

# Sub Office Dadaab, Kenya

#### **APRIL 2021**

The security situation in Dadaab and nearby Sub Counties remained calm throughout the month. Border points into Kenya were closed to mitigate the risks of transmitting COVID-19. However, there continues to be a trend of border crossing from Somalia to Kenya

through the porous borders along Liboi corridor. New arrival profiling remained suspended due to COVID-19 prevention and mitigation measures.

Relocation of non-Somali refugees to Kakuma remained suspended due to same Covid-19 measures.

225,675

Dadaab population as of 30 APRIL 2021

57%

Percentage of Dadaab population are children

#### **VOLUNTARY REPATRIATION FROM DADAAB**

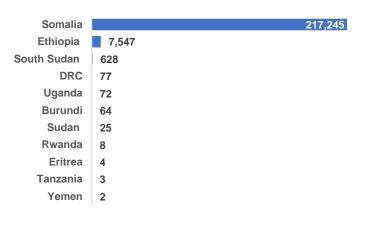
81,207

Somali refugees who returned home since **December 2014**; no return in March 2021.

63,928

Refugee children are enrolled in school in the Dadaab camps

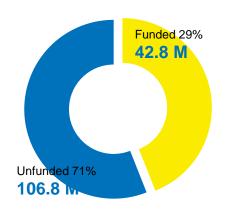
## REFUGEES AND ASYLUM SEEKERS BY COUNTRY OF ORIGIN AS OF 30 APRIL 2021

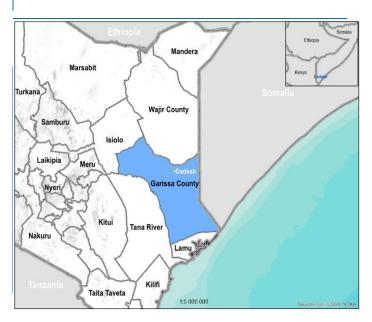


**FUNDING (AS OF 20 APRIL 2021)** 

### **USD 149.6 M**

requested for the Kenya situation





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#### **COVID-19 Preparedness and Response**



- Highest COVID-19 cases recorded so far and mortalities since the beginning of the outbreak.at 95 cases and 5 deaths.
- Ifo2 isolation facility was operationalized during the reporting period. A total of 34 cases were admitted for COVID-19 management.
- A total of 232 refugees and asylum seekers were tested for COVID-19 translating to an average positivity rate of 10.7%.
- COVID-19 vaccination phase one was launched on 7 Apr 2021. By the end of April, 436 had been vaccinated with refugees making up 117. Slow uptake was attributed to the fasting period and negative media coverage of the AstraZeneca vaccine. Scale up of sensitization and continuous medical education was undertaken to increase uptake of the vaccine.
- Access to essential health services provided with 41,341 consultations conducted during the reporting period at a rate 80 consultation/clinician/day.

#### **Public Health Response**

- One isolation and one quarantine facility maintained for COVID-19 response.
- UNHCR and partners maintained 251 community health workers for risk communication and community engagement, community-based surveillance, and community sensitization on uptake of essential services, and to ensure access to basic care for those with chronic conditions.
- Community sensitization upscaled through 5 weekly live radio shows, household visits and health education sessions at the health facilities.
- COVID-19 supplies stockpile maintained at Ifo2 warehouse to support health partners in the COVID-19 response.
- Sample referral for COVID-19 testing and surveillance supported through Kenya Red Cross Society.

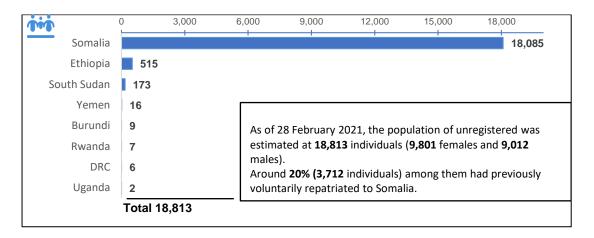
### **PROTECTION**



- UNHCR registration team remotely registered 501 new births, and deregistered 4 deaths and updated the birth and death notification details in ProGres.
- Ration card exchange was conducted for 1,162 persons of concern and updated in ProGres as lost or damaged cards. The team also assigned alternate food collectors to 55 persons of concern.
- The team issued and updated 28 SIM cards for cases that were separated during continuous registration processes at the field level. 15 card separation cases were conducted for family reunification and facilitation of the ongoing voluntary repatriation cases.
- The Refugee Affairs Secretariat issued 4 refugee identity cards and processed 7 new applications. The process of producing new refugee identity cards remains suspended



- until further notice. In Dadaab, there are 12,665 refugee identity cards which are pending collection.
- The General Food Distribution commenced on 1st April 2021 and was completed on 15th April 2021 in Ifo while Hagadera and Dagahaley completed on 16 April 2021. A total number of 45,322 families consisting of 223,234 individuals and 96% of the food token holders received food assistance.
- There was no profiling of new arrivals. The population of unregistered is estimated at 18,813 individuals; 9,801 are females while 9,012 are males.



#### **Access to Justice**

- Legal aid clinics were conducted across the three camps, where the RCK (Refugee Consortium of Kenya) camp-based protection monitors and community-based counsellors referred a total of 86 (60 Women, 24 Men, 2 Girls, 0 Boys) clients to the legal clinics. The issues presented by clients included court (Immigration) case follow up, physical assault, Intimate Partner Violence case, threats, double registration, stigma and discrimination, insecurity, child labor, medical assistance, data transfer from Kakuma to Dadaab, defilement, resettlement queries, card reactivation, child custody cases, livelihood assistance, renewal of alien card, threat of early marriage, plot dispute, child maintenance, survivor of torture, documentation, disability support and minor family disputes
- The Dadaab Court did not have sessions during the reporting period due to the continued absence of a prosecutor, as well as lack of infrastructure to facilitate virtual court hearings with the prosecutors in Garissa. Thus, most criminal cases were taken to Garissa courts for mentions or given alternative dates as the Judiciary continues to follow up on the issues.
- Border monitoring activities were conducted by RCK border monitors where 482 (146 men, 99 women, 121 girls and 116 boys) were recorded as having crossed through the Liboi border into Kenya. In the previous month, 519 (143 Men, 119 Women, 131 Boys, 126 Girls) crossed through the same point. This decrease in numbers could be attributed to the rains being experienced in the region which hinders movements due to the impassable roads as well as limited movements of persons observing the Holy month of Ramadhan as most people opt to remain indoors. The RCK monitor at Liboi directed them to the camps and informed them of the importance of reporting their presence in Kenya to UNHCR and RAS. Lack of border monitors at court stations and along the



migration corridor continues to pose a challenge as it is difficult to mitigate release of arrested POCs in time. RCK has been in consultation with the border authorities through their networks to mitigate same.

#### **Child Protection**

- Terres des Hommes (TdH) supported 20 vulnerable children in Ifo camp with cash-based intervention under PRM funding. The children received unrestricted vouchers worth Kshs 5,000 which they can use to redeem their items of choice at TdH prequalified shops. This support is aimed at helping children have access to necessities such as food commodities (e.g. sugar, rice, milk) and non-food items such as (mattress, sleeping mats, exercise books and pens). The support also enabled the parents/care givers supplement their efforts of supporting their children. Additionally, TdH supported 10 children including two boys living with disability with emergency assistance in the form of food and non-food items in Ifo camp.
- TdH counsellors provided psychosocial support to 106 children (50 girls,56 boys) in the three camps. The needs presented included mental health concerns, psychosocial concerns due to various protection needs, exposure to child labour for children living with elderly caregivers and unaccompanied/separated children (UASC) who are unable to provide for themselves. In Ifo, TdH engaged 33 care givers in group session on offering basic counselling skills to children of various ages. The individuals were drawn from the safe spaces which include the transit center, safe haven and the Protection area.
- TdH in Ifo and Dagahaley conducted 8 Best Interest Assessments for food token, assigning of alternate food collectors, card separation and care arrangements. The assessments will be discussed internally with the TdH team before being referred to UNHCR for further actions.
- TdH supported 9 children in Bulla Kheir host community with dignity kits in the form of a restricted cash voucher worth Kshs 5,000. The girls would be able to redeem items such as sanitary towels, bar soaps, bathing soaps, toothbrush, toothpaste, and hand sanitizers. One SGBV survivor, 3 separated children and 5 adolescent girls living with vulnerable caregivers benefitted from this support.
- TdH conducted a 3-day capacity training for 20 community members. Topics covered included child rights, child safeguarding policies, harmful cultural practice and their effects and referral pathway as well as COVID-19 preventive messages.
- Tdh supported 2 children with emergency social support in the form of food and non-food items. The support was aimed at helping the families meet their most immediate needs and enable them cope with the harsh economic times occasioned by the COVID-19 pandemic

#### **Community Empowerment**

 UNHCR provided a three-day training to 15 female volunteers on girls' mentorship in Ifo camp with an objective of building capacity on mentorship processes for communitybased social support. Topics discussed were roles of a mentor, characteristics of a good



- mentor, mentoring relationship, challenges faced in mentor-mentee relationship, prevention measures, and stages of mentorship relationship.
- Lutheran World Federation (LWF) conducted a training for 30 caregivers of older persons in Hagadera. The training empowered the participants with knowledge and skills on appropriate care for bedridden older persons in home-based programs. Subsequently, LWF supported 100 older persons with vegetable seedlings including sukuma wiki, tomatoes, spinach, okra, carrots, etc. for the multi storey garden farming project in Hagadera which will help them grow fresh vegetables for their consumption and supply in the market as an income generating activity.
- Youths conducted COVID-19 awareness campaigns across the 3 camps as part of activities to curb the spread of the pandemic. They encouraged community members to observe public health mitigation measures such as wearing of facemasks, maintaining social distancing and the frequent handwashing using soap and water.

#### **Sexual and Gender-based Violence (SGBV)**

- 46 SGBV cases were reported and attended to across the camps through the GBV partner. Case profiles included rape, physical assault, and psychological/emotional abuse. All survivors received psychosocial counselling and referrals were made to the police and to hospitals as appropriate. Follow up will be done with the police to ensure that proper investigations are conducted, and witnesses record statements thereby aiding in survivors' access to justice
- DRC held a sensitization forum in Ifo camp on community perception and consequences of FGM/C reaching 25 individuals. Findings from the session indicated that FGM is still tied to religious connotation. However, majority of the participants indicated a change in attitude on how they perceive the practice.
- The partner engaged 15 female participants in a 3-day training on girls' mentorship in Ifo camp with an objective of building capacity on mentorship processes for communitybased social support. Roles of a mentor, characteristics of a good mentor, mentoring relationship, challenges faced in mentor-mentee relationships and stages of mentorship relationship were discussed.
- A community forum on causes and effects of domestic violence on individuals, families and the community was held in Ifo camp reaching 30 individuals. The aim of the forum was to share information and create awareness on SGBV prevention, reporting channels and available services.
- Two dialogue sessions on SGBV and violence reduction were held with 75 men in Ifo and Dagahaley camps. The discussions focused on how men in the camp can be involved in enhancing safety and security for women and girls. The men were encouraged to use their power and positions positively to advance gender equality and to create conducive environments for women and girls' development.
- Gender Based Violence health talks were conducted in Dagahaley camp reaching 70 community members. Economic violence as a barrier to women and girls' full potential was discussed. Participants shared that cultural practices and traditionally ascribed roles are the biggest barrier to women and girls' participation in decision making processes. The facilitator encouraged women to take up livelihoods' opportunities offered by agencies which will help them meet their basic needs. The GBV hotline number and the referral pathway were shared.



#### **Persons with Specific Needs (PSNs)**

- 566 (291F, 275M) older persons were attended to during the month of April across the 3 field offices of Ifo, Hagadera and Dagahaley by Lutheran World Federation's (LWF) social services unit. The 566 persons benefited from services such as assessment and case documentation, psychosocial counseling, home visits and follow ups including referrals to other agencies for health, WASH, rehabilitation, and registration services.
- One counselling session for 24 older persons conducted for on how to cope with the current pandemic including adherence to set preventive measures for curbing spread of COVID-19.
- LWF reached out to 389 (192M, 197F) people living with disabilities In Hagadera. The individuals received services at the rehabilitation center such as assistive devises support, physiotherapy, and occupational therapy services, and at block level services included homebased therapy and counselling services
- During the reporting month, LWF facilitated the monthly elderly coordination meeting in Dagahaley and among participants were 30 (15M, 15F) elderly committee members along with RAS and LWF staff from Education and Community services. The elderly committee members received updates on funded project and activities for older persons. The committee also raised concerns over closure of the camps as announced by the Government of Kenya.
- In Dagahaley and Ifo. Humanity and Inclusion (H.I) reached out to 1,490 (803m,687f) persons with disability for services such as physiotherapy, occupational, soft tissue manipulation, gait, assistive training, client session, peer to peer, fabrication, and repair of assistive devices.

#### Coordination

- A virtual case conference was held on 6 April 2021 where 5 cases were discussed. All the cases are still open as lasting solution were not reached. The people of concern are to continue with counselling services from agencies. All the cases will be reviewed in one month after agreed action points are carried out.
- UNHCR held an interagency virtual meeting on Communicating with the Communities and validated the terms of reference and roadmap for the working group. To increase effectiveness of the working group, a training action plan will be designed, to map out community committees and agency communication channels and create an information dashboard for the Dadaab operation.
- Protection Community Based unit held an interagency PSEA (Prevention of Sexual Exploitation and Abuse) taskforce meeting on 8 April 2021. The operationalization of the taskforce will serve as the primary body for coordination and actively promote protection from sexual exploitation and abuse of persons of concern. The focal persons have responsibility within their agencies and in collaboration with the PSEA Task Force to facilitate awareness-raising in the community on their rights, the fact that all services are free and provide mechanisms to report on sexual exploitation and abuse.
- UNHCR-World Bank Rapid Response Telephone survey have interviewed 459 households out of a target of 1,250 households. The consent rate in the refugee sample from all the respondents (respondents interviewed in the 5th wave + respondents that we did not reach in the 5th wave) was 52%.



- Participatory assessment interagency refresher training was held on 16 April 2021 and agreed on the roadmap, groups, and responsibilities for each partner. Participants agreed on the following thematic areas namely Health, Education, Shelter, Child Protection and SGBV. After further consultations, thematic areas on Environment, Communication with Communities, and questions for Key Informants. New Arrival, Documentation, Access to Justice and Civil registration thematic areas will be administered through a Kobo tool. On 27 April 2021, UNHCR held an interagency training on *kobo* tool form for the structured questions for the remaining thematic areas. The planned exercise will be conducted after a virtual training will is conducted on 4 May 2021.
- National Interagency Mental Health and Psycho-Social Support coordination meeting was held on 27 April 2021 and the meeting presented the best practices from each location, reviewed the 4W mapping and launched the planning of World Mental Health Day.
- On 28 April 2021, the monthly youth coordination meeting was held with key partners and youth representatives across the 3 camps engaged on emerging issues affecting youth such as the COVID-19 response, registration and verification of youth groups as well as sports teams and the suspension of Alien card processing due to surge in the third wave of the COVID-19.
- Youth across the camps were engaged in FGD discussions to sensitize the youth on documentation as part of the ongoing participatory assessment.
- Youth across the camps conducted COVID-19 campaigns as part of measures to prevent the spread of the disease among refugee community. They encouraged the community to wear face mask, maintain distance of at least two meters and frequent handwashing using soap and water. Further, the symptoms of the disease were explained at tap stands, market, and crowded place.
- Clean-up campaigns were undertaken by Youth groups in Ifo and Dagahaley at the dumping sites and roadsides. In addition, waste management methods such as burning and burying, were demonstrated to the community members who participated.



#### **EDUCATION & LIVELIHOODS**

- The Kenya Certificate of Secondary Education (KCSE) national examinations were successfully completed on 21 April 2021 with 95% completion rate for 1,555 registered candidates across 6 Secondary schools. 85 learners absconded the national examinations.
- The 2020/21 KCPE results were released on 15 April 2021 nationally and an overall slight improvement in mean score for 22 primary schools was realized from 212.30 marks in 2019 to 230.48 marks in 2020/21. The best student in Dadaab UNHCR refugee camps primary schools was from Upendo primary in Hagadera camp who scored 378 marks out of 500 overall, followed by a female candidate from Iftin Primary, Hagadera camp with 375 marks and 3rd in position scored 363 marks from Iftin primary school, Hagadera.
- Training of 107 teaching and non-teaching staff (23F, 84M) on school safety and hygiene
  practices in relation to COVID-19 was conducted to enhance their capacity and
  awareness on how to ensure proper hygiene practices in schools as a factor in the fight



- against the spread of COVID-19. The participants were drawn from the 22 primary schools in the three camps.
- Lutheran World Federation (LWF) trained 46 teachers on the use of audio-visual literary resources development to support online learning during the period of the COVID-19 pandemic. The one-day, camp-based training was delivered to participants from 22 primary schools in all the three camps. The objective of the training was to understand the meaning of audio-visual materials, making use of audio-visual materials in the course of the delivery of their lessons to their learners, access and disseminate online audio and visual resources and identify the challenges associated with the use of online audio-visual online resources.
- LWF engaged 20 boys from Dagahaley camp Central primary school on 21 April 2021 in a psychosocial support conference. The topics covered addressed decision making, self-esteem, stress management and positive self-concept to help them address harmful socio-cultural practices and norms during this period of the COVID-19 pandemic.
- Technical and Vocational Education and Training (TVET) trainings at the DRC Vocational training centres continued in all the 3 camps, with average weekly attendance of 72% out of 139(58 female) youth enrolment. Main skills taught included trade test in Electrical, Solar lighting Tailoring and dress making and plumbing skills for grade I and II. Development of Skills Mapping app with support from ILO, has been completed and one hundred youth have been trained and registered on the app. About four of them have already uploaded their skills. The skills app helps the students to identify their skills and the match them with appropriate jobs in the market.

#### **DURABLE SOLUTIONS**

- The resettlement unit conducted resettlement interviews and drafted two cases comprising of nine individuals for the USA and Canada. Due to the COVID-19 pandemic, all interviews will be conducted remotely. The team developed standard operating procedures on remote interviewing to minimize exposure and spread of the corona virus.
- The unit received and responded to 12 deferrals, which were related to the addition of new-born babies to the RSC Africa-United States Refugee Admissions Program (USRAP). Further, the team continued to offer counselling sessions to persons of concern via emails, phone calls and WhatsApp messaging. As a result, 23 applicants were counselled, and their inquiries responded to on their resettlement case status.
- 40 cases were submitted to the UK and the Keep in Touch' message shared with the concerned applicants. Among them, four cases were identified having changes in the family composition (add on baby and spouse). Updated Resettlement Referral Forms will be shared with the UK as soon as the new-born baby and spouse are registered.
- One movement pass, comprising of six individuals, was prepared, and shared with IOM.
   These were for the people who were going to Nairobi and then being resettled in Canada.
- UNHCR has been broadcasting information it received from PRM to USRAP applicants through Radio. This was for messaging to community groups who are in the US pipeline, in particular for those refugees who were booked for travel and had their travel cancelled at the last minute.



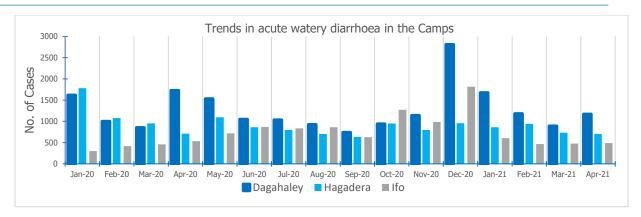
- The unit received one request from an applicant who wished to be reunited with family in Italy. The refugee was assured that the office would assist them throughout the process whenever possible. However, the beneficiaries of the request are unregistered, which poses a challenge.
- UNHCR reached out to one applicant and notified him that the United Church of Canada (UCC) has a sponsor willing to take him under the private sponsorship program. The unit assisted him in documenting and forwarding additional information required by the UCC.
- Using KoBo toolbox for complementary pathways, 36 individuals were recorded as having received assistance. Since adoption of the tool in April 2021, data collection has been enhanced, particularly where ProGres V4 cannot be used.
- Plans are being finalized for the voluntary repatriation of the first group of returnees to Ethiopia via Dire Dawa Airport. An estimated 74 (with 37-seater or 100 with 5-seater aircraft) returnees are expected to travel on the two rotations on 5 May. Other cases are being processed for subsequent movements during the month of May.

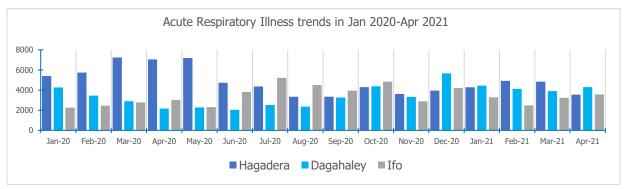
#### **Identified Needs and Remaining Gaps**

- Many refugees in Dadaab refugee camps are seeking support for resettlement given that particularly those with high protection risks and most vulnerable, have virtually no or very limited voluntary repatriation prospects. Regrettably, quotas availed are very low.
- There is a need to increase and strengthen awareness on complementary pathways amongst the refugee community so that UNHCR can facilitate access to opportunities. In 2020, the Office assisted 131 individuals with access to family reunification and community sponsorship Programmes in third countries.



- Two more cases of vaccine Derived Polio Virus 2(cVDPV2) were detected in healthy stool samples routinely collected from new arrivals. First round of polio immunization campaign is planned for May 2021.
- Overall health of the population remained stable with mortality rates within the recommended standards at crude mortality rate (CMR) of 0.07/1000 population/month (recommended is< 1.5) and under 5 mortality rate of 0.3/1000 population/month (recommended is < 0.75)</li>
- There were 2 maternal mortalities recorded, one was a referral from the host facility. Both audited and feedback shared for health system strengthening.
- Access to essential health care was provided through 3 hospitals and 6 health posts with 32,888 consultations conducted at 73 consultations/clinician/day. This is above the recommended standard of 50.
- A 12.4.% increase in acute watery diarrhoea noted due to the rains and this was mainly in the northern camps. The overall caseload for acute respiratory illnesses reduced with a slight rise in Dagahaley camp. No cholera cases confirmed during the reporting period. Hygiene promotion and sensitization of communities continued throughout the period with increased water pumping hours.





- Management of acute malnutrition Management of moderate acute malnutrition (MAM) and severe acute malnutrition (SAM) was maintained. This was done through three components namely, stabilization centres for management of severe acute malnutrition (SAM) with medical complications, outpatient therapeutic care centres for management of SAM without medical complications and supplementary feeding centres for treatment of moderate acute malnutrition (MAM). The increase in cases of moderate malnutrition was because of targeted active case finding in the community by use of family MUAC, height for weight approaches especially in Hagadera camp.
- MIYCN (Maternal Infant and Young Children Nutrition) activities implemented include mother to mother support groups meetings and linkages, community dialogue, family bazaars. As a result, 857 babies were put on the breast within the first hour and 11 new admissions for breast milk substitute raising the total number of children under 6 months in the program to 27.
- Access to optimal reproductive health and HIV services continues to be provided. During the reporting period, 62,13 women and girls accessed sexual and reproductive health services at the various points in the camps and 64 were managed for post abortion care. Provision of safe motherhood interventions was achieved through 24-hour *mama taxi* referral services, adequate community linkages and provision of comprehensive emergency obstetric and new-born care. Referral mechanism was established benefitting 3 emergency obstetric cases requiring specialized care in Garissa. 77% of mothers completed antenatal care and 97% of the 998 deliveries were conducted by skilled personnel. The caesarean section rate is 5.7%.
- Most at Risk populations who continue to seek services are 166 while those on antiretroviral therapy are 120 up from 118 in the previous reporting period. A total of 832(250m) were tested for HIV.
- No maternal mortality recorded during the reporting period.



- 32 referrals, out of which 8 were to Nairobi while 24 were to Garissa. No mortalities reported.
- A network of 251 community health volunteers and 6 supervisors support health education, risk communication and community engagement, surveillance, community level screening and contact tracing efforts. During the reporting period, 53,602 household visits were conducted.
- The mental health clinics provided comprehensive integrated services to patients with existing mental health conditions in addition to psychosocial support. refugees and surrounding populations. A total of 1174 consultations were conducted. Psychosocial support was also offered by different partners to those in quarantine and isolation.
- The referral mechanism was maintained for emergency specialized care, 47 patients were referred to Garissa (36) and Nairobi (11). Out of these cases, 10 were obstetric emergencies. As part of the government's COVID-19 public health measures, the cessation of referral of elective cases and reverse referral missions is still in effect.

#### **Identified Needs and Remaining Gaps**

- Reduced community health workforce from 323 to 251 for risk communication and community engagement. This has resulted in inadequate community surveillance, household health education sessions and quarantine admissions.
- Backlog of chronic cases at the camps due to movement restrictions suspending reverse referrals leading to increased morbidity and complications.
- Lack of point of entry surveillance and quarantine facilities at main border crossing points
  of Liboi and Amuma continue to affect efforts and pose a risk of importation of more
  virulent variants of COVID-19.
- Shortage of clinical staff. Currently clinicians are doing 80 consultations per clinician per day, the recommended standard is less than 50.
- Inadequate blood and blood products especially affecting maternal health outcomes. Post-partum haemorrhage is responsible for over 90% of maternal mortalities in the camps.
- Lack of nutrition survey since 2018 hence accurate picture of the nutrition status not known
- Shortage of staff to support the MIYCN activities in Ifo and Hagadera camps because of budget reductions.
- Shortage of clinical staff. Currently, clinicians are doing 73 consultations per clinician per day, the recommended standard is less than 50.
- Inadequate blood and blood products especially affecting maternal health outcomes. Post-partum haemorrhage is responsible for over 90% of maternal mortalities in the camps.

### FOOD SECURITY AND NUTRITION

 Double distribution for the month of April and May was conducted during the period under review. Food items distributed and cash is as per the below tables.

Commodity	Quantity in	Quantity in Kg per	Amount of Cash in
	grams/day/person	person	Kes/person/Month



Cereal- Sorghum	126	7.43 Kgs (126*59/1000)	600
Pulses	60	3.54 Kgs (60*59/1000)	
Oil	35	2.06 Kgs (35*59/1000)	

No cash, Bamba chakula for undocumented beneficiaries.

Undo	cumented and beneficiaries		Documented beneficiaries Fed	
Camp	Households	Population	Households	P
Hagadera	1,585	4,954	16739	
IFO	1,660	4,741	13960	
Dagahaley	1,507	4,138	14530	
Totals	4,752	13,833	45229	

#### **Identified Needs and Remaining Gaps**

- Lack of nutrition survey since 2018, hence accurate picture of the nutrition status not known.
- Shortage of staff to support the Maternal Infant and Young Child Nutrition activities in Ifo and Hagadera camps because of budget reductions.



#### **Access to water**

On average, the daily water production in March from 22 operational boreholes was 10,769 m3, where about 6,774m3 supplied to the refugee population in the three Dadaab camps. This translated to an average daily per capita water allocation of 28 litres per person per day. About 3,995m3 (36. %) was apportioned to other users including Agencies, markets, institutions, hospitals, leakages, livestock, and other losses.

#### **Sanitation Coverage**

There were 39,471 household latrines and 250 communal latrines during the reporting period, translating to a coverage of 85.1%. WASH partner (CARE) is currently incorporating community structures in camp cleaning. 105 sanitation cleaners who were actively engaged in managing solid waste in public areas across the refugee camps, have been laid off. Therefore, management of solid waste is being done by the community and their leaders.



#### **Hygiene Promotion**

 CARE engaged 126 hygiene promoters to conduct campaigns and incorporating community structures in hygiene promotion across the camps. Hygiene promotion ratio to PoCs stands at 1:1,898, against the UNHCR standard of 1:1000 PoCs in protracted refugee situations like Dadaab.

#### **Identified Needs and Remaining Gaps**

- There is a need to construct 2,500 household latrines to attain standard coverage of 90% in 2021 – 2022.
- There is one functional landfill in Hagadera, hence there are needs for two additional landfills for Dagahaley and Ifo respectively.
- 108 additional hygiene promoters are required to be engaged to attain a standard ratio of 1:1,000.
- There is a need to install solar for the pumping of boreholes; 4 boreholes and 6 generators, need replacement. 13 leaking elevated tanks need repairs and capacity building is required for the three market water committee members in the camps.

#### Working in partnership

In Dadaab, The Government of Kenya counterpart, RAS, and UNHCR are working together with WFP, UNICEF, IOM, County Government of Garissa, Refugee Consortium of Kenya, Save the Children International, Terre Des Hommes, Danish Refugee Council, International Rescue Committee, Lutheran World Federation, Humanity and Inclusion, Centre for Victims of Torture, Windle International, Norwegian Refugee Council, Kenya Red Cross Society, Médecins Sans Frontier, FilmAid International, CARE International, RRDO, FaIDA and Peace Winds Japan.

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