



# International Peace Support Training Centre Nairobi, Kenya

## A Comparative Study of Access to Social Economic and Cultural Protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement



**OCCASIONAL PAPER: SERIES 9, NO. 4**

Dr. Eunice Njambi

*“Integrating Gender in Peace Support Operations in East Africa”*



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**A Comparative Study of Access to Social Economic  
and Cultural Protection in Kakuma Refugee Camp  
and Kiryandongo Refugee Settlement**

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SERIES 9, No. 4

Dr. Eunice Njambi

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## Foreword

The International Peace Support Training Centre (IPSTC) is a regional research, training and education centre in Eastern Africa. The Centre is responsive to peace operations training and education needs of the African Peace and Security Architecture. The research conducted at IPSTC covers a broad spectrum ranging from Conflict Prevention, Conflict Management, to Post Conflict Reconstruction. It aims at enhancing promotion of peace, security and stability in the region, which is essential for sustainable development in Africa. The Research Theme for 2018 is *“Integrating Gender in Peace Support Operations in East Africa”*.

This Occasional Paper titled: **‘A Comparative Study of Access to Social, Economic and Cultural Protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement’** aims to analyze refugee access to social, economic and cultural protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement. In addition, it endeavors to establish refugee access to basic health, economic empowerment and food security.

The research products from IPSTC have been developed aiming at informing the design of training modules at IPSTC. This Occasional Paper is an important contribution to the vision and mission of IPSTC.

Let me take this opportunity to thank the Government of Japan and UN Women – Kenya for their support of our research activities and publication of our field reports.

**Brig. Patrick M. Nderitu**  
**Director**  
**IPSTC**

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## Acronyms

<b>CBI</b>	Cash Based Intervention
<b>CRRF</b>	Comprehensive Refugee Response Framework
<b>DRA</b>	Department of Refugees Affairs
<b>DRC</b>	Democratic Republic of Congo
<b>FBM</b>	Food Basket Monitoring
<b>FGM</b>	Female Genital Mutilation
<b>FSNA</b>	Food Security & Nutrition Assessment
<b>FSNWG</b>	Food Security & Nutrition Working Group
<b>GAM</b>	Global Acute Malnutrition
<b>GBV</b>	Gender Based Violence
<b>GER</b>	Gross enrolment Ratio
<b>LWF</b>	Lutheran World Federation
<b>MDRTB</b>	Multi Drug Resistance-Tuberculosis
<b>NER</b>	Net Enrolment Ratio
<b>NRC</b>	Norwegian Refugee Council
<b>OPM</b>	Office of the Prime Minister
<b>PDM</b>	Post Distribution Monitoring
<b>RAS</b>	Refugee Affairs Secretariat
<b>SAM</b>	Severe Acute Malnutrition
<b>CRRF</b>	Social Economic and Cultural Protection
<b>SP</b>	Social Protection
<b>UNDP</b>	United Nations Development Program
<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>UNICEF</b>	United Nations Children's Fund
<b>WHO</b>	World Health Organization
<b>WPF</b>	World Food program

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## Definition of key terms

1. **Access:** A multi-dimensional concept which can be summarized with 5 As (Available, Accessible, Affordable, Appropriate, Adequate) on areas between the service recipients and social service provider in relation to the service (Penchansky & Thomas, 1981). For this study, the services refer to refugee social economic and cultural protection. **Availability** existence of the service; **Accessibility** physical distance to the service encompasses access to information; **Affordability** financial costs of the services; **Appropriate** culturally acceptable to the relevant to the community; **Adequate** quality of service involvement at individual level through shared decision making and capture feedback and at collective level.
2. **Basic education:** level of education from early childhood, primary education, secondary education, formal as well as non-formal education, literacy and adult education. It's imparting basic learning skills and meeting basic learning needs. Basic education is the interface with technical and vocational education and training, (UNESCO 2007)
3. **Access to cultural protection:** Freedom of participate in the cultural life of a community, which includes; religion, rites of passage, marrying and having a family (UNCHR 1999).
4. **Economic protection:** Allowing refugee's access to decent economic opportunities through programmes such as cash transfers to poor households, improving health and education outcomes and investment in productive assets e.g. agricultural tools UNCHR (1999)
5. **Health protection:** Basic human right that includes a spectrum of services from prevention to management of chronic health conditions and palliative care (WHO 2008)
6. **Access to food security protection:** when all people at all times have access to sufficient, safe, nutritious food that meets people's dietary needs as well as their food preferences to maintain a healthy and active life, (FAO, IFAD, UNICEF, WFP and WHO 2017).
7. **Social economic and cultural protection:** For this study five indicators will be assessed; health, education, decent economic, food security and cultural activities, (UNCHR 1999)

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8. **Decent work:** Opportunities for work that is productive and delivers a fair income, security in the workplace and social protection for families, better prospects for personal development and social integration, freedom to express, participate in decisions affecting one's life and equality of opportunity and treatment for all women and men, (ILO 2009)
  9. **Gender analysis:** A systematic analytical process based on sex-disaggregated information. Describes gender differences, roles and power dynamics in a particular context. For this study gender analysis brings to focus on gender disparities of refugee access to SECP, (UNDP 2016)
  10. **Gender:** Differences between the sexes, norms and cultural expectations on women/girls, men/boys. For this study gender is used for analysing the relationship between men, women, girls and boys, in regard to their access SECP opportunities and vulnerabilities, (UNDP 2016)
  11. **Migrant:** Someone who chooses to move, not because of a direct threat to life or freedom, but in order to find work, for education, family reunion, or other personal reasons. They do not have fear of persecution or serious harm in their home countries, (UNCHR 1999).
  12. **Refugee Camp:** Built accommodations for refugees and administered by UNHCR and/or host governments. Food, water and services such as schooling and health care are provided by relief agencies. Refugees in camps are not expected to be self-sufficient. Camps are generally conceived as temporary though in practice this is often not the case, (UNCHR 1999).
  13. **Refugee protection:** All interventions from public, private and voluntary organizations and informal networks to support refugees to prevent manage and overcome risks and vulnerabilities and enhance the social status and rights of refugees, (UNCHR 1999).
  14. **Refugee Settlement:** Refugees settle on land, usually in an uninhabited or sparsely-populated area, with a view to creating new self-supporting rural communities that ultimately form part of the economic and social system of the area, (UNCHR 1999).
  15. **Refugees:** Individuals displaced outside their country of nationality as a consequence of generalized violence, conflict or a well-founded fear of persecution, (UNCHR 1999).
  16. **Sex:** Biological differences between women and men, (UNDP 2016)

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## Abstract

Refugee Socio-Economic and cultural protection (SECP) involves programmes such as: food, shelter, water, medical supplies, environmental protection and building schools among others, humanitarian. The main objective of the study was to analyze refugee access to SECP in Kakuma Refugee Camp and Kiryandongo Refugee Settlement. In addition establish refugee access to: basic health, economic, food security, and cultural protection. The study used mixed methods for data collection and analysis; household interview focus group discussion and informant interviews were conducted. A total of 540 household heads were enrolled for the study. Access to SECP from the highest to the lowest was access to was; basic education 361(66.9%), cultural protection 342 (63.3%), food security 184 (34.1%), health protection 160 (29%) and economic protection was at 154 (28.5%). The study concludes that access to (SECP) in Kakuma and Kiryandongo is low. Access to SECP was higher in Kiryandongo that in Kakuma. Based on the findings the study recommends the need for UNWomen, UNHCR, IPSTC, RAS (Kakuma & Kiryandongo through OPM office) to: Establish programs to improve all areas of SECP especially access to economic protection and access to technical skills centre friendly to the refugees. Conduct a TNA on capacity (ability, authority, resources and responsibility) of refugee's affairs secretariat (RAS) in providing and facilitating access to social economic and cultural protection. Finally, there is need to conduct further research to establish household access to international civil/ political protection.

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# CHAPTER 1:

## Introduction and Background

### 1.1 Introduction

Access to Social Protection (SP) by migrants is fundamental to achieving the 2030 Agenda for Sustainable Development, specifically Goals 1-10 (World Bank, 2017). According to a 2017 report by the International Labour Organization (ILO), only 2.2 billion (29 %) of the global population is covered by comprehensive social protection (SP) systems, 3.7 billion (45 %) are effectively covered by at least one SP benefit, the rest 4 billion (55 %) are unprotected. As a development policy tool SP aims to alleviate poverty, inequality and social exclusion among refugees. Globally refugee population is estimated at 24 million of who 51% are Children below 18 years. According the Government of Uganda and UNHCR (2017), Uganda was hosting 1,395,146 refugees and asylum seekers. It is the largest refugee hosting country in Africa and the third largest in the world.

The Refugee Convention is the global foundation for protection refugees it was ratified by 145 member state. Providing humanitarian emergency assistance is the first step towards long-term. UNHCR developed a global network of suppliers, these agencies include: the World Food Programme (WFP), the UN Children's Fund (UNICEF), World Health Organization (WHO), United Nations Development Programme (UNDP), International Organization for Migration (IOM), International Committee of the Red Cross (ICRC), International Federation of Red Cross and Red Crescent Societies (IFRC) and Non-governmental organisations (NGOs).

The 10 countries hosting most refugees relative to the size of their national economies are in Africa (UNHCR, 2016). The least developed countries such as Cameroon, Chad, Democratic Republic of the Congo, Ethiopia, Kenya, Sudan, and Uganda hosted 4.9 million (28 %) refugees; of the global total. Low-income countries facing severe structural barriers to economic growth and development, experience challenges in responding to the needs of refugees. The core principle is non-refoulement, which asserts that a refugee should not be returned to a country where they face serious threats to their life or freedom. In Africa refugee protection is governed legal instruments which includes: 1951 UN Convention, 1969 OAU Convention Governing the Specific Aspects of the Refugee Problem in Africa, African Charter on Human and People's Rights and the Hungarian Helsinki Committee Budapest 2015).

Refugees migrate in order to escape conflict and/or poverty, or cope with social economic and environmental shocks. These calls for the need to examine the relationships between gender migration, access to social economic protection in relation to key issues such as: food, health, education, employment and culture.

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## 1.2 Background of Kakuma Refugee Camp and Kiryandongo Refugee Settlement

### 1.2.1 Kakuma refugee camp

Kakuma refugee camp was set up in 1992. It is located in the North Western part of Kenya in Turkana county, 125 km from the South Sudan boarder. Turkana County, whose capital is Lodwar, is bordered by Uganda, South Sudan and Ethiopia. Kakuma is situated in the second poorest region in Kenya and as a result of this poverty; there are on-going tensions between the refugees and the local community that has occasionally resulted into violence. Kakuma has two areas of operations, Kakuma Refugee Camp and Kalobeyi Integrated Settlement. Kakuma camp is divided into four sections namely: Kakuma 1 (oldest and most densely populated), Kakuma 2, Kakuma 3 and Kakuma 4 (newest and sparsely populated). According to the UNCHR, the total population is 185,798 refugees (UNHCR, 2018). The vast majority are from South Sudan and Somalia. Of the 21 nationalities, a large number are very small in number, four just under 5% each of the total population compared to Somali and South Sudanese population at 31.7% and 49.2% respectively. These nationalities can be further divided along ethno-linguistic lines, and by needs specific to the sex and/or age of the population.

#### **Education profile of refugees in Kakuma refugee camp**

The education coverage is: pre-primary 25%, primary education 65% and secondary education 2%. In 2014, there were: 7 pre-schools, 21 primary schools, 4 secondary schools (2 high schools and 2 technical colleges offering vocational training and other courses including Arabic. The training is based on the Kenyan curriculum. Cultural/traditional practices do not favour girl's education. Girls only represent 20% of pupils in primary and secondary schools (forced and early marriage are the major challenges hindering girls' education). Apparently, some parents refuse to educate their daughters because they could learn about family planning and contraception among other 'undesirable' things. However, girls are more willing to learn because education is a means to free themselves from family oppression. There is a rule requiring boys and girls to eat together at school. This has encouraged the co-educational idea, in sharp contrast to traditional practice, particularly for the Sudanese.

Congestion in schools, dilapidated and under resourced facilities, and lack of trained teachers are some of the challenges faced. Some pupils have to walk up to 20 kilometres to school (10 km back and forth). In 2003, Kakuma Distance Learning Centre offered 29 students the possibility to take academic courses with the University of South Africa. As a form of entrepreneurship, refugees started schools and training centres for language and vocational skills, sometimes with Kenyan teachers or volunteers from within the camp.

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‘Instant Network Schools’ (an eLearning project) and a community library were launched and established in one of the secondary schools in 2015. The eLearning is a mobile, quick and easily deployable solution that allow for interactive classes using mobile educational content.

## **Peace and Security**

There is a Kenyan police station located just outside the entrance of the camp. Kenyan police do not typically operate in the camp after dusk. The police sweep the major roads at dusk, requiring all non-refugees that they encounter to leave the camp. Within the camp, LWF has responsibility for security. LWF employ a number of Kenyans, mainly ex-military personnel who patrol the camp and all issues relating to security have to be reported to them. There is a 120-strong force of local guards, drawn from both the refugee and local populations. ‘Police stations’ which are manned around the clock and which provide a base for night-time patrols have been constructed. Refugee residents have their own guards and patrols after nightfall and in many of the residential groups, guards carry machetes and makeshift bows on their patrols.

There is a Protection Area within the camp, which is a fenced enclosure accommodating around 120 families. It is intended as a temporary solution when a refugee’s safety cannot be ensured in the camp, so almost no services are provided. As a result of several Turkana thefts and intrusions into domestic spaces inside the camp, there is increased fencing especially along the edges of each residential group. In 2014, approximately eight people died in fights among the South Sudanese refugees; officials say the fighting, following an alleged rape of a young girl, has divided the Dinka and Nuer population in the camp.

In 1994 and 1996, collective punishments were administered after unidentified persons destroyed enclosures built for distributing rations and counting refugees. Food distribution was cut off for 21 days and 14 days respectively and the ‘incentives’ paid to employed refugees were withdrawn. After these tensions some refugee leaders were invited to a meeting with the UNHCR representatives in Lodwar. They attended the meeting believing that it would provide an opportunity to sort out the misunderstandings between the refugees and the agencies. However, these leaders were arrested and charged with incitement, destruction of property and theft of building materials. They spent two months in prison and the following court hearings had to be paid for by the refugee community. Eventually the leaders were acquitted but could not get compensation for wrongful detention given UNHCR’s jurisdictional immunity.

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## **Access to housing by refugees**

New arrivals normally receive one piece of reinforced plastic 4 by 5 meters with which to construct their shelter. The plastic, while providing an excellent waterproof layer, is not self-supporting nor does it provide any insulation. They need long supply pieces of wood to make the frame and grass to complete the shelter walls of the hut and provide some thermal insulation. The majority of the housing is built of mud brick, wood, or cane extracted from the surrounding territories and new or scavenged canvas. The rest comprises of thatched roof huts, tents, and mud abodes.

## **Access to food**

Except for the small minority who were able to establish shops, the vast majority of the population in Kakuma is completely dependent on food rations. The World Food Program (WFP) provides a food ration to all the refugees twice a month based on the minimal dietary requirement of 2,100 calories/person/day. WFP is responsible for deciding the amount of food to be distributed and for providing it in the form of staples. In 2011, the WFP provided food to 98.3% of the registered refugees, averaging 2,076 calories/person/day. The main problem with the food rations is that they do not necessarily provide the elements necessary for a basic diet. Furthermore, the rations are insensitive to cultural and household needs, leading to refugees considering food assistance as degrading – where they are expected to be grateful for inappropriate provisions. Moreover, when, as is frequently the case, WFP is unable to provide all of these staples, the required calories are provided from whatever commodity is available. There have been times when all of the 1900 calories (i.e. before it was increased to 2,100) were supplied in form of maize flour. In 1997, refugees did not receive any beans or lentils for eight weeks, their only potential source of protein.

When the maize is too dry, it needs to be milled/ground. Fuel is needed for transporting it to the grinding mills. Cash is required to pay for the grinding of the maize into flour (for porridge). When there is shortage of firewood or other fuels (which is often), dried bean rations are not eaten, as they cannot be cooked. Money is needed to buy firewood or charcoal. As a result of violent clashes between with the local Turkana, refugees cannot dare go out to collect firewood. Through its agreement with WFP, UNHCR has accepted responsibility for providing additional foods, which provide the required supplementary micronutrients. Rarely, in the history of Kakuma camp, have these supplements been delivered. However, a large-scale 17-month micronutrient powder program targeting the entire population in the camp was implemented in February 2009.

WFP expects that refugees trade part of the food received and, indeed, around half of the distributed food is sold. Around 80 to 90% of the refugees sell part or most of their

food package (most often maize and beans) on the black market. Unfortunately, an oversupply of any particular commodity such as oil or maize flour results in its market value falling. There is a thriving ration resale market operating in front of one of the main food distribution centers. More often tolerated than not, ration resale periodically becomes the subject of active policing, including police sweeps that force ration sellers to clear the area, particularly when these practices become too blatant. Given that many of the surrounding Turkana population do not have adequate food, they engage in odd jobs in the camp and/or buy maize and beans from the refugees.

Reportedly, there is corruption within the food distribution system; relief workers are accused of selling part of the relief aid (cooking oil, wheat flour, and soap) on the black market. In addition, some families are able to get food assistance for 'ghost' family members or those residing outside the camps. Others inflate the number of household members in order to receive extra rations. There are many refugees without ration cards (card lost or refugee status not given or lost). There are many people with cancelled refugee status living in the camp. These people rely on rations of friends/family/ neighbors. Refugees who own livestock fed from ration supplies. Since 2015, the WFP introduced digital cash transfers, that is, sends Ksh100 in cash per person/ month through a mobile phone to replace part of the food ration (10% of staple cereal like maize, wheat flour, or sorghum). The cash can only be redeemed for food. This gives refugees more freedom to decide what they will eat and is also good for the local economy.

### **Access to health services**

At the time of the study, an operation was currently going on conducting intense hygiene promotion and decontamination, in both Kakuma refugee camp, Kalobeyei settlement and the reception Centre, to prevent the widespread of cholera. Access to health workers per day remains high as compared to the acceptable UNHCR standard of < 50 Consultations per Clinician per day with 107 and 126 consultations per clinician.

### **Economic profile**

Kakuma camp hosts more than 500 retail and wholesale shops. The camp has various markets, mostly organized along ethnic lines, where a wide variety of products are on sale. The products include fresh and canned food items, vegetables and meat, clothing and household items, hardware, medicine, cosmetics, building equipment, electrical equipment (e.g. radios and telephones) and bicycles.

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### 1.2.2 Kiryandongo refugee settlements

Kiryandongo refugee settlement is located in the Western Region Kiryandongo District in Uganda. It was established in 1990 with a current (2018) population of 327, 929 with refugees accounting for 57,639 (17%) people with the remainder of 270,290 (83%) being Uganda nationals. The majority of refugees are from South Sudan, with a small number from the Democratic Republic of Congo, Rwanda, Burundi, and Sudan. Although now closed to new arrivals, partners continue to facilitate family reunifications and resettlement for protection cases. Insufficient food rations due to ration cuts, in place since August 2016 for refugees who arrived prior to July 2015, coupled with limited agricultural inputs lead refugees to skip meals or share food stocks with their neighbours.

Many children and youth drop out of school due to high school fees and related costs, such as uniforms and school materials. Secondary school-aged students are particularly affected and it was reported that non-governmental organizations provide only a few opportunities for scholarships. Respondents also noted that classrooms are overcrowded and reportedly, the under-qualified teachers rarely follow the standard curriculum.

The three health centres in the settlement, serving both refugees and the host community, are reportedly understaffed and under resourced. Refugees reported that there are long queues at the health centres, pharmacies are regularly out of stock, and there are limited testing and treatment options available for diseases other than malaria. Some refugees resort to selling part of their small food rations in order to afford private clinics. Pregnant women, the elderly, and people with disabilities are particularly vulnerable, as they cannot walk long distances to the health centers and with even more limited livelihoods opportunities, cannot afford to pay for transport to the health facilities.

There are only limited water points serving a large population which contributes to queues for water. The few motorized boreholes need frequent repairs and delays in fixing them further inhibit access to water. Respondents also reported that there were not enough household latrines, especially for persons with special needs.

Traditional sources of livelihoods and those that partners focus interventions on, such as farming and handicraft making, may not be appropriate for the market. There is a need for an assessment to understand market needs and then tailor livelihood strategies and programming that is more innovative.

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### 1.3 Problem Statement

Kenya and Uganda carries the biggest refugee burden in East Africa and Africa in general. Despite notable advances in strengthening protection of refugees, there have been documented protection challenges in Kakuma refugee camp and Kiryandongo refugee settlement (UNCHR, 2018). These challenges include but not limited to: Sexual and gender based violence (SGBV), trafficking, prosecution, detention, violence and killings. Insufficient food rations due to ration cuts coupled with limited agricultural inputs, lead refugees to skip meals or share food stocks with neighbours (UNCHR, 2016). Many children and youth drop out of school due to high school fees and related costs, such as uniforms and school materials. The health Centres, serving both refugees and the host community, are reportedly understaffed and under resourced. According to a 2017 ReliefWeb report, lack of financial institutions in the refugee settlements impedes the refugees' ability to effectively manage money and to save. Most of the refugees use mobile money, but weak phone network coverage in the settlements makes this method unreliable. Stress on the environment and the available natural resources heighten tensions between refugees and the host communities.

Refugee protection challenges affects each gender differently yet there is limited gender segregated data on access to social economic and cultural protection (World Bank, 2017; UNCHR, 2017). Challenges in refugee protection hinder the achievement of durable solutions aimed at facilitating refugees lead safe and productive lives. Refugees need to be engaged in their own protection to achieve any durable solutions (UNCHR, 2016).

### 1.4 Research question

1. What is the refugee access to social economic and cultural refugee protection services in Kakuma Refugee Camp and Kiryandongo Refugee Settlement?
2. What determines refugee access to social economic and cultural protection among refugees in Kakuma and Kiryandongo refugee camp/settlement.

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## 1.5 Objectives

### Broad objective

To analyse refugee access to social economic, cultural and protection provisions in Kakuma Refugee Camp and Kiryandongo Refugee Settlement.

### Specific objectives

1. To assess refugee access to basic health protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement.
2. To analyse refugee access to economic protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement.
3. To evaluate refugee access to food security protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement.
4. To evaluate refugee access to cultural protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement

## 1.6 Scope

This study focused on the **5As** (Available, Accessible, Affordable, Appropriate, Adequate) on areas between the refugee as service recipients and social service providers in relation to the service. The study focused on four areas of social economic and cultural protection that include: health, economic protection, food security protection and cultural protection.

## 1.7 Justification

Gender analysis was done to better understand refugee access to social economic and cultural protection based on a gender perspective in order to make recommendations on ways to improve programmes/projects on refugee protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement. It also aimed at informing the level of access to social economic protection services for women, men, boys and girls.

Comprehensive Refugee Response Framework (CRRF) builds on the SDGs 2030 Agenda and calls for gender meaningful participation in decision-making that impact their lives, families and communities. Thus, the study aimed to inform ways of improving and enchainning gender and age specific access to social-economic and cultural protection.

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## CHAPTER 2:

### Literature Review

#### 2.0 Introduction

This chapter has five sections the first part focus on chronological development of refugee social economic and cultural protection. The second section focuses on empirical literature on refugee access to food, basic health education, work, and cultural protection. The fourth section describes ways of measuring access to social economic protection and lastly a theoretical and operational framework that will be used to measure the outcome of the study.

#### 2.1 The history and development of refugee social economic protection

Social protection is defined by World Bank (2016) as a set of public measures that a society provides for its members to protect them against economic and social distress that would be caused by the absence or a substantial reduction of income from work as a result of various contingencies (sickness, maternity, employment injury, unemployment, invalidity, old age, and death of the breadwinner); the provision of health care; and, the provision of benefits for families with children.

Social protection needs to cover the lifecycle, which includes pregnancy/early childhood, youth, working age and old age.

The 2030 Agenda for Sustainable Development underscores the importance of social protection for the attainment of the Sustainable Development Goals (SDGs). Gaps in access and insufficient benefits challenge the effectiveness of social protection to reduce inequality and leave no one behind. Understanding the barriers that diverse groups face in accessing social protection is necessary if substantial coverage is to be ensured for all nations, peoples and segments of society. This calls for inclusive social protection

International agreements governing social protection systems make reference to refugees. The International Labour Organization (ILO) has long championed universal eligibility to social protection. The ILO 1952 Convention No. 102 requires equality of social protection treatment and has been ratified by 55 countries (ILO, 2017).

More recently, ILO passed Recommendation No. 202, known as the *Social Protection Floor*. This sets out four basic social protection guarantees to all residents and children. Furthermore, several blocks of countries have agreed to guarantee social protection access to migrants moving within them, the best-known example being Regulation (EEC) 1408/71 for European Union (EU) migrant workers. Globally, there are also hundreds of bilateral and multilateral agreements between specific countries.

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The Addis Ababa Action Agenda of 2015, for example, commits UN member countries to improving ‘access to and portability of earned benefits [social insurance]’ (UN-DESA, 2015). In spite of these agreements, both the legal and effective social protection coverage of international labour migrants remains low.

The rights set out in international human rights law, including those relating to family life and family unity, are applicable to everyone, including refugees, asylum-seekers, and others in need of international protection. Under international human rights law, the family is recognized as the fundamental group unit of society and is entitled to protection and assistance in Article 16(3) of the 1948 Universal Declaration of Human Rights (UDHR); Article 23(1) of the 1966 International Covenant on Civil and Political Rights (ICCPR); and, Article 10(1) of the 1966 International Covenant on Economic, Social and Cultural Rights (ICESCR). States are responsible for protecting the rights of their citizens. When governments are unable or unwilling to do this, people may face such serious threats that they are forced to leave their country and seek safety elsewhere. If this happens, another country has to step in to ensure that the refugees’ basic rights are respected. This is known as “international protection”.

The 1951 Convention relating to the Status of Refugees and its 1967 Protocol is the core of the international protection system and are complemented by regional treaties and declarations that also address the rights of refugees. The international refugee law does not operate in isolation. It is best understood in conjunction with international human rights law, starting with the 1948 Universal Declaration of Human Rights, and with international humanitarian law (the law of war).

### **Kenya Protection Delivery Unit (PDU)**

Kenya hosts a large number of asylum seeking and refugee population, which is presently managed jointly by the country’s Refugees Affairs Secretariat (RAS) and the UNHCR under the Refugee Act and the 2009 Refugees Regulations. Kenya recognizes two classes of refugees - prima facie refugees and statutory refugees. Asylum seekers go through an initial registration and at this point in the process, they are screened for their eligibility to seek asylum and to obtain accelerated processing. This process is then followed by an interview. The protection delivery unit (PDU) in Kenya provides a whole range of protection services to people of concern (UNHCR, 2017). It monitors the external borders of Kenya to make sure that asylum-seekers have effective access to the Kenyan territory and that they are not repatriated to their country of origin or to another country where their security and life could be at risk. The principle of ‘non-repatriation’ and the right to seek asylum of each individual facing persecution are the basis of the international protection regime of refugees. As such, UNHCR has to make sure that fundamental principles are observed by the Kenyan government.

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PDU also assess the legal and protection needs of individuals who approach UNHCR, as well as those who have been referred by its partners; or cases brought to UNHCR's attention by any other means. Refugees can face a variety of protection problems in Kenya that would trigger an appropriate response on the part of UNHCR or its partners. When refugees raise security concerns, UNHCR usually liaises with police authorities, as it is the responsibility of the Kenyan Government to provide security to the refugees. UNHCR does not have its own security apparatus to extend physical safety and ensure/maintain law and order.

Women and children, who form almost 80% of the total refugee population, are considered as the most vulnerable persons of concern and are prioritized under UNHCR's protection assistance programs (UNHCR, 2016). Refugee women are particularly vulnerable and a significant number of them are victims of gender-based violence (GBV); this is according to a 2016 UNHCR report. When such cases are reported, UNHCR will provide a package of services and support to the victim in a timely manner. These services include health care, psychosocial support, legal aid and support for reintegration into the community if needed. The support provided is meant to overcome the immediate effect of the violence inflicted as well as to address the trauma and the stigma associated with migration. The UNHCR and its partners implement a prevention strategy to reduce and mitigate the occurrences of such violence (UNHCR, 2016).

### **Social Protection Policy Issues**

In the immediate to medium term, the government, by coordinating the currently fragmented social protection interventions, will establish and provide a basic minimum social protection package as defined in the 2008 AU Social Protection Framework. In the meantime, the Government will also be planning longer-term actions in line with the UN/ILO Social Protection Floor (SPF) Initiative, which guarantees a universal minimum package that adopts a lifecycle approach to social protection. The SPF package consists of the following elements: access to education and essential health services; income security through family or child benefits; unemployment benefits; disability benefits; and income security in old age (through both contributory and non-contributory pensions).

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## **Social protection policy - three main categories**

1. Safety nets and consumption transfers to sustain livelihoods and build human capital: Social transfers will mainly be in the form of direct cash transfers to poor and vulnerable people over their lifecycle but may include in-kind benefits. The transfers may be conditional or non-conditional depending on the target group and the delivery mechanisms adopted. The criteria for targeting and standards are developed as part of the strategies to implement the prescribed policy.
2. Asset protection and rehabilitation to re-establish livelihoods: Efforts will be made to ensure that people's property is protected and for those who lose their assets, mechanisms are put in place to support them. The five key protection measures includes the following: Providing food, shelter, water, and health services in response to emergencies; Providing asset rebuilding services such as restocking, access to inputs, and resettlement for rehabilitation purposes; Providing direct feeding programmes for those vulnerable to malnutrition, meals and nutritional support to schools, the older persons and pre-school-age children. This is complemented by training in good nutritional practices, skills transfer and health services, and food distribution during emergencies such as famine and flooding (in the relief phase); Redistributing food to ensure that areas requiring food get it in a timely manner; Providing food for work and targeted subsidies to access basic services such as food and inputs; Support in scaling up coverage of micro-insurance to safeguard assets.
3. Asset development and income opportunities to establish sustainable livelihoods: There is need to ensure that people who are receiving social assistance have access to other services that can help transform their lives. There is need to ensure that people who are receiving social assistance have access to other services that can help transform their lives.

## **Policy Measures**

1. Strengthen micro-finance systems to expand access to banking, credit, and savings and build skills training and business development services to facilitate informal and formal employment (as stipulated in the Development of Micro-enterprises for Employment Creation Policy of 2005).
2. Strengthen social economic institutions such as cooperatives and self-help groups
3. Widen eligibility for waivers, exemptions, and targeted subsidies to public services.
4. Increase access to targeted subsidies for agricultural and industrial inputs.

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## **Key challenges facing asylum seekers in Kenya**

The Law Library of Congress, Global Legal Research Center (2016) outlines some of the key challenges facing refugees in Kenya mainly as a result of the curtailment of rights brought about by encampment. The challenges include: The limitation of their meaningful participation in activities that impact on their lives and access to services and freedom of movement. Access to and recognition of documentation remains a challenge for refugees whose protection and access to services relies heavily on the recognition of their status. Xenophobic attitudes also continue to threaten the security of refugees and asylum seekers leaving them susceptible to unlawful arrests, detention and forceful return (Global Legal Research Center, 2016).

Recurrent terrorist attacks are said to have prompted Kenya to introduce changes to its refugee policy. One notable change was the introduction of an encampment policy requiring all asylum seekers and refugees in urban areas to relocate to designated camps. Although refugees have been allowed to engage in informal employment, this appears to be getting difficult as the encampment policy constrains movement and work permits are rarely issued to refugees (UNHCR, 2015).

Refugees are technically free to apply for naturalization if they meet certain requirements, which on face value are not prohibitive; however, in practice Kenya does not naturalize refugees. An asylum seeker is issued an asylum-seeker pass upon applying for refugee status. This is replaced by a refugee identification card after the application is granted. All asylum seekers and refugees are required to live in their designated refugee camps and need a movement pass in order to travel anywhere outside the camp (Law Library of Congress, 2016). Kenya has several laws and programs to enhance the protection of refugees, mostly undertaken by UNHCR-Kenya.

## **Refugee protection in Uganda**

Uganda hosts about 1.2 million refugees and asylum seekers (UNDP, 2017). The Norwegian Refugee Council NRC in Uganda provides safety and protection to refugees in the country. The refugees and asylum seekers are mainly from South Sudan, the Democratic Republic of the Congo (DRC), Burundi and Somalia. Uganda has unique laws and regulations that promote the safety and wellbeing of refugees (UNDP, 2017). The Refugee Act of 2006 stipulates that refugees have the right to free movement and work, to establish businesses, and to access public services like health care. Uganda has also incorporated refugee protection and assistance programs into its National Development Plan, through its settlement transformation agenda (UNDP, 2017). The law and new strategies are positive signs for refugees' prospects for future integration into local communities.

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According to UNHCR, the Ugandan government under the leadership of the Office of the Prime Minister (OPM), which holds the mandate for refugee policy, has kept its borders open to refugees and has extended its longstanding, generous refugee policy to new arrivals (UNHCR, 2016). In brief, the policy gives refugees substantial freedom to choose between living in Ugandan villages and towns or in so-called refugee settlements. In the settlements, each refugee household receives a plot of land for their shelter, usually about 100 square feet in size, as well as access to nearby land for collective agriculture. Uganda also integrates refugees into local social services and permits them to move freely and seek employment (UNHCR, 2017).

### **The Ugandan refugee policy**

The Ugandan refugee policy contains admirable attributes that include: having an open door policy to all asylum seekers regardless of nationality or ethnicity, granting refugees relative freedom of movement and the right to seek employment and providing each family of refugees with a plot of land for their exclusive (agricultural) use (World Bank, 2016). However, the policy is limited in one way, that is, while the legal framework provides generous support for the integration of refugees, it does not provide a permanent solution for those who can neither repatriate nor be resettled in another country. People in this situation remain refugees in Uganda for life, a fate also shared by their children and even their grandchildren who have no hope of obtaining citizenship. Refugees can, however, vote and be elected at the village level per Section 46(3) of the Local Government Act and the constitution (UNDP, 2017).

## **2.2 Empirical literature on refugee access to social protection**

### **2.2.1 Refugee access to food**

Food Security and Nutrition Working Group (FSNWG) observes that the East and Central African region faces serious challenges in food security (FSNWG, 2017). Approximately 27.1 million people are under crisis, emergency and famine situations and in need of urgent humanitarian assistance (FSNWG, 2017). Of major concern are areas where food insecurity has continued to deteriorate due to impacts of droughts (Somalia, Kenya, and pastoral areas of Ethiopia) and insecurity (South Sudan and Burundi). Prevalence of global acute malnutrition (GAM) especially among children below five years, pregnant and lactating mothers and other vulnerable groups is equally high and above the emergency threshold, while severe acute malnutrition (SAM) is above critical levels (FSNWG, 2017). In parts of northern Kenya, South Sudan and Somalia, GAM prevalence rates are as high as 30% and above, and there is urgent need of life-saving assistance. Due to continued insecurity, forced displacement continues and has reached unprecedented levels, for example, there is continued high influx of refugees, especially

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from South Sudan, mainly into Uganda, Sudan, Ethiopia, and Kenya. The region now hosts over 4.4 million refugees of whom 1.7 million are from South Sudan (UNHCR, 2017).

High food insecurity and malnutrition levels have persisted in much of Somalia (pastoral areas of Bari and Nugaal regions and the southern cereal producing regions of Lower Shebelle and Bay), Kenya (most of the pastoral areas in Turkana, Garissa, Marsabit, Samburu, Tana River and Mandera, south-eastern and coastal marginal agricultural areas) and Uganda (localized parts of Central, Karamoja, Teso, North-Western and Busoga regions) and in the refugee camps WFP, 2015).

As of 31 March 2017, UNHCR reported a total of 4.41 million refugees and asylum seekers in the region (a 33% increase since January 2016); the majority of refugees being South Sudanese (1.77 million and with continued movement), becoming the largest refugee movement in Africa since 2010. Other refugees are from Somalia (614,000), DRC (481,000) and Burundi (427,000). A 2017 report by the UNHCR notes that Uganda hosted the largest number of refugees (over 1.19 million), followed by Ethiopia (0.8 million) and Kenya (approximately 0.5 million) (UNHCR, 2017). Meanwhile, the number of IDPs in South Sudan, Sudan, the DRC and Somalia exceeds one million with no signs of abating in the near future (FSNWG, 2017).

In Uganda, according to UNHCR (2017) and the Office of the Prime Minister (OPM), South Sudanese refugees arriving in Uganda continue to report general insecurity, limited access to food and basic services. The Integrated Food Security Phase Classification report released in January 2017 reported that 1.6 million people are food insecure. The Food Security and Nutrition Assessment (FSNA) by UNICEF, UNHCR and WFP(2016) indicated an overall stable and improved under five nutrition situation but high levels of stunting and anaemia were still observed.

### **Strategies by the UNHCR**

In coordination with WFP, pipeline breaks are anticipated for timely mobilization of resources. UNHCR ensures timely and accurate registration allowing refugees to receive the right food entitlement (UNHCR, 2016). In collaboration with partners, UNHCR ensures safe and fair food distribution by providing timely and clear information to the refugees, by establishing an efficient complaints mechanism, by providing weigh stations for refugees, and by doing Food Basket Monitoring (FBM) as well as Post Distribution Monitoring (PDM). For more efficient registration, WFP and UNHCR consider the possibility of using biometrics (as being applied in Kenya).

The feasibility and appropriateness of using Cash Based Interventions (CBI) for either part or the entire food ration is also under consideration (UNHCR, 2016). UNHCR with other partners ensures regular screening for malnutrition among new arrivals and makes referrals to the appropriate. Uninterrupted nutrition supplies is expected all times through anticipation of stock-outs and timely mobilization of resources. There is close collaboration between health and nutrition partners to ensure referral of vulnerable groups to preventative nutrition programs (UNHCR, 2016). Monitoring of the Food Security and Nutrition situation and response goes along with effective partnership and coordination. The Global Memorandum of Understanding between the WFP and UNHCR describes the roles and responsibilities of both agencies in food assistance and nutrition programming, including monitoring (UNHCR, 2016). It states that WFP, UNHCR and partners will do FBM and PDM jointly, while UNHCR and its nutrition partners will monitor the nutrition programs and conduct nutrition surveys (UNHCR, 2016).

### **2.2.2 Basic health care services**

Access to health care services is important it leads to improved population health promotion, disease prevention and patient satisfaction. Refugees' comprehensive primary care is maintained by UNHCR. According to UNHCR (2017) more than 65 million people worldwide have been displaced due to conflict, violence, persecution, or other violations of their human rights. Often, these people have a higher burden of disease, due to their exposure to physical and psychological trauma and may have ongoing health needs requiring access to healthcare.

There is evidence that refugees' access to healthcare is often compromised due to a variety of factors, including appropriateness of services, inflexibility of local systems, language barriers, and lack of transportation (UNHCR, 2017). In 2014, health services were to be provided to refugees in Kakuma and Dadaab as well as in urban areas. Children, pregnant women, lactating women, people living with disabilities, the chronically ill and those living with HIV&AIDS were to be given first priority in the medical services (UNHCR, 2014).

A new clinic was constructed at Kakuma 4 (UNHCR, 2014). These medical services were to be constructed so as to ensure sufficient coverage. The regular health programming in the camps focus on health prevention and promotion through strengthening routine immunization, health outreach programs and enhancing access to curative services (including referral for secondary and tertiary care) and safe motherhood services (UNHCR, 2016). The health sector maintains robust active disease surveillance with special attention to multi-drug resistant tuberculosis strengthen maternal and child

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health in order to lower or maintain a low maternal and under five mortality rate (UNHCR, 2016).

According to UNHCR (2015), in the southwestern part of Uganda, the crude mortality rate, as well as mortality rates for children under five and infants, declined. There was an increase in the use of health facilities at the same time as the number of consultations per clinician per day was reduced. The immunization rate grew, with 66 per cent of children fully vaccinated in 2010, compared to 30.5 per cent in 2009. Some 4,600 refugees in urban areas were assisted to gain access to basic health services, and almost 2,600 refugees had access to medical tests (UNHCR, 2015). Refugees diagnosed with chronic illnesses, including cancer, mental illness, tuberculosis and hypertension, received specialized treatment. Expectant mothers were provided with mosquito nets, baby kits, used clothes and cotton rolls. Two immunization days were carried out in collaboration with a government health center (UNHCR, 2015).

### **2.2.3 Refugees access to basic education**

Education is a basic human right, enshrined in both the 1951 Convention relating to the Status of Refugees and the 1989 Convention on the Rights of the Child (The law Library of Congress, 2016). During times of displacement, education plays a crucial role in fostering social cohesion, addressing psychosocial needs, and providing a safe and stable environment for those who need it most (UNHCR, 2016).

Education is an empowering right and a public good, it is a major way by which economically and socially marginalized adults and children can lift themselves out of poverty and obtain the means to participate fully in their societies. Sustainable Development Goal (SDG 4) 2030, aims towards inclusive and equitable quality education and lifelong learning for all and emphasizes that Member States should commit themselves to “developing more inclusive, responsive and resilient education systems to meet the needs of children, youth and adults including internally displaced persons and refugees” (UNESCO, 2017). The SDG4 cannot be achieved by 2030 without meeting the education needs of vulnerable populations, including refugees, stateless persons and other forcibly displaced persons. Indeed, education plays the important role of a multiplier to the other SDGs.

In particular, secondary education and vocational training for refugees represents a critical step in the educational pathways towards sustainable livelihoods, professional development and higher education. It contributes to the development of the social and human capital of refugee communities, self-reliance and solutions; it also ensures that refugees have the basis for increased earning power and the skills to rebuild their communities. It is estimated that, globally, only 50 % of refugee children of primary-

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school age are actually in school, a number that drops to 25 % for adolescent refugees in secondary school (UNHCR, 2016). Indeed, refugee children and adolescents are five times more likely to be out of school than their non-refugee peers. Continued sustainable access to quality education thus remains a key concern for the roughly eight million refugees, below 18 years of age, under UNHCR's mandate (UNHCR, 2016).

A UNCHR (2016) study on access to education, the challenges in relation to access to education, particularly in host countries was that refugee children and adolescents are out-of-school. Among refugees, only 50% of children attend primary school and only 25% are in secondary school. In the last decade, countries in the Middle East and North Africa region have invested considerable resources to increase children's school attendance. However, progress has recently stalled. Millions of children have had their lives torn apart and their schools destroyed by conflict. The effect is a setback on previous achievements with high numbers of out-of-school children. This is the case, for example, in Syria, where universal primary enrolment had been achieved in 2000.

The Kenyan Constitution (2010) and the Basic Education Act (2013) provide access to education as the right of every child in the Kenya. In 2003, Kenya implemented free primary education under the framework of Education for all where enrolment grew dramatically. Children in refugee camps and in urban areas use the Kenyan curriculum, sit for national examinations, and are awarded certificates just like Kenyan children; this is in line with the Kenya Constitution (2010). Refugees in Kenya reside in urban areas and in the Dadaab and Kakuma camp complexes. The encampment policy, which restricts the movement of refugees, also affects access to schools outside the camps. However, children in urban areas are permitted to enrol in public schools, and most of the public schools situated in refugee-populated areas in Nairobi, such as in Eastleigh, have a high number of refugee pupils - up to 80 per cent in some schools (UNHCR, 2015).

According to the 2014 Kenya Basic Education Statistical Booklet, the national net enrolment ratio (NER) was 88 per cent at the primary level and 47.4 per cent at the secondary level. In the Kakuma refugee complex, hosting about 180,000 refugees and asylum seekers with 50,000 children enrolled in 19 primary schools, the NER stands at 65 per cent at the primary level and 3 per cent at the secondary level. Comparison of the gross enrolment ratio and NER indicates a high enrolment of over-age children and 16,169 children between 6-13 years who are out of school - 79 per cent of them female (UNHCR, 2014). Enrolment, especially at secondary level, in the refugee camps is significantly lower than the national threshold. This is largely caused by the exclusion of refugees in the national selection and placement for secondary schools, leaving the few camp schools as the only option (The Lutheran World Federation (LWF), 2015).

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In Kakuma refugee camp, there are a multitude of interacting factors, which prevent children from accessing basic education services (LWF, 2015). The barriers include the following:

**Infrastructural Barriers.** The number of children of school age in Kakuma far exceeds the number and capacity of schools, classrooms, desks, chairs, toilets and books. Neither LWF nor UNHCR have policies that necessitate a cap on the number of school enrolments, but schools are forced to place discretionary limits on the number of children able to be accommodated in a classroom or by a given teacher. For primary schools, the average classroom to child ratio sits at 1:156, the latrine to child ratio at 1:141, with desks at 1:9 and teachers at 1:97 (LWF, 2015). The distance children travel to school can also limit/ dissuade enrolment or attendance.

**Circumstantial Barriers.** The disproportionately large number of over-age learners in schools is attributable to various factors, many of them unavoidable in the context of human displacement, that interfere with learning in childhood and adversely impact the likelihood of school completion. Where the Net Enrolment Ratio (NER) for primary schools in Kakuma is 69.5%, the Gross Enrolment Ratio (GER) is at a much higher 113.4%, speaking to the high number of over age learners across the camp. Factors such as marriage, labour, and movement within the camp or anticipated resettlement in a third country are some of the reasons for a child's non-attendance or drop out from school during their teenage years; language barriers and low educational achievement are also key limiting factors. UNICEF defines the Gross Enrolment Ratio as 'the number of children, regardless of age, divided by the population of the group that officially corresponds to the same level', where the Net Enrolment Ratio refers to the 'number of children enrolled in primary school who belong to the age group that officially corresponds to primary schooling, divided by the total population of the same age group' (UNICEF, 2015).

**Financial Barriers.** School attendance is free in Kakuma but not often perceived as such by children and families who cite the cost of school supplies, transport, uniforms and in some cases, bribes to teaching staff, as costs that can be difficult to meet or not a priority for families. Likewise, in the context of few income generation opportunities, school attendance is at times perceived in terms of the loss of income it represents, where a child might be generating income through cheap labour or required to tend to younger siblings while the parent or guardian undertakes income-generating activities outside the home. This is mostly the case for girls, who are fewer, or attain lower grades, in the primary schools (LWF, 2015).

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**Cultural Barriers.** In tandem with other barriers, cultural factors play a significant role in educational decision-making matters. Kakuma's population brings various experiences and expectations of formal schooling, some negative or that place low value on education including lack of knowledge in English and Swahili which are the languages of instruction or cultural interests that take precedence over formal schooling.

These interests curtail the length of time available for school attendance or delayed initiation of schooling. These interests include need to attend madrasa for Islamic children, early marriages that result in early dropouts or female genital mutilation (FGM) which can result in poor health or disinterest in school. According to the Lutheran World Federation (2015), cultural barriers are more likely to inhibit opportunities for girls than boys to access education.

**Human Resource Barriers.** Finally, human resources and social structures represent crosscutting barriers to educational access and quality. Less than 50% of teachers in the Primary schools hold relevant qualifications thus limiting the capacity and interest of the teachers in managing large class sizes, with limited resources and in poor infrastructural conditions (LWF, 2015).

Retention of experienced teachers is an on-going challenge, particularly for those with qualifications who cite opportunities for less demanding work that is higher paying as a key reason for separation. This is compounded by sicknesses, resettlement or interest in starting small businesses. While the poor retention of teachers has a significant impact on the continuation of learning for students, so too can it contribute to weakened management structures and insecurity among pupils. Pupils identify bullying and abuse among learners as a barrier to education. It should be added that the enforcement of LWF's code of conduct necessitates the termination of teachers who breach their ethical responsibilities that included inappropriate relations with pupils, non-attendance and taking of bribes (LWF, 2015).

Uganda has the largest refugee population in Africa and is the third largest refugee-hosting nation in the world (UNHCR, 2017). In 2017, the country hosted 1.7 million international migrants of whom 1.3 million were refugees and asylum seekers primarily from the Democratic Republic of Congo and South Sudan (WHO-African Region, 2018). This number is expected to increase as conflict and political instability continue in the region with existing refugees unlikely to return home in the near future.

The 2006 Refugee Act as well as the 2010 Refugee Regulations has further strengthened migrants and refugees' rights within the country. Indeed, Uganda's refugee law is one of the most progressive in the world (UNDP, 2016). The government maintains an inclusive approach, granting refugees freedom of movement, a plot of land, the right to

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seek employment and engage in business and access to public services such as education and health on par with the citizens. Refugee rights are enshrined in the Refugee Act of 2006, that includes the right to access education, and Uganda has mainstreamed refugee education into national educational structures.

UNHCR's strategy for refugee education therefore supports and complements the work of the government, in alignment with the Ugandan Education Sector Strategic Plan (UNHCR 2017). UNHCR works closely with the Ministry of Education and Sports, other government agencies, and a range of partners to implement a variety of interventions aimed at providing quality education to the refugee population throughout the country. The Office establishes and equips education infrastructure, recruits and deploys teachers, in support of both refugee children and the host communities.

Education infrastructure requires significant expansion and repair in order to meet the growing demand for education from refugee communities. Currently 48,965 children of primary school age remain out of school, underlining the need for targeted interventions to further promote access and quality education (UNHCR, 2016). The UNHCR notes that the gross enrolment ratio for refugee children is 57 per cent, while the net enrolment ratio is 54 per cent. In the refugee settlements, where 46 primary and 4 community secondary schools are operating, there is a critical need for more classroom space, latrines, administration buildings, libraries and other basic facilities in the existing schools. Overall, the Ugandan education system is experiencing a teacher shortage, in addition to a lack of teaching and learning materials such as textbooks (UNHCR, 2016). refugees in Kenya and Uganda have limited access to basic education due to the barriers exposed to them. UNHCR together with the Kenyan and Ugandan governments need to improve on the education services provided to the refugees.

#### **2.2.4 Refugees access to work opportunities**

Globally, the refugee and asylum-seeker population of almost 25 million is a significant but grossly underutilized labour force and at the same time, refugee access to labour markets in host countries constitutes a major challenge (UNHCR, 2014). Many host countries, especially emerging economies and those with weak labour markets, are reluctant to allow refugees the right to work. A political economy perspective demonstrates that restrictions are based on concerns of labour market distortion and limited capacity, decreasing jobs available to citizens, reductions in wages, and working conditions. Protracted conditions of refugee displacement and long-term settlement, often enabled by employment, may precipitate claims for citizenship and naturalization that host countries are reluctant to encourage. In any case, in many countries the refugee

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population accounts for a very small fraction of the host population and workforce, posing negligible impacts from a macroeconomic perspective.

Despite this fact, host governments are in certain cases swayed by popular opposition to refugee work rights and security concerns in regard to large-scale refugee populations settling and working (UNHCR, 2014).

Uganda has hosted refugees from various neighbouring countries for several decades (Vemuru et al., 2016). Refugees in Uganda are either self-settled in urban and rural areas or live in the organized settlements constructed by the government. Majority of these refugees, have not yet attained sustainable livelihoods. According to UNDP (2016), most refugees in Uganda who are self-employed appear to be more successful than the employed ones; however, only 26.1% of self-employed refugees are self-sufficient (UNHCR, 2016). More self-employed refugees were found to be on their way to self-sufficiency (15.5%) than employed refugees. A 2016 report by the UNHCR observes that although many refugees are able to create livelihood for themselves and their families, many still suffer from poverty (UNDP, 2016).

In 2014, there was an increase in the number of refugees who benefitted from livelihood interventions at the Kakuma Refugee Camp in Kenya. However, subsequent livelihoods assessment estimates noted that there still remained several outstanding needs. Lack of livelihood opportunities is compounded by difficulties in accessing work permits, limited market linkages and restricted industrial attachment. For skills training to be truly effective it should be supplemented with industrial attachment, life skills and business management alongside start-up capital to jumpstart self-employment. Barely half of those who completed skills training received this additional support. Sustained advocacy is required to increase refugee access to work permits, and also follow up with sensitization for more licensing officers, inspectors and collectors in other areas where refugees reside and operate small businesses.

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## 2.3 Measuring refugee access social economic and cultural protection

<b>Conceptual framework</b>
Refugee protection systems International and civil/ political protection frameworks
<b>Independent variables</b>
1. Health protection 2. Economic protection 3. Food security protection 4. Cultural protection
<b>Refugee participation</b>
<b>Outcome (Dependent Variable)</b>
Durable solution Social economic and cultural Refugee civil and political protection frameworks

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## CHAPTER 3:

### Methodology

#### 3.1 Study design

This was analytical comparative study using mixed methods for data collection and analysis.

#### 3.2 Study area

The study area was conducted in Kakuma refugee camp in Kenya and Kiryandongo Refugee Settlement in Uganda.

#### 3.3 Study population

The main study population was the refugee household heads (HHHs) or their representative in the sampled houses in Kakuma and Kiryandongo. In addition, the public service officers working for the Refugees Affairs Secretariat (RAS) in Kenya and Uganda, the UNCHR officers dealing with refugee protection and international Non-Governmental Organizations (NGO) dealing with refugee protection were included in the study, as indicated in table 1 below.

#### 3.4 Sample size determination and sampling procedure

The sample size for the quantitative data was 540 HHHs. This was determined using the Multiple Indicator Cluster Survey Sample (MICS3) Table 4.5 (Annex 1). The cluster sampling method was used to balance homogeneity and for geographic representation. The formula below shows how the cluster sampling was calculated. (See table)

**Table 1: Sample size determination**

<b>n =</b>	$\frac{[4 (r) (1-r) (f) (1.1)]}{[(0.12r)^2 (p) (nh)]}$
<b>n</b>	The required sample size, expressed as number of households, for the key indicator
<b>4</b>	A factor to achieve the 95 per cent level of confidence
<b>r</b>	The predicted or anticipated prevalence (coverage rate) for the indicator being estimated
<b>1.1</b>	The factor necessary to raise the sample size by 10 per cent for nonresponse
<b>f</b>	The shortened symbol for design effect
<b>0.12r</b>	The margin of error to be tolerated at the 95 per cent level of confidence, defined as 12 % of r (12 % thus represents the relative sampling error of r)
<b>P</b>	The proportion of the total population upon which the indicator, r, is based,
<b>nh</b>	The average household size

## Sampling procedure

Two level cluster sampling was used - Kakuma refugee camp and Kiryandongo refugee settlements were the main clusters. In each cluster 10 sub-clusters were identified based on the UNCHR geographical administrative areas in Kakuma and Kiryandongo as shown in Table 2 below. Probability sampling was done to identify the households. The method ensured that all households in the target population had a chance of being selected into the sample.

The household list was obtained from the cluster elders with assistance from the RAS administration in Kenya and Uganda. A sampling frame was drawn and proportionate allocation sampling was done per sub-cluster. The  $K^{\text{th}}$  number was calculated. The first household was randomly selected and the  $K^{\text{th}}$

**Table 2: Sampling frame for the household**

	Population	Households (5 people)	HH per cluster	% sample	Sample
Kakuma	185,798	37160	75	56	302
Kiryandongo	147,966	29593	40	44	238
Total	333,764	66753		100	540
<b>Country/Clusters</b>	<b>Frequency</b>	<b>%</b>			
Uganda					
Cluster A	40	7.4			
Cluster B	40	7.4			
Cluster C	40	7.4			
Cluster G	40	7.4			
Cluster K	40	7.4			
Cluster N	40	7.4			
Kenya					
Kakuma 1	75	13.9			
Kakuma 2	75	13.9			
Kakuma 3	75	13.9			
Kakuma 4	75	13.9			
Total house holds	540	100			
KII					
Kenya Refugee Affairs Secretariat	6				
Kenya UNHCR Protection officers (economic, health, education, legal)	6				
Protection NGO	5				
Uganda Refugee Affairs Secretariat	6				
Protection NGO	5				
FGD					
Kakuma Youth F	12				
Kakuma Elders	12				
Kiryandongo Youth	12				
Kiryandongo Elders	12				
Total	48				

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The sample for key informant interviews (KII) was purposively selected from sampled institutions dealing with refugee protection. They included the Refugees Affairs Secretariat (RAS) in Kenya and Uganda, the UNCHR officers dealing with refugee protection and international non-governmental organizations (NGOs) dealing with refugee protection. A total of 48 KII were included for the study, as indicated in Table 2 above.

The sample for the focus group discussion (FGD) was purposively selected from the refugee elders and youth leaders representing the selected cluster villages in both Kakuma and Kiryandongo. A total of four FGD were conducted two each in Kenya and Uganda, one was for the elders and the other was for the youth, each FGD had 12 participants.

### **3.5 Inclusion and exclusion criteria**

Only the HHH who were 18-years and above, and those who gave informed consent were enrolled for the study. In addition the HHH must have lived in Kakuma or Kiryandongo for the last three months prior to the study. For the KIIs and FGDs the participants gave informed consent before participating in the study.

### **3.6 Data management**

#### **3.6.1 Data collection**

This study employed mixed methods in data collection; both quantitative and qualitative data was used. Quantitative data was collected using structured questionnaires, which were administered to the refugee HHHs or their representatives. The tool focused on the components of refugee social and cultural protection issues dealing with food, health, education, work and culture. Qualitative data was collected using a semi-structured questionnaire (guiding questions) administered to the sampled key informants - public and nongovernmental practitioners in refugee protection. The FGDs were used for triangulating what was missed from the HHH and KIIs responses. The aim was to help clarify findings from the household tool and gain a more profound understanding of the challenges faced in refugee protection. Content analysis was conducted on the national, regional and international policy documents dealing with refugee social protection.

#### **3.6.2 Data analysis**

Quantitative data was analyzed using descriptive analysis, to establish the distribution of the study variables based on the study objectives. The mean, median and mode were used to describe the magnitude of the study variables. The data is presented in tables, graphs, using the statistical Package for Social Scientists (SPSS) and Microsoft Excel packages.

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Inferential statistics was done using the Chi square test ( $\chi^2$ ) to measure the significance association between the dependent (refugee gender access to social and economic protection) and independent variables (health, economic, food security and cultural protection systems). The test of significance was at 0.05 with a confidence of 95%. The p-value was ranked between 0 and 1 and was interpreted in the following way: A small p-value (typically  $\leq 0.05$ ) indicated no evidence against the null hypothesis, so the researcher rejected the null hypothesis. A large p-value ( $> 0.05$ ) indicated weak evidence against the null hypothesis, so the researcher accepted the null hypothesis. P-values very close to the cutoff (0.05) were considered to be marginal association with the outcome.

Spearman rank correlation: Spearman rank correlation is a non-parametric test that is used to measure the degree of association between two variables. It was developed by Spearman, thus it is called the Spearman rank correlation. Spearman rank correlation test does not assume any assumptions about the distribution of the data and is the appropriate correlation analysis when the variables are measured on a scale that is at least ordinal.

Qualitative data was used to support the quantitative findings. The data was analysed using a three-step data analysis. Step one involved documentation of all the issues as recorded during the FGD sessions. Step two involved clustering of all the issues under specific thematic areas while step three involved development of meanings and conclusions from the thematic areas in relation to the study objectives. Emerging issues were clustered into thematic areas upon which meanings and conclusions were drawn.

### **3.7 Quality control and ethical consideration**

#### **3.7.1 Tool and content validity**

Tool validity determines whether the research measures the intended outcome and how truthful the research results are. Content validity was done to ascertain connections between the Independent and Dependent variables. Subject matter experts were consulted during the technical proposal as well as during the tool development process.

Research assistant training was conducted at Kakuma and Kiryandongo. The tools were pretested and adjusted to ensure that they captured all the study objectives and study variables. The field logistics were discussed, clarified, explained and agreed upon by the research team. All logistics during the data collection was the responsibility of the research team. The principal investigator put in place various measures to ensure that the quality of the study was achieved. The data entry clerks cleaned the data by examining filled questionnaires for completeness, consistency and errors in entry. Any questions arising thereof were clarified immediately before entering the data.

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### **3.8 Ethical considerations**

Official clearance to conduct the study was given by the IPSTC Director. In addition, a research permits was obtained from the National Commission for Science, Technology and Innovation in Kenya. Consent to conduct the study was also obtained from the UNHCR and Refugee Affairs Secretariat in Kenya and in Uganda, from the Office of the Prime Minister (OPM). Permission to conduct the study was also sort from the camp managers in both Kakuma and Kiryandongo. Lastly informed consent was obtained from the HHHs, the KII and FGD discussants before the interviews were conducted. Ethical issues on confidentiality were emphasized and adhered to before and during the study.

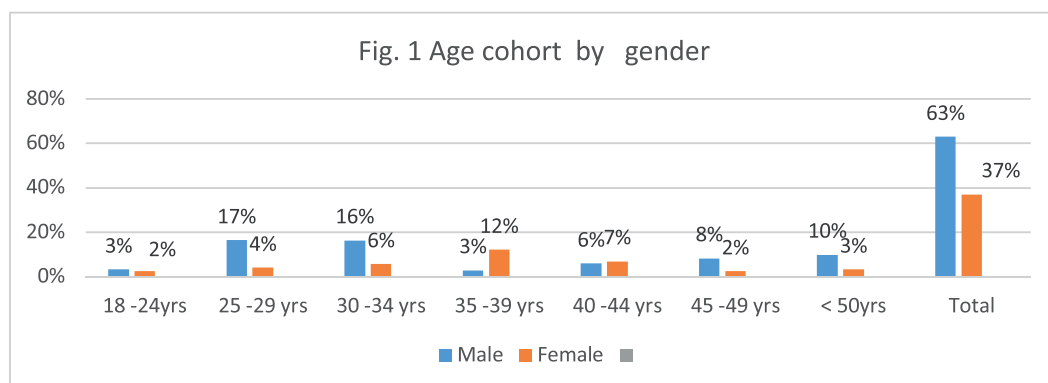
# CHAPTER 5

## Findings and Discussion

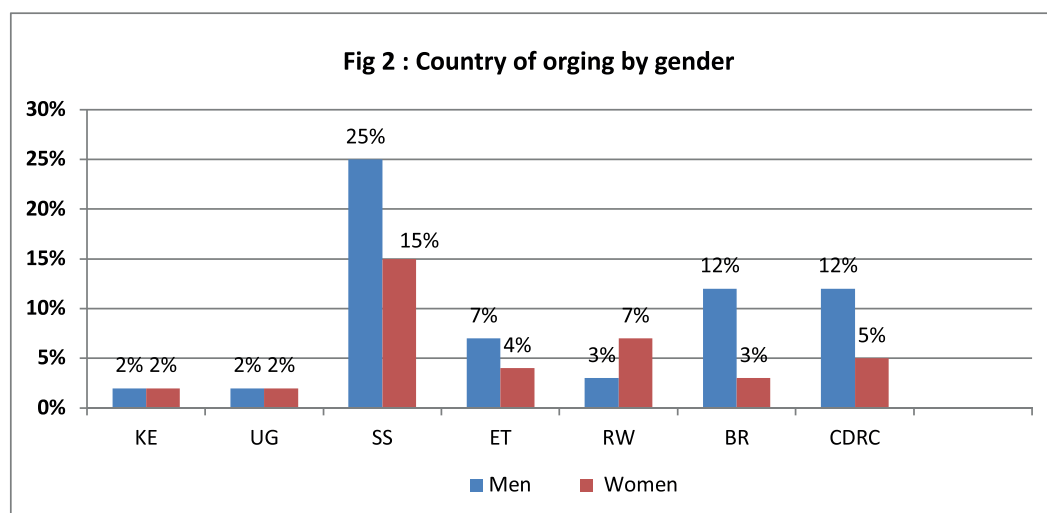
This chapter presents the findings of the study based on the objectives and operational variables. The broad objective of the study was to assess refugee access to social economic and cultural protection in Kakuma refugee camp and Kiryandongo refugee settlement. The first section gives a descriptive analysis of the respondents. The second section analyses refugee access to SECP in terms of basic health, basic education, work, food and cultural protection. The third section gives inferential analysis of the determinants of refugee access to social economic protection.

### 5.0 Major characteristics of the respondents and Household characteristics

A total of five hundred and forty household heads HHHs (540) participated in the study. The mean age was 37 years, median 35 years and the mode was 30 years. Male respondents were the majority 422 (78%) compared to the female respondents 22 (27%). In both Kakuma and Kiryandongo the South Sudan refugees had the highest population at 217 (40%) followed by Democratic Republic of Congo 87 (17%) as shown in fig.2



### Refugee Country of origin by sex



**Access to health protection:** Seven variables were assessed they included; Availability access of health services, Affordability access to basic health services (BHS), accessibility (geographic distance to service & information. Availability of essential medicine, access to water and sanitation child and maternal health.

Refugee access to health protection was at 160 (29%) as compared to 380 (70.4%) no access. The highest access was geographic accessibility (distance to the health services) at 403 (74%). This means that the refugees walked less than one hour to the health facilities. The lowest health protection access was maternal health; only 122 (22%) accessed the service as shown in Table 3.

Table 3: Refugee access to health protection by type of residence				
		Type of residence		Total
		Kakuma refugee camp	Kiryandongo refugee settlement	
		229(55.4%)	240(44.4%)	100.0%
1. Availability access of health services	No availability access	71	71	142
		13.1%	13.1%	26.3%
	Available access (existence of BHS)	124	87	211
		23.0%	16.1%	39.1%
	N/A(not sick)	104	82	187
		19.3%	15.2%	34.6%
2. Affordability access to basic health services	No affordability access	51	63	114
		9.4%	11.7%	21.1%
	Affordability access (financial)	144	95	239
		26.7%	17.6%	44.3%
	N/A(not sick)	104	82	187
		19.3%	15.2%	34.6%

Accessibility (geographic distance to service & information BHS	No accessibility	78	59	137
		14.4%	10.9%	25.4%
	Access to accessibility (geographic distance to service & information))	221	181	403
		40.9%	33.5%	74.6%
3, Access to water and sanitation	No access to WATSAN	152	142	295
		28.1%	26.3%	54.6%
	Access to WATSAN	147	98	245
		27.2%	18.1%	45.4%
4. Access to child health	No access to child health	213	194	408
		39.4%	35.9%	75.6%
	Access to child health	86	46	132
		15.9%	8.5%	24.4%
Availability access to essential medicine	No availability access	104	73	177
		19.30%	13.50%	32.80%
	Availability access to essential medicine	91	86	177
		16.90%	15.92%	32.80%
	N/A (not sick)	104	82	186
		19.30%	15.00%	34.40%
Access to maternal health	No access to maternal health	240	178	418
		44.40%	33.00%	77.40%
	Access to maternal health	59	63	122
		10.90%	11.70%	22.60%

**Access to economic protection:** : Seven variables were assessed they included; Main source of income, monthly income in Kenya/Uganda shillings, operate a bank account, savings method, access to loans and family assets.

Refugee access to economic protection was at 154 (28.5%) as compared to 386 (71.5%) no access. The highest access was basic education at 361(66.9%) and the lowest access owned family assets at 34 (6.3%) as shown in table 4.

**Table 4 Access to Economic protection by Type of camp residence**

		Type of camp		540 (100%)
		229(54.4%)	240(44.4)	
		Kakuma refugee camp	Kiryandongo refugee settlement	Total
Access to basic education	No access to basic education	121	58	179
		22.4%	10.8%	33.1%
	Access to basic education	178	183	361
		33.0%	33.9%	66.9%

Technical training	No technical training	252	112	364
		46.7%	20.9%	67.4%
	Has technical training	47	129	176
		8.7%	23.9%	32.6%
Main source of income	Salaried	3	77	80
		.6%	14.3%	14.8%
	Self employed	64	31	95
		11.9%	5.8%	17.6%
	Remittance	232	133	365
		43.0%	24.6%	67.6%
Operate a bank account	Don't operate a bank account	272	206	479
		50.4%	38.2%	88.7%
	Operates a bank account	27	34	61
		5.0%	6.3%	11.3%
Means of save your money	Don't save money	54	74	128
		10.0%	13.7%	23.7%
	Save money in the bank	6	48	54
		1.1%	8.9%	10.0%
	Save money in the bank at home	206	90	297
		38.1%	16.7%	55.0%
	Use table banking to save money	33	28	61
		6.1%	5.2%	11.3%
Own family assets	Don't own family assets	271	234	506
		50.2%	43.3%	93.7%
	Own family assets	28	6	34
		5.2%	1.1%	6.3%

**Access to food security protection :** Four variables were assessed they included; Ways of obtaining food, size of your land you cultivate, Type and quantitate of food in store (Sorghum, Beans, Maize, Rice/Wheat, Cassava, Oil), Type and number of animals kept.

Refugee access to food security protection was at 184 (34.1%) as compared to 356 (65.9%) no access. The highest access was food provision by UN agencies where all the respondents stated that they received some form of supply; the lowest access was refugee having food (Sorghum, Beans, Maize, Rice/Wheat, Cassava, Oil) in stored assets at 34 (6.3%) as shown in Table 5.

**Table 5: Food security by type of residence**

		Type of Residence		540 (100%)
		229(54.4%)	240(44.4)	
		Kakuma	Kiryandongo	Total
Food provision	UN agent providing food	299	241	540
		55.4%	44.6%	100.0%
Land for cultivation	Have land for cultivation	299	241	540
		55.4%	44.6%	100.0%
Has food in store	No food in store	139	187	326
		25.7%	34.6%	60.4%
	Has food in store	160	54	214
		29.6%	10.0%	39.6%
Keep domestic animals (chicken, pigeon, camel goats, cows, camels)	Don't keep domestic animals	150	100	250
		27.8%	18.5%	46.3%
	Keeps domestic animals	149	141	290
		27.6%	26.1%	53.7%

**Access to cultural protection :** Five variables were assessed they included; HHH marital status, family size, HHH religion affiliation, group belonging of the HHH, cultural activities you celebrate in the camp or wish to celebrate.

Refugee access to cultural protection was at 342 (63.3%) as compared to 198 (36.7%) no access. The highest access was refugee right to marry (42.6%) and the lowest access was no access to social group belonging of the HHH at 292 (54%) as shown in Table 6.

**Table 6: Cultural Protection type of residence**

		Type of Residence		540 (100%)
		229(54.4%)	240(44.4)	
		Kakuma refugee camp	Kiryandongo refugee settlement	Total
HHH Marital Status	Married monogamy	230	167	397
		42.6%	30.9%	73.5%
	Married polygamy	28	13	41
		5.2%	2.4%	7.6%
	Single	27	30	57
		5.0%	5.6%	10.6%
	Widow (er)	12	23	35
		2.2%	4.3%	6.5%
	Separated	2	8	10
		.4%	1.5%	1.9%

HHH Religious affiliation	Protestant	135	116	251
		25.0%	21.5%	46.5%
	Catholic	30	60	90
		5.6%	11.1%	16.7%
	Indigenous church	4	5	9
		.7%	.9%	1.7%
Group Belonging of the HHH	Muslim	130	60	190
		24.1%	11.1%	34.9%
	None	145	147	292
		26.9%	27.2%	54.1%
	Women/men	46	37	83
		8.5%	6.9%	15.4%
	Church	38	23	61
		7.0%	4.3%	11.3%
	Clan groups	64	12	76
		11.9%	2.2%	14.1%
	Youth	6	22	28
		1.1%	4.0%	5.2%

Table 7 below gives a summary of the refugee access to SECP from the highest access to health (64%) to the lowest economic protection

**Table 7 Summary of access to social economic and cultural protection**

		Type of Residence		540(100%)
		229(54.4%)	240(44.4)	
		Kakuma	Kiryandongo	Total
Access to cultural pro- tection	No access to cultural protection	108	82	190
		20.0%	15.2%	35.2%
	Access to cultural protection	191	159	350
		35.4%	29.4%	64.8%
Access to food security	No Access to food security pro- tection	271	85	356
		50.2%	15.7%	65.9%
	Access to food security protection	28	156	184
		5.2%	28.9%	34.1%
Access to health pro- tection	No access to health protection	215	165	380
		39.8%	30.6%	70.4%
	Access to health protection	84	76	160
		15.6%	14.1%	29.6%
Access to economic protection	No Access to economic protection	242	144	386
		44.8%	26.7%	71.5%
	Access to access to economic pro- tection	57	97	154
		10.6%	18.0%	28.5%
Multiple response question				

## Determinants of access to SECP

Table 8: Ranking of determinants of access to SECP	P value (.05 )	Pearson r correlation ( r2) (-1 to +1)
1. Access to economic protection	.001	0.662
2. Access to food security	.001	0.629
3. Size of land for cultivation	.001	0.578
4. Monthly income in Kenya/Uganda shillings	.001	0.492
5. Technical training	.001	0.384
6. Area of training	.001	0.378
7. Type of refugee residence	.001	0.361
8. Access to cultural protection	.001	0.350
9. Education level	.001	0.346
10. Access to basic education	.001	0.332

What determined gender access to social economic and cultural protection among the refugees in Kakuma and Kiryandongo is based on table 8, the top three determinants to SECP included; Access to economic protection, food security and Size of land for cultivation. The **p-value** is between 0 and 1 and interpreted in the following way: A small **p-value** (typically  $\leq 0.05$ ) indicates a low probability that the null hypothesis is correct (thus, providing evidence for the alternative hypothesis). The Spearman's  $r^2$  was used to measure linear association between the independent and dependent variables. It summarises the strength and direction (-ve or +ve) of the relationship between the two variables. Spearman's coefficient is appropriate for both continuous and discrete variables, including ordinal variables. Correlation coefficients values ranged from -1 (a perfect -ve relationship) and +1 (a perfect +ve relationship). The value of 0 indicates no linear relationship. The ( $r^2$ ) close to +1 meant a +ve relationship between the variables, with increases in one of the variables being associated with increases in the other variable. Correlation coefficient close to -1 indicated a -ve relationship between variables, with an increase in one of the variables being associated with a decrease in the other variable

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## CHAPTER 6:

### Conclusion and Recommendation

#### 6.1 Conclusion

The main objective of the study was to analyse refugee access to social economic and cultural refugee protection in Kakuma Refugee Camp and Kiryandongo Refugee Settlement. In addition, it was to establish refugee access to: basic health, economic, food security, and cultural protection.

Access to SECP is very low. Access in order of the highest to the lowest: cultural protection, food security protection, and access to economic protection, health protection. The highest access health protection was geographic accessibility (distance to the health services) This means that the refugees walked less than one hour to a health facility. The lowest health protection access was maternal health with few women accessing the maternal child health. Refugee access to economic protection low with more than three quarters without access. The highest access was basic education and the lowest access owned family assets Refugee access to food security protection was low. The highest access was food provision by UN agency where all the respondents stated that they received some form of supply by the UN agency and the lowest access was refugee having food (Sorghum, Beans, Maize, Rice/Wheat, Cassava, Oil) as stored assets. Refugee access to cultural protection was high but many refugees did not belong to any social group belonging of the HHH at 292 (54%).

#### 6.2 Recommendation

##### Partnership

UNWomen, UNHCR, IPSTC, RAS (Kakuma and Kiryandongo through OPM).

1. Conduct Training needs assessment (TNA) on technical skills for the refugees.
2. Curriculum development based on the TNA findings on technical skills.

NB: 1/3 gender rule to be observed in the improving access to SE and cultural protection.

##### Further research

TNA on capacity (ability, authority, resources and responsibility) of Refugees Affairs Secretariat (RAS) in providing and facilitating access to social economic and cultural protection.

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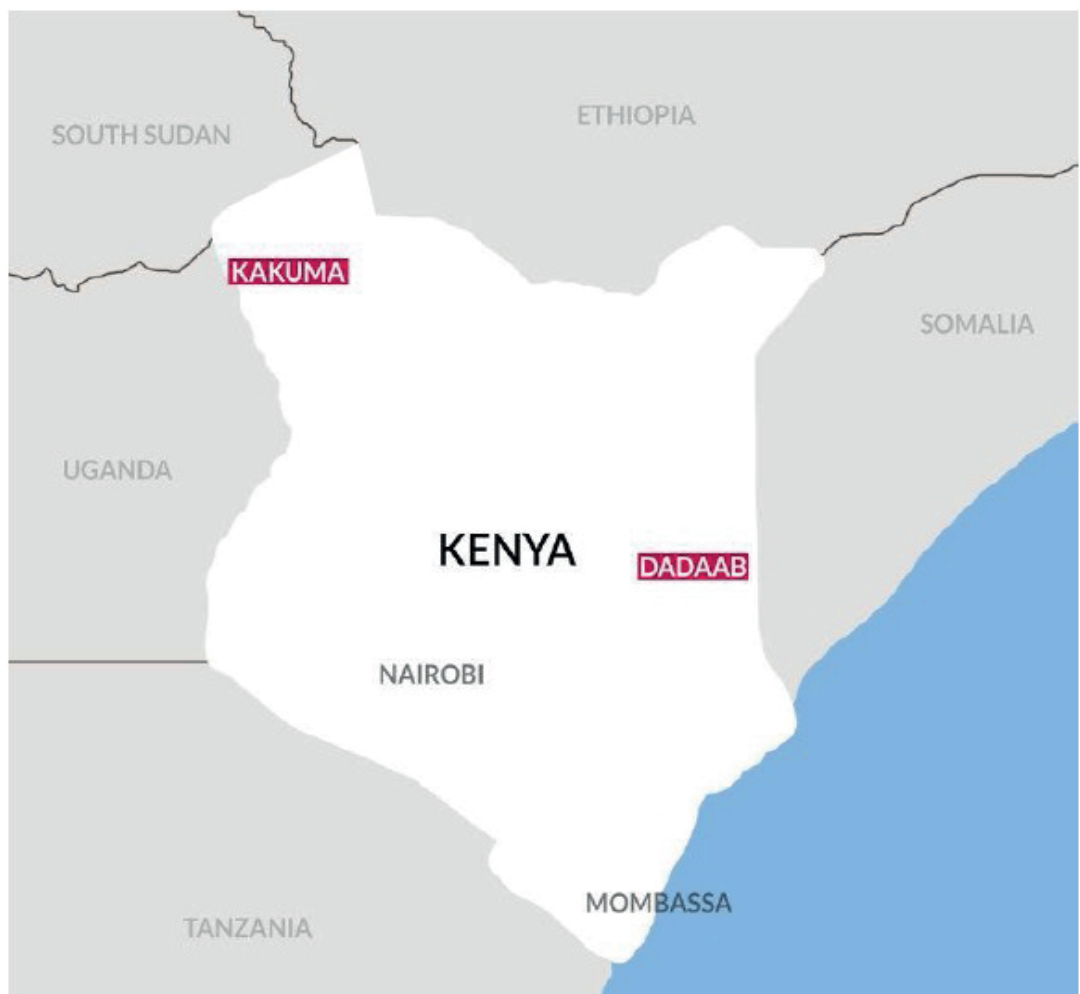
# Annexes

## Annex 1: The Multiple Indicator Cluster Survey Sample (MICS3) Table 4.5

**Table 4.5**  
**Expected Reliability Measures (Standard Error and Confidence Interval) for Sample of 6,000 Households under Various Demographic Alternatives**

Average household size	Size of indicator r	Size of subpopulation P	Number of sample persons in subpopulation	Number of persons with indicator	Standard error	Confidence interval (95% level)	
						Lower	Upper
4	0.10	.025	540	54	.016	.068	.132
		.05	1,080	108	.011	.078	.122
		.125	2,700	270	.007	.086	.114
		.20	4,320	432	.006	.089	.111
	0.20	.025	540	108	.021	.158	.242
		.05	1,080	216	.015	.170	.230
		.125	2,700	540	.009	.181	.219
		.20	4,320	864	.007	.185	.215
	0.30	.025	540	162	.024	.252	.348
		.05	1,080	324	.017	.266	.334
		.125	2,700	810	.011	.278	.322
		.20	4,320	1,296	.009	.283	.317
	0.50	.025	540	270	.026	.447	.553
		.05	1,080	540	.019	.463	.537
		.125	2,700	1,350	.012	.476	.524
		.20	4,320	2,160	.009	.481	.519
5	0.10	.025	675	68	.014	.072	.128
		.05	1,350	135	.010	.080	.120
		.125	3,375	338	.006	.087	.113
		.20	5,400	540	.005	.090	.110
	0.20	.025	675	135	.019	.162	.238
		.05	1,350	270	.013	.173	.227
		.125	3,375	675	.008	.183	.217
		.20	5,400	1,080	.007	.187	.213
	0.30	.025	675	203	.022	.257	.343
		.05	1,350	405	.015	.269	.331
		.125	3,375	1,013	.010	.281	.319
		.20	5,400	1,620	.008	.285	.315
	0.50	.025	675	338	.024	.453	.547
		.05	1,350	675	.017	.467	.533
		.125	3,375	1,688	.011	.479	.521
		.20	5,400	2,700	.008	.483	.517
6	0.10	.025	810	81	.013	.074	.126
		.05	1,620	162	.009	.082	.118
		.125	4,050	405	.006	.088	.112
		.20	6,480	648	.005	.091	.109
	0.20	.025	810	162	.017	.160	.234
		.05	1,620	324	.012	.176	.224
		.125	4,050	810	.008	.185	.215
		.20	6,480	1,296	.006	.188	.212
	0.30	.025	810	243	.020	.261	.339
		.05	1,620	486	.014	.272	.328
		.125	4,050	1,215	.009	.282	.318
		.20	6,480	1,944	.007	.286	.314
	0.50	.025	810	405	.022	.457	.543
		.05	1,620	810	.015	.470	.530
		.125	4,050	2,025	.010	.481	.519
		.20	6,480	3,240	.008	.485	.515

**Annex 2:** Map of Kenya showing Kakuma refugee camp



Source: UNHCR (2014).

**Annex 3:** Map of Uganda showing kiryandongo refugee settlement



Source: UNHCR (2014).





## About the Author



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