activities i.e. providing legal aid for both refugees and vulnerable communities, community legal awareness education, capacity building on peace and security, advocacy research, and documentation of human rights violation. We have also been dealing with access to justice especially on gender-based violence.
14.	Lamu Youth Alliance	Youth empowerment, Reducing the level of violent extremism, and Advocacy for a favorable youth environment.

Table 27: Stakeholders in Lamu

## Annex Two: Survey Questionnaire

### Informed Consent Statement

Good morning/Afternoon, Sir/Madam.

Welcome and thank you for being here today. The purpose of this interview is to solicit your valuable input for a protection assessment in Lamu County. This assessment aims to gain insight into the requirements of both the refugee and host communities impacted by drought. The protection assessment will serve several crucial purposes, including the identification of prevailing protection needs, the mapping of existing protection services and mechanisms, the analysis of protection deficiencies, the provision of guidance for future HIAS initiatives, and the assessment of HIAS' contribution to drought response.

Let me introduce myself. I am \_\_\_\_\_, I work with HIAS, and I will be asking you some questions in today's discussion. This will be a one-to-one discussion. I will guide the conversation by asking questions which you can respond to. There are no right or wrong answers to these questions. Just be honest.

Before we start, I want to let you know two things. First, the information we learn today will be to improve our services and help us in reporting on the work we're doing to serve refugees. The summary of today's discussion will include a summary of your comments and some recommendations. Secondly, you do not have to answer any questions that you do not feel comfortable answering. This interview is anonymous and confidential. "Anonymous" means that we will not be using your name and you will not be identified as an individual in our report of this project. "Confidential" means that what we say in this meeting will not be repeated outside of this meeting; however, I cannot control what you do when you leave. Although we honour confidentiality, please remember that what you say here today could be repeated by another respondent. So please, do not say anything that you absolutely need to keep private.

Nothing you say, or do not say, will affect your relationship with HIAS, or any other actor. Your opinion and experience will make a very important contribution to our approach in serving refugees.

*Additionally, there are no benefits for participation. Do you have any questions? If you have questions later, or you would like us to delete the information we collect from you now, please contact [Peter Nderitu 0722932099].*  Yes /  No

### Consent/Assent

By agreeing to participate, you are indicating that you fully understand the above information and give consent to participate in this interview.

Do you give your consent to proceed with this interview?

Yes I do  No (*thank the respondent and end the interview*)

<b>Date of interview</b>	
<b>Interviewer name I</b>	
<b>Wards</b>	
<b>GPS coordinate</b>	
<b>Start time</b>	
<b>Questionnaire number (household identifier number)</b>	

SECTION A: DEMOGRAPHICS CHARACTERISTICS OF STUDY RESPONDENTS			
No	Question	Response	Skip
<b>Respondents: All targeted respondents</b>			
<b>Demographic Characteristic of Respondents</b>			
<b>Are you the head of household?</b> <input type="checkbox"/> Yes / <input type="checkbox"/> No		<b>If NO, who is?</b>	
A1	What is the sex of the respondent?  [Circle/tick the right response]	1. Male 2. Female 3. Non binary 4. Prefer not to Say	
A2	What is the age of the respondent?	1. Below 18 years 2. Between 18-24 years 3. Between 25-30 years 4. Between 31-34 years 5. Between 35-40 years 6. Between 41-45 years 7. Between 46-49 years 8. Between 50-55 years 9. Above 55 years	If below 18 years stop the study and thank the respondent
A3	Highest Level of Education?	1. No formal schooling 2. Primary school incomplete 3. Primary school completed 4. Secondary school incomplete 5. Secondary school completed 6. College/University incomplete 7. College/University completed 8. Post graduate degree 9. Prefer not to say	
A4	Marital Status	1. Never married 2. Currently married 3. Separated 4. Divorced 5. Widowed 6. Cohabiting 7. Prefer not to say	
A5	What is your legal status in the country?	1. Registered Refugee 2. Host community 3. Internally Displaced Person 4. Unregistered migrant 5. Asylum seeker 6. Other .....	If refugee go to A6  If internally displaced go to A8 If from host community go to A10
A6	If refugee/Asylum seeker/unregistered migrant When did you arrive here?	<input type="checkbox"/> Less than 2 months ago / <input type="checkbox"/> 3-6 months ago / <input type="checkbox"/> 6-12 months ago / <input type="checkbox"/> More than a year ago	
A7	If refugee/Asylum seeker/unregistered migrant which country did you arrive from?	..... .....	
A8	If internally displaced When did you arrive here?	<input type="checkbox"/> Less than 2 months ago / <input type="checkbox"/> 3-6 months ago / <input type="checkbox"/> 6-12 months ago / <input type="checkbox"/> More than a year ago	

A9	If internal displaced where did you come from?	..... .....				
A10	How many people are living in your HH?	Male	Female	Total		
A11	Number of male (Disaggregated data for other HH members by age)	0-4 yrs	5-17 yrs	18-59 yrs	60+ yrs	
A12	Number of Female (Disaggregated data for other HH members by age)	0-4 yrs	5-17 yrs	18-59 yrs	60+ yrs	
A13	Are there people in your HH with disabilities?	1. Yes 2. No				
A14	If yes, how many have disabilities?	Male _____				
		Female _____				
A15	What type of disabilities they have? [Multiple responses possible]	1. Mental 2. Physical 3. Hearing impairment 4. Vision impairment 5. Other.....				

**SECTION B: CONTEXT ANALYSIS**

No	Question	Response	Skip	
<b>Respondents: All targeted respondents</b>				
<b>a) Source of Income</b>				
B1	Do you have a source of income?	1. Yes 2. No	If yes go to B2 If no go to B3	
B2	What are your main sources of income?  <i>Can pick multiple answers</i>	1. Farming/ livestock 2. Business/ self-employment 3. Formal employment 4. Casual jobs 5. Relief / donation 6. Remittances from family and friends 7. Mining 8. Others (Specify).....	<i>Tick appropriately</i>	
B3	How many people in this Household earn any form of income?	Male	Female	Total
B4	What is your household average monthly income?	1. Below 2500 2. 2501-7500 3. 7501-15000 4. 15001-30000 5. 30001-50000 6. Above 50000		

B5	Has your average monthly income changed over the last three months?	1. Yes 2. No 3. Don't know	If yes go to B6 and if No go to B7
B6	If yes, explain how?	..... ..... .....	
B7	If No, explain why	..... ..... .....	
B8	Is your household able to afford all your household's basic needs?	1. Yes 2. No 3. Don't know	If no go to B9 and if yes go to B10
B9	If no, which of the basic needs is most affected?	1. Food 2. Shelter 3. School 4. Clothing 5. Healthcare 6. Other (specify).....	Tick appropriately
B10	On average how much in Kshs do you spend monthly on your basic needs?	1. Below 2500 2. 2501-7500 3. 7501-15000 4. 15001-30000 5. 30001-50000 6. Above 50000	
B11	How has this changed over the last 3 months?	1. Increased 2. Reduced 3. Remained the same 4. Don't know	If reduced go to B12 and increased go to B13
B12	If reduced, what are the reasons why this has reduced?		
B13	If increased, what are the reasons why this increased?		
B14	Did you receive any cash and voucher assistance from any organization during the last three months?	5. Yes 6. No	If yes go to B15 If no go to B17
B15	If yes, who provided the cash/voucher? [Name the organization(s)]	..... ..... .....	
B16	How sufficient was the cash/voucher in acquiring basic needs?	..... ..... .....	

**b) Food and Nutrition Security**

**i. Food Consumption Score**

B17	Over the last seven days, how many days did most of your household (50%+) eat the following food items inside or outside the home? And what was the main source of each food item? Use codes below, write 0 if not consumed in the last 7 days.		
	<b>Foods</b>	Number of days eaten in the past <b>7 days</b> . If 0 days, do not specify the main source.	How was this food acquired? 1 = Own production (crops, animal) 2 = Fishing / Hunting 3 = Loan 4 = Market (purchase with cash) 5 = Market (purchase on credit) 6 = Begging for food 7 = Exchange labor or items for food

			<p>8 = Gift (food) from family relatives or friends  9 = Food aid from NGOs, government  10 = Other</p> <p><b>Write the main source of these foods consumed over the past 7 days.</b></p>
	<b>Cereals, grains, roots, and tubers</b> (Rice, pasta, bread, sorghum, millet, maize, potato, yam, cassava, sweet potato, plantain)		
	<b>Pulses/legumes, nuts, and seeds</b> (beans, cowpeas, peanuts)		
	<b>Milk and other dairy products,</b> (milk, yoghurt (exclude margarine/butter or small amounts of milk for tea/coffee))		
	<b>Meat, fish, and eggs</b> (goat, beef, chicken)		
	<b>Vegetables and leaves</b> (spinach, onion, tomatoes, carrots, peppers, green beans)		
	<b>Fruits</b> (bananas, apples, lemon, mango)		
	<b>Oil/fat/butter</b> (vegetable oil, palm oil, shea butter, margarine)		
	<b>Sugar, or sweet, such as:</b> sugar, honey, jam, pastries, sugary drinks		
	<b>Condiments/spices</b> (tea, coffee, chocolate, salt, garlic, tomato paste or sauce)		
B18	<p>Which of these statements best describes the food eaten in your household in the last 7 days?</p> <p>[Only one response needed, read the responses to the respondent]</p>	<ol style="list-style-type: none"> <li>1. We always have enough to eat and the kinds of food we need</li> <li>2. We have enough to eat but not always the kinds of food we need</li> <li>3. Sometimes we don't have enough to eat</li> <li>4. Often, we don't have enough to eat</li> </ol>	<i>Tick appropriately</i>
B19	<p>Here are some reasons why households don't always have enough to eat. For each one, please tell me if that is a reason why this household doesn't always have enough to eat.</p>	<ol style="list-style-type: none"> <li>1. Not enough money for food</li> <li>2. Too hard to get to the Market</li> <li>3. Not enough food available in local markets</li> <li>4. Not able to cook or eat because of health problems or special eating needs (diet)</li> <li>5. Lack of firewood/charcoal/fuel to cook the food</li> <li>6. Not able to produce enough food to eat</li> </ol>	
B20	<p>Here are some reasons why people don't always have the kinds of food they want or need. For each one, please tell me if that is a reason why you don't always have the kinds of food you want or need.</p>	<ol style="list-style-type: none"> <li>1. Not enough money for food</li> <li>2. Too hard to get to the market</li> <li>3. Not enough food available in local markets</li> <li>4. Health problems or special eating needs (diet)</li> <li>5. Kinds of food we want are not available in local markets</li> </ol>	



		6. Good quality food are not available	
B21	In the past 7 days, was there ever no food to eat of any kind in your house because of lack of resources to get food?	1. Yes 2. No	If Yes go to B22 If No go to B23
B22	How often did this happen in the past 7 days?	1. Rarely (1–2 times) 2. Sometimes (3–10 times) 3. Often (more than 10 times)	
B23	In the past 7 days did you or any household member go to sleep at night hungry because there was not enough food?	1. Yes 2. No	If Yes go to B24 If No go to B25
B24	If yes, how often did this happen?	1. Rarely (1–2 times) 2. Sometimes (3–10 times) 3. Often (more than 10 times)	
B25	In the past 7 days, did you or any household member go a whole day and night without eating anything at all because there was not enough food?	1. Yes 2. No	If Yes go to B26 If No go to B27
B26	If yes, how often did this happen?	1. Rarely (1–2 times) 2. Sometimes (3–10 times) 3. Often (more than 10 times)	
B27	In the past 7 days, if there have been times when you did not have enough food or money to buy food, how many days has your household had to:		
	a) Rely on less preferred and less expensive foods?	Number of days out of the past seven: (Use numbers 0 – 7 to answer number of days; Use NA for not applicable)	
	b) Borrow food, or rely on help from a friend or relative?		
	c) Purchase food on credit?		
	d) Gather wild food, hunt, or harvest immature crops?		
	e) Consume seed stock held for next season?		
	f) Send household members to eat elsewhere?		
	g) Send household members to beg?		
	h) Limit portion size at mealtimes?		
	i) Restrict consumption by adults in order for small children to eat?		
	j) Feed working members of HH at the expense of non-working members		
	k) Reduce number of meals eaten in a day?		
	l) Skip entire days without eating?		

<b>SECTION C: LEGAL PROTECTION</b>			
<b>No</b>	<b>Question</b>	<b>Response</b>	<b>Skip</b>
<b>Respondents: All study respondents</b>			
<b>a) Existing protection services</b>			
C1	How would you rate the security situation for you and your dependents in this place?	1. Very safe 2. Safe 3. Unsafe 4. Very unsafe 5. Unknown	Tick appropriately
C2	If the area is unsafe or very unsafe, why?	..... ..... .....	
C3	Do you have access to the following basic rights?	1. Shelter Yes [ ] No [ ] 2. Work Yes [ ] No [ ] 3. Health Yes [ ] No [ ] 4. Education Yes [ ] No [ ]	
C4	Which of the basic right is mostly lacking in the area?	1. Shelter 2. Work 3. Health 4. Education	
C5	Are aware of how to access asylum, the procedures and related legal processes?	1. Yes 2. No	If yes go to C6 If no go to C10
C6	If yes, have you been able to acquire asylum and other legal documents?	1. Yes 2. No	If no go to C7
C7	If no, what challenges do you face?	..... ..... .....	
C8	Are there organization supporting legal protection of refugees and displaced persons?	1. Yes 2. No	If yes go to C9 and if no go to C10
C9	If yes, which are these organizations?	..... ..... .....	
<b>b) Protection needs and risks of vulnerable people</b>			
C10	Is this community, what is the likelihood that your rights are most likely to be violated?	1. Often 2. Most often 3. Not often 4. Don't know 5. Pre far not to say	
C11	Which rights are most likely to be violated and why?	..... .....	
C12	Whose rights are most likely to be violated and why?	..... .....	
C13	Where do you report cases of rights violations within the community?	1. Chiefs office 2. County administration offices 3. Organizations (NGOs/CSOs) 4. Community leaders	

	(Respondents can choose multiple responses)	5. Nyumba kumi 6. Other (Specify).....	
C14	What is the priority needs of the following groups of people during drought and emergency situations? (Respondents can describe as many categories as possible)		
	a) Host communities		
	b) Refugees		
	c) Internally Displaced population		
	d) GBV survivors		
	e) PWDs		
	f) Women and girls		
	g) Youths and young people		
	h) Older persons		
	i) Others (specify)		
C15	If you have children under 18 years of school going age, are they able to access schooling?	1. Yes 2. No	If yes go to C16 If no go to C17
C16	If yes, how many access schools?	..... ..... .....	
C17	If no why?	..... ..... .....	
C18	Which of the following is easily accessible to children in the area?	1. Access to education, 2. Adequate balance meals 3. Safe spaces/shelters 4. Health care	Tick appropriately
C19	Which of the following is least accessible?	1. Access basic needs, 2. Access to education, 3. Adequate balance meals 4. Safe spaces/shelters 5. Healthcare	Tick appropriately
C20	Are there children in paid labour/work in the community?	1. Yes 2. No	If yes go to C21 If no go to C22
C21	If yes, which work do they engage in?	..... ..... .....	
C22	Are there cases of child marriages reported in the community?	1. Yes 2. No	If yes go to C23 If no go to CD1
C23	If yes, where do you report these cases?	1. Children office 2. Chief 3. Community leaders 4. CSOs/ NGOs 5. Others .....	

**SECTION D: MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT SERVICES (MHPSS)**

No	Question	Response	Skip
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<b>a) Existing protection services</b>			
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D1	Are you aware of any services on mental health and well-being offered in your community?	1. Yes 2. No	If yes go to D2 If no go to D4
D2	If yes which services, are offered in your community? ( <i>Respondent can choose multiple questions</i> )	1. Psychological First Aid (PFA) 2. PM+ (Problem Management Plus) 3. SH+ (Self Help Plus) 18 4. IPT (Interpersonal Therapy) 5. NHIF subscription 6. Peer-to- peer interventions 7. Individual counselling 8. Group interventions 9. Family Therapy Other specify	
D3	Which are the organizations that provide this service?	.....	
D4	What are some of the mental health and well-being issues that affect refugees and vulnerable populations in your community	..... .....	
D5	Since the displacement/moving here, what changes have you noticed in yourself and others?	1. Psychosomatisation: sleeping disorder, eating disorder, unexplained tiredness, 2. Feelings (sadness, anxiety, fears, loss of hope) 3. Thoughts (difficult to concentrate, memory problems, intrusive thoughts, flash backs) 4. Behavior (unusual actions, substance abuse, aggressively, isolation, loss of interest) Other: _____	Can choose multiple answers
D6	What are some of the stressors for women, girls, boys and men in the community?	1. Violence 2. Segregation 3. Insecurity 4. Lack of basic needs 5. Other specify	Can choose multiple answers
D7	Who among the community members mostly needs mental health and psychosocial support? (MHPSS)?	1. Women 2. Girls 3. Boys 4. Men 5. PWDs 6. Refugees 7. Internally displaced populations 8. Children 9. Older people 10. Other (specify).....	Can choose multiple answers
D8	Which are the existing structures that promote psychosocial well-being and resilience of women, men, girls, and boys?	1. Family 2. Community 3. Community organizations 4. NGOs 5. Government 6. Others.....	Can choose multiple answers
D9	Mention some of the stakeholders that provide specifically provide psychosocial support to the community?	..... ..... .....	
D10	What are some of the age- and gender-	1. Games 2. Community forums	

	appropriate psychosocial activities within the community?	3. Exhibitions 4. Creative arts 5. Others .....	
D11	What are some of the challenges that make it difficult for refugees and vulnerable population to access the services they need to improve their mental health and wellbeing in your community?		
D12	Have you or any member of your household been referred to access any mental health and psychosocial services?	1. Yes 2. No	If yes, go to D13
D13	If yes, please describe the services to which you were referred to and your experience?	..... ..... .....	
<b>D14.</b> Please comment on the following statements about your mental health and wellbeing			
	<b>Below are some statements about feelings and thoughts.</b>  <b>Please indicate the number that best describes your experience of each Over the last 2 weeks.</b>	1. <b>None of the time</b> 2. <b>Rarely</b> 3. <b>Some of the time</b> 4. <b>Often</b> 5. <b>All of the time</b>	
1	I've been feeling optimistic about the future		
2	I've been feeling useful		
3	I've been feeling relaxed		
4	I've been feeling interested in other people		
5	I've had energy to spare		
6	I've been dealing with problems well		
7	I've been thinking clearly		
8	I've been feeling good about myself		
9	I've been feeling close to other people		
10	I've been feeling confident		
11	I've been able to make up my own mind about things		
12	I've been feeling loved		
13	I've been interested in new things		
14	I've been feeling cheerful		
D15	What do you consider the main obstacles or challenges you face today?		

D16	Thinking about the challenges you have just identified, what do you think are the main strengths or resources you have to deal with these?		
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**SECTION E: GENDER BASED VIOLENCE (GBV)**

No	Question	Response	Skip
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**Respondents: All targeted GBV survivors; women,**

**a) Existing protection services**

E1	What safety and security concerns do women and girls face in the community?	<ol style="list-style-type: none"> <li>1. Physical violence</li> <li>2. Emotional abuse</li> <li>3. Sexual violence</li> <li>4. Forced and early marriages</li> <li>5. Sexual exploitation</li> <li>6. Denial of Resources, Opportunities or Services</li> <li>7. Other .....</li> </ol>	
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E5	Do you know how to seek support for cases of violence against women and girls?	<ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> <li>3. Don't know</li> </ol>	
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E6	If yes, where do you seek support?	<ol style="list-style-type: none"> <li>1. Gender office</li> <li>2. Chief</li> <li>3. Police</li> <li>4. Community leaders</li> <li>5. Nyumba kumi</li> <li>6. CSOs/ NGOs on GBV</li> <li>7. Others .....</li> </ol>	Can select multiple
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E7	Which services are offered to support GBV survivors in the community?	<ol style="list-style-type: none"> <li>1. MHPSS</li> <li>2. Provision of safe space/ shelter</li> <li>3. Medical care/ Health</li> <li>4. Legal services</li> <li>5. Provision of economic support</li> <li>6. Training on self-reliance</li> <li>7. Others.....</li> </ol>	Can select multiple
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E8	Which challenges do GBV survivors face in reporting and accessing services?	..... ..... .....	
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E9	Which are some of the institutions providing GBV survivors with protection services and support?	..... ..... .....	
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E10	What are the factors that are likely to lead to risk of GBV for refugees and vulnerable populations?	..... ..... .....	
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**Existing protection services**

E11	Are women, girls, and able access information on rights and services?	<ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	
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E12	If yes, where do they access these information	<ol style="list-style-type: none"> <li>1. Through media</li> <li>2. During community events</li> <li>3. During sports events</li> <li>4. Public campaigns</li> <li>5. Use of IEC Materials</li> <li>6. Other (Specify)</li> </ol>	Can select multiple
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**SECTION F: ECONOMIC INCLUSION**

No	Question	Response	Skip
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**Respondents: All**

**a) Existing protection services**

F1	Which are some of the economic activities that exist in your community?	..... .....	
F2	Do you or any members of your household participated in the activities mentioned in F1 for employment and Income Generation?	<ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If yes go to F3 IF NO go to f4
F3	If Yes which are the economic activities that you or your family members are engaged for employment and income generations	..... ..... .....	
F4	If No what are some of the reason, why you or members of your family are not engaged in economic activities for employment and income generation?	..... ..... .....	
F5	What was your main source of capital for your business start up	<ol style="list-style-type: none"> <li>1. Family members</li> <li>2. Sale of household Asset</li> <li>3. Loan for Bank</li> <li>4. Loan from Voluntary savings group</li> <li>5. Loan from Micro-finance and cooperative</li> <li>6. House hold savings</li> <li>7. Donation</li> <li>8. Cash transfer/Voucher</li> <li>9. Other .....</li> </ol>	Can select multiple
F5	Who or which institutions provide financial support to refugees and vulnerable population engaged in business and income generating economic activities	..... .....	
F6	Have you or members of of your household ever received training on business?	<ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If yes, go to C26 If no, go to C27

F7	If yes, what were you trained on?	<ol style="list-style-type: none"> <li>1. Business skills</li> <li>2. Financial literacy</li> <li>3. Savings and loaning</li> <li>4. Record keeping</li> <li>5. capital sourcing</li> <li>6. Others.....</li> </ol>	
F8	What are the challenges that affect business enterprises in your community?	<p>.....</p> <p>.....</p> <p>.....</p>	
F9	How can refugees, displaced population and vulnerable communities be supported to address this challenge?		
<b>Accountability to Affected Populations</b>			
G1	Which languages do you speak? (check all that apply)	<input type="checkbox"/> English <input type="checkbox"/> Arabic <input type="checkbox"/> Swahili <input type="checkbox"/> Somali <input type="checkbox"/> Other:	
G2	What type of information would you like to receive from aid providers?	<input type="checkbox"/> What help can I get in this area <input type="checkbox"/> How to access services <input type="checkbox"/> How to provide feedback to aid workers <input type="checkbox"/> What behavior I should expect from aid workers <input type="checkbox"/> Other: Please specify	
G3	Who/where would you prefer to receive information from?	<input type="checkbox"/> Face-to-face with NGO staff <input type="checkbox"/> Community meetings <input type="checkbox"/> Community leader/representative <input type="checkbox"/> Poster/banner <input type="checkbox"/> Leaflets <input type="checkbox"/> Mobile phone <input type="checkbox"/> Family/friends <input type="checkbox"/> Other: _____	
G4	What is your preferred means of receiving the information?	.....	
G5	Which language would you prefer to receive information in?	.....	
G6	Are you aware of any people who may be unable to access available information because of specific needs?	.....	
G7	Why were they unable to access available information?	.....	
G8	How would you prefer to provide feedback to aid providers about the quality, quantity and appropriateness of the aid you will receive?	.....	

G9	How would you prefer to provide feedback to aid providers about the behavior of aid providers?	.....	
G9	Which language do you prefer to provide feedback in?	.....	
G10	Who makes decisions in your community about issues that affect the community as a whole?	.....	
G11	Do you feel like you have a say in decisions that affect your community? If not, why not?	.....	
G12	How important is it to you that you are involved in decisions about your community?	.....	
G13	How would you like aid workers to involve you in decisions about the aid you will receive	.....	