Quarterly Report

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I. INTRODUCTION

ACTED conducted the first round of safety audit in June 2019 in 16 IDP sites in Hargeisa. The goal of the exercise was to evaluate site level GBV risks associated to the physical structure, camp layout and provision of critical services. Specifically, the assessment was undertaken with the following objectives:

• To observe and evaluate site level protection/GBV risks associated to the camp layout, camp infrastructures and services such WASH, shelter as well as safety and security;
• To understand vulnerabilities that make affected population more expose to GBV risks, particularly women and girls;
• To recommend mitigation measures to be taken collectively by humanitarian actors to reduce the identified risks and/or vulnerabilities identified;

This report contains key findings gathered during data collection and it provides actionable recommendations to reduce the identified GBV risks and vulnerabilities. The majority of these IDP camps are overcrowded, self-settled makeshift with improvised shelters. Most of sites are overcrowded, with no pathways between the shelters, which contribute to make the sites particularly vulnerable to fire outbreak.

All the assessed sites don’t have physical structures surrounding them:

Among the priority needs of the IDPs living in settlements as stated by the participants, are access to Health, water, education, sanitation and hygiene. Actors operating in the sites should ensure minimum actions are taken to mitigate protection risks, particularly those associated with WASH and Shelter.

The findings from the safety audit were presented by ACTED during a CCCM Sector Meeting in Hargeisa on the 12th September. The CCCM team will regularly follow up on actions taken to address the recommendations and will monitor the effectiveness of mitigation measures implemented and identify new risks that might need to be addressed in the next round of GBV Safety Audit, scheduled in December 2019. The report and the annexes will be disseminated
among the humanitarian community, local authorities and service providers to advocate for measures aiming at improving safety and living conditions in the sites and equal access to services for the affected population.

2. METHODOLOGY

The Safety Audit assessment was conducted using the Safety Audit Checklist tool developed with support of the GBV integration guidelines. The checklist was filled through a mix of observations, site walks and key informant interviews with female community members. Separate checklists were filled in for every site and respective results were entered in a data analysis matrix which is attached to this report. Data disaggregated by sites, were analyzed to identify GBV risks, vulnerabilities and produced specific recommendations to reduce GBV threats/risks in the sites. Focus Group Discussions were held where the participants were IDP women and girls who shared their views and protection concerns. The FGD generated in-depth and rich discussion on some of the key issues surrounding the specific vulnerabilities and challenges facing IDP women and girls. During the discussion, valuable pieces of information and insights that emerged from the discussion were collected and possible ways of mitigating the identified threats and risks were established.

List of sites assessed in Hargeisa, Somaliland

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3. SUMMARY OF KEY FINDINGS

**CAMP DESIGN AND LAYOUT**

- None of the sites has protective physical structures surrounding the sites.

- Out of 16 sites assessed, 9 are planned sites whereas the remaining 7 sites are self-settled with no site planning prior to their formation. These sites are characterized by poor shelter conditions and insecure/unstable land tenure. The site residents face eviction threats and live in constant fear of being forcefully evicted. Even in the 9 planned sites, some temporary shelters have been constructing by new arrivals joining their relatives already living in the site.
• Out of the 16 sites assessed, 11 sites have public lighting which provide dusk to dawn lighting, but in none of the site public lighting is sufficient to adequately meet the needs of the IDP population. ACTED has installed 33 solar lights in 11 sites, and is planning to install 10 more in the remaining 5 sites.

• None of the site has a designated safe space dedicated for women and girls.

• Out of the 16 sites assessed, only 5 sites have space to easily walk between shelters and other structures.

**SHELTERS**

• The shelters for most of the self-settled sites/informal settlements are made of weak materials and are the traditional Somali “buul” which are made of fabric, sticks, carton or improvised materials that can’t withstand strong gale-force wind and heavy rains. Moreover, these shelters don’t have lockable doors that can provide safety and security at night, thus making women and girls more vulnerable and fearful during the dark hours of the night.

• Out of the 16 sites assessed, only 5 sites have shelters built of solid materials and have secure locks with doors.

• Out of the 16 sites, 5 sites have private sleeping areas; these sites include Ayax 1, Ayax 2, Ayax 3, Ayax 4 and Digaale while the rest of the sites don’t have private sleeping areas.

• All the 16 sites have shelters housing more than six people and have multiple families sharing the same shelter This creates overcrowding and the promotes the spread of diseases

**WASH**

• All the 16 sites that were assessed don’t have water points inside them and therefore site residents rely on self organized water trucking. Residents expressed their deep concern about their inability to afford the price of water. Access to safe drinking water was uniformly reported as a huge challenge across all sites.

• 6 out of the 16 sites assessed have latrines while the rest lack these basic WASH facilities and therefore the practice of open defecation is rampant in those sites that don’t have communal pit latrines.

• Only in one of the sites out of the sixe that have sanitation facilities, the latrines are well lit at night
None of the assessed sites has gender segregated latrines: men and women share the same latrines.

**PROTECTION**

In none of the assessed sites the female key informant could recall the existence of community based protection committees or in site GBV focal points.

Out of the 16 sites, only 4 sites have nearby health facilities and these nearby health facilities don’t have adequate medical supplies to meet the needs of the IDP population. For critical/emergency cases, site residents carry patients to the hospitals in town which are far away from the sites. Given the low level of income and livelihood opportunities for the IDPs, the cost of transport and medical is difficult for them to afford. Some of the site residents cannot afford the transport cost and there are no ambulances that can carry critically ill patients from the IDP sites to the hospitals in town for medical treatment.

4. **FOCUS GROUP DISCUSSIONS SUMMARY**

In order to complement the assessment conducted with the Safety Audit checklist tool for Somalia on 20\(^{th}\) to 25\(^{th}\) June 2019, ACTED Camp Management Team conducted Focus Group Discussions with female residents of the sites. A total of 141 women and 107 girls from 16 IDP camps participated in the discussion representing the voices of the other women and girls of their communities.

During the discussion women and girls expressed the need for inclusive participation in decisions that affect in all facets of their lives. One of the participants echoed this during the discussion, “We are the backbone of every society on this planet and our continuous involvement, contribution and participation in the community is not only necessary and important for our empowerment as women and girls but also necessary for a strong and cohesive Focus group discussion with women residents in Hargeisa IDPs sites
society that works towards socioeconomic and political prosperity for all”. She also added that women and girls have been denied the opportunity to unleash their God-given talents and potentials and this narrative needs to change if we want to achieve meaningful economic and political freedom and progress.

Women and girls blamed lack of equal opportunities as the main culprit and hindrance to their empowerment and economic freedom. One of the participants said: “I am a mother of six children who are orphans. I am uneducated and did not receive any formal education. I am currently unemployed with no even basic skills to earn an honest living. The future of my children and those in similar fate hangs in the balance as I cannot afford to pay for their education. This makes me worry as I don’t want them to be like me and go through this pain when they go older”.

Women and girls also cited lack of skills training to engage in income generating activities for poverty alleviation. They mentioned that these kind of opportunities are limited for IDP women and girls. They therefore requested the humanitarian organizations and other well-wishers to look into their plight and provide them with opportunities and possibilities to break the shackles of poverty in order to have a dignified life and become equal contributing partners. When asked about the existence and quality of WASH facilities in the sites, they expressed deep concerns about the lack of latrines in most of the sites, and even in the sites where sanitation facilities exist, the fact that latrines are not gender segregated a major concern and worry for both women and girls. One of the girls said; “we go out of the site in the open to relieve ourselves and this puts our lives in danger and compromises our privacy and dignity. We are exposed to numerous risks which can undermine our inherent rights and endanger our lives”.

When also asked about shelters and how safe they feel at night, one of the participants said; “I live in a tiny bull with my children. This temporary shelter is of weak materials with no proper door and roofing. I feel unsafe and woke up whenever I hear any sound at night. I also fear because the buul I live in can catch fire as it happened in Nasahablood B in the wee hours of the night when people were all asleep”.

The issue of eviction was raised by the female participants and featured in the discussion. Land tenure is a huge challenge for the IDPs since the vast majority live on privately owned lands
with no formal lease agreements. The landowners issue eviction notices as they wish which makes the IDPs live in fear, in limbo and uncertainty. Women and girls also talked about access to health care, since this presents a formidable challenge to many of the displaced population living in settlements. This inaccessibility to this basic service is exacerbated by the lack of health centers in the vicinity of the sites and expensive transportation costs to reach the facilities. Women and girls mostly trek long distances to get health services. One of the female participants said; “We find it very hard and painful when one of us is in the final stage of her pregnancy. We don’t have ambulances and certified midwives in the sites and this might be a life-threatening situation during child birth. We humbly request the organizations to provide technical and financial support towards the establishment of maternal and child health centers in all the sites to help improve the odds for women and their babies”.

5. RECOMMENDATIONS

- Strong and fact based advocacy for lands and stable land tenure agreement
- Close cooperation between CCCM, HLP and Local authorities to address the issues of forced evictions
- Increasing the number of solar lights to enhance visibility and contribute to the safety and security of site residents at night
- Promote the education and retention of teenage girls in school, including regular distribution of sanitary pads.
- Making schools available and accessible to the IDPs so that all children, including teenage girls and young women can have equal access and opportunities to quality education
- Economic empowerment through skill acquisition and livelihood interventions targeting women and girls to protect them from early marriage and domestic violence.
- Construction of water points to increase access to quality drinking water for all inhabitants.
- Construction and rehabilitation of gender segregated and well-lit latrines as open defecation is rampant in a number of sites that don’t have pit latrines.
- Provision of safe, solid and durable shelters to improve the living conditions of the displaced populations and contribute to the overall site safety.
- Setting up and supporting camp-based safety groups and/or patrols comprised of both women and men to create safer environment for all
- Provision of firewood or alternative source of energy at IDP sites to reduce protection risks during fire wood collection
- Mainstreaming prevention and response to SGBV across sectors and programming.
- Strengthening referral pathways at site level through regular sensitization and awareness.
- Establish confidential reporting mechanisms at IDP sites and settlements including through hotline services
- Increase maternal health care service available

Safety Audit, Hargeisa, June 2019
• Increase coverage of health mobile team unit
• Support vulnerable residents and pregnant mother with hospital transportation grants

6. ATTACHMENTS

1. Safety Audit Checklist for Somalia
2. Safety Audit Database Hargiesa, June 2019
3. Safety Audit Snapshots Hargeisa June 2019

For more information on the Safety Audit for Baidoa and for the full list of attachments, please contact Ali Askar, CCCM Project Manager, at ali.askar@acted.org and Elena Valentini, CCCM Technical Coordinator at elena.valentini@acted.org.