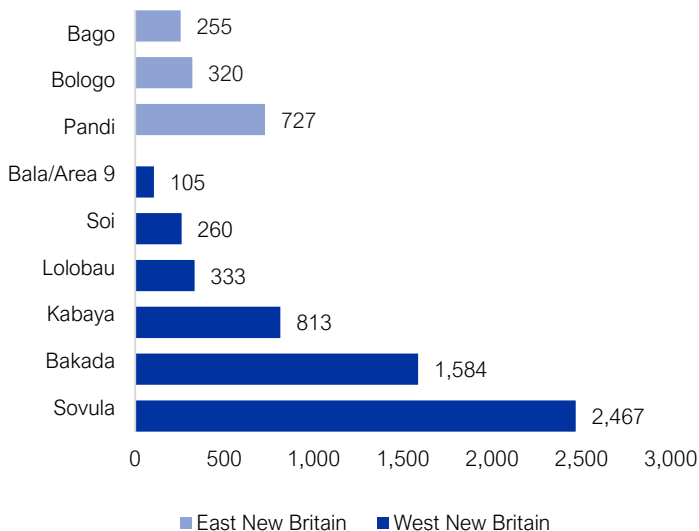


Mount Ulawun Volcano Eruption

BACKGROUND

IOM continues to work in partnership with the National Disaster Centre and Provincial Disaster Centres in West New Britain (WNB) and East New Britain (ENB) provinces to assess and assist communities affected by Mount Ulawun volcano eruption. IOM in partnership with the local authorities deployed the Displacement Tracking Matrix (DTM) within a week following the eruption that occurred on 20 November 2023 and identified 8,565 persons (1,707 Households [HH]) displaced from the local villages to seven sites in WNB (5) and ENB (2).¹ A second round of the DTM deployed on 8-10 December 2023 has witnessed a 24.78 per cent decrease in the IDP population from the first round. This decrease is largely due to the voluntary return of the IDPs to their villages as the volcanic activity has subsided. Local authorities continue to monitor the situation and will formally communicate to the IDPs regarding return. This displacement profile presents findings from the second round of the DTM.

Total No. of IDPs by Site



Displacement Overview² (n = 9 sites)



6,864

Internally Displaced Persons (IDPs)



1,353

IDP Households



49%

of the IDPs are males



51%

of the IDPs are females



50%

of the IDPs are children below 18 years old



5%

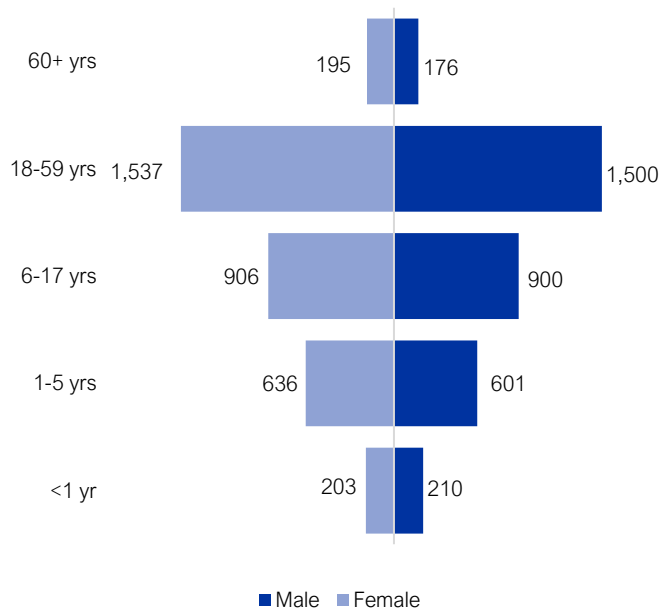
of the IDPs are persons over 60 years old



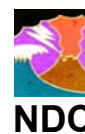
81% of the IDPs are staying in sites located in WNB (Bakada, Kabaya, Sovula, Lolobau, Soi, and Bala/Area 9).

19% of the IDPs are staying in sites located in ENB (Pandi, Bago and Bologo).

Gender and Age Pyramid



DTM Operations are supported by:



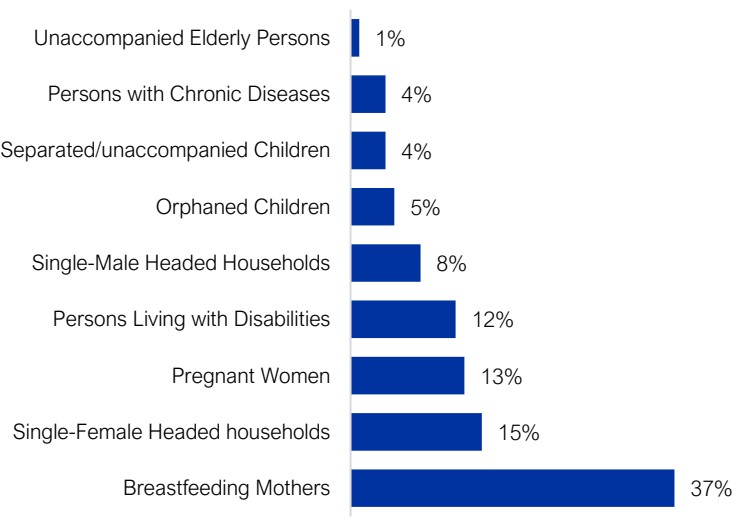
¹ The DTM report is available at, <https://dtm.iom.int/reports/papua-new-guinea-mount-ulawun-site-profile-december-2023>

² Data is from the sites hosting 6,864 IDPs (1,353 HH) from the local villages in WNB (5,562) and ENB (1,302). Private sector companies' employees and their dependents formerly displaced to Barema mill, Barema clearing, and Hargy area 6 in WNB have now returned to their homes.

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VULNERABILITIES

347 vulnerable individuals were identified, with the plurality identified as 'breastfeeding mothers' (37%). This percentage is very high and there is an urgent need to address the specific needs especially of breastfeeding mothers including supplying nutrition supplements and improving access to healthcare services.



SITE MANAGEMENT

Local authorities are currently planning to close six IDP sites namely Soi, Hargy Area 9, Lolobau in WNB, and Pandi, Bago and Bologo in ENB in the coming days. Part of Sovula (Sovula road site) in WNB will also be closed.

Local authorities and partners are assessing conditions in the IDPs' villages of origin including providing materials such as detergents and cleaning tools that will help the affected households remove ash from the roofs and clean rain-fed tanks and the environment around the homestead on return. The IDPs are unable to tend their gardens currently. This could lead to food insecurity upon return, and partners including IOM are distributing basic gardening tools to help improve food security and livelihoods activities on return. This support is critical to end displacement and help the displaced population attain durable solutions.

According to reports from the Emergency Operations Centre (EOC) and Forward Operating Base (FOB) in WNB, Bakada, Kabaya, and Sovula IDP sites will remain open for an indefinite period and continue to accommodate people from Noau (ward 3) and Ubili (ward 2) villages that have been heavily affected by mudflows caused by rains and ash deposits.

SHELTER AND NON-FOOD ITEMS

The assessment found out that the need for a safe shelter remains a critical concern for the displaced population.

Several IDPs lacked shelter grade tarpaulins and constructed makeshift shelters using different kinds of materials including plastic sheeting and bush materials. Most of the women and children at Sovula IDP site were still living in classrooms at Sovula Primary School during the time of the assessment and up to 25 individuals were being accommodated in each classroom.

The IDPs at Kabaya were living in a structure made of concrete floor and iron roof. This structure has no partitioned walls.

Concerns related to overcrowding and lack privacy in shelters were highlighted during the assessment.

Private sector companies' employees and their dependents formerly displaced to Barema mill, Barema clearing, and Hargy area 6 in WNB have now returned to their homes.

Organizations such as the Papua New Guinea Red Cross Society (PNGRSC), Adventist Development and Relief Agency (ADRA) and IOM have initiated the distribution of non-food items (kitchen utensils, sleep mats, mosquito nets, cleaning tools, and jerry cans) with ongoing efforts to address the shelter needs of the IDPs.

Response efforts including deployment of shelter-NFIs are being supported by the local authorities and development partners such as the Australian Government, United States Agency for International Development's Bureau for Humanitarian Assistance (USAID/BHA), and the Rotarians Against Malaria.

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FOOD SECURITY AND NUTRITION

The displaced population is currently relying on food aid.

Local authorities in WNB and ENB distributed food rations including rice, tinned fish, noodles and sugar to the IDPs. However, the availability of food remains a pressing issue as some IDP sites (Bago, Bakada and Kabaya) have reported irregular food distribution.

The assessment found out that children under 5 years old, pregnant women, and breastfeeding mothers have not received supplementary feeding in all nine sites assessed. Distribution of supplementary feeding targeting these groups is recommended.

As part of the field assessments, local authorities and IOM visited Noau and Ulamona (Ubili) villages of origin for majority of the IDPs at Bakada, Kabaya, and Sovula and observed that these villages have been affected by mudflow that destroyed the food gardens, worsening the food insecurity situation of the villagers.

EDUCATION

All schools in the affected areas have been closed since the eruption of Mt. Ulawun volcano.

Sovula Primary School administration expressed concerns about the damage to school assets and have requested for the relocation of the IDPs to another site upon delivery of emergency shelter materials.

PROTECTION

There were no security incidents reported across all sites during the time of the assessment. None of the IDPs sites reported the availability of child friendly spaces. The lack of referral mechanisms for survivors of Gender-based Violence (GBV) was reported across all sites. It is recommended that these issues are addressed including establishing child friendly spaces and GBV referral mechanisms.

Concerns related to lack of basic services, overcrowding and lack of privacy in shelters were highlighted during the assessment. IDPs at Bala/ Area 8 reported the lack of lighting and security on site.

WATER, SANITATION AND HYGIENE (WASH)

Except for Kabaya that has a borehole accessible by walking 20-30 minutes (one way), IDPs in the remaining sites collect drinking water from the nearby rivers, creeks, and rain catchments. These IDPs walk approximately 15 minutes (one way) to access the rivers and creeks.

The New Britain Palm Oil Limited installed 4 X 5,000L water tanks at Kabaya, Bakada, and Sovula (roadside, Koasa) to improve the access to drinking water. Hargy Oil Palm Company have continued with the daily water trucking to Bakada, Kabaya and Sovula ensuring a reliable and consistent water supply.

None of the care centers reported the use of water purification or treatment. A visit to the villages of origin found out that the creek feeding the main water supply in Ubili village is heavily polluted with the mudflow.

Water containers/ jerry cans and hygiene kits constituted needs identified in the initial DTM assessment. In response, organizations including the PNGRCS and IOM have started distributing water jerry cans. Other WASH items distributed include soap and cleaning detergents.

ADRA is supporting the response including through the construction of gender-segregated latrines to improve sanitation at the IDPs sites.



Water catchments have improved access to drinking water for several IDPs. © Hillary Halli/ PNGRCS

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HEALTH

IDPs at Soi care centers have reported the existence of an Aid Post, while Sovula, Bakada, and Kabaya care centers have temporary aid posts that are providing basic healthcare services. The Catholic Health Services deployed community healthcare staff to Kabaya (3), Sovula (1), and Bakada (2).

IDPs in the remaining sites reported that there are no nearby health facilities and walk for up to 1 hour (one way) to access healthcare services. The commonly reported diseases include diarrhea, scabies, malaria, and flu. There is a notable shortage of essential medical supplies across all IDP sites assessed.

METHODOLOGY

To better understand the situation including sectoral needs of the affected population, an inter-agency team comprising of local authorities from WNB and ENB, Papua New Guinea Red Cross Society, and the International Organization for Migration (IOM) deployed a second round of the Displacement Tracking Matrix (DTM) tool to the displacement sites on 8-10 December 2023. Displacement tracking was conducted through field observations, focus group discussions (FGD) and key informant interviews (KII) with affected population and local authorities. This displacement profile presents findings from the DTM assessment undertaken in WNB and ENB.



Data from the DTM sites assessment is being used by the government and partners to better inform response and return planning targeting the displaced population. © Mohamud Omer/ IOM

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