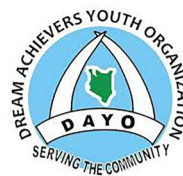




This project is funded by the European Union



AGA KHAN FOUNDATION

Strengthening Community Coping Strategies to Covid-19 Pandemic Rapid Needs Assessment Summary Report

Background

DAYO in partnership with Mombasa county government, Department of Health with funding from European Union through The Aga Khan Foundation (AKF) undertook a Rapid Needs Assessment with the aim of:

I. Alleviating the impact of COVID -19 with regards to the youth cohort through mobilization and linkages to training, learning and securing of sources of livelihood/quantifiable means of sustenance.

II. Assessing the impact of Covid-19 and coming up with workable solutions/interventions aimed at cushioning the most vulnerable population in the six implementing sub counties of Mombasa.

Methodology

The needs assessment used a parallel mixed-methods design; an approach to inquiry that combines both qualitative and quantitative methods concurrently, prioritizing both methods almost equally (Creswell & Clark, 2011) Data was collected using questionnaires and observation protocols, while interviews and focus group discussion protocols were used to collect qualitative data

In Numbers

1. Mombasa county Population 2022: 1,388,979 [World Population Review]
2. 489 directly reached (285 Females, 204 Males)
3. 6 sub counties : Kisauni, Nyali, Mvita, Likoni, Changamwe, Jomvu

Key findings

1. Source of COVID -19 sources

The assessment sought to establish which mechanisms did the community receive COVID-19 related information.

Information Source	Responses		Percent of Cases
	N	Percent	
Other	31	3.90%	7.00%
From community support group, VSLA group, Women's Group	62	7.70%	13.90%
From NGOs, local associations, aid workers	108	13.50%	24.20%
From local authorities, religious leaders	117	14.60%	26.20%
From relatives, friends, neighbors	213	26.60%	47.80%
From government official, military official, health authorities	270	33.70%	60.50%
Total	801	100.00%	179.60%

2. Medium of Information Dissemination

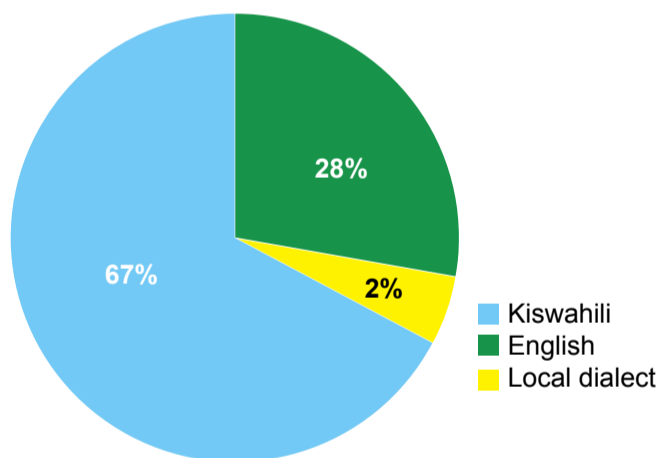
The respondents were further asked to specify, under a multiple response question the medium through which they received information regarding COVID-19 prevention and containment

Medium Of Information Sharing	Response N	Percent	Percentage of Cases
Radio	305	24.10%	68.40%
TV news	302	23.80%	67.70%
Social media (Facebook, Instagram, etc.)	127	10.00%	28.50%
SMS/WhatsApp etc.	109	8.60%	24.40%
Posters	76	6.00%	17.00%
Newspaper	75	5.90%	16.80%
Informal discussion	73	5.80%	16.40%
Public meeting or awareness session	72	5.70%	16.10%

Via religious leaders and institutions	57	4.50%	12.80%
Door to door sensitization	51	4.00%	11.40%
Discussion on the phone	13	1.00%	2.90%
Leaflets	5	0.40%	1.10%
Other	2	0.20%	0.40%
Total	1267	100.00%	284.10%

3. Language of Packaging

The respondents were further asked to prioritize which language if utilized in information packaging will be more effective and efficient to the residing community



Preferred Language

4. Mostly received Key messaging

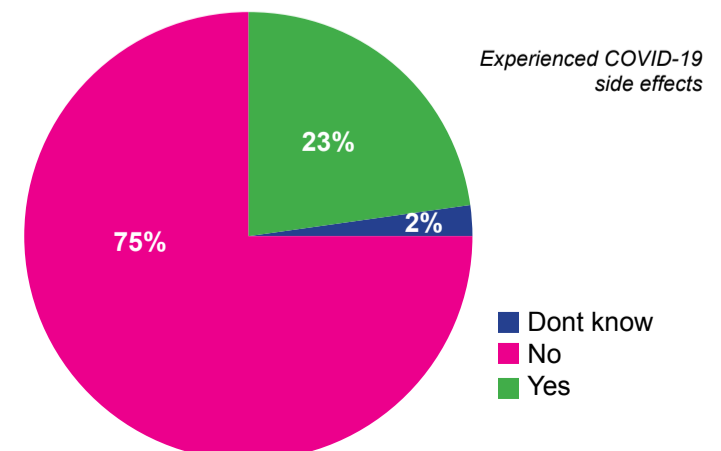
The assessment guide interrogated the most received information about COVID-19 and the least received message by the respondents and found the below

	Responses		Percent of Cases
	N	Percent	
Wash your hands frequently with soap and water or use a hand sanitizer with >60% alcohol	321	23.20%	72.00%
Maintain social distancing, at least 1.5-2 meters distance between yourself and others, specifically anyone who is coughing or sneezing. Stay at home as much as possible	317	22.90%	71.10%
The most common symptoms are fever, tiredness, dry cough, sore throat, nasal congestion, diarrhea, in some cases loss of taste and smell	228	16.50%	51.10%

Avoid touching your eyes, nose and mouth	167	12.10%	37.40%
The contamination vectors: The virus is spread from person to person through small droplets from the nose or mouth when an infected person coughs or exhales. People can catch COVID-19 from breathing the droplets or if they touch objects or surfaces where droplets landed and then touch their eyes, nose or mouth. It is not certain how long COVID-19 survives on surfaces (may last few hours to few days)	90	6.50%	20.20%
Practice respiratory hygiene: cover your mouth and nose with a bent elbow or tissue when coughing or sneezing. Dispose used tissue immediately.	88	6.40%	19.70%
If you are sick, stay at home and monitor your symptoms. If your symptoms become severe for example, difficulty breathing, coughing, high fever, seek medical attention	86	6.20%	19.30%
Infection and contagion: Some people become infected but do not develop any symptoms and do not feel unwell but are contagious for others. 80% of people recover from the disease without needing any treatment. About 1 in 6 people who get COVID-19 become seriously ill & have breathing difficulties that might require medical attention, especially older people or those with underlying medical conditions.	57	4.10%	12.80%
Other	29	2.10%	6.50%
Total	1383	100.00%	310.10%

5. Experienced COVID-19 effects

The last interrogated factor under the COVID-19 information and awareness, was on either any member of the household had experienced any of the mentioned/identified COVID-19 effects.



Experienced COVID-19 side effects

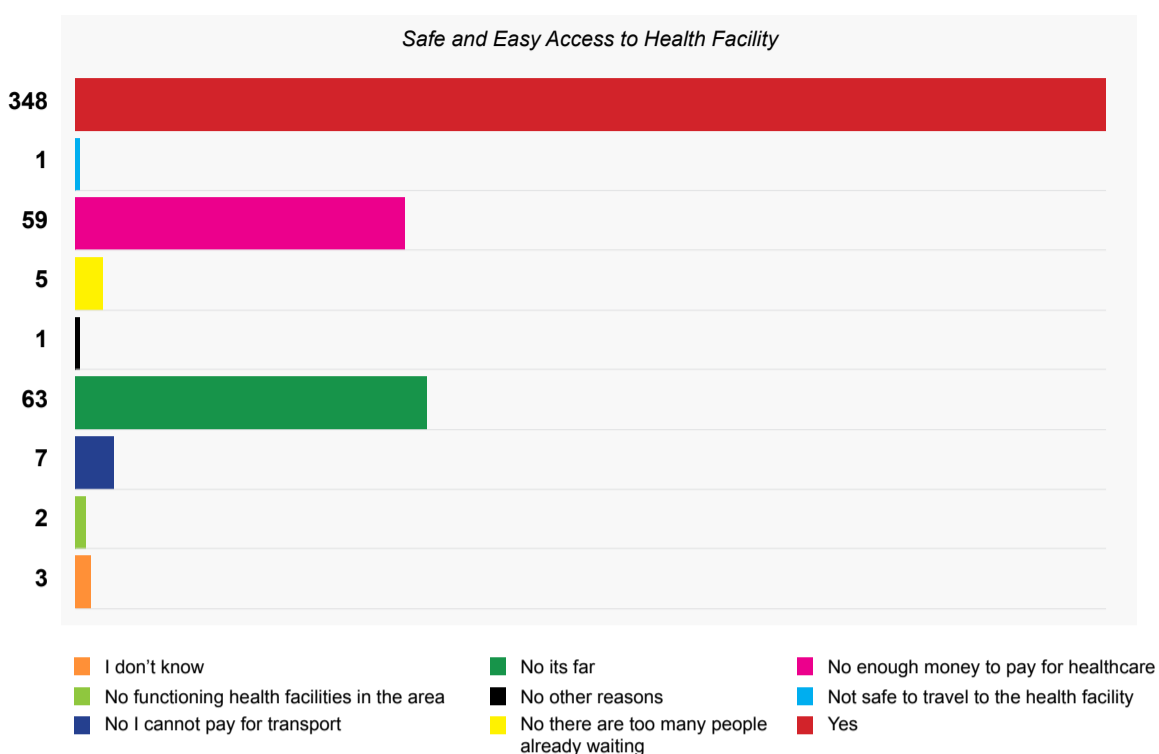
6.Reasons for absence of a hand washing facility

The researchers interrogated and verified the presence of hand washing devices with the sampled households

	Responses		Percent of Cases
	N	Percent	
Ran out of water/soap	73	17.70%	19.70%
Cannot afford water/soap	105	25.40%	28.30%
Soap is unavailable/ cannot find water	29	7.00%	7.80%
Soap is unnecessary	14	3.40%	3.80%
Don't like soap	3	0.70%	0.80%
Don't know	46	11.10%	12.40%
Other	143	34.60%	38.50%
Total	413	100.00%	111.30%

7. Access to facility

The study sought to determine on whether the respondents had safe and easy access to health facility following government directive on self-isolation.



8.Household fears

In line with the rippling implications and impacts of COVID-19, the respondents were asked of the various fears that they possess as a household

		Number of Cases	Percent	Percent of Cases
What are you main household fears	Economic situation and income generating activities	409	36.20%	83.60%
	Access to food	295	26.10%	60.30%
	Health Issues	203	18.00%	41.50%
	Missing school	87	7.70%	17.80%
	Safety (related to the crisis specifically)	73	6.50%	14.90%
	Access to medicine	48	4.30%	9.80%
	Others	14	1.20%	2.90%
Total		1129	100.00%	230.90%

9.Top Priority Needs

Household and community members were asked to determine three immediate priorities that would aid or strengthen their coping strategies to COVID-19 pandemic.

		Responses N	Percent	Percent of Cases
What are the top three priority needs	Food	413	27.40%	84.50%
	Water	271	18.00%	55.40%
	Livelihood	263	17.50%	53.80%
	Shelter and household items	212	14.10%	43.40%
	Education	196	13.00%	40.10%
	Sanitation- Hygiene	80	5.30%	16.40%
	Protection	53	3.50%	10.80%
	Other	17	1.10%	3.50%
Total		1505	100.00%	307.80%

Recommendations

WASH

- Regular community sensitization on hygiene practices and utilization of locally devised hand washing innovations

Partnerships

- Collaboration with County and National government systems and funding infrastructure for effective support of community coping strategies
- Strengthen working relationship with Community Health Workers in the beneficiary identification

Health Promotion

- Upscale the COVID-19 vaccination messaging and sensitization to initiate behavioral and perception change to COVID-19 Vaccination.
- Sensitize youth on content creation and use of digital media for income generation and coping mechanism

Leave No one Behind

- Inclusivity is critical during implementation to ensure People with Disability are not left behind
- in-depth analysis needed to understand priorities and needs of adolescent girls and young women

About DAYO

- Dream Achievers Youth Organization (DAYO) was founded in 2005 as CBO. Due to the increased need to expand its area of intervention, DAYO was later registered as an NGO in 2021. DAYO currently implement Projects in five Counties; Kilifi, Kwale, Kisumu, Nairobi and Mombasa.



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