Monitoring Social and Economic Impacts of COVID-19 on Refugees in Uganda: Results from the High-Frequency Phone Survey-Second Round

Second round (December 2020)

World Bank
Poverty and Equity Practice

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Key messages and findings

Employment, family business and family farming:

✓ The employment rate among respondents declined to 36 percent in December (round 2) compared to 43 percent in October/November (round 1) mainly due to a decline in employment in the West Nile region. This can be a temporary decline though as, in addition to 36 percent, about 12 percent of respondents in December indicated that they had a job to return to. Among them, almost half planned to return to this work within one month.
✓ Under-employment among refugees was widespread as they reported working about 27 hours per week. Almost half of refugees worked fewer hours in December than before the lockdown.
✓ Ownership of family businesses in December was far below the pre-COVID-19 level. The share of households with a family business dropped 10 percentage points from 37 percent before March to 27 percent in December 2020.
✓ Among those who had a business before or after the lockdown, 39 percent lost businesses after March, 16 percent opened a new business after March 2020, and the remaining 45 percent continued operating a family business since the lockdown. The closure of businesses after the lockdown was more likely to happen in non-agriculture sectors, whereas new businesses were more likely to start in agriculture.
✓ About 69 percent of refugee households worked on household farms in the first agricultural season; however, this share declined to 63 percent in the second season. The change was driven by shifts in the West Nile region, where the share of households working on farms declined from 78 to 66 percent.
✓ The share of households who needed to sell products from their farms declined compared to the first round but, the ability to sell deteriorated mainly West Nile. This may partly be explained by the harvest season in which demand for farm product is likely to decline as many households consume their own produce.

Poverty, income and food security:

✓ Perceptions of income changes were more positive in December compared to October/November but, income levels were still far below the levels before the COVID-19 outbreak. More respondents in the second round reported that their income was either the same or higher compared to those interviewed in the first round (October/November). However, by December none of the key income sources from farming, family businesses, wage employment and humanitarian assistance reached pre-COVID levels.
✓ Compared to the round in October/November, in December, fewer households experienced the most severe forms of food insecurity such as going without eating for a whole day and not eating even when hungry.
✓ Preliminary estimates indicate that poverty among refugees declined slightly from 52 to 49 percent in the second round but remained higher than the pre-COVID-19 estimated level of 44 percent.

Social assistance:
✓ Social assistance remained at similar levels from October to December. Refugees in the South West region have received predominantly cash and non-food aid, while refugees in the West Nile region have received mostly food aid.

Access to basic needs:

✓ The share of refugee households who could not buy main staple foods remained as high as 38 percent in the second round. However, significant regional differences have occurred. Whereas access to main staple foods improved in Kampala and the South West region in December, access declined in the West Nile region. Also, in the second round, female-headed households were less likely to be able to buy their main staple food compared to male-headed households.

✓ There was an increase in the share of households who could not access medical treatment when needed in the second round (25 percent) compared to the first round (20 percent). This was mainly driven by a substantial deterioration in access in the West Nile region where the lack of medicine in health facilities and the lack of money were the main reasons for inability to access medical treatment.

✓ There was an improvement in children’s participation in education and learning activities in round 2. In about 70 percent of households with household members attending school before closures in March, at least one member was engaged in any education or learning activities in round 2. This was 12 percentage points higher than in round 1 (58 percent).

✓ The increased participation in learning activities in the second round, however, was accompanied by a growing share of households whose members participated solely in the activities with the lowest learning potential, such as studying alone, doing homework provided by parents, and/or studying agriculture (rising to 28 percent in round 2 from 21 percent in round 1).

Knowledge and behavior:

✓ Refugees almost universally agreed that using masks in public can reduce the risk of contracting coronavirus. Better educated and male respondents demonstrated stronger agreement.

✓ More than 90 percent of refugees would agree to be vaccinated if approved vaccines were available now at no costs. Acceptance rates were the highest among refugees in the West Nile region (95 percent), followed by the South West region (86 percent) and Kampala (82 percent). Agreement with getting vaccinated was the lowest among non-Somali refugees in Kampala (77 percent).

✓ There was a significant reduction in avoiding handshakes and groups of more than ten people in the second round compared to the first one. However, self-reported wearing of masks in public all or most of the time increased to almost 100 percent.

Socio-economic shocks, coping strategies and social assistance:

✓ Every refugee household suffered at least one socioeconomic shock during the month preceding the interview in round 2, with increases in the prices of commonly consumed items being the most common shock.

✓ Reducing consumption, receiving assistance from NGOs, and engaging in additional income generating activities (IGAs) were the most common strategies used to cope with socioeconomic shocks.

✓ About 50 percent of refugee households had to borrow money to cope with the COVID-19 emergency. Acquaintances such as neighbors and friends were the main sources of lending, in
particular in Kampala, but savings groups and loan associations played an important role in the West Nile and South West regions.

✓ The two most frequent reasons to borrow money were buying food (67 percent of households) and paying for health expenses (35 percent), with some important regional variations. In all regions, buying food was the most frequent reason to borrow money. In Kampala, 88 percent of refugee households borrowed money to buy food. Paying for health expenses was important in the South West region where 45 percent of refugees borrowed money for this reason. In Kampala, paying rent was also an important reason to borrow money (41 percent).

Concerns, intentions to return and interactions with hosts

✓ There was a slight decline in the share of respondents who perceived the COVID-19 pandemic as a substantial financial threat for their household between the first and second rounds: from 73 to 69 percent respectively.
✓ About 13 percent of respondents reported to know someone who has or had COVID-19. About 5 percent of refugees believed that they had COVID-19 themselves. This share was the highest among Somali refugees in Kampala (15 percent). Compared to those without formal education, refugees who completed secondary school and above, reported more often that they knew someone who is or was infected.
✓ About 37 percent of refugees wished to return to their country of origin. About 7 percent wished to move from Uganda to another country. Compared to refugees from other countries, South Sudanese refugees in the West Nile region were the most likely to report that they wish to return to their country of origin (61 percent).
✓ While nearly 8 in 10 refugees did not know when they would leave Uganda. 40 percent of refugees in Kampala intended to leave in one month.
✓ Among those who did not want to return, safety in terms of conflict and violence was the main condition that would make them return to their country of origin. About 46 percent of refugees indicated that they would never return to their country of origin.
✓ COVID-19 lowered the interaction between refugees and Ugandans with 42 percent of refugee households reporting less frequent interactions with their host community members since the COVID-19 outbreak.
✓ Radio and NGOs were mentioned as the most trusted sources of information about COVID-19 with some variations across regions and strata. Thus, refugees in Kampala trusted more to TV and friends and neighbors than radio and NGOs. Almost 55 percent of Somali refugees in the South West mentioned short message service as most trusted source.
A. Background

1. The High-Frequency Phone Survey for refugees in Uganda (URHFPS) tracks the socioeconomic impacts of the COVID-19 crisis on refugees. The World Bank (WB) in collaboration with the Uganda Bureau of Statistics (UBOS) and the United Nations High Commissioner for Refugees (UNHCR) launched and conducted the URHFPS. The URHFPS tracks the impacts of the pandemic on a monthly basis for a period of three months. Data collection for the first round of the URHFPS took place between October 22 – November 25, 2020. Data collection for the second round of the URHFPS took place between December 5-24, 2020. This brief discusses results from the second round of the URHFPS. Where possible and appropriate, results are compared across the two rounds.\(^1\) Detailed results from the first round are available in Atamanov et al. (2021).

2. The survey sample includes respondents with active phone numbers that were selected randomly from the Profile Global Registration System (ProGres) of UNHCR, and the refugee household survey carried out by UBOS and the World Bank in 2018.\(^2\) The targeted sample for the first round included 2,100 households and was representative at seven strata constructed as a combination of regions and different countries of origin: Kampala-Somalia, Kampala-other (Burundi, DRC, South Sudan), South West-Burundi (SW-Burundi), South West-DRC (SW-DRC), South West-South Sudan (SW-South Sudan), South West-Somalia (SW-Somalia), and West Nile-South Sudan (WN-South Sudan).\(^3\) The realized sample after the first round was 2,010 households. The second round of the phone survey tried to re-contact these same households from the first round and managed to reach 1741 of them. In order to reduce the impact of attrition on the survey results, additional new households were sampled, bringing the overall realized sample to 1852 observations for the second round.\(^4\) In order to reduce the bias related to only interviewing households with phone numbers and non-response, the data from the 2018 representative refugee household survey was used to produce and calibrate the weights for both rounds of the phone survey.

B. Economic activities

a. Labor market and farm activities

3. Employment did not show signs of recovery in December compared to October/November and the national rates declined mainly due to a lower employment rate in the West Nile region. In contrast to results from the national phone survey of Ugandans (World Bank 2020), the employment rate among refugee respondents did not recover and declined even further in the second round conducted in December 2020 (Figure 1). This was partly driven by a substantial reduction in employment among refugees in the West Nile region. Such a drastic decline may be associated with the end of the second agricultural season and higher dependence of refugees on farming in the West Nile region. Respondents in the second round who reported that they were not employed currently also indicated if they had a job they expected to return to. Overall, about 12 percent of all refugee respondents were expected to return

\(^{1}\) Results from the first round in this brief may be slightly different from reported in Atamanov et al. (2021) due to correcting demographic information for two households.
\(^{2}\) World Bank (2019).
\(^{3}\) Selected country of origins accounted for about 97 percent of all refugees in Uganda in 2020.
\(^{4}\) Upcoming holidays did not allow to increase the realized sample further.
to work, of whom 47 percent plan to return to work during the next week or within the next month. This may imply that a decline in employment in the second round was temporary.

*Figure 1. Employment status of respondents by region in rounds 1 and 2, (% of all respondents)*

4. **On average, employed refugees worked about 27 hours during the week with residents in Kampala working longer hours.** On average, refugees did not report working full time during the week preceding the interview. At the national level, refugees worked an average of 27 hours per week (Figure 2). Refugees in Kampala reported working the longest average number of hours – 33 hours – which was higher than in the South West region (25 hours) and in the West Nile region (29 hours). Male respondents and those with higher education worked longer hours than female respondents and those with lower levels of education.

5. **Refugees worked fewer hours in December compared to hours worked before the lockdown in March 2020.** In the second round, respondents were asked to compare how working hours changed since March 2020 (Figure 2). Almost half of respondents reported working fewer hours. This share was significantly higher in South West (64 percent) and Kampala (55 percent) compared to West Nile (32 percent).
6. The share of refugee households with a family business has not reached pre COVID-19 levels. About 37 percent of households had a family business before March 2020, but by December this share has dropped to 27 percent (Figure 3). Considering that four percent of households reported to be temporarily out of business, and thus could reopen, six percent of households might have lost their family businesses permanently.

7. Family businesses in non-agricultural sectors were more likely to close and the least likely to launch since March 2020. Respondents were asked about having a family business before and after March 2020. Among those who had a business during this period, 39 percent lost it after March, 16 percent opened a new business after March and the remaining 45 percent continued operating a family business during the whole time before and after the lockdown. Those who had a business in a non-agriculture sector were more likely to have closed it after March (43 percent) compared to those whose family business was in agriculture (21 percent). Creation of new businesses was more likely to happen in agriculture compared to non-agriculture (Figure 4).

8. Households were slightly less likely to work in their household farm in the second agricultural season compared to the first agricultural season, mainly in the West Nile region. About 69 percent of refugee households worked in household farms in the first agricultural season and this share declined to 63 percent in the second season (Figure 5). The change was driven by shifts in the West Nile region, where the share of households working in farms declined from 78 to 66 percent across the two survey rounds. There were no significant changes across agricultural seasons in the shares of those who had to change
livestock activities because of COVID-19 (11 percent of households in both seasons). There was a decline in the share of households who had to change planting activities due to COVID-19 from 10 to 6 percent across seasons.

9. There was a decline in the share of households who needed to sell products from their farms, but their ability to sell declined mainly in West Nile. Households were asked if they needed to sell any products from their farms between January-October 2020 in the first round and since last call between October/November and December 2020 in the second round. There was a significant reduction in the need to sell products in the second round from 20 to 13 percent probably mostly driven by recall period differences. Those who needed to sell were also asked if they were able to sell the products in a week preceding the interview (Figure 6). Households mainly in West Nile were less often able to sell their products in the second round compared to the first round. At the same time, households in South West improved their selling ability in the second round.

Figure 5. Household worked on household farm in rounds 1 and 2, (% of refugee households)

Figure 6. Household who were able to sell products last week in rounds 1 and 2, (% of refugee households)

Source: URHFPS first and second rounds, authors’ calculation.

b. Changes in income since lockdown

10. Humanitarian assistance continued to be the main source of income in December, the share of households reporting earning income from business and wage employment also rose. About 94 percent of households at the national level reported that they received income from humanitarian assistance in December – higher than the share who did in October/November (Figure 7). Similarly, more households also reported earning income from family business and wages in the second round.

Figure 7. Key income sources during last 12 month across regions in rounds 1 and 2, (% of refugee households)

Source: URHFPS first and second rounds, authors’ calculation.
11. **Perceptions of income changes tend to be more positive in round 2, but income levels are still far below the pre-COVID-19 levels.** Respondents were asked how their household income had changed in the last month. More respondents in December reported that their income was either the same or higher compared to those interviewed in October/November (Figure 8). However, when current income levels were compared to the pre-March level, on average, none of the key income sources, including farming, family business, wage employment and humanitarian assistance, had fully recovered to pre-COVID levels. For example, only 25 percent of households in December reported that their family business income was higher or equal to the pre-COVID level. This share was higher for income from farming and wage employment – about 37 percent for both sources (Figure 9).

![Figure 8. Households with more or the same income levels in round 1 (since March) and round 2 (in the last month), (% of refugee households)](image)

![Figure 9. Households with more or the same level of income as before the outbreak in round 2 (% of refugee households)](image)

*Source: URHFPS first and second rounds, authors’ calculation.*

*Note: Regional results in figure 9 should be treated with caution given small sample size, in particular in West Nile.*

c. **Impact on poverty and food security**

12. **Poverty among refugees is estimated to decline slightly from 52 to 49 percent in the second round.** The URHFPS used a consumption model which was built by using the representative household survey of refugees and host communities conducted in 2018 to identify the strongest correlates of consumption. During the phone survey, information on the correlates were collected. This allowed imputing consumption in the phone survey using the Survey of Well-being via Instant and Frequent Tracking (SWIFT) methodology developed by Yoshida et al. (2015). According to the preliminary SWIFT estimation, poverty among refugees was estimated to decline from 52 percent in the first round to 49 percent in the second round. This is still higher than predicted pre-COVID-19 poverty of 44 percent.

13. **There was a slight improvement with regards to the most severe forms of food insecurity in the second round.** Respondents were asked about their food security situation among adults in the household during the 30 days prior to the day of the interview. There were fewer households in December who experienced the most severe forms of food insecurity such as going without eating for a whole day and not eating even when hungry, compared to October/November (Figure 10).
For one of the food security indicators - “ran out of food” which was comparable to the 2018 refugee survey, the situation improved substantially in the second round but, was worse than what was reported in 2018. Refugees in Kampala had the worst situation on all three most severe forms of food insecurity. Female headed households were significantly more likely to experience the situation in which adults in the household went without eating for a whole day.

**Figure 10. Food security during last 30 days in the household in rounds 1 and 2, (% of refugee households)**

Source: URHFPS first and second rounds, authors’ calculation.

**d. Social assistance**

14. There were no substantial changes in the incidence of social assistance across rounds, with the only exception being in-kind (non-food) transfers, which fewer households reported to receive in the second round. There were fewer households receiving in-kind transfers in the second round which was probably related to different recall periods in the two rounds (Figure 11). Refugees in the first round were asked about social assistance between March and October/November, while in the second-round the recall period covered the month preceding the interview which was conducted in December. Refugees in the South West region reported getting predominantly cash and non-food aid, while refugees in the West Nile region reported getting mostly food aid (Figure 12). As a result of these regional differences in the type of aid, female-headed households (widespread among refugees in the West Nile region) were more likely to get food aid compared to male-headed households.

**Figure 11. Types of social assistance in rounds 1 and 2, (% of refugee households)**

Source: URHFPS first and second rounds, authors’ calculation.

**Figure 12. Types of social assistance in rounds 1 and 2 across regions, (% of refugee households)**

Source: URHFPS first and second rounds, authors’ calculation.
C. Knowledge and behavior

15. Refugees universally agreed that using masks in public can reduce the risk of contracting coronavirus. About 58 percent of refugees strongly agreed and 38 percent agreed that the use of masks in public can reduce the risks of contracting COVID-19. Refugees with higher education and males were more likely to strongly believe in the usefulness of masks.

16. An absolute majority of refugees agreed to be vaccinated, with the highest acceptance rate in the West Nile region. Refugees were asked whether they would agree to be vaccinated if an approved vaccine to prevent coronavirus was available right away at no cost. About 95 percent of refugees in the West Nile region, 86 percent in the South West region and 82 percent in Kampala said they would agree (Figure 13). Acceptance was the lowest among non-Somali refugees in Kampala – only 76 percent who said they would agree. Among those who do not want to be vaccinated, an absolute majority mentioned safety concerns as the main reason not to be vaccinated. Those with the highest level of education also worried that vaccines would not work.

Figure 13: Acceptance to be vaccinated if approved vaccine to prevent coronavirus was available right now at no cost in round 2, (% of refugee respondents)

Source: URHFPS second round, authors’ calculation.
Note: Numbers may not add up to 100 percent due to rounding.

In the second round, there was a significant reduction in the prevalence of self-reported safe practices such as avoiding handshakes and avoiding groups of more than ten people, although mask wearing increased. Even though the absolute majority of refugees reported more frequent handwashing with soap in the week preceding the interview in December, fewer refugees reported avoiding handshakes or physical greetings and avoiding groups of more than ten people in the second round (Figure 14). This decline was expected given that the recall period for both questions covered strict lockdown measures in the first round, whereas containment measures had been eased by the second round. At the same time, the incidence of wearing masks in public a week preceding the
The observed decline in selected safe practices among refugees is consistent to what was observed among Ugandans as well (World Bank 2020). The share of Ugandan respondents who avoided groups of more than 10 people declined from 91 percent in June to 61 percent in September/October. The share of those who avoided handshakes declined as well in the same period from almost 100 to 81 percent.

D. Access to food, health, and education

17. Access to staple foods continued to be the most challenging goods and services to access, with declining access in the West Nile region and among female headed households. Refugees were asked whether they managed to access selected basic goods and services in the week preceding the interview. As in the first round conducted in October/November, almost 40 percent of households reported being unable to buy main staple foods in December 2020 (Figure 15). Despite no change at the national level, there were changes across regions. For example, the ability to buy food improved in Kampala and the South West region but deteriorated in the West Nile region. Female headed households reported lower access to main staple food compared to male headed households in the second round (Figure 16).

Figure 15: No access to selected basic goods and services when needed last week in rounds 1 and 2, (% of refugee households)

Figure 16: Access to main staple food when needed by regions and head of household gender in round 2, (% of refugee households)

Source: URHFPS first and second rounds, authors’ calculation.

Source: URHFPS second round, authors’ calculation.

Such a high prevalence of masks wearing in public can be overstated and additional indirect question will be asked in round 3 to triangulate the findings.
18. The lack of access to medical treatment increased between rounds, mainly driven by worsening access rates in the West Nile region. There was an increase in the share of households who could not access medical treatment when needed from about 20 percent in the first round (between March to October/November) to 25 percent (in the month preceding interview) the second round in December (Figure 17). This was mainly driven by substantial deterioration in access in the West Nile region. Among those who were not able to access medical treatment, more than 50 percent mentioned lack of money as the main reason and 26 percent mentioned lack of medicine in health facilities. Lack of medicine was a particular issue in the West Nile (36 percent), while in Kampala a lack of money was the main reason for an absolute majority of households (90 percent).

19. There was a substantial increase in the share of households with members participating in education/learning activities in round 2. Before the lockdown, 81 percent of households (according to the first round) had at least one member attending school. After the lockdown, between March and October/November, only 58 percent of these households had at least one member engaged in learning activities (Figure 18). In the month preceding the interview in December though, this share increased to 70 percent. Improvements were observed in all regions. At the individual level, 69 percent of those who attended school before March were participating in education or learning activities in the second round. The average individual participation rate was lowest in Kampala (49 percent), followed by the South West region (57 percent) and the West Nile region (75 percent). No significant gender differences were observed.

20. Increased participation in learning activities was, however, accompanied by a higher share of members participating in the activities with the lowest learning potential. Respondents were asked about the types of education or learning activities the members in their household had been engaged in over the last week. In the first round, about 21 percent of households had members engaged solely in one or a combination of the three activities with lowest learning potential: studying alone, doing homework provided by parents, and/or studying agriculture. In the second round, the national average increased to about 28 percent of households, mainly due to the significant rise in the West Nile region (Figure 19).
Figure 18: Participation in any education or learning activities after schools’ closure in round 1 (since March) and round 2 (last 7 days), (% of refugee households with any member attending school before March 2020)

Figure 19: Engaged only in activities with low learning potential such as studying alone, doing homework provided by parents, or/and studying agriculture (% of refugee households with any member engaged in learning activities)

Source: URHFPs first and second rounds, authors’ calculation.
E. Coping strategies to socioeconomic shocks

21. Every refugee household suffered at least one socioeconomic shock during the month preceding the interview in December, with variations by region. Households in Kampala were more likely to have experienced only one shock compared to those in the South West and West Nile regions (Figure 20). Price increases of the most highly consumed items was the most common shock, followed by: illness, injury or death of an income earning household member; disruption of farming, livestock and fishing activities; job loss, and non-farm business closure (Figure 21). While the number of shocks experienced in round 2 (December) decreased compared to round 1 (October/November), this may be due to differences in the recall periods. In round 1, participants reported shocks faced since March 2020 (a seven-month period), while in round 2, participants reported shocks faced in the preceding month.

![Figure 20: Number of shocks in last month in round 2, (% of refugee households)](image)

Source: URHFPS second round, authors’ calculation.

![Figure 21: Types of shocks in round 2, (% of refugee households)](image)

Source: URHFPS second round, authors’ calculation.

22. Reducing food consumption, receiving humanitarian assistance, and engaging in additional income generating activities (IGAs) were the most common strategies used to cope with socioeconomic shocks. Such strategies were also those most used in round 1 (October/November). Notably, refugee households in Kampala were the least likely to have received assistance compared to households in other regions (Figure 22). Engagement in additional IGAs was the most common in West Nile while receiving humanitarian assistance was more frequent in the South West.

![Figure 22: Selected strategies to cope with socioeconomic shocks in round 2, (% of refugee households)](image)

Source: URHFPS second round, authors’ calculation.
23. About 50 percent of refugee households had to borrow money to face the COVID-19 emergency and acquaintances such as neighbors and friends were the main sources, particularly in Kampala. About 66 percent of refugee households borrowed money in the South West region compared to 53 percent in Kampala and 38 percent in the West Nile region (Figure 23). The main sources were neighbors, friends and non-household members, Village Savings and Loan Associations (VLSAs) and saving groups (Figure 24).

24. Buying food was the main purpose for borrowing, but payment for medical expenses and rent were also significant in some regions. The main purpose for borrowing money for most households was to buy food (at a high of 88 percent in Kampala), followed by the payment of medical expenses (most significant in the South West region at 45 percent) and to pay rent (also highest in Kampala at 41 percent) (Figure 25). Possibly, the incidence of borrowing money to buy food may be lower in the West Nile region as households in that region reported to receive food rations more often than those in other regions or because of more prevalent agriculture activities.

Figure 23: Incidence of borrowing money to face the COVID-19 emergency since March 2020, (% of households)

Figure 24: Main sources of borrowed money, (% of households)

Source: URHFPS second round, authors’ calculation.

Figure 25: Main purposes for borrowing money in round 2 by regions, (% of households)

Source: URHFPS second round, authors’ calculation.
F. Concerns, intentions to return and interactions with hosts

25. In October/November 2020 most households reported that they perceived the COVID-19 pandemic as a substantial financial threat to their household and this perception continued in December 2020, albeit to a slightly lower degree. While the perceived substantial financial threat of the outbreak was maintained across rounds, a slight decline can be noticed. The share of households that perceived the outbreak as a moderate threat increased in round 2 (December), compared to round 1 (October/November). Compared to the West Nile region, more households in Kampala and the South West region considered the outbreak to be a substantial threat to their finances (Figure 26).

*Figure 26: Degree of threat from coronavirus pandemic to household’s finances, (% of refugee households)*

Source: URHFPS first and second rounds, authors’ calculation.

26. More educated refugees and South Sudanese refugees in the South West region more commonly reported knowing someone who is or was infected with COVID-19.

About 13 percent of respondents reported to know someone who has or had COVID-19. About five percent of refugees believed that they themselves had caught COVID-19 at some point. Compared to those with no formal education, refugees who completed secondary school and above reported more often that they knew someone who is or was infected (Figure 27). Compared to other strata, Somali households in Kampala were more likely to believe that they have had COVID-19, followed by Somalis in Kampala. Furthermore, knowing someone who is or was infected was more often reported among South Sudanese refugees in the South West region.

*Figure 27: Beliefs about having had COVID-19 and knowing someone who is or was infected in round 2, (% of respondents)*

Source: URHFPS second round, authors’ calculation.
27. Perceived insecurity at home did not change much in round 2 (December) compared to round 1 (October/November). Perceived safety at home since the outbreak, as reported in October/November and in December 2020, was generally high with 54 and 55 percent of respondents reporting that they always felt safe at home in each round respectively. Perceived safety was the lowest among refugees in the South West region. Interestingly, South Sudanese and Somali respondents were the most likely to report always feeling safe at home in both rounds.

28. Nearly 4 in 10 refugees wished to return to their home but most were not sure when they would leave Uganda. Refugees were asked if they intended to return to their home or country of origin. About 45 percent wished to return either home or to a different country. South Sudanese refugees in the West Nile region had the highest intent to return home – 61 percent (Figure 28). This finding is in line with UNHCR’s research on South Sudanese refugees’ intentions to return. Most refugees in the South West region, Somalis in particular, did not want to leave Uganda while most of those who wanted to leave, would go to a different country than country of origin. In Kampala, a similar pattern was observed, and it seems to be driven by Somalis. However, the share of refugees in Kampala who wish to go to a different country is more than double that of refugees who would go back to their country of origin. As refugees in Kampala tend to be richer than those in other regions, such a difference in intentions to go to a different country may be partly explained by larger socioeconomic resources and social networks among refugees in Kampala compared to those in other regions. While nearly 8 in 10 refugees at the national level did not know when they would leave Uganda, 40 percent of refugees in Kampala intended to leave in one month (Figure 29).

Figure 28: Intentions to leave Uganda in round 2, (% of respondents)

Source: URHFPS second round, authors’ calculation.
29. Lack of conflict and violence was the main condition to make refugees want to return to their home country. Refugees who did not want to return to their home country were asked what would make them want to return home or to their country of origin. About 45 percent of refugees said that they would return if their home was safe from conflict and violence (Figure 30). Secondary reasons such as availability of livelihoods opportunities in their country of origin and food security were not as important. However, there was a strikingly high share of refugees who did not want to return back home for any reason – 46 percent. This group was more pronounced in the West Nile and South West regions and in particular among South Sudanese refugees in the South West region.

30. Only about 55 percent of refugee households interacted with Ugandans in the week preceding the second-round interview, with the COVID-19 outbreak making interactions less frequent. Households with more educated respondents tended to interact more often than those with no formal education (Figure 31). The outbreak impacted the frequency of interaction between refugees and hosts especially in Kampala, where in 51 percent of households, refugees reported that they interact less often with Ugandans than before the outbreak. Even though more educated refugees interact more often with Ugandans than those with no formal education, they reported less interaction with hosts than before the outbreak. Therefore, the COVID-19 outbreak and restrictive measures to curb the spread of the virus might have important negative implications on social cohesion and integration efforts, at least temporarily.

31. Radio and NGOs were mentioned as the most trusted sources of information about COVID-19 with variations across regions and level of education. Almost half of refugee respondents viewed radio as the most trusted source of information about COVID-19. NGOs were on the second place (15 percent).
Among refugees in Kampala though the most trusted sources were quite different. About 28 percent selected TV followed by 20 percent trusting friends and neighbors and 18 percent trusting social media such as Facebook, Twitter and so forth. The trusted source differed among refugee with different level of education. Refugees without formal education were more likely to mention friends and neighbors as most trusted source of information (13 percent), while refugees with completed secondary education and above were more likely to mention social media (13 percent) and TV (10 percent). Interestingly that almost 55 percent of Somali refugees in the South West mentioned short message service as most trusted source.

*Figure 33: Most trusted source of information about COVID-19, (% of respondents)*

*Source: URHFPS first and second rounds, authors’ calculation.*
G. Bibliography


H. Annex

a. Sampling

The Profile Global Registration System (ProGres) served as a sample frame for the URHFPS. It was complemented by the data collected for the refugee household survey carried out by UBOS and the World Bank in 2018. The sample was selected from the pool of refugees with phone numbers. The targeted sample included 2,100 observations: 300 observations in each stratum. Four countries of origin were targeted in the survey: Burundi, Democratic Republic of Congo (DRC), Somalia and South Sudan. The combination of country of origin and region were used to create seven strata: Kampala-Somalia, Kampala-other (Burundi, DRC, South Sudan), South West-Burundi, South West-DRC, South West-South Sudan, South West-Somalia, and West Nile-South Sudan.

The realized sample of data collection was 2,010 households in the first round and 1,852 households in the second round. The number of observations in the two rounds and population shares across strata are shown in Table H-1.

Given that the refugee population with phone numbers may be fundamentally different from the population without phone numbers (e.g. more educated, affluent, living in urban areas and so forth), and also due to the issue of non-response, respondents in the phone survey may not be representative of the overall refugee population in Uganda. In order to reduce the potential bias and make results nationally representative, we developed a weighting procedure by producing weights using a reference nationally representative survey and calibrating obtained weights to make the phone survey nationally representative and resemble the distribution for the key variables of those from the reference survey. The refugee survey from 2018 was used as a reference in creating weights for the phone survey, while post-stratification was conducted to preserve to the extent possible regional population shares from the ProGres dataset as of November 2020.

<table>
<thead>
<tr>
<th>Strata</th>
<th>Round 1</th>
<th>Round 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>number of observations</td>
<td>Population weighted share</td>
</tr>
<tr>
<td>Kampala (Burundi, DRC, South Sudan)</td>
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<td>3</td>
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<tr>
<td>Kampala-Somalia</td>
<td>340</td>
<td>2</td>
</tr>
<tr>
<td>SW-Burundi</td>
<td>284</td>
<td>3</td>
</tr>
<tr>
<td>SW-DRC</td>
<td>299</td>
<td>26</td>
</tr>
<tr>
<td>SW-South Sudan</td>
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<td>5</td>
</tr>
<tr>
<td>West Nile-South Sudan</td>
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<td>58</td>
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<tr>
<td>SW-Somalia</td>
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<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>2,010</td>
<td>100</td>
</tr>
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Source: URHFPS first and second rounds, authors’ calculation.
### Table H-2. Characteristics of respondents and households in the second round

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<th>Demographics</th>
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<th>Kampala</th>
<th>South West</th>
<th>West Nile</th>
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<td>5.3</td>
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<tr>
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<td>2.2</td>
<td>2.8</td>
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<td>Dependency ratio, %</td>
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<tr>
<td>Age of respondent</td>
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<td>Male respondent, %</td>
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<td>42</td>
<td>59</td>
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<tr>
<td>Male head, %</td>
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<td>65</td>
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<tr>
<td>Education of respondent</td>
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<tr>
<td>Complete primary and below, %</td>
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<td>38</td>
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<tr>
<td>Some secondary, %</td>
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<td>22</td>
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<td>Completed secondary &amp; +, %</td>
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<td>8</td>
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</tbody>
</table>

*Source: URHFPS second round, authors’ calculation.*

*Note: All estimates are household weighted.*