



### HIGHLIGHTS

- The Displacement Tracking Matrix was rolled initially in seven counties of the 47 counties in Kenya from 18 February 2015 to 30 April 2015
- 59 sites have been assessed in seven counties.
- During the data collection period, the DTM tracked a total of 29,616 households (or 216,294 persons) in the 59 open sites surveyed.

### BACKGROUND AND SUMMARY

Kenya is constantly experiencing recurrent man-made and natural disaster-related internal displacements. Man-made triggers include but are not limited to political, ethnic and land related violence as well as development projects. Political violence in particular, or the threat of it, has over-shadowed every electoral process since Kenya's first multi-party elections in 1992. The largest displacement recorded occurring in the aftermath of disputed presidential elections in December 2007 when nearly 664,000 Kenyans fled their homes and around 1,300 were killed.

While natural disasters are mainly around climatic challenges; drought especially in Northern Kenya, landslides in Western and Central Kenya and floods. There is no official, comprehensive, up-to-date national data on IDPs in the country. Data gathering by the Kenya Inter-agency Rapid Assessment team has focused on instances of fresh displacement caused by violence or rapid-onset disasters with little quantitative and qualitative data on displacement dynamics after IDPs' initial flights. Coordinated emergency responses are still an issue for Kenya.

### METHODOLOGY

The Displacement Tracking Matrix (DTM) provides in-depth information on IDP site/settlement areas, IDP's areas of origin and population demographics from the seven counties and one bordering area, where the pilot assessment was conducted. Data also looks at service provision for IDPs in terms of water and sanitation, food and nutrition, communication, mobility, education, health, shelter and non-food items, livelihoods and protection of children, women and other vulnerable persons.

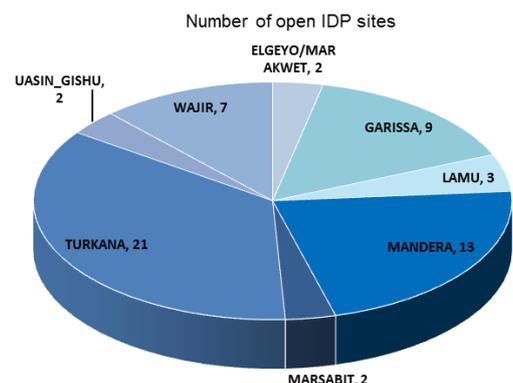
The DTM is conducted at the site level and consists of a rapid site assessment tool based on key informant interviews and focus group discussions (with community leaders, local government authorities and/or site residents) verified by direct observation of available services and living conditions in sites. The rapid assessment includes identification of protection risks and gender based violence risk factors, to be referred to appropriate actors for mitigation and/or response.

The DTM pilot project has been conducted in seven pilot counties out of Kenya's 47 counties. These pilot counties have overtime borne the brunt of displacement. They include Garissa, Lamu, Mandera, Marsabit, Turkana, Uasin Gishu and Wajir. Although it was not targeted in the pilot counties, Elgeyo Marakwet county was also assessed as it borders Uasin Gishu county and has IDP sites that spread across the county border.

### SITE/SETTLEMENT AREAS AND POPULATION DEMOGRAPHICS

IOM has so far assessed 59 open IDP sites. Data reveals that Turkana County has majority of open IDP sites (21, followed by Mandera County which has 13 open sites. Garissa has 9 open sites while Wajir has 7 open sites. Marsabit (2), Uasin Gishu (2), Elgeyo Marakwet (2), and Lamu (3) have the least number of IDP sites.

As of 30 May, there are approximately 216,294 IDPs in all the preliminary counties of assessment. The sites are situated far from the urban centres. Family heads have lost their initial means of livelihood, mainly farming and now engage in small scale businesses.



### CONTACTS

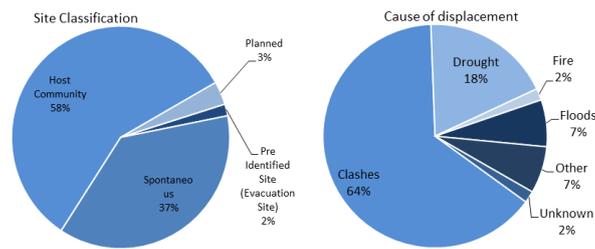
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## SITE MANAGEMENT, SHELTER, AND NON FOOD ITEMS

From the total of 59 sites assessed, 12 sites\* have an appointed site manager. Services available in the sites include:

- Registration Activities 17 sites (29%)
- WASH Support 4 sites (7%)
- HEALTH Support 22 sites (37%)
- Shelter/NFI Support 15 sites (25%)
- Food Support 26 sites (44%)
- Protection support 11 sites (19%)



Majority of the sites are using traditional methods for housing; **Grass thatched huts (16), Manyatta (23)**. The cause of displacement is mainly a result of internal clashes (38). Most IDP sites are situated either on **Ancestral land (20)** or **Public/government land (13)**.

**Plastic sheets** and **mosquito nets** are considered the most important NFIs needed in sites. In addition to that, 73 per cent of the 59 sites indicate the need for shelter repair materials.

\*Site classification to be refined for the next round of DTM.

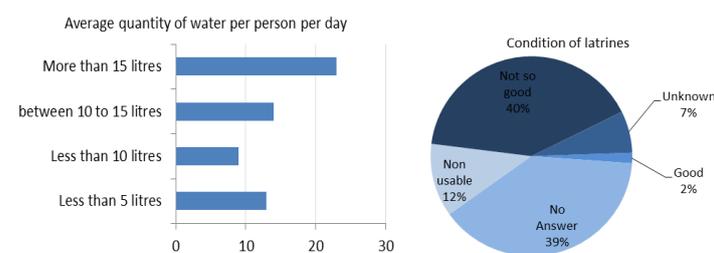
## MOBILITY

IDPs in 23 sites of the 59 sites assessed have previously been displaced while IDPs in 27 sites were displaced for the first time. No response was recorded in six sites and three sites had no information regarding previous displacements.

Displacement has not hindered free and safe movement for 67 per cent of IDPs in 40 sites. 32 per cent of IDPs cited insecurity behind their inability to move freely. Curfews and cost of transportation have hindered movement in 14 and two sites respectively.

52 per cent of IDPs wished to remain in the sites while 42 per cent in 25 sites preferred to go back home. Damaged or destroyed homes as well as infrastructure, insecurity, lack of food and livelihood topped the list of the reasons why the IDPs were hesitant to go back home. Most of IDPs indicated damaged houses (23 sites) and lack of safety (13 sites) as the **main factors preventing their return home** irrespective of the reason behind their displacement.

## WATER SANITATION AND HYGIENE (WASH)



5 sites have indicated that water sources are within reasonable distance inside the site while 24 sites stated that the water source despite being within the site is considerably a distance away (**more than 20 minutes' walk**). 50 per cent of the sites (29) stated that their water source was outside the site with majority (18) being within reasonable walking distance (less than 20 minutes). The most frequent source of drinking water is piped water (14 sites) with water trucking (9 sites) and unprotected wells (8 sites) second and third respectively.

12 sites have not been reporting **problems with water** while some sites reported problem with taste (4 sites), suspended solids (3 sites), odour smell (3 sites), and others (3 sites).

**Conditions of most latrines** were reported as not so good in 24 sites while 7 sites reported non-usable latrines and only 1 site reported latrines in good condition. Only 10 sites reported latrines having locks. Majority (47 sites) reported not having any locks.

Garbage disposal system is a problem in majority of sites as 38 sites reported not having any. For the sites with a garbage disposal system in place the most common is burning (16 sites). Of the 59 sites 34 reported having a **solid waste problem**.

52 sites reported **no hygiene promotion** or campaigns on site. 5 sites indicated having some campaign awareness on hygiene.

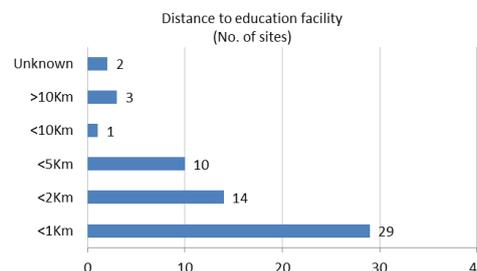
## EDUCATION

94.83 per cent of children were able to access education before they were displaced. Majority of the sites (45) have access to education facilities, most of which are government run. More than 75 per cent of children are attending school in 16 sites, while less than 50 per cent in 14 sites are attending school. 13 sites indicated that less than 25 per cent of children are attending school while less than 75 per cent of children are reported to be attending school. 6 sites did not indicate whether children are attending school.

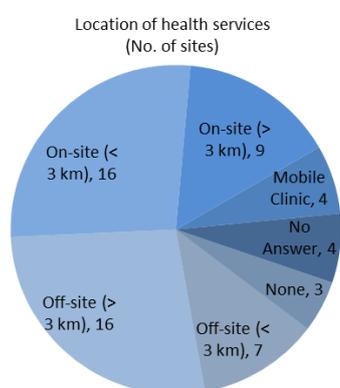
53 sites reported having the education facility less than 5 km from the site.

Insecurity, displacement, inadequate teaching staff, cost of education, lack of teaching materials and closed down school are cited as reasons why children are not attending school.

For most children (50%), schools are within a walking distance. The furthest that children have had to walk to the nearest education facility is 10 KM.



## HEALTH



68.97 per cent of respondents indicated that they have access to health facilities in their sites as opposed to 25.86 per cent who do not. 5.17 per cent of IDP's did not have a clear answer. There is no humanitarian agency that is providing health services in the camps as indicated by 54 per cent respondents.

Malaria is the most prevalent disease standing at 69.5 per cent followed by diarrhoea at 15 per cent. Communicable diseases, malnutrition, measles and other disease represented five per cent, three per cent, 1.7 per cent and three per cent respectively. However, 1.7 per cent of the population was not affected.

Out of the 59 sites, health facilities that operated within a radius of 3 Km served 16 sites, whereas 10 sites were served by health facilities located over 3 Km away.

Additionally, four have mobile clinics operating inside the sites, whereas, three have

no health facility to cater for the IDP population. Four sites did not indicate whether they have health facilities inside or outside their sites.

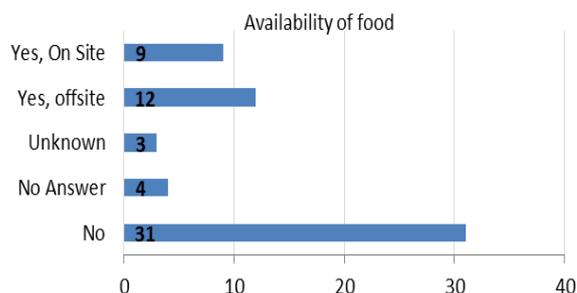
The government is the main health service provider across the 59 sites covering 75.86 per cent, followed by international Non-Governmental Organizations and local clinics at 8.62 per cent. 5.17 per cent of the 59 sites had no service provider while 1.72 per cent of the sites were covered by other health service providers.

53.45 per cent of the IDP's in the pilot counties have no regular access to medicine/ medical services as compared to 29.31 per cent who do.

## FOOD AND NUTRITION

31 sites reported as **not having food distribution**. 34 sites reported that they buy the food they consume, making purchase by cash, the most common means of accessing food. 18 sites reported that they receive **food distributions** from various agencies, although these distributions are irregular in 13 sites. Residents in some sites cultivate their own food while others receive food from host communities.

18 sites reported providing **supplementary feeding for pregnant and lactating mothers** while 17 sites reported also to providing **supplementary feeding for children**. Majority of the other sites (39 sites) did not offer any supplementary feeding initiatives.



## COMMUNICATION

Majority of Kenyans have access to mobile phones and IDPs consider them the most reliable means of communication and source of information. Information from local leader, family and friends follow respectively. 3 per cent (2 sites) indicated local authorities and radio as source of information. 95 per cent of sites in the 59 assessed sites have had no information regarding travelling abroad. 89 per cent have had discussions about travelling to major towns.

Safety and security is a major concern for the IDP across the 59 sites assessed. Shelter, situation in areas of origin and other

relief assistance was featured as important information.

The table below indicates that opportunities to travel to major towns are being discussed or advertised within communities in Wajir and Turkana counties.

County	Number of sites assessed	Number of communities where opportunities to travel to major towns are being discussed/advertised within the community	Percentage of communities where opportunities to travel to major towns are being discussed/advertised within the community
Wajir	7	2	29%
Garissa	9	0	0%
Mandera	13	0	0%
Marsabit	2	0	0%
Turkana	21	2	10%
Uasin Gishu	2	0	0%
Elgeyo Marakwet	2	0	0%
Lamu	3	0	0%
Grand total	59	4	7%

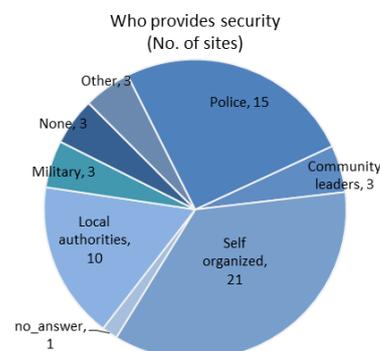
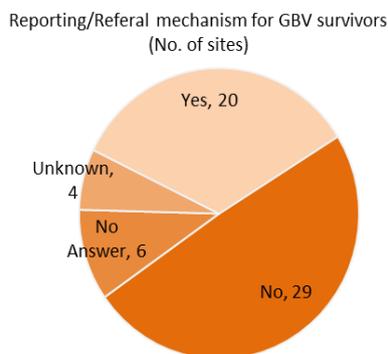
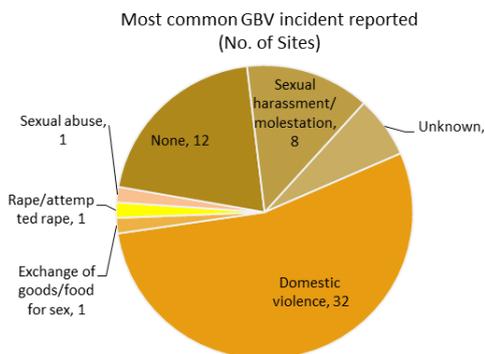
### PERSONS WITH SPECIAL VULNERABILITIES

The three largest vulnerable groups were found to be elderly persons (5,885), breastfeeding mothers (5,485) and pregnant women (3,922). The table below breaks down the counties with the largest number of vulnerable groups.

Vulnerable Group	Lamu	Garissa	Mandera	Wajir	Marsabit	Uasin Gishu	Turkana	Total
Number of expectant women	17	109	1,542	212	35	0	2,007	3,922
Number of lactating mothers	27	198	2,292	391	60	0	2,517	5,485
Number of persons with chronic diseases /serious medical conditions	1	55	54	33	10	0	3,219	3,372
Number of persons with physical disabilities	0	119	550	79	15	0	1,014	1,777
Number of persons with mental disabilities	2	55	142	22	3	0	330	554
Number of single female-headed households	11	220	696	176	52	0	1,878	3,033
Number of single male-headed households	2	209	433	91	5	0	3,310	4,050
Number of unaccompanied elderly persons	11	225	783	288	50	0	4,528	5,885

### PROTECTION OF CHILDREN, WOMEN AND OTHER VULNERABLE PERSONS

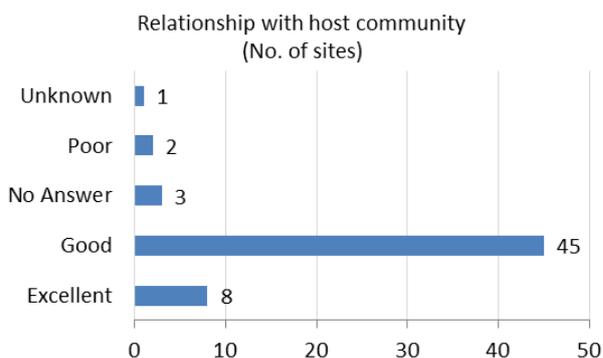
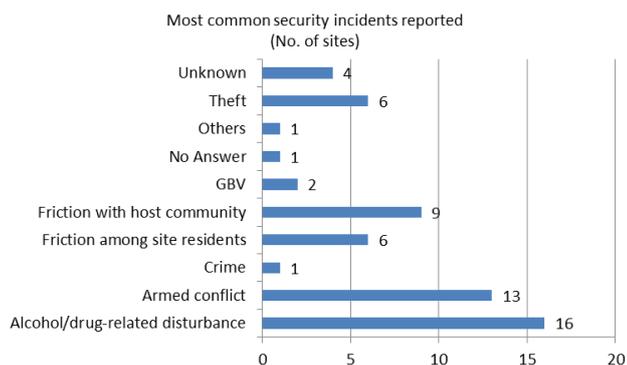
32 sites (54%) reported no availability of security on-site.



\*These are indications at the aggregate level, not individual incidences.

The most common type of gender-based violence incident reported or known of occurring in sites was found to be domestic violence. 37 sites in general reported that the population felt safe (37 sites said men feel safe, 38 sites said the children feel safe and 37 sites said that women feel safe).

45 sites (76 per cent) reported no child friendly spaces while 56 sites (95 per cent) reported no women friendly spaces available in the sites.



### ANNEX

- 02\_IOM DTM Dashboard Kenya\_Overview\_Round 1\_20150530
- 06\_IOM DTM Displacement Sites Kenya\_Round 1\_20150530
- 05\_IOM DTM Dataset Kenya\_Round 1\_20150530

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The raw dataset can be accessed at: <http://kenya.iom.int>.