



World Food Programme



PSN ASSESSMENT REPORT– NAKIVALE

DECEMBER 2018

1. Background/Overview

UNHCR's mandate is to provide international protection to persons of concern (PoC) through applying an age, gender and diversity (AGD) approach to all aspects of its work, to ensure that PoC have equal access to and enjoy their rights. UNHCR works in partnership with PoCs to identify and address the protection risks and needs they face. In order to better protect and assist persons with specific needs, community-based approaches should be integrated into protection work. If PoC are put at the centre of operational decision-making, and protection strategies are built in partnership with them, they will be better protected, in a better position to identify, develop and sustain solutions, and resources will be used more effectively.¹

¹ UNHCR, Manual on a Community Based Approach in UNHCR Operations, 2008.

IDENTIFICATION OF PSN

Identification of persons with specific needs is a continuous process. The identification can be done at different stages, by different actors. Specific needs are variable. Therefore, constant follow-up of cases on one hand, and continuous identification on the other hand, are key. The PSN assessment exercise is one way of identifying persons with specific needs. Nevertheless, the PSN identification is an evolving and dynamic process and PSN assessment exercises cannot go without a continuous identification process and follow-up of cases already identified. Successful PSN assessment will allow all participating agencies to identify systematically specific needs of PSN; to design and implement protection and assistance programmes in cooperation with the PSN and their communities; to prioritise PSN in protection and assistance; to develop partnerships and referral mechanisms with other protection and assistance actors who have the expertise and capacity to support groups and individuals with specific needs; and to establish and maintain a confidential individual case management system to register and track PSN, and record the protection and assistance they require and receive. UNHCR has a global commitment to the good practice of 'continuous registration'. Hence, data collection should not be a one-time event, but should be periodically updated to accurately reflect significant events in the timeline of an individual case (IOM 030/2009 FOM 030/2009, *Guidance on the Use of Standardized Specific Needs Codes*, 10 June

In situations of displacement, **some individuals will face heightened protection risks because of their specific needs. Timely identification of individuals with specific needs is crucial in order to best support them through social services or community structures.**

Assessment of persons with specific need is a key activity conducted by UNHCR and its partners. Despite the interventions that take place on a daily basis including the registration upon arrival, it may be challenging for UNHCR and partners to identify all the specific needs of PoC as some of their needs may not be visible or spoken about and require further assessment. In this regard, **PSN assessment has been taking place in the settlements in the South West annually to identify, update and address the specific needs, level of vulnerability and its urgency for further protection interventions.**

Nakivale settlement is located in the South West with a population of 102,250 individuals². The settlement comprises of 3 zones, Basecamp, Rubondo and Juru. Basecamp comprises of 27 villages, Rubondo of 25 villages and Juru of 26 villages. The total number of registration groups (households) was 30261 at the time of the assessment.

The starting point of the PSN assessment was cases of PSN identified during the verification exercise which took place in Nakivale between March and May. **The PSN assessment exercise took place from 22nd of August until 27th of September and started from Juru zone.**

1.2 The following are groups generally considered to have specific needs, among others:

- **Girls and boys at risk** including **Unaccompanied and Separated Children;**
- **Persons with serious medical conditions;**
- **Persons with special legal or physical protection needs;**
- **Single women, women- headed households;**
- **Older persons at risk;**
- **Persons with disabilities;**
- **Persons with diverse sexual orientation or gender identity.**

It is important to remember that not every individual in each of these groups will have specific needs, and that their needs may alter over time and according to context. Rather than target 'labelled' groups with a standard package of assistance, **it is essential to analyse the protection and assistance risks that**

individuals and groups face and assess their needs by means of a targeted protection assessment, a needs assessment, or both. It is also important

² Statistics at 31st December 2018.

not to limit the scope of protection and assistance to the above-mentioned groups³, and to note that some individuals might have more than one specific need.

1.3 Risks

The following risks are likely to occur and particular attention should be put in order to avoid or reduce such risks.⁴

- If groups or individuals with specific needs are not identified early in an emergency, they may face heightened protection risks.
- If not addressed early on, protection and assistance gaps that groups or individuals with specific needs face may become more severe over time.
- Although communities play an essential role in identifying and supporting persons with specific needs, and designing and implementing protection and assistance programmes, they can sometimes be a negative force. Harmful traditional practices may (re-)emerge during displacement, marginalized and vulnerable groups may face more extreme exclusion or exploitation, power imbalances can be exacerbated, etc.
- If systems simplistically favour persons with specific needs, they may generate needs artificially.
- Specific needs and their prioritization should therefore be reviewed regularly as the emergency context evolves.
- If specific needs are not identified and addressed promptly, the situation of persons of concern may deteriorate, causing further harm and loss of life.
- Late or ineffective response may create security risks.
- There are reputational risks for UNHCR: if it does not fulfil its protection responsibilities towards particular groups, this can damage its credibility and authority, and undermine its mandate.

2. Participating agencies

The PSN assessment exercise was coordinated by UNHCR and conducted by UNHCR, OPM and all implementing and operational partners which include Humanitarian Initiative Just Relief (HIJRA), Medical Teams International (MTI), Windle International Uganda (WIU), Nsamizi Training Institute for Social Development, Hunger Fighters Uganda, Uganda Red Cross Society (URCS), and World Food Programme (WFP).

³ Emergency Handbook, *Identifying persons with specific needs (PWSN)*, available at <https://emergency.unhcr.org/entry/125333/identifying-persons-with-specific-needs-pwsn>

⁴ The mentioned risks are listed in the Emergency Handbook, *Identifying persons with specific needs (PWSN)*, available at <https://emergency.unhcr.org/entry/125333/identifying-persons-with-specific-needs-pwsn>

3. Guiding principles

All actors agreed to extend the fullest cooperation and meaningful participation in carrying out the PSN assessment exercise in order to achieve ownership and continue providing protection and assistance for PSN. All participating actors agree to follow the AGD approach, community-based and rights-based approaches as per following set of guiding principles:

- All refugees (male and female, children, older persons) are consulted and meaningfully participate in the process of PSN assessment exercise.
- No assumptions are imposed with respect to the specific needs of PoCs.
- All PSN benefit equally and fairly from protection and assistance according to their needs.
- Refugees receive information about the assessment exercise, and when and how the collected data is used.



Figure 1 PSN assessment at Basecamp II, Nakivale settlement / UNHCR

4. PSN Assessment Procedures/Criteria

In order to ensure the credibility of the process and the collected data, **PSN assessment exercise was conducted in three levels:**

- **Identification and assessment done by Multi-Functional Team (MFT)**⁵ comprised of staff members from UNHCR, OPM, and implementing and operational partners through the most feasible data collection methodology that was agreed among the participating agencies. **To guide the identification and assessment of specific needs during the exercise, the participating agencies used the UNHCR's "Guidance on the Use of Standardised Specific Needs Codes"**⁶ which provides a comprehensive list of an individual's particular characteristics, background, or risks that may require urgent response. These codes are used in the UNHCR registration and case management tool, proGres v4, which at the time of the assessment was used only by UNHCR and OPM, but which will be eventually used also by other partners. The total number of categories of specific needs are 11 and there are 71 sub categories that have detailed information on the specific

⁵ Volunteers recruited for the assessment all signed the Code of Conduct.

⁶ IOM 030/2009 FOM 030/2009, *Guidance on the Use of Standardized Specific Needs Codes Annex II*, 10 June 2009

needs. Participating **agencies had a one day training prior to the exercise on specific needs codes to familiarise themselves with the codes / criteria and to accurately record the information.**⁷

A questionnaire was developed in order to be able to capture all information regarding PSN as well as referrals to be done to the appropriate service provider. Volunteers from the refugee community as well as community leaders supported the MFTs particularly in locating all the houses in the different villages. **The exercise was done through home visits to each household in all villages and was carried out also at the reception centre. The assessment was conducted only to the PoCs who presented one of the following documents:**

- Family Attestation and Proof of Verification
- Asylum Seeker Certificate and Proof of Verification
- Proof of Verification

Unregistered individuals as well as individuals who missed the verification exercise conducted earlier in 2018 were referred to OPM.

- During the assessment, data entry volunteers first recorded all the information from the questionnaires into an Excel sheet that reflected the fields required for migration into proGres v4. UNHCR then further cleaned the list and did a verification of all individuals against data captured in proGres v4. Once the list was finalized, data migration UNHCR staff in HQ in Copenhagen supported the migration of all PSN codes into the system.
- Due to their complex nature requiring assessments by trained or specialized personnel, cases such as those related to SGBV, child protection, legal protection and medical condition and disability were referred to relevant service providers during or immediately after the assessment exercise depending on the urgency and vetted by technical experts. All codes vetted after the migration, new cases and changes in PSN identified after the migration will be entered directly into proGres v4 by UNHCR Nakivale.

Nakivale is also hosting individuals who are yet to be registered. They are hosted at Kabazana Reception centre. These individuals were assessed using a different tracking sheet since, until registration is completed, the information on PSN will not be entered into proGres v4. Once registered, PSN information will also be recorded into the system directly by OPM.

⁷The same criteria will be used in the continuous identification as well, following the exercise.

5. Findings

All the houses in the settlement were visited by the multi-functional teams. Nevertheless, in many cases, refugees were not at home during the time of the assessment. **Among the registration groups, it was possible to interview individuals in 18,260 registration groups out of 30,261. The number of PSN identified during the exercise is 7,531.** The total number of Specific Needs is 16654⁸. Cases that are still pending vetting are not reflected in the statistics hereunder.

5.1 Breakdown per specific needs

527 CHILD AT RISK (CR)

Person below the age of 18⁹ who is at risk due to his/her age, dependency and/or immaturity.

890 UNACCOMPANIED OR SEPARATED CHILD (SC)

Person below the age of 18 who are currently not under the care of either parent or other legal or customary primary caregiver.

588 WOMEN AT RISK (WR)

Women of 18 years old or above, at risk because of her gender, such as single mothers or caregivers, single women, widows, older women with disabilities and survivors of violence.



Figure 2 PSN Assessment at Basecamp II, Nakivale / HJRA

⁸ Note that the number total number of individuals with specific needs does not equal the total number of specific needs, as one individual might have multiple specific needs.

⁹ The Convention on the Rights of the Child (CRC) defines, in Article 1, a “child” as “every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier”. See: <http://www.unhcr.org/refworld/docid/3ae6b38f0.html>.

467 SPECIFIC LEGAL AND PHYSICAL PROTECTION NEEDS (LP)

Person with legal protection needs because of a threat to life, freedom or physical safety.

3759 OLDER PERSON AT RISK (ER)

Person of 60 years old¹⁰ or above, with specific need(s) in addition to his/her age. This includes single older persons and older couples. They may be the sole caregivers for others, suffer from health problems, have difficulty adjusting to their new environment, and/or otherwise lack psychological, physical, economic, social or other support from family members or others.

2341 SINGLE PARENT OR CAREGIVER (SP)

Single person of 18 years or above with one or more dependants, including biological or non-biological children, or other dependants (such as an older person). The single parent/caregiver is both the primary income earner and/or caregiver.

2368 PERSONS WITH DISABILITY

Physical, mental, intellectual or sensory impairments from birth, or resulting from illness, infection, injury, trauma or old age. These may hinder full and effective participation in society on an equal basis with others.

4555 SERIOUS MEDICAL CONDITION (SM)

Serious medical condition that requires assistance, in terms of treatment or provision of nutritional and non-food items, in the country of asylum.

161 FAMILY UNITY (FU)

The right to family unity is inherent to the universal recognition of the family as the fundamental group unit of society and as a fundamental principle of refugee protection. The right to family unity may, depending on the circumstances, be infringed on when action is taken to separate an existing family unit, or when family members who already have been separated are not able or permitted to reunite.

¹⁰ The UN-agreed cut-off is 60 years to refer to older persons, but exceptions can be made to the age requirement depending on the physical state of the individual. See, for example, World Health Organization, *Definition of an older or elderly person*, <http://www.who.int/healthinfo/survey/ageingdefnolder/en/>.

354 TORTURE

Any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.¹¹ Torture, therefore, includes four main elements: 1) severe physical or mental pain and suffering; 2) intent; 3) purpose; and 4) State involvement. Acts of torture may include, but are not limited to, beatings, kicks, burns, cuts, electric shock, suffocation, submersion, suspension, solitary confinement, toe/finger nail removal, and sexual assault/violence.

644 SGBV

Any act of violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to persons on the basis of their sex or gender, including threats of such acts, coercion or arbitrary deprivation of liberty whether occurring in public or private life.

It encompasses, but is not limited to: (i) physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation; (ii) physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution; (iii) physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

6. Way Forward

- **Data collection should not be a one-time event. UNHCR and partners will continue to identify and assess PSN on a daily basis. Additionally, the final list of PSN has been shared with the partners who will be responsible for updating regularly the list to accurately reflect the specific needs of PoCs.** They will also cross-check the information with the tracking sheets used by partners and will inform UNHCR of any change. All new cases identified as well as updates on the codes of PoCs already identified, will be referred **on a weekly basis to UNHCR in order to record them in proGres v4.**
- Similar to the systematized assessment exercise, **cases that require further review will be vetted by a vetting committee which should meet every month for the purpose of continuous registration.**
- **Urgent cases should not wait for the committee to sit but referred to specialized agencies for appropriate response.**

¹¹ *Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment*, 1984, Article 1, <http://www.unhcr.org/refworld/docid/3b00f2224.html>.

- During the PSN assessment, some unregistered individuals were registered by OPM but not assessed for the purposes of the PSN assessment. Therefore, individuals that have been registered while the assessment was on-going, will be assessed later on and entered into the system directly by UNHCR staff.
- **All actors in the settlement are responsible for continuous identification of PSN, recording and updating of the PSN data.**
- **All actors are responsible and committed to ensure that the most appropriate actions and follow-ups are taken for PSN.**

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