

PROTECTION ASSESSMENT OF BIIQA, QOLOJI 1, AWJABUR, MASLE, DUGSI AND KALIYAL IDP SITES IN FAFAN ZONE, SOMALI REGIONAL STATE



Figure 1 Qoloji 1 IDP site



Table of Contents

1. INTRODUCTION	3
2. SCOPE OF THE ASSESSMENT	4
3. COMPOSITION OF THE ASSESSMENT TEAM	5
4. OBJECTIVE OF THE ASSESSMENT	6
5. ETHICAL CONSIDERATIONS.....	6
6. METHODOLOGY AND ASSESSMENT TOOLS	6
7. MAJOR CHALLENGES AND LIMITATIONS	7
8. KEY FINDINGS	8
8.1 BIIQA IDP SITE.....	8
8.2 AWJABUR IDP SITE	11
8.3 QOLOJI 1	13
8.4 DUGSI IDP SITE.....	16
8.5 KALIYAL IDP SITE	18
8.6 MASLE IDP SITE.....	20
9. CONCLUSIONS	22
10. RECOMMENDATIONS	24



1. Introduction

The Danish Refugee Council (DRC) is a humanitarian, non-governmental, non-profit organization founded in 1956 that works in more than 30 countries throughout the world. DRC fulfils its mandate by providing direct assistance to conflict-affected populations – refugees, internally displaced people (IDPs) and host communities, in conflict areas around the world.

DRC has been implementing two projects in 18 IDP sites in Fafan Zone during 2018 with funding from ECHO and UNHCR. Both projects complement and strengthen DRC's provision of protection focused assistance and contribute in enhancing the capacity of community-based protection mechanisms and the capacity of the local authorities in preventing and responding to protection needs and concerns of IDPs. These assessment reports were produced under the UNHCR funded project "*Responding to Basic Needs and Protection Concerns in the Fafan Zone of Somali Region, Ethiopia*"

According to DTM round 14¹, a total of 167,652 households consisting of 1,006,276 displaced individuals are dispersed in 389 displacement sites across Somali Region. These figures show a decrease of 75,044 individuals (11,280 HHs) in comparison to DTM 12 and 9,890 individuals (594 HHs) to DTM 13; On the contrary there was an increase of 3 sites from DTM 12 and one site from DTM 13. The majority of IDPs identified in the region were displaced to locations near their areas of origin. 63 % of IDPs in the region are displaced within the region.

During displacement women, children, persons with disability and elderly people are more vulnerable to different types of protection risks and in need to immediate assistance and protection. As per DTM 14, there is a total of 6,569 orphan children; 3,167 separated children; 1,291 unaccompanied children; 3,786 people with disability; 5,720 single female-headed households; 17,595 elderly-headed households and 8,060 elderly without caregivers in Somali region. Even though the number of displaced people is decreasing,

¹ November-December 2018



the number of people of concern show an increase in numbers from 34,814 in DTM 13 to 46,188 in DTM 14. Compared to the other vulnerable groups the number of elderly-headed households was highly increased. Family separation due to conflict or in search of livelihood opportunities can be one of the reasons for the increase.

2. Scope of the assessment

In Fafan Zone, a total of 226,080 displaced individuals are living in 37 IDP sites. The main reason of displacement for IDPs in 35 sites was conflict, while for the remaining 2 sites was drought. This protection assessment has been conducted in 6 IDP sites where DRC has an intervention and where DRC has not conducted an in-depth protection assessment before. The main purpose of this assessment was to identify the protection needs and risks as well as the capacity or coping mechanisms that exist within the displaced community in the 6 selected IDP sites. More specifically the assessment was conducted in Dugsi, Kaliyal, Awjabur, Qoloji 1 and Biiqa IDP sites in Babile woreda and Masle IDP site in Tuliguled woreda.

The assessment was able to capture information related to protection needs, concerns, availability of services and relationship between the host and IDP community among others. The data collection was carried out from November 5, 2018 up to November 7, 2018 for the sites in Babile woreda. However, due security issues in Tuliguled woreda the data collection in Masle was conducted on December 10, 2018.

The findings can be a documented resource which can support different humanitarian actors to design projects that can improve the safety and protection of the IDPs in Fafan Zone or advocate on behalf of the displaced community.

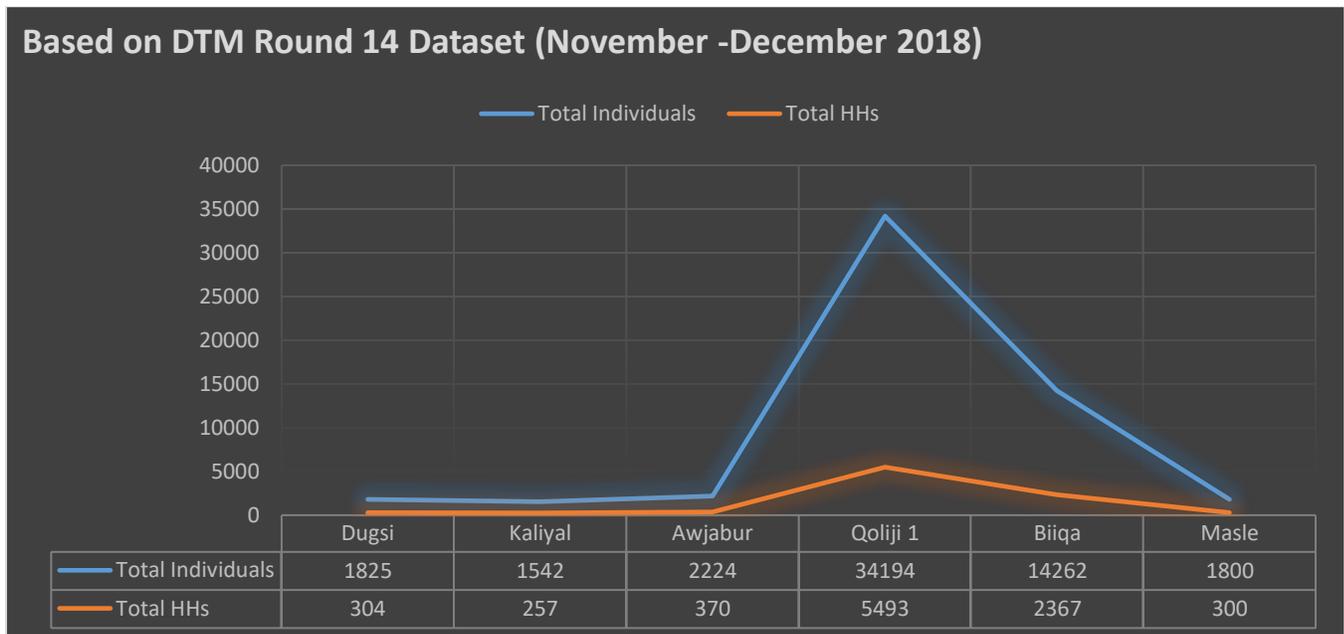


Figure 2 Population of the selected IDP sites

3. Composition of the assessment team

The assessment team consisted of 5 (4F,1M) DRC staff². Structured interviews targeting women and girls were conducted by Female staff.

Name	Sex	Organization	Title
Hoden Abdikarim	F	DRC	Protection officer
Abdikarim Dheg	M	DRC	Protection Officer
Amira Muktar	F	DRC	Protection Officer
Hamedda Hassen	F	DRC	Protection Assistant
Hoden Mohamud	F	DRC	Protection Assistant

Figure 3 List of the DRC staff members participating in the assessment

² Prior to the assessment DRC had discussions with the Disaster prevention and preparedness bureau (DPPB) and the Bureau of women and children affairs (BOWCA) to inform them about objective of the assessment, the methodologies deployed, the sites selected and the type of support expected from the local authorities

4. Objective of the Assessment

The objective of this assessment was:

- To identify protection risks and concerns, community coping mechanisms and capacity of the community to respond to the risks.
- To assess the available services and needs for humanitarian assistance in the IDP sites.

5. Ethical considerations

DRC has considered consent, confidentiality and the right of the participants to withdraw during the designing phase of the assessment tools and during the actual assessment. All DRC staff were trained on the above principles before the assessment and all participants received information regarding their rights before the interviews.

Informed consent: The objective of the assessment has been clearly described to the participants and consent was taken before the recording of any information.

Confidentiality: DRC applied its internal data protection guidelines to ensure confidentiality of all personal information of the respondents, during data collection as well as during storage.

Voluntary participation: The participants were informed that participation in the assessment is voluntary and that they could withdraw from the discussion at any time. On the same time, they were informed that they have the right to refuse to answer a few or all questions.

6. Methodology and assessment tools

DRC applied a purposive sampling technique. The number of participants, their role, age and sex were clearly defined before the assessment in order to get the detail information needed. The local administration was responsible to prepare all the respondents in their respective sites.

The data collection tools were:

- A. Semi structured interviews with women and girls.
- B. Semi-structured interviews with men (Youth, persons with disability, elders and other).
- C. Key Informant Interviews with local authorities or religious leaders or community representatives.
- D. Protection observation

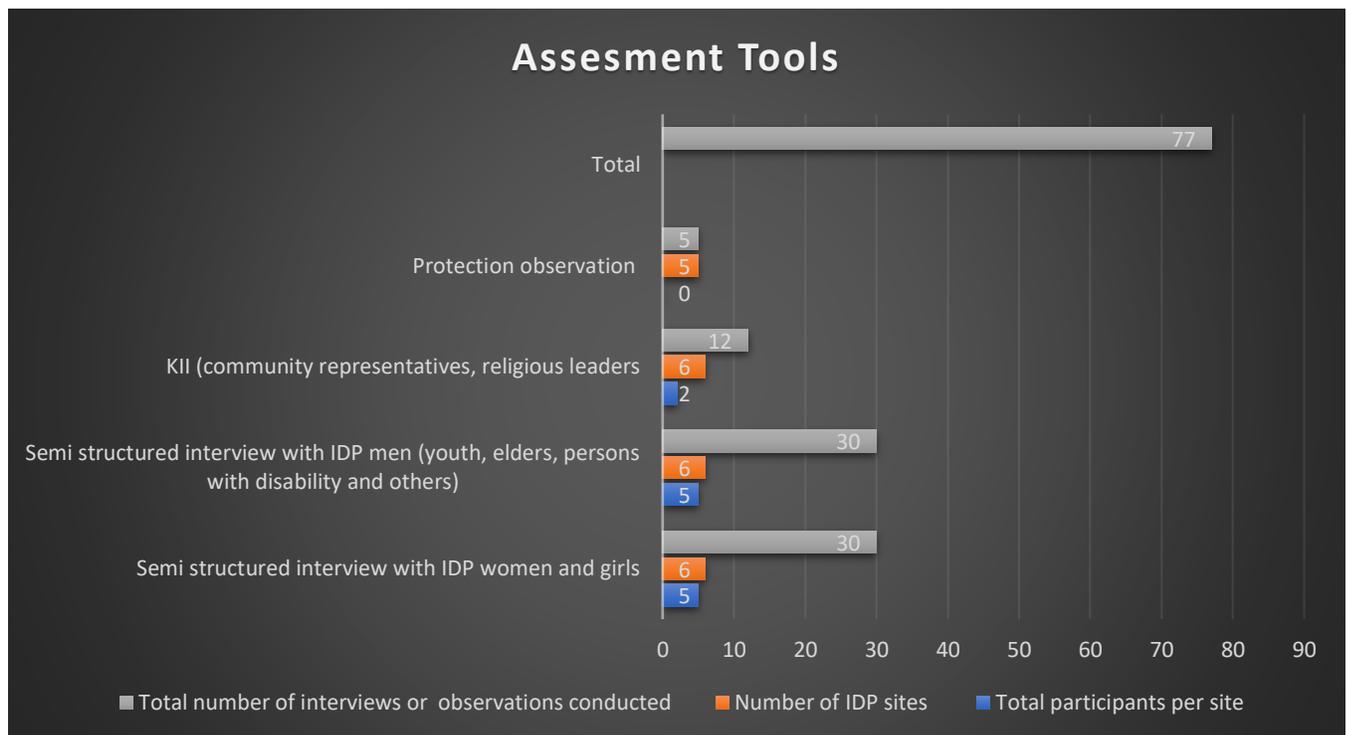


Figure 4 Assessment tools

7. Major challenges and limitations

- The security situation in the sites under Babile and Tuliguled woreda hindered the timely collection of the required information/data.
- The data collection tool KOBO that was used for the assessment has limitations in regards to qualitative data collection and analysis.

8. Key Findings

8.1 Biiqa IDP site

Biiqa IDP site is under Babile woreda. The site has recently opened³ to host IDPs displaced from East Harrage of Oromia region due to the conflict between Somali and Oromia regions. Based on DTM round 14 findings, a total of 14,262 (7,930F and 6,332M) IDPs and 2,367 HH are residing in Biiqa. DRC has established a community-based protection committee (CBPC) comprised of 20 members in December 2018. The CBPC has received training about protection and are assigned to do safe identification, referrals and awareness raising and serve as a focal point for protection activities.

Access to services

Food: The DPPO and Kebele administration usually provides information about food distribution to the community before the distribution. The IDPs have received food only two times since they arrived with the last distribution being conducted 10 days before the assessment. The food couldn't cover the consumption needs of the families for more than a week. According to a participant: *'we can't plough, engage in business sectors to cover our daily consumption'*. The IDPs are highly dependent on the host community to cover their food needs. Even though participants mentioned that some IDPs have no access to food, the assessment team couldn't verify the reason and the number of IDPs affected. Additionally, the provision of food was delayed for several months because of the instability in Somali region and the change in the regional government. As a result of the food insecurity, IDPs can be exposed to different health problems as well as malnutrition a high risk especially for children.

WASH: The community had initially no access to clean water in Biiqa. The IDPs had to travel around 3 km to get water from a well and wait for 1 hour in the queue. The amount of water collected was not enough for their daily consumption. However, the Lutheran World Federation (LWF) has distributed jerrycans and started the provision of water through water trucking recently. Regarding the hygiene conditions there is no latrine,

³ June 2018



disposal pits or showers. The absence of those sanitation facilities has resulted to people being at risk different diseases and casualties as has been reported.

Shelter: IOM has provided 500 plastic sheets when the IDPs arrived at the site. The IDPs have built temporary shelters using plastic sheet and wood. In some occasions 3-4 HHs live together in one hut (traditional house) due to shortage of shelters in the site. As per the respondents, the shelters have no lock but there are no safety concerns associated to that.

Health: The closest health center is located 2km away from Biiqa IDP site. As a result is less accessible especially for women, children, people with disabilities and elders. The problems associated with the health facility can lead people in severe medical conditions that need urgent attention. Despite that, the IDPs visit the health center as well as traditional healers for any health-related problem. Women and girls have information on reproductive health and hygiene.

Livelihood: The displaced community was engaged in agriculture activities and trade while in their place of origin. After the displacement, the IDPs are highly dependent on humanitarian assistance and host communities to survive. The lack of start-up capital in order to be engaged in income generating activities was mentioned as a main challenge by the respondents.

Education: According to key informants (KII), almost all children attended school before displacement. However, around 25-50% of the children attend now the primary school. The school is far and the classrooms are very crowded to accommodate students from both the host and IDP community.

In conclusion, most of the services are far to access easily and therefore costly for the IDPs. The IDPs have prioritized food, NFIs, shelter, water, medical care and education as the most important services that need immediate attention.

Child protection: According to the respondents there are no major concerns that affect children. Even though it is difficult to know exactly the number of orphan children on site



due to the lack of data, unofficial care arrangements exist and therefore orphan children are currently been under the protection of their relatives.

Persons with specific need: The participants have identified women, elders, single-headed households as more vulnerable than the other community members.

Coping mechanisms: The host community share food and other resources with the IDPs. Some of the IDPs are engaged in daily labor work to cover their daily consumption. Early marriage has also become one of the coping mechanisms in the community.

GBV: Female respondents listed out domestic Violence, early marriage and FGM as the most common GBV cases whereas male participants said, ‘there is no GBV incident in the community’. This can be due to the lack of awareness, misconceptions regarding GBV or intention to hide the incidents. It needs further assessment to know the exact reason and develop a strategy to prevent and respond to GBV cases properly. Women and girls are aware were to report child abuse or GBV cases that are taking place in Biiqa. They also suggested that sex-segregated latrines, provision of solar lights, awareness raising about GBV and construction of a women-friendly space can improve the safety, protection and access to services for women and girls.

Freedom of movement, new displacements and documentation: The IDPs can move freely from place to place without any restriction. A total of 40 HH newly displaced from the Somali -Oromo border areas and more specifically Ali-kulo, Hindia, Dorata, Gologadon, Didimto and Ibro-sadan Kebeles of Bisidimo woreda of Oromia region arrived in the past 4 to 6 months to the site. The local authorities have registered the IDPs up on arrival. There is no movement out of the site to other areas.

Social cohesion: The coexistence of the IDPs and host community is very good. Whenever conflict occurs the Kebele management and elders mediate and resolve the issue immediately, maintaining this way the good relationship of the communities.

Safety and Security: The kebele leaders are responsible to ensure the safety and security of the community in the site. The lack of electricity though restricts IDPs movement during night time. Since the border is located only 7 klm away from the site the

recurrent clashes among Somali and Oromia are still affecting the safety and security of the community.

8.2 Awjabur IDP site

Awjabur is located in Babile woreda. It is 130 km far from Jigjiga. According to DTM 14, a total of 370 HH and 1,224 (1,112F and 1,112M) IDPs are living in the site. The site has opened to accommodate displaced HHs from East Hararge due to the conflict in September 2014. DRC has established CBPC to strength the community-based protection mechanism of the community in 2018. IRC is supporting the community through an education program.

Access to services

Food: The IDPs haven't received food assistance either from the government or any humanitarian agency in the past. They received food assistance from the host community.

WASH: The main source of water is unprotected surface water. The IDPs travel close to 3 km to fetch water and spend 1 hour in a queue to get it. The IDPs said security incidents can occur when they are on the way get water. The IDPs have no personal or communal latrine, shower or disposal pit.

Health: The IDPs have no access to health services in the site. The nearest health post is in Ali Ethiopia which is 25-30 Kms away from the site. The IDPs use donkey or travel on foot to access the health centre. The community goes to health centre and traditional healers when they have a health problem. The health centre does not have enough facilities to treat all types of medical cases. Pregnant women deliver at home through the assistance of traditional birth attendants. No follow up and medical examination is done either before or after the delivery, that as a consequence could lead to severe complications during the pregnancy and birth.

Livelihood: The main source of income prior to displacement was trade and agriculture and now is humanitarian assistance and labour work. Women walk long distances to collect firewood as a mean of income and many IDPs leave the site and their family in



search of livelihoods. The IDPs have identified lack of skills and motivation and start-up capital as the main challenges to start their own income-generating activities.

Shelter: In Awjabur IDPs have constructed temporary shelter using the local resources which cannot protect them from weather elements and insects. On average 6 families are sharing one shelter.

Education: The IDPs have access to lower primary school (grade 1-4). According to Key informants, 75 % of children go to primary school but before the displacement almost all children attended school. However, due to the shortage of classrooms and teachers, ensuring daily attendance and quality of education for children is challenging. Early marriage and the responsibility to support their families have been reported as obstacles for girls attending school.

The IDPs stated that *'we usually reported needs and gaps to woreda administration ... we have access only to education'*. Food, NFIs, shelter, water and health care are the unmet needs that the community is asking the humanitarian community to fulfil.

Freedom of movement, new displacements and documentation: The IDPs can move from place to place without any restrictions or safety concerns. The site continues to receive new arrivals; 9 to 20 HH from Erer Babile woreda of Oromia region arrived in the site two weeks before the assessment. The local authorities have registered the IDPs on arrival.

Child protection issues: Early marriage, child neglect and child labour have been identified as the major protection risks for children during a community mapping exercise.

Safety and security: The community generally feels safe in the site although sometimes *'we get attacked from the border'*. There is no light in the site so sometimes the IDPs face security incidents. The Kebele leaders are responsible to ensure the safety and security of the community.

GBV: Women and girls identified domestic violence (physical and verbal abuse), early marriage as the common GBV incidents happening throughout the site. They report child abuse or SGBV cases to community-based protection committee in the site.



Persons with specific need: The most vulnerable groups are women, elders and single-headed households according to the respondents. DRC has provided solar lamps, dignity kits and assisting devices as a part of individualised assistance for 34 vulnerable in the site.

Social cohesion: As per the respondents *'the relationship with the host community is excellent'*.

8.3 Qoloji 1

Qoloji is one of the formal IDP sites in Somali Region. This IDP site belongs administratively to Babile woreda and it is located 60 km away from Jijiga. Most of the IDPs have been displaced from West Hararge. According to DTM 14, there are 5,493 HH and 34,194 (19,226F and 14,968M) individuals living in the site that was established in August 2016.

In regards to humanitarian assistance provided in the site UNICEF, NRC and DRC are responding to the needs in terms of water and sanitation; DBBP in food provision and coordination; UNFPA, IOM and Save the children provide Dignity kits, shelter and Nutrition respectively; IRC and DRC are implementing protection activities.

DRC has established a CBPC that consist of 20 (11F, 9M) members, 5 of which are from the host community. DRC protection staffs assist the CBPC to identify and refer cases to service providers, mobilize the community and raise awareness among the IDPs on protection issues.

Access to services

Food: The camp management usually provides information about food distribution and DPPB distributes the food to the community. There was food distribution one month before the assessment. However, the food is not enough to feed the whole family for one month and there are usually delays. The IDPs believe that the change of the regional government and the weakness of the camp management was the main reason for the delay in food provision. They share the food among them to survive and share their



complaints to camp managers to get attention from government and humanitarian agencies.

WASH: The government provides water through water trucking. The IDPs receive enough amount of water within 500 meters range and the waiting time in queue is between 30 minutes to an hour. The water points are in a safe and accessible place for the entire community. The community has communal latrines which are sex-segregated but solid waste disposal pits are full. DRC supports the community transporting the waste to Jijiga to minimize further health risk.

Shelter: Most of the IDPs have a plastic tented shelter which can't protect them from rain and sun. The newly displaced community have no shelter. There are also women in the site that have no shelter.

Health: The IDPs have access to a health centre in the site. The health centre doesn't have enough facilities to respond to all the needs raising from the community. Almost all women deliver in the health post with the assistance of the midwife. Women and girls are informed about reproductive health and hygiene.

Livelihood: Trade, agriculture and pastoralism was the source of income before displacement. Now IDPs completely rely on humanitarian assistance. The IDPs stated lack of skills and motivation, start-up capital, land ownership season are some of the challenge to start their own business.

Education: The IDPs have access to lower primary school (grade 1-4) in Qoliji. As per the KII, 75% of the children attend school. Most of the children attend school regularly but some are absent learning the Quran and playing on the street. Psychological distress also affects children attention in the classroom. Early marriage has also been mentioned as the main reason for girl's school dropout.

To access school from grade 5-8, the students should travel 2km away to Anod primary school passing through a main road. The students are also facing shortage of uniforms and school materials.



GBV: Similarly to Biiqa IDP site, even though male participants said there are no GBV cases in Qoloji, women and girls have identified domestic violence, early marriage, forced marriage, and sexual assault as the main GBV incidents occurring in the site. The community reports GBV or child abuse cases to camp management or CBPC in site. Women travel long distance to collect firewood as a mean of income that in turn creates conflicts with the host community and put women at risk of physical harm. Besides the women-friendly space, women requested dignity kits and solar lights to improve women and girl's safety and protection.

Safety and security: There are streets lights in the Qoloji and therefore the community can move freely from place to place without any restriction. Sometimes inter-communal conflict and crimes affect the security situation in the site. The camp management, police and the kebele leaders are the ones responsible for the safety and security of the community.

Freedom of movement, new displacements and documentation: The conflict among Somali and Oromia was the main reason for displacement of the community. Family separation occurred during the displacement with the tendency of women and elderly being more affected. Around 300 HH arrived at Qolji from Babile, Balbalayti, Harar, Awaday, Meiso, Bisidimo and other areas of Oromia region in the past one year but no IDPs left to other areas. It is difficult to state the number of people that have essential documents but the IDPs estimated that 75% of people have no documentation including ID, birth, marriage and/or death certificate.

Child protection: According to BOWCA, there were 760 separated children before. The community (relatives and clan members) fosters separated orphan children through traditional arrangements. One of KII has mentioned there were children leaving the site for family reunification purposes and children that are engaged in child labor.

Persons with specific need: The participants identified women, elders, single-headed households as the most vulnerable groups compared to other community members.



Social cohesion: The IDPs expressed their relationship with the host community as '*not bad*'. DRC couldn't identify incidents or get more information that reflects the interaction between the IDPs and the host community.

Coping mechanisms: Almost the whole community relies on humanitarian support. Some IDPS also left to other locations in order to fulfil their family needs.

8.4 Dugsi IDP site

Most of the IDPs were originally displaced from East Hararge to Babile woreda Dugsi IDP site. A total of 304 HHs or 1,825 (958F and 867M) individuals are living in the site since June 2014. DRC has established a CBPC consisting of 20 members which are tasked to do safe identification and referrals and awareness raising activities. IRC supports the community with an emergency education program.

Access to services

Food: The IDPs have no access to food distribution. The government didn't distribute food for the past 4 months. The host community shares food and other resources with the IDPs.

WASH: The community has access to unprotected surface water, located more than 3KM away from the site. The community has no personal or communal pits for solid disposal and showers.

Livelihood: The IDPs were pastoralists before displacement. Agriculture and chat trade were their main source of income. Lack of start-up capital, land ownership as well as the season have been mentioned as challenges to engage in income-generating activities. Women collect firewood as a means of income and therefore are more exposed to protection risks, especially GBV.

Health: The IDPs have no access to the health centre. They must travel 22 km to receive medical services in the health post that is located in Ali-Ethiopia. Pregnant women deliver at home through the supervision a traditional birth attendant. The community is not informed about reproductive health and hygiene.

Shelter: The IDPs don't have shelter but they are still living with host community. There are also women living without shelter.

Education: The IDPs have access to school in the site. According to participants, 75% of children attend primary school. The participants have recognized early marriage as well as the attitude of the community towards the importance of education for girls and their responsibility at household activities as the obstacles for girl's education.

In terms of access to services, the IDPs have only access to education and they identified water, food, shelter and health services as the top priorities of the community.

Freedom of movement, new displacements and documentation: In general it is safe for IDPs to move from place to place. According to participants, a total of 50 HH from Erer in Oromia region arrived the previous 6 months to the site. The IDPs stated that there was no registration on arrival. Family separation was not significant during displacement.

Child protection: Child labour and early marriage have reported as the main child protection concerns.

GBV: Women and girls have listed out domestic violence, early marriage, forced marriage as the common types of GBV in Dugsi. They are not aware also where to report child abuse or SGBV or regarding the existing available services and referral mechanisms in site. Women suggested that the provision of clothes and solar lamps and the construction of safe spaces will improve the safety and the protection of women.

Safety and security: The community feels safe living in the site. The situation of the available shelters and the lack of enough light in the site can increase though the risks for women.

Social cohesion: The IDPs described the relationship between host community and displaced community as 'good'.

Persons with specific need: The participants have acknowledged that women, single headed households and elders are the most vulnerable group compared to the rest.

8.5 Kaliyal IDP site

This IDP site is situated in Babile woreda and was established to accommodate the displaced community from East Hararge in May 2014. According to DTM round 14, 257 HHs or 1,542 (771M and 771F) IDPs are found in Kaliyal. DRC has established a CBPC with 20 members that serve as protection focal points for both government and humanitarian actors. In addition to DRC, IRC has been implementing education and ACPA is running a WASH program.

Access to services

Food: The government has never distributed food. The displaced community receives food from the host community.

WASH: The source of water is unprotected surface water. The water point is not located in a safe area and it is 3km far away from the site. IDPs said that '*sometimes we get attacked, told to fetch and leave urgently*'. The community has no personal or communal latrines, disposal pits nor showers. The community is practicing open defecation due to lack of access to latrines.

Health: The health facilities are not located in a safe and accessible area for the whole population. The community must travel 28 km to access the health centre on foot or using donkeys. The distance as well as the lack of transportation makes it difficult especially for women, children, people with disability and elders to access those services. Additionally, women are not informed about reproductive health and hygiene.

Livelihood: The IDPs were pastoralists and engaged in agricultural activities and trade before they were displaced. Currently, the majority of the community is not engaged in any type of livelihood activities. However, some women collect firewood as a means of income. The participants mentioned that the lack of start-up capital is a challenge to in order for them to start their own income generating activity.

Shelter: The IDPs are living in plastic tented shelter.

Education: As per the participants, 50 % of children are attending primary school. The students have access to lower primary school (grade 1-4) but the absence of female

teachers, early marriage and household activities have been mentioned as the main obstacles for girl's attending school.

The IDPs are accessing education services but water, food and health services are highly in need in Kaliyal site.

Child protection: There is no major child protection issue reported by the participants.

GBV: Domestic violence, early marriage and forced marriage have been identified as the most common types of GBV cases. The participants don't know where to report child abuse or SGBV cases, but they are aware of available services and referral mechanisms. One of the participants said that *'when a militia from other ethnic (group) has raped a woman ...there was no measures taken'*.

Freedom of movement, new displacements and documentation: The IDPs can move from place to place. A total of 30 newly displaced HHs arrived in Kaliyal but outward movement of IDPs has not been occurring according to respondents. The local administration has registered all the IDPs upon arrival.

Safety and Security: The community feels safe in Kaliyal. However, minor disagreements sometimes escalate and become a security concern for the whole community. There is no light in site and as a consequence the movement of IDPs at night has been affected. Additionally the lack of electrical power doesn't allow them to charge their phones and therefore call in case of emergency. The Kebele leaders are responsible to ensure the safety and security of everyone in the site.

Coping mechanisms: Some people from the community are engaged in daily labor and move to other areas looking for work opportunities. Early marriage is another coping mechanism indicated during the interviews.

Social cohesion: As per the KII, the relationship between IDPs and host community is *'excellent'*

8.6 Masle IDP site

This IDP site is found in Tuli-guled woreda. The site was established to accommodate the displaced community mainly from Somalia Region due to the conflict between Somalia and Oromia in July 2018. As per DTM round 14, there are 300 HH and a total of 1,860 (885F and 915M) individuals in Masle. DRC has established a CBPC with 20 members to strengthen the community-based protection mechanisms in 2018.

Access to services

Food: There was no food distribution to the displaced community until now. The host community is sharing food with the displaced population.

WASH: The IDPs don't get enough water on a regular basis either for cooking or for daily consumption. They must travel more than 3 km and wait 1-hour in queue to get water from the unprotected water sources. The community has no sanitation facilities and the unavailability of latrines is encouraging widely the practice of open defecation in Masle.

Shelters: The IDPs houses have been burned in their place of origin and lost their assets. The community is sharing shelters with the host community. There are also women without shelter in the site.

Livelihood: Since this site is close to Jijiga city, the IDPs sell camel milk to get some income. Before displacement, their livelihood was agriculture, but now the IDPs are waiting for assistance from humanitarian agencies and the government. The IDPs said '*We can't engage /do any activity due to ongoing war (Somali and Oromia) in the Tuliguled woreda*'.

Education: According to KII, before the displacement, all children have been enrolled in school. However, now less than 50% of children are attending primary school. The security situation is affecting their attendance in school and some children are working to support their families.

Health: The Health centre is not safe and accessible to IDPs. They must travel 6 KM to get health services. The health centre doesn't have enough facilities to respond to all the



needs of the community. Pregnant women delivered at home through the assistance of traditional attendants and family members.

Child protection: Due to the ongoing conflict, there are many separated and orphan children living with their relatives on the site. DRC couldn't get the exact number of children since there is no official registration but the respondents claimed that those children need assistance in terms of psychosocial support and educational materials among others.

GBV: Early marriage has been reported as occurring in Masle. Women and girls don't have information on where to report child abuse or SGBV cases and they are not aware about referral mechanisms. Women reported feeling unsafe when they go to collect firewood.

Persons with specific need: Women, elderly, elderly single-headed households and in general Single-headed households are identified as the most vulnerable groups in the community.

Freedom of movement, new displacements and documentation: As per the KII, there are no new displaced IDPs that arrived to Masle recently, but there are IDPs leaving the site to search water for their personal consumption and their livestock and looking for better assistance. As per the participants, only 25 % of the total population may have some type of documentation. Unlike the other sites, the local government didn't register the IDPs upon arrival.

Safety and security: The IDPs feel safe and secure in site even though there is no light and it is risky to move during night time since the site is close to the regional border. The Kebele administration is in Derasene 5-10 km far from Masle. There is Military camp in Feedhacad which is 10 Kms away from the site. The militias are everywhere in and around the site. Male adults are armed and responsible to prevent possible threats from the border.

Social cohesion: As per the KII, the relationship of the IDPs and the host community is '*excellent*'

9. Conclusions

The assessment findings provide a grim picture of the protection environment as well as the basic needs in all 6 sites. Even though the assessed sites have been established the previous 2-4 years, with the exception of Masle and Biiqa, the needs in regards to humanitarian assistance remain high.

More specifically, in terms of basic needs and access to services all the sites reported issues in accessing food, with food not being provided on a consistent basis or not delivered at all. When food is distributed, the amount is not sufficient to cover the needs of the entire household. IDPs in the majority of the sites are dependent on the host community for food and shelter or they are highly dependent on humanitarian assistance in the case of Qoloji. Even though the 2 communities share resources, the relationship among them has been reported as 'good' or 'excellent' in the majority of the sites.

When the willingness to engage in income generating activities is there, IDPs don't have start-up capital to engage in those. The outward movement from the sites in search of better livelihood opportunities and/or assistance has been reported in a number of sites, creating questions in regards to family separation and protection of the individuals that choose this path.

Shelters have been prioritized as a need since IDPs either have temporary shelters that don't protect them from the weather conditions or share shelters among them or with the host community. Some sites reported women being without a shelter that in turn could pose significant protection concerns. With the exception of Qoloji where water has been provided on site in a safe and accessible area for all, the rest of the sites don't have access to sufficient and clean water. IDPs have to travel a minimum of 3km to access the closest water source instead of the 500 meters described in the Sphere standards and the situation in terms of sanitation, with total lack of sanitation facilities, imposes serious health concerns.

Access to health services is challenging in all sites, except Qoloji that a health post is operational on site. The distance from the closest health facilities, that in some situations is located more than 20km away, as well as the lack of available resources or capacity of

the health post has been reported as a main challenge. Even though IDPs still seek medical treatment in the health posts, they also seek advice from traditional healers as well as traditional midwives in the case of pregnant women.

Humanitarian assistance is mainly provided in Qoloji 1, where a number of agencies are present either with a permanent or temporary presence (DRC, IRC, UNICEF, IOM). With the exception of Masle IDP site, the local authorities registered the IDPs upon arrival but without providing any documentation.

Across all sites, IDPs have been reporting the almost complete absence of any civil documentation without though to be very clear if they obtained any documents before displacement. The lack of civil documentation though doesn't appear to have implications in regards to freedom of movement or safety with all IDP participants reporting that they can move freely inside or outside the sites. Even though initially IDPs reported feeling safe in site, it appears that lack of light at night as well as the vicinity to the regional borders are affecting the feeling of safety with limited movements during the night.

In regards to GBV, existence of domestic violence and early marriage has been reported in all sites. Even though early marriage is a cultural practice in Somali region, it was further aggravated by displacement and it was reported additionally as a coping mechanism adapted by the communities. Child labor has been reported as a concern in some of the IDP sites while in regards to separated children, traditional practices and more specifically unofficial caring arrangements have been reported as the main protective mechanism for those children. Additionally, there seems to be a reduction in school attendance for children following the displacement. More specifically, for girls, early marriage and household responsibilities seem to be the main reason for not attending school but lack of female teachers as well as the cultural perceptions around access to education for girls present also obstacles in their enrolment and attendance. Lastly, in all sites, women, elderly and single-headed households have been identified as the most vulnerable and in need of assistance.

10. Recommendations

These assessments shed some light in the situation of both recently displaced as well as populations in situation of protracted displacement. Due to the fact that Qoloji 1 IDP site is a formally recognised settlement for internally displaced in Somali region and the high numbers of population it hosts, it received more attention than the rest from the humanitarian agencies during the previous 2 years. Smaller sites, in terms of population numbers, have received less assistance and therefore, the sharing of resources with the host communities has been inevitable. Cautious of the conflicts that can arise due to the limited resources in the areas, the humanitarian community needs to provide assistance in terms of basic needs as well as protection to the displaced population both in new and protracted displacement situations.

The assessment presents the negative coping mechanisms that IDPs use in order to survive, with early marriage as well as onward movement being the main ones reported. The urge to cover basic needs for their family is engaging IDP in practices that could be potentially harmful. The dependency that is created either on host communities or humanitarian assistance is a factor that humanitarian organisations have to take into consideration before selecting areas of intervention. The need for durable solutions and sustainable approaches is evident and a strategy at a micro level is required in order to ensure that the most in need communities are targeted for assistance.

The need for livelihood interventions that can potentially increase the resilience of IDPs, even for recent displacements is important and could in the long term be beneficial for both IDPs and host communities. A balance between emergency interventions aiming in covering basic needs and early recovery is very much needed for all communities assessed over the last one year by DRC in Somali region. This approach can potentially reduce the negative coping mechanisms that IDPs are adopting as well as contribute to the creation of a protective environment in those sites.