

 56 assessed sites

 47,061 IDP households

 195,250 IDPs



Focus Group Discussion with IDPs in EPC Negomano in Mueda district during MSLA Round 5 assessment

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EXECUTIVE SUMMARY

This Multi-Sectorial Location Assessment (MSLA) report, which presents findings from the International Organization for Migration's (IOM) Displacement Tracking Matrix (DTM) Round 5 assessments, aims to enhance understanding of the extent of internal displacements and the needs of affected populations in conflict-affected districts of Northern Mozambique. The report covers the period from 18 to 31 August 2021 and presents trends from 56 assessed sites hosting internally displaced persons across nine districts in Cabo Delgado, 2 sites in Niassa, and 1 site in Nampula.

In total, 195,250 internally displaced persons (IDPs) (an increase of 31% since the previous round, mainly due to coverage expanding from 45 to 56 sites) or 47,061 households were mapped living in sites assessed during this MSLA. Reported figures, however, exclude displaced individuals living in host community settings. According to DTM Round 13 Baseline, as of September 2021 an estimated 602,404 IDPs were identified in living in both host communities and sites, in Cabo Delgado.

Sites under assessment in this report included relocation sites, temporary sites or transit centers, and host community extensions as classified by the Camp Coordination Camp Management (CCCM) cluster. Relocation sites are planned by local authorities and sometimes with CCCM partners with certain minimum criteria for households (e.g. minimum space per family). Temporary sites are locations with pre-existing infrastructure, like schools, that have been re-purposed in this period of crisis. Given the active and fluid nature of displacement trends in Northern Mozambique, it is important to note that the number of sites or locations with displaced IDPs exceeds the number of sites assessed for this round.

The MSLA included an analysis of sector-wide needs, including shelter and non-food items (NFIs), water, sanitation and hygiene (WASH), food and nutrition, health, education, livelihoods, protection, community engagement and energy.

This report pays special attention to the dynamics of forced displacement into sites in the provinces of Cabo Delgado, Nampula, and Niassa which has been hit the hardest by the conflict in Northern Mozambique.

METHODOLOGY

IOM's Displacement Tracking Matrix (DTM) is the leading humanitarian data provider to support response planning. Information on conditions and needs of affected communities and displacement trends as well as in-depth thematic assessments are of key importance in addressing current Humanitarian Response Plan (HRP) indicators and identifying priorities for the different sectoral responses.

The Multi-Sectoral Location Assessment (MSLA) captures detailed information on the internally displaced persons (IDPs) in sites, including demographic information, place of origin, age and sex breakdown, vulnerabilities, and detailed sectoral needs (shelter and NFI, WASH, food, nutrition, health, education, livelihoods, communication, protection, and energy). Information is collected through direct interviews with Key Informants (KI) and local representatives, through direct observations, as well as through Focus Group Discussions.

COVID-19 preparedness measures were also captured in this assessment.

OVERVIEW: Cabo Delgado, Nampula and Niassa

From 17 to 31 August 2021, in close coordination with the provincial government of Cabo Delgado, the International Organization for Migration (IOM)'s Displacement Tracking Matrix (DTM) teams conducted Multi-Sectoral Location Assessments (MSLA) in 53 sites hosting 195,250 internally displaced persons (IDPs) in Cabo Delgado province, 1 site with 4,910 IDPs in Nampula province, and 2 sites with 340 IDPs in Niassa province, in response to the mass displacements caused by the insecurity situation in the north. In all sites, the majority of IDPs were displaced by the insecurity situation.

Of the total 195,250 individuals in the assessed sites, 54,670 (or 28%) are women, 39,050 (20%) are men, and 101,534 (52%) are children. Demographic data in Figures 2 and 3 is a sample collected through random sampling of twenty households per site.

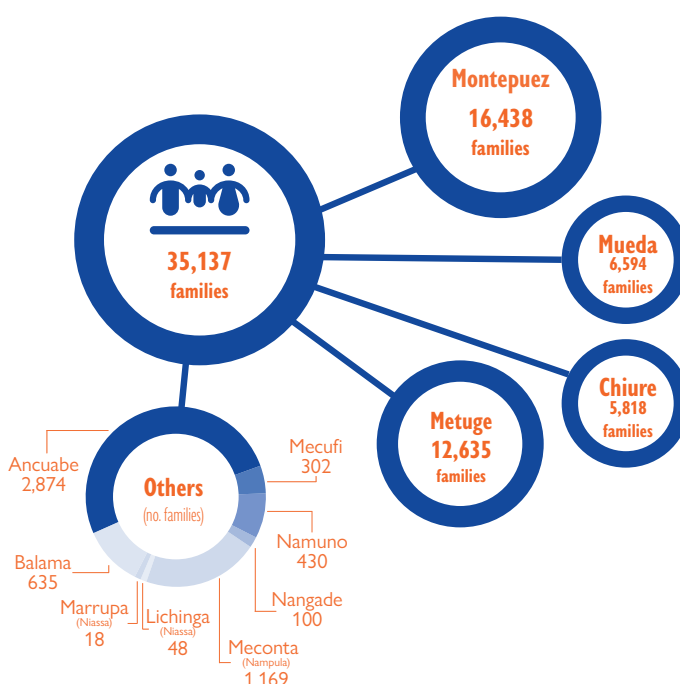


Figure 1: IDP households per district in Cabo Delgado, Nampula and Niassa

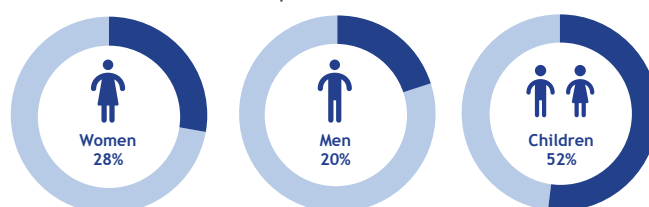


Figure 2: Proportion of adult female, adult male, and child IDPs

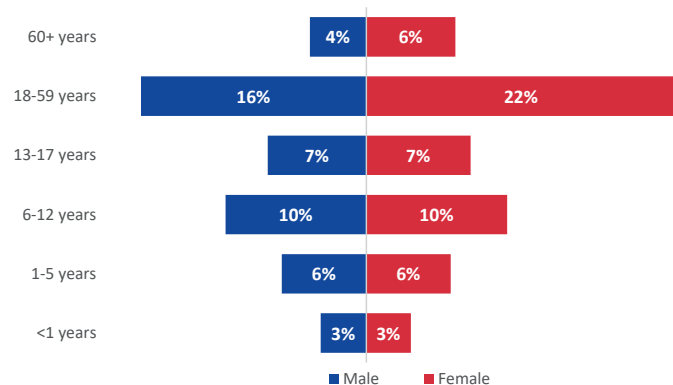
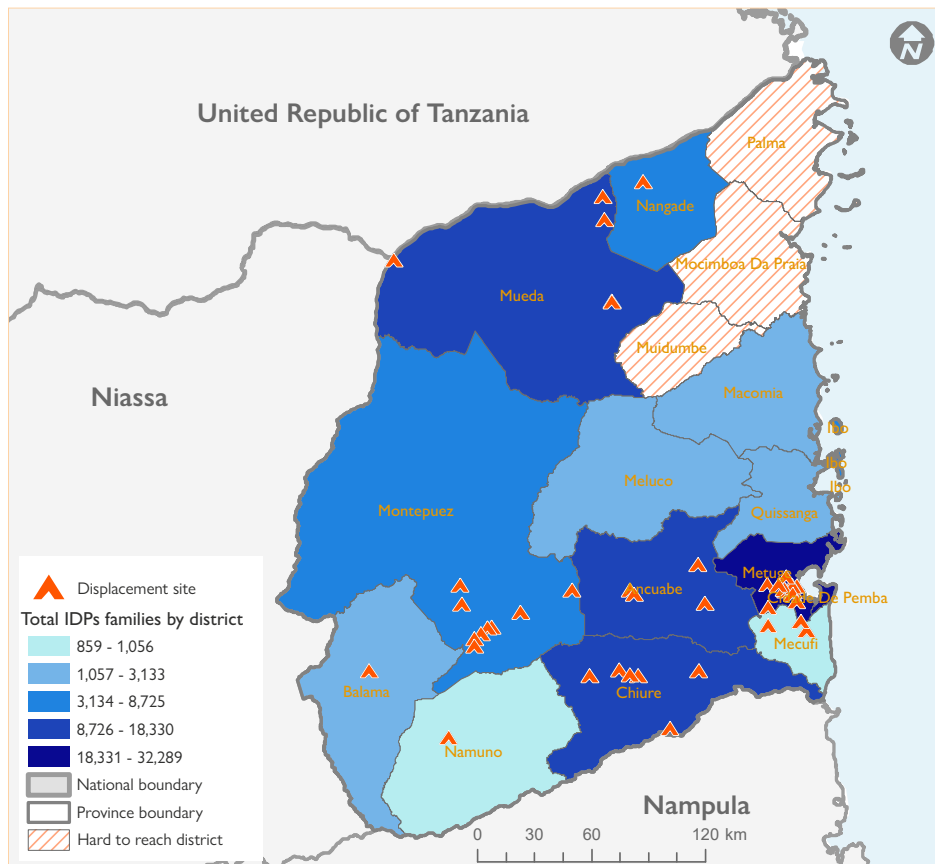


Figure 3: Sex and age demographics of IDPs in Cabo Delgado and Nampula

Based on demographic data, gathered through a random sampling of IDPs in the sites, 54% of IDPs are female and 46% are male. According to the sampling, 52% of the IDP population is under 18 years of age. There are an estimated 11,030 infants (under 1 year of age) in the IDP population, and 23,666 children aged 1 to 5 years old - for full demographic breakdown consult the [MSLA 5 dataset](#).

Demographic data for Round 5 is summarized in the table below, with a breakdown of vulnerable groups by district.

District	No. IDPs	No. HH	Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Unaccompanied Minors	Elderly without carers	Child-headed households	Elderly-headed households
Ancuabe	12,310	2,874	125	0	67	14	37	63	0	0
Balama	2,481	635	20	61	31	48	108	10	19	61
Chiure	31,488	5,818	0	0	44	0	3	0	0	0
Mecufi	1,274	302	5	50	4	0	2	0	0	0
Metuge	48,626	12,635	291	267	314	41	0	2	2	87
Montepuez	66,708	16,438	222	553	42	0	20	61	8	11
Mueda	24,654	6,594	81	249	29	0	26	43	47	4
Namuno	2,060	430	15	45	2	15	0	0	0	6
Nangade	399	100	4	23	2	0	6	3	2	6
Meconta (Nampula)	4,910	1,169	38	0	19	0	0	0	0	24
Lichinga (Niassa)	267	48	2	14	4	0	0	4	0	0
Marrupa (Niassa)	73	18	0	7	0	0	0	0	0	5
Grand Total	195,250	47,061	803	1,269	558	118	202	186	78	244



190,000 IDPs
 45,826 IDP households
 53 assessed sites

Fifty-three sites were assessed in Cabo Delgado province. Twelve per cent of the total site IDP population resides in Centro de Netele, eight per cent in Centro de Nacaca and seven per cent in EPC 25 de Junho. Thirty-one are relocation sites, 21 are temporary sites, and one is a host community extension. Three sites reported limited physical accessibility - Naschitenje, EPC Namatil, and EPC Negomano. Forty-six sites are at risk of becoming inaccessible in the event of a natural disaster. All sites are reported as safe and secure for humanitarian partners.

Demographics

In Cabo Delgado, the IDP demographics are as follows: 20% adult males (38,628 individuals), 28% adult females (52,959), 52% children (98,413). There are an estimated 11,030 infant children (under one year old), and 23,666 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Unaccompanied Minors	Elderly with-out carers	Child-headed households	Elderly-headed households
763	1,248	535	118	202	182	78	215

Mobility

The insecurity situation was the main cause of displacement of IDPs in all of the 53 sites assessed (in Centro de Ngunga, natural disasters and insecurity were reporting as displacement drivers). In 60 per cent of sites, the majority of the IDP population arrived more than six months ago, 15 per cent between three and six months ago, and 17 per cent between one and three months ago. In the past month, four new sites have been opened. In 75 per cent of sites, it is reported that the sheltered population is increasing.

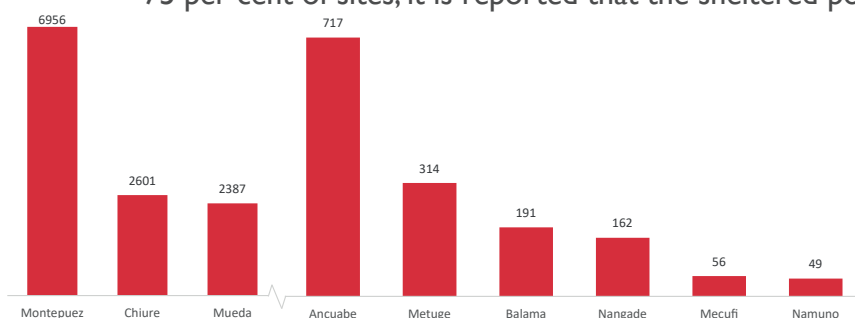
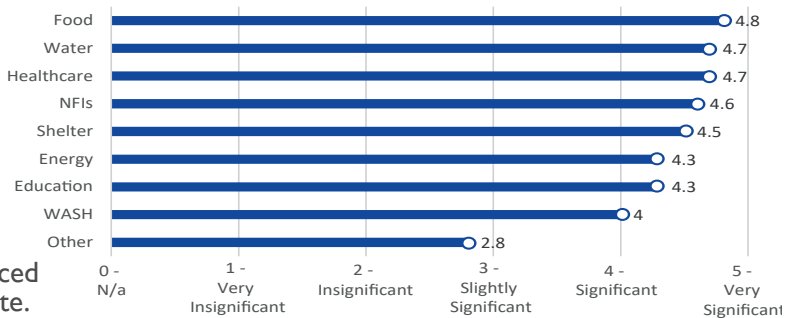
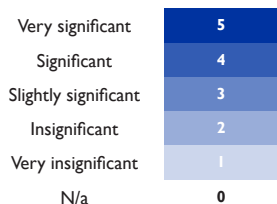


Figure 4: Number of arrivals in last month per district (discontinuity of scale of y-axis between Ancuabe and Mueda for ease of reading)

Sites reported 13,433 arrivals in the past month. Fifty-two per cent of the recorded arrivals were in Montepuez, 19 per cent in Chiure, and 18 per cent in Mueda. The largest individual influx was in Massasse in Montepuez, with 3,900 arrivals.



Priority Needs



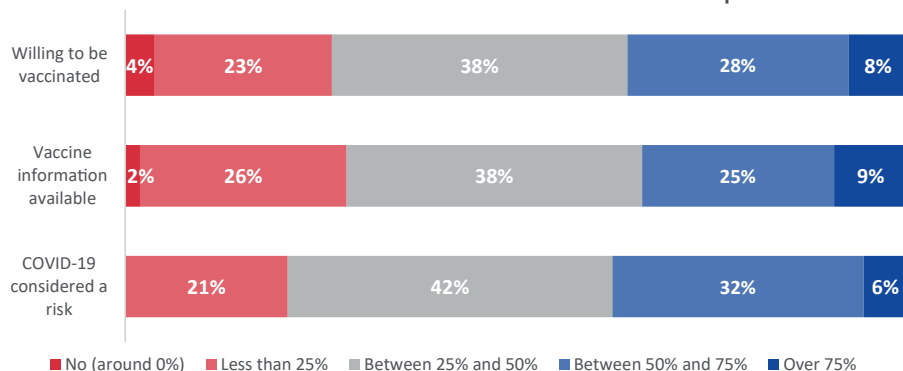
The graph shows the relative needs of the displaced populations, and the table shows the needs of each site.

District	Site Name	Food	Water	Shelter	NFIs	Healthcare	Education	WASH	Energy	Other
Ancuabe	Ngeue	5	5	5	5	5	5	5	5	5
	Nankumi	5	5	5	5	5	1	3	5	5
	Nanjua B	5	5	5	5	5	3	2	5	5
	Nanjua A	5	5	5	5	5	3	3	5	5
	Nacussa B	5	5	5	5	5	5	5	5	5
	Natove	5	5	4	4	5	5	2	5	5
Balama	Bairro de Angalia	3	3	3	4	4	4	4	0	4
	Bairro de Impire	3	2	3	4	4	4	4	0	4
Chiure	Chiote	5	5	5	4	5	3	2	5	5
	Marrupa	3	3	3	3	5	3	3	5	5
	Meculani	3	5	3	5	5	3	3	5	5
	Chiure Velho	5	5	4	5	5	4	5	5	5
	Ocu sede	4	5	5	5	5	5	3	5	5
	Katapua	5	5	4	5	5	3	3	5	5
	Maningane	5	5	5	5	5	5	5	5	5
	Megaruma	5	5	5	5	5	5	5	5	5
Mecufi	Centro 3 de Fevereiro	4	5	5	5	5	5	3	5	5
Metuge	Ngalane	5	5	5	5	4	4	4	3	0
	Nicavaco	5	5	5	5	3	4	4	3	0
	Impire Cahora bassa	5	4	5	5	4	3	3	3	0
	Nacobo	5	4	5	5	5	5	4	4	0
	Naminawe	5	5	5	5	4	4	3	3	0
	EPC 25 de Junho	5	5	5	5	5	4	3	3	0
	Centro de Pulo	5	4	5	5	4	4	4	4	0
	Unidade	5	5	5	5	5	5	4	4	0
	Centro Agrario de Namuapala	5	5	5	5	5	5	5	5	5
	Centro de Ngunga	5	5	5	5	5	4	3	4	0
	Ntocota	5	5	5	5	4	4	3	4	0
	Tratará	5	5	5	5	5	5	5	5	0
	Centro de Bandar	5	5	5	5	5	5	5	5	0
	EPC de Manono	5	5	5	5	5	5	5	5	0
	Saul	5	5	5	5	5	5	5	5	0
	Cuaia	5	5	5	5	5	5	5	5	0
Nangua 2	5	5	5	5	4	5	4	4	0	
Nangua 1	5	5	5	5	5	5	5	5	0	
Montepuez	Bairro de upajo	5	5	2	4	5	4	5	4	4
	Centro de Piloto Mapapulo	5	4	4	4	4	4	1	4	4
	Centro de Ntele Mapapulo	5	5	4	4	4	4	5	5	4
	Massasse	5	5	5	5	5	4	4	5	4
	Centro de Ncambona	5	5	4	5	4	4	5	4	5
	Bairro de Marcune	5	5	4	4	4	4	5	4	5
	Centro de Mararange	5	5	4	4	5	5	5	4	5
	Centro de Nanhupo B	5	5	3	4	5	5	5	5	4
	Centro de Mirate	5	4	4	4	5	5	4	4	4
	Ujama	5	4	4	4	5	5	5	4	4
Centro de Nacaca	5	3	3	4	2	4	4	4	4	
Mueda	EPC Namatil	5	5	5	4	5	4	4	5	0
	Naschitenje	5	5	5	4	5	4	4	4	0
	EPC Negomano	5	5	5	4	5	5	4	5	0
	Eduardo Mondalane	5	5	4	4	5	5	4	4	0
Lyanda	5	5	5	4	5	5	5	4	0	
Namuno	Nomeitel	5	5	5	5	5	5	4	5	5
Nangade	Centro de Reassentamento	5	5	5	4	5	4	4	5	4



COVID-19 Preparedness

In 15 per cent of sites there are no precautionary measures against the spread of COVID-19, while in 74 per cent of sites IDPs wear masks. In 40 per cent of sites, most IDPs wear face masks in public spaces, while in 53 per cent only some IDPs do, and in 6 per cent no one does. In 62 per cent of sites, IDPs sometimes wash their hands, while in 28 per cent they almost never do. In 81 per cent of sites, masks haven't been distributed. In 75 per cent of sites, functional hand washing stations with soap are not available. In 75 per cent of sites, information, education, or communication materials related to COVID-19 are not available. Awareness sessions have been held in 68 per cent of sites in the last month in Cabo Delgado.



The graph to the left presents various vaccination and COVID-19 related indicators. In 28 per cent of sites, most IDPs (between 50% and 75% of the population) are willing to be vaccinated, in 23 per cent of sites most IDPs have information on vaccines available to them, and in 32 per cent of sites most IDPs consider COVID-19 as a personal health risk.



Shelter

Throughout Cabo Delgado, on average 13 per cent of households sleep outdoors, 36 per cent sleep in emergency shelters, and 51 per cent sleep in permanent shelters. For a breakdown of shelter conditions for each site, consult the [MSLA 5 dataset](#). In 58 per cent of sites, local building materials are available and accessible to IDPs, in 75 per cent of sites IDPs are constructing shelters. In 17 per cent of sites, shelters have leakages, and in 6 per cent shelters have flooded. In 50 per cent of sites, markets are reportedly functioning.

IDPs received shelter/NFI support in 49 per cent of sites. IDPs in 94 per cent of sites urgently need NFI/shelter support. The most needed types of support are for NFIs (76% of sites), emergency shelters (70% of sites), shelter upgrades (60%), technical support (52%), labour support (16%), and house/land support (6%). In 83 per cent of sites the majority of IDPs do not have access to flashlights. IDPs in site acquired NFIs in the following ways: brought with them when displaced (26% of sites), donated by the local community (28%), purchased at local market (36%), through aid distributions (57%). The main barriers to accessing NFIs are: lack of money (49% of sites), items are too expensive (34%), transport too expensive (21%), market not accessible (8%), markets do not sell items (6%), and market is not safe (2%).

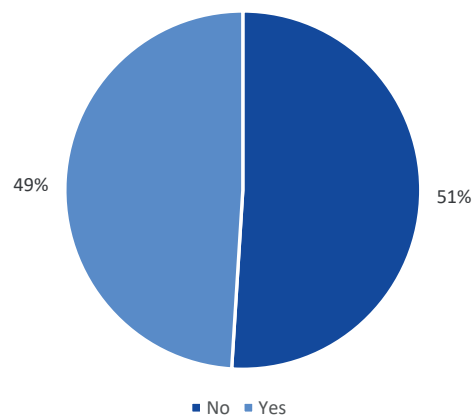


Figure 6: Percentage of sites where IDPs received shelter/NFI support

Information on NFI needs was gathered using Likert scales. The graph beside shows the relative needs of the displaced populations, averaged across all the sites in Cabo Delgado. Option "5 - Very Significant" represents the highest need level. Most needs apart from Lighting, Plastic Sheets, and Cooking fuel are between 4 - Significant, and 5 - very significant. For a site specific breakdown, consult the [MSLA 5 dataset](#).

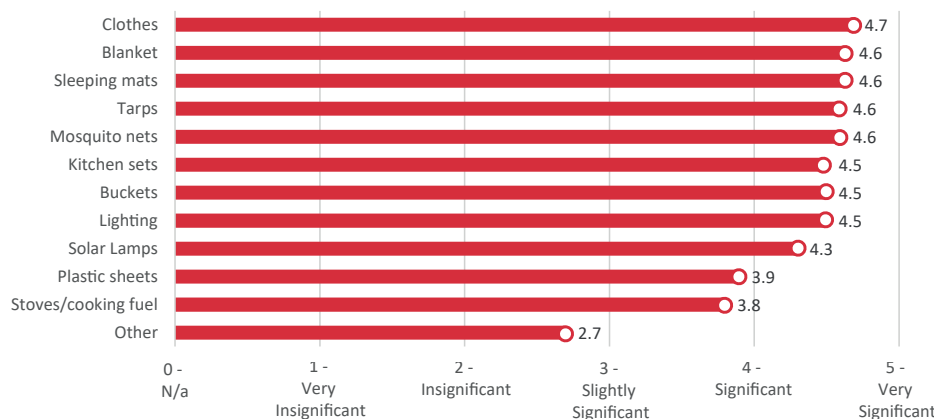


Figure 7: Average NFI needs of all sites using Likert Scales



In three sites, Bairro de Upajo, Centro de Bandar, and Naschintenje, around half (50%) of IDPs live in areas where open defecation is visible. In 11 per cent of sites, some IDPs live in areas with visible defecation, and in 83 per cent of sites no open defecation is visible. In 87 per cent of sites, no one has access to showers or bathing facilities. In 47 per cent of sites no one has access to enough soap. In 8 per cent of sites no one has enough water for drinking. In 70 per cent of sites, there are no hand washing stations. There have been hygiene/WASH communications in 53 per cent of sites. In 98 per cent of sites, there are no systems for managing solid waste. In 63 per cent of sites, there was no WASH related distribution in the last month. In 34 per cent of sites, draining systems function very poorly.

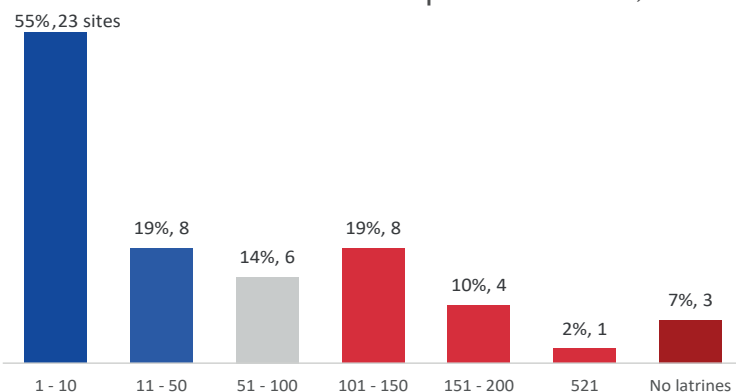


Figure 8: Number of IDPs in sites for each available and functional latrines as percentage (%) and number (n) of sites

The graph beside presents the number and percentage of sites, with different categories of latrine availability (i.e. how many IDPs are present on site for each available latrine). In 55 per cent of sites there are between 1 and 10 latrines for each IDP, while in 19 per cent there are between 11 and 50 IDPs for each latrine. In 14 per cent of sites there are between 51 and 100 IDPs for each available latrine. In Eduardo Mondalane site there are 521 IDPs for each latrine. In 3 sites there are no latrines.



Eighty-one per cent of sites received a food distribution in the last month. In 32 per cent of sites, the majority of IDPs have access to farming lands. In 21 per cent of sites, households have received agricultural inputs from a distribution. Of those sites where the majority have access to farming land, in 55 per cent of sites no households are actively working their farmland, while in 9 per cent all of the households (around 100%) are working their land. Of the sites that received agricultural inputs, in 27 per cent of sites, households do not own any livestock, while in 36 per cent of sites a few households (around 25%) own livestock.



In 96 per cent of sites, the first course of action when family members get sick is to go to a health facility. In 70 per cent of sites, IDPs have access to a hospital, in 26 per cent access to mobile brigades, in 11 per cent ambulance services, and an on-site clinic in 8 per cent of sites. In 66 per cent of sites, the majority of women give birth in health facilities, while in 30 per cent the majority give birth at home with the assistance of midwives. In 98 per cent of sites, the majority of women seek out a health professional in the course of their pregnancy. In 96 per cent of sites, IDPs are aware of HIV support services, and in 94 per cent they are aware of Tuberculosis support services. In 11 per cent of sites, IDPs have been presenting symptoms of diarrhea or vomited. Overall, IDPs are satisfied with the provision of healthcare in 49 per cent of sites in Cabo Delgado.



In 74 per cent of sites, the majority of children have access to schools/education facilities. In 66 per cent of sites, the school facilities are functional. The two greatest barriers to education are a lack of materials and a lack of teachers. Additional barriers include no access to documentation, discrimination, and of transport to schools. In those sites where children are attending school, on average 46 per cent are enrolled and attending education. The graph below shows the distance to school facilities for the sites in Cabo Delgado.

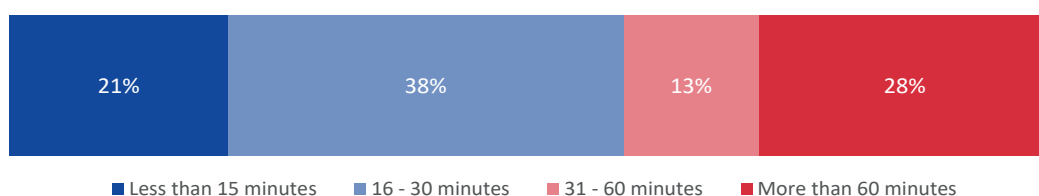
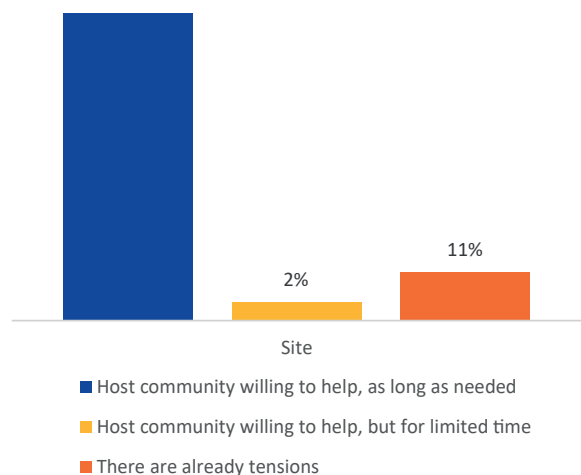


Figure 9: Distance to school/education facility as percentage of sites



There are no police stations/security posts in 62 per cent of sites. There are no child friendly spaces in 96 per cent of sites. In 91 per cent of sites, communal facilities are not lit. In 83 per cent of sites, there is a security provider/mechanism to ensure the safety of IDPs. In 68 per cent of sites, there is a referral mechanism for Gender Based Violence (GBV) survivors.



In 40 per cent of sites, there is a support mechanism for the psychosocial needs of the population. In 87 per cent of site, the host community has said that IDPs can stay as long as is needed. In 11 per cent of sites, there are already tensions between the IDP and host communities (sites: Nangua 2, Unidade, Megaruma, Chiure Velho, Marrupa, and Nanjua A). In 94 per cent of sites, the majority of IDPs do not have access to legal documentation. Of those sites where the majority do not have legal documentation, 42 per cent of sites report that the main barrier to getting the necessary documentation is due to heavy bureaucracy, and in 40 per cent of sites the barrier is a lack of financial means. In 38 per cent of sites, the majority of IDPs present can neither read or write.

Figure 9: Relationship with host community as percentage of sites



Communication

To communicate with the humanitarian sector, sites report the IDP community uses the following: community leaders, humanitarian agencies, and call centers. When communicating with the displaced community, the humanitarian sector uses the following avenues: community leaders, local government, and direct outreach by the humanitarian agencies themselves. There are volunteers present on-site, and have organised social activities for the following sectors: health (48% of sites), WASH (41%), protection (38%), child protection (31%), education (28%), GBV (10%), Protection against Sexual Exploitation and Abuse (PSEA) (7%), and youth (7%).

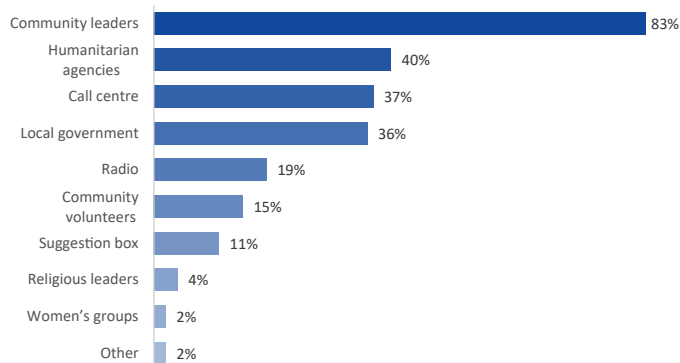


Figure 10: What are the main communication mechanisms used by IDPs to communicate with the humanitarian community, as percentage of total sites

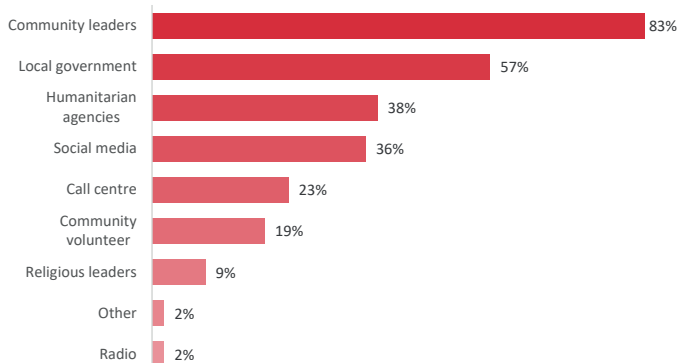
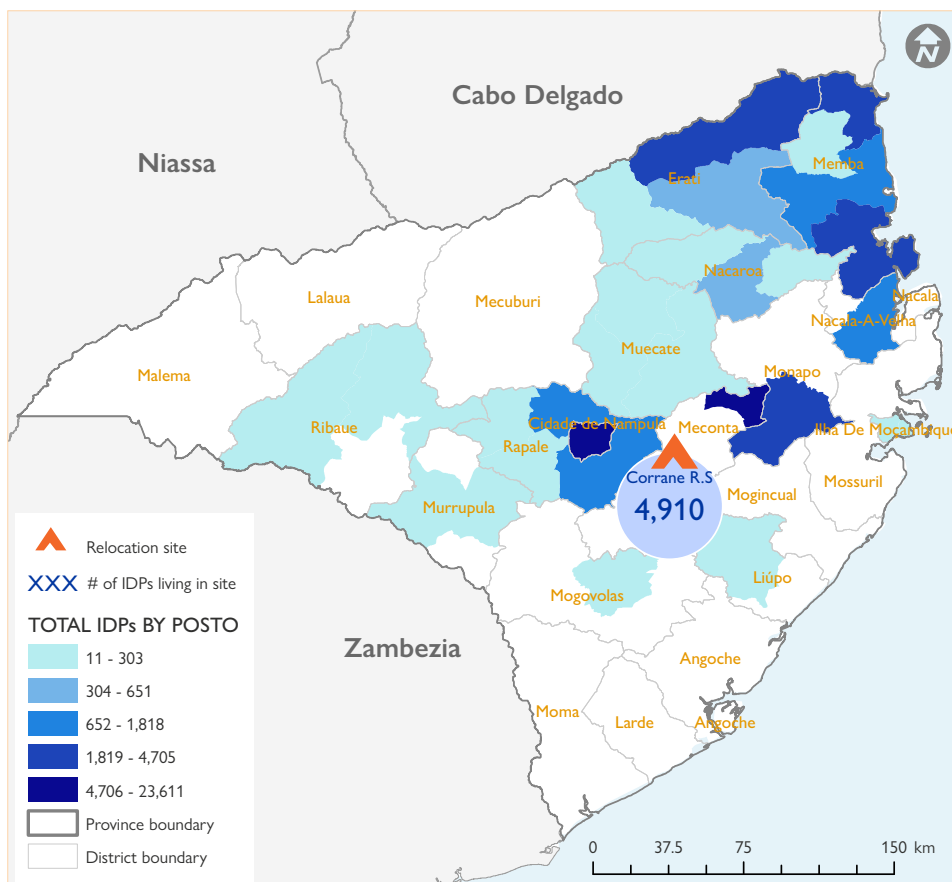


Figure 11: What are the main communication mechanisms used by the humanitarian community to communicate with IDPs, as percentage of total sites



In 64 per cent of sites, households do not need to use any coping strategies associated with a lack of fuel, while in 13 per cent households may skip meals/reduce portions, and in 9 per cent of sites they may undertake illegal/irregular work. In 66 per cent of sites, households generally manufacture their cooking stoves. In 74 per cent of sites, households generally produce or manufacture their cooking fuel. In 45 per cent of sites, households spend between 1h30 and 3h00 per week collecting fuel. In 30 per cent of sites they spend less than 1h30 collecting fuel. In 52 per cent of sites households generally do their cooking outdoors. In 81 per cent of sites, it is reported that either electricity point are not functioning or that fuel/wood is not available at the local market. A total of 82 per cent of sites report that electrical point or markets with fuel/wood are too far away, while 43 per cent report that electricity/fuel is too expensive, and 29 per cent of sits reported that gathering/collecting the electricity/fuel is dangerous.



4,910 IDPs

1,169 IDP households

1 assessed site (relocation centre)

Corrane relocation site is physically accessible, and not at risk of becoming inaccessible in the event of a natural disaster. It is safe and secure for humanitarian actors to enter the site. Violence due to the insecurity situation in Cabo Delgado is the main reason of displacement for the majority of IDPs. Most IDPs in the site are originally from Mocimboa da Praia. The majority of people were displaced between more than 6 months ago, and intend to return in more than 6 months.

Demographics

In Corrane relocation site, the IDP demographics are as follows: 11% adult males (546 individuals), 20% adult females (976), 69% children (3,888). There are an estimated 373 infant children (under one year old), and 660 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Unaccompanied Minors	Elderly without carers	Child-headed households	Elderly-headed households
38	0	19	0	0	0	0	24

Priority Needs

Very significant	5
Significant	4
Slightly significant	3
Insignificant	2
Very insignificant	1
N/a	0

	Corrane	Corrane
Food	4	4
Water	4	4
Shelter	5	3
NFIs	5	5
Health		4
Education		4
WASH		3
Energy		5

COVID-19 Preparedness

Regular hand washing is the most common preventative measure against COVID-19 on site, and IDPs frequently wash their hands. Hand washing stations with soap, have been installed. There have been mask distributions. There are information materials present, and COVID-19 awareness sessions have been held in the past month. A majority of IDPs consider COVID-19 a risk, have information on vaccine access, and wish to be vaccinated.

Shelter

In Corrane, 100% of IDP households are sleeping in emergency shelters, with households building their own shelters. IDPs need technical assistance to build their homes/shelters. Shelter/NFI support has been received by IDPs in the site. The most significant reported NFI needs are for blankets, sleeping mats, and kitchen sets. The main barrier to accessing NFIs is that IDPs do not have the money to purchase items they need at the local market.



WASH

There are functioning latrines on-site, and there is approximately one available latrine for each household, with additional facilities constructed as families are relocated to the site. There are active WASH committees on-site, and the drainage system is described as very poorly functioning. IDPs use hand pumps to access water. Long waiting times for water is a key issue reported by IDPs.



Livelihoods

The previous food distribution occurred two weeks before data collection in Round 5. In each case, 100% of households received food in the distribution. In the site, the majority of IDPs do not have access to farmland, and approximately 50% of households are working the farmland, and around 50% having received agricultural inputs. Furthermore, around 25% of households own some type of livestock (e.g. chicken, goats, pigs, or cows).



Health

When members of the household fall ill, the first course of action is to go to the local health facility, which is an on-site clinic. The clinic is open every day apart from weekends. In the site, most women give birth at the health facility and seek a health professional during their pregnancy. IDPs are aware of support for both people with HIV and/or Tuberculosis. Residents in Corrane are satisfied with the healthcare services provided.



Education

The majority of school age children have access to school (estimated at 1,137 children). The school is described as non-functional. The facility is 31-60 minutes away when walking. It is reported that IDPs with disabilities face significant barriers to accessing education.



Protection

There is a functioning police post that on-site, but there are no child-friendly spaces in Corrane. There is a security provider or mechanism present for the safety of residents in the site, and a referral mechanism for GBV survivors. Communal facilities are not lit. The host community has indicated that it is willing to provide help to the IDPs in Corrane for as long as is needed. It is reported that the majority of households have no legal documentation, and households do not have the financial means to replace the documents.



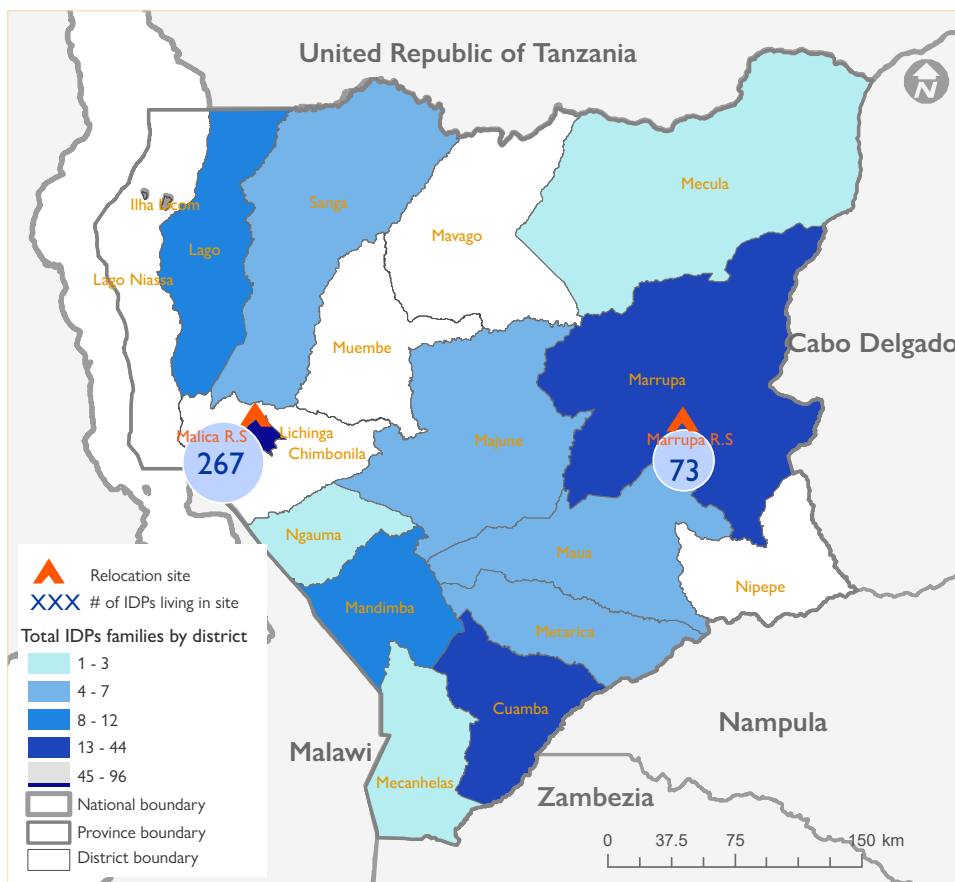
Communication

To communicate with the humanitarian sector, the community uses the following: community leaders, local government, and religious leaders. When communicating with the displaced community, the humanitarian sector uses the following avenues: local government, community volunteers/mobilisers, and religious leaders. Volunteers are on-site, and have organised social activities for the following sectors: Health, Protection, Child Protection, WASH, GBV, PSEA, and Education. It is reported that in the majority of households, no members can either read or write.



Energy

When households do not have enough cooking fuel, they use stoves from other households. Households generally produce/manufacture their own cooking stoves, and generally acquire/collect fuel themselves. Households spend about 30 minutes a week collected fuel for cooking, and do most of their cooking outdoors. There are no energy sources reportedly available for households in the site. The main priorities in the site are energy services for household lighting, energy for street lighting, and energy for health services.



340 IDPs



66 IDP households



2 assessed sites (relocation centres)

Malica and Marrupa 2 are relocation sites that are physically accessible, and not at risk of becoming inaccessible in the event of a natural disaster. They are safe for humanitarian actors to enter the site. Violence due to the insecurity situation in Cabo Delgado is the main reason of displacement for the majority of IDPs resident in the site. The majority of people were displaced more than 6 months ago, and do not intend to return.



Demographics

In Malica and Marrupa 2 relocation sites, the IDP demographics are as follows: 18% adult males (62 individuals), 22% adult females (75), 60% children (203). There are an estimated 26 infant children (under one year old), and 39 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Unaccompanied Minors	Elderly without carers	Child-headed households	Elderly-headed households
2	21	4	0	0	4	0	5



Priority Needs

Very significant	5
Significant	4
Slightly significant	3
Insignificant	2
Very insignificant	1
N/a	0

Food
Water
Shelter
NFIs

	Malica	Marrupa 2
Food	5	5
Water	5	4
Shelter	5	5
NFIs	4	5

Health
Education
WASH
Energy

	Malica	Marrupa 2
Health	5	4
Education	4	4
WASH	5	5
Energy	4	5



COVID-19 Preparedness

Wearing masks is the most common preventative measure against COVID-19 in both sites. IDPs almost never wash their hands in either site. Hand washing stations have not been installed. There have been no mask distributions. There are no information materials, but COVID-19 awareness sessions have been held in the past month. A majority of IDPs consider COVID-19 as a health risk, have information on vaccine access, and wish to be vaccinated.



Shelter

In Malica, all IDP households are sleeping in emergency shelters, while in Marrupa 2 12 households are in emergency shelters and 6 in permanent shelters. Shelter/NFI support has been received in both sites. The most significant needs are for NFI assistance, and emergency shelters assistance in both sites. The most significant NFI needs in both sites, are for blankets, sleeping mats, kitchen sets, buckets, clothes, plastic sheets, and tarps.



WASH

There are functioning latrines on-site, and there is one available latrine for every four households. There are no hand washing stations in Malica, while in Marrupa 2 the stations have no soap. Hygiene campaigns have been conducted only in Marrupa 2. The drainage system is described as very poorly functioning in Marrupa 2, and more-or-less functioning in Malica. IDPs use hand pumps and tanks to access water. There is one water source per site.



Livelihoods

Food distributions have been received in the last month, and the last food distribution occurred more than three weeks before data collection in both sites. Almost all households received the distribution. In both sites, IDPs have access to farmland. All households in Malica are working their farmland, while only around 25 per cent in Marrupa 2 are. No one owns livestock on either site.



Health

When members of the household fall ill, the first course of action is to go to the local health facility, which is an on-site clinic in Marrupa 2 and a hospital in Malica. In both sites, most women give birth at the health facility and seek a health professional during their pregnancy. IDPs are aware of support for those with HIV and/or Tuberculosis. Residents are satisfied with the healthcare services. There are no cases with symptoms of diarrhea and/or vomiting.



Education

In both sites, the majority of school age children have access to school (but in Malica there are no children attending school and the school is described as non-functional there). The facility is less than 15 minutes away in Malica, but 31-30 minutes away from Marrupa 2. It is reported that IDPs with disabilities face significant barriers to accessing education.



Protection

There are no functioning police posts on either site, and are no child-friendly spaces. There are security providers or mechanisms present for the safety of residents in the sites, and referral mechanisms for GBV survivors. Communal facilities are not lit. The host communities have indicated that they are willing to provide help to the IDPs in both sites for as long as is needed. It is reported that the majority of households in both sites have no legal documentation, and households lost said documentation when they were displaced.



Communication

To communicate with the humanitarian sector, the communities use the following: community leaders, local government, and community volunteers/mobilisers. When communicating with the displaced communities, the humanitarian sector uses the following avenues: staff from humanitarian agencies, community leaders, and local government. Volunteers are on-site only in Marrupa 2, and have organised social activities for the following sectors: WASH, Health, Protection, and GBV. It is reported that in the majority of households in both sites, no members can either read or write.



Energy

When households do not have enough cooking fuel, in Marrupa 2 they use stoves of other households, while in Malica households tend to exchange NFIs for fuel as well as using stoves from neighboring households. Households individually produce/manufacture their cooking stoves in Malica, and in both sites households manufacture/produce/collect their cooking fuels. In both sites, households spend on average 30 minutes a week collecting fuel, and normally cook outdoors. There are no available energy sources on either site. The main energy priorities are for household lighting, street-lighting, education, and health facilities in Marrupa 2, while in Malica the energy priorities are for mobile phone charging, cooking, household lighting, and for street-lighting.

DTM activities are supported by:

