

SNAPSHOT



IOM SUDAN

Displacement
Tracking
Matrix

Multi-Sectoral Location Assessment in South Kordofan

The Displacement Tracking Matrix's (DTM) Multi-Sectoral Location Assessment (MSLA) is an IOM tool that provides useful information on the availability of essential services within targeted locations of interest. MSLA has been present in Sudan since 2005, generating a comprehensive and detailed data source on essential key indicators for the facilitation of humanitarian and development programmatic design and implementation: namely, population presence, shelter, food security, education, health, WASH, protection and other services. Since June 2018, DTM has been conducting location assessments across the state of South Kordofan. To date, it has covered 185 villages (locations) within three localities, namely Abu Jubaiha, Kadugli and Reif Ashargi – each exercise consisting of a visit to the location followed by the physical surveying of public infrastructure, interviews with key informants, and group discussions with affected members of the community.

The following report will provide a brief overview on DTM's MSLA activities in each of the three localities to date. It is important to note, however, that all figures are estimations based on information given by key informants. They are thus not to be interpreted literally, as they have not been verified through direct registration, but rather serve to provide an overview of the situation as reported on the ground.

185

Villages (locations)
covered in three localities

88,169

Internally Displaced
Persons (IDPs)

18,587

Returnees

Abu Jubaiha



97 Locations visited

539,549 Individuals

9,165 Single female-headed households

POPULATION PRESENCE & VULNERABILITIES

The current population in Abu Jubaiha is estimated to be 539,549 individuals, comprising:

490,417
Host community

40,214
IDPs

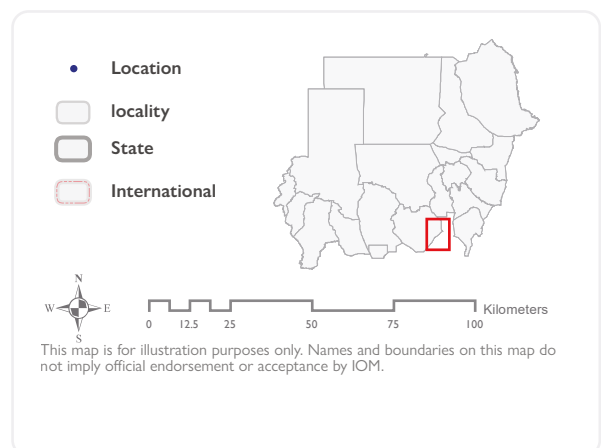
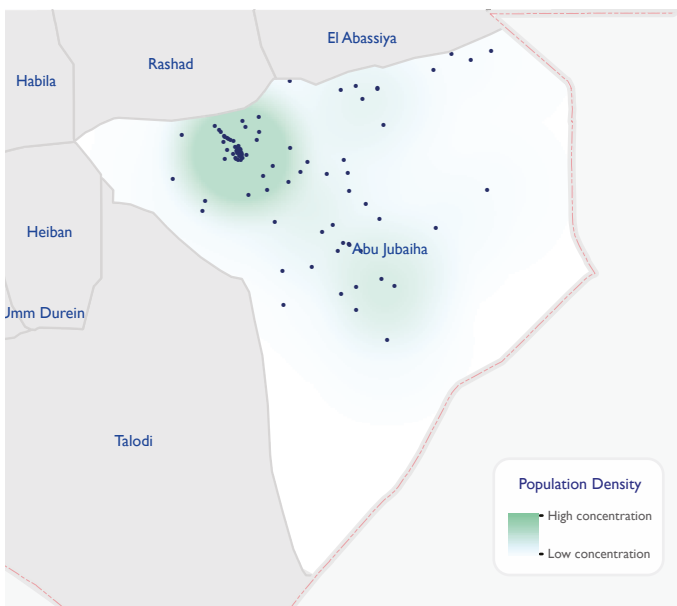
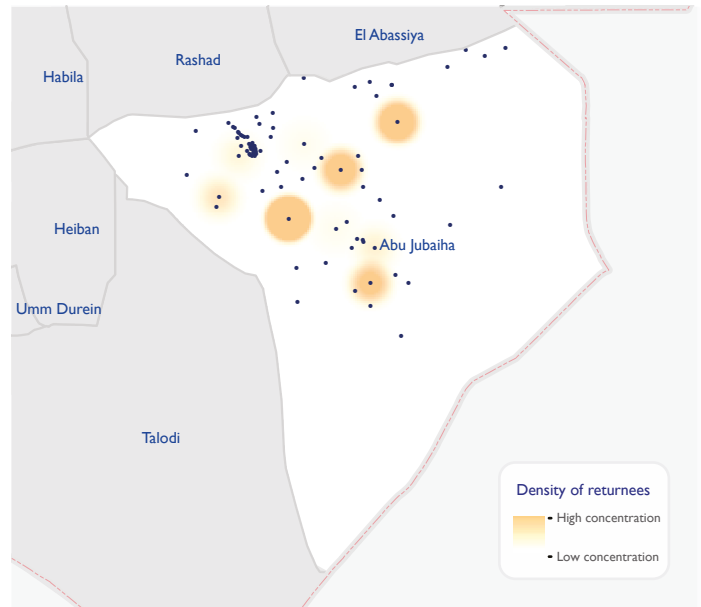
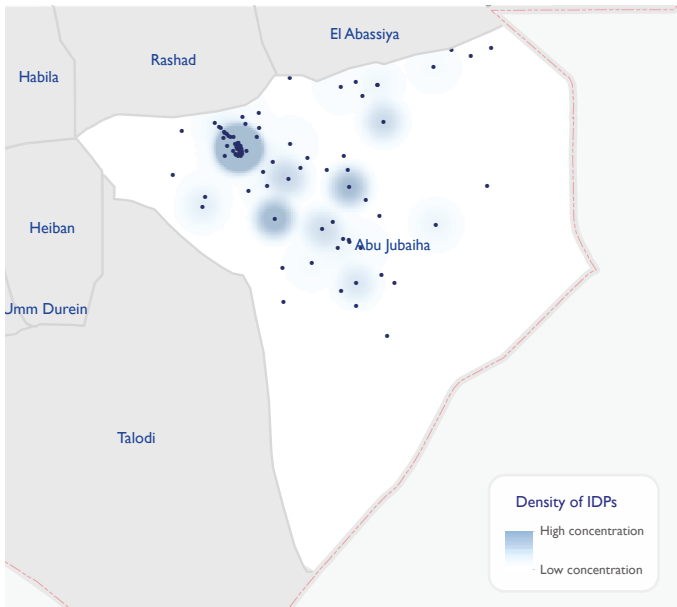
8,918
Returnees

More than 78 per cent of the locations visited host a higher proportion of females than males, with an estimated 9,165 single female-headed households across the locality. The predominant vulnerabilities observed are:

35,274
Breastfeeding mothers

22,847
Pregnant women

19,835
Orphaned children



HEALTH



Health in Abu Jubaiha represents a high priority need in 16 (out of the 97 visited) locations. There are currently 165 doctors and 174 nurses, in addition to 240 midwives available. Of significance, 68 per cent of the locations do not have any health facilities available and 88 per cent do not have any pharmacies. Although dependent on the services required, there is a large divide between facilities where medical care is free (32%), partially charged (33%) or fully charged (35%). Furthermore, health presents an additional vulnerability for 12,674 persons with physical disabilities, 2,777 persons with mental disabilities and 23,751 persons with chronic diseases/serious medical conditions.

Locations with no available health facilities



68%

Locations with no available pharmacies



88%

Vulnerabilities



12,647

Persons with physical disabilities



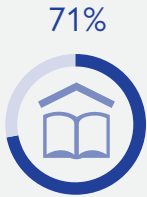
2,777

Persons with mental disabilities



23,751

Chronic diseases/serious medical conditions



71%

Access to education



17,734

Students enrolled in school



502

Teachers

EDUCATION



Education is a high priority need across nine of the locations in the locality. Out of a total 17,734 students enrolled in educational institutions in Abu Jubaiha, there is a notably even gender distribution. There are 502 teachers working in the locality (67% of whom are female). Seventy-one per cent of the present population have access to education, with primary schools being the most prominent. Eighty-nine per cent of existing schools are functional.

FOOD SECURITY



Food security is a high priority need at only one of the locations in Abu Jubaiha. The main reasons for food shortages in the locality have been attributed to the lack of finances, crop damage and low rainfall. Food aid has only been provided to two locations. The main income generating activities in the area are agriculture, livestock husbandry, firewood collecting and small trading. Veterinary services are only available in three villages.

Main reasons for food shortages



Lack of finances



Crop damage



Low rainfall

264



Water sources

58%



Functional

42%



Non-functional

WASH



WASH is the highest priority need in 70 of the location across the locality. At present, there are 264 water sources available in Abu Jubaiha – only 58 per cent of which are still functional. The community is largely responsible for the maintenance of these sources. Sixty-three per cent of the available water is free of charge – collected mostly from pools/wells (36%) or hand pumps (35%). It takes, on average, between 0-30 minutes for households to collect water in Abu Jubaiha.

SHELTERS



Shelters in Abu Jubaiha are mostly constructed from rakooba grass (48%) or from brick (28%). Of the existing shelters available, only six per cent are unoccupied. At present, 55 per cent of locations are in the process of constructing new shelters.

Shelter construction materials

43%



From Grass (Rakooba)

20%



Clay hut

28%



Brick houses

1%



Traditional tent

6%



Unoccupied

25



Locations with police presence

76%



Mobile network coverage

OTHER SERVICES



In Abu Jubaiha, police are present in 25 locations. A formal justice system is operating in one village, whilst tribal justice systems exist across 57 other locations. Mobile network is available across 76 per cent of the locality and most of the population own a radio – 94 per cent listening to non-local radio channels.

Kadugli



39 Locations visited

218,317 Individuals

5,000 Single female-headed households

POPULATION PRESENCE & VULNERABILITIES

The current population in Kadugli is 218,317 individuals, comprising:

193,240
Host community

26,208
IDPs

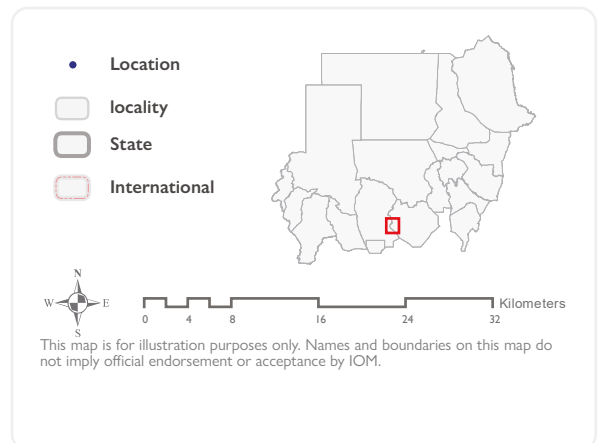
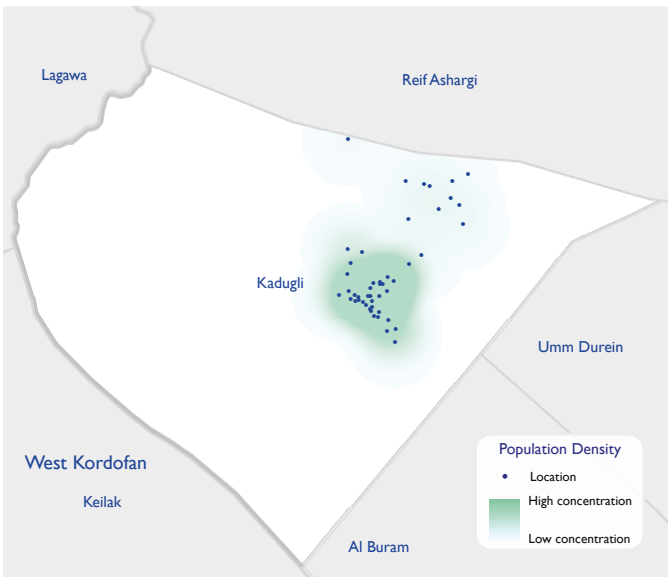
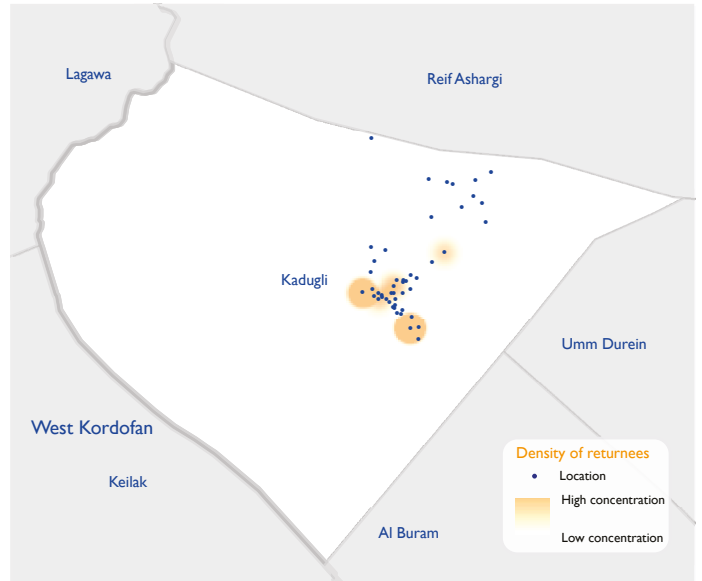
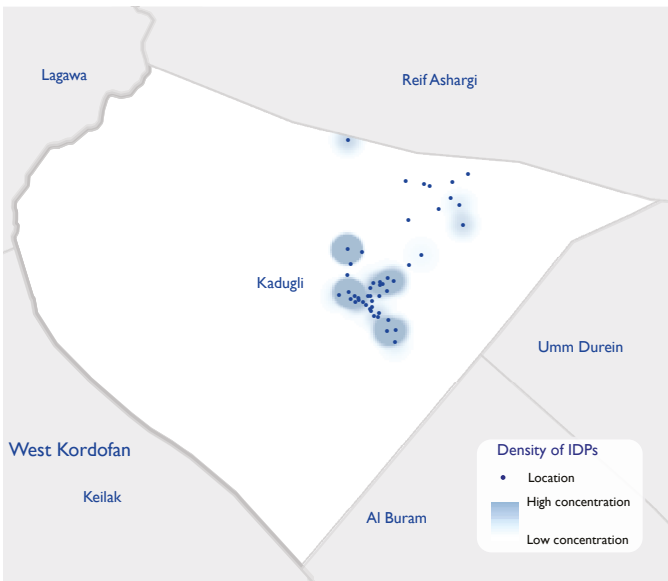
6192
Returnees

Almost 90 per cent of the locations visited have a higher presence of females than males, with 5,000 single female-headed households. The significant additional vulnerabilities present in Kadugli are:

10,531
Breastfeeding mothers

5,756
Pregnant women

6,528
Orphaned children



This map is for illustration purposes only. Names and boundaries on this map do not imply official endorsement or acceptance by IOM.

HEALTH



Health presents a high priority need in three (out of 39 visited) locations across Kadugli. At present, there are 194 doctors and 160 nurses, in addition to 118 midwives. Over 52 per cent of the villages, however, do not have any health facilities available in their location – 54 per cent without available pharmacies. Although it is dependent on the medical service needed, many of the medical care facilities charge the cost of medication (26) and not the full medical fees. There are at present 1,429 persons with physical disabilities, 580 persons with mental disabilities and 8,225 persons with chronic diseases/serious medical conditions.

Locations with no available health facilities



Locations with no available pharmacies



Vulnerabilities



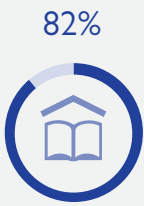
1,429
Persons with physical disabilities



580
Persons with mental disabilities



8,225
Chronic diseases/serious medical conditions



Access to education



29,051
Students enrolled in school



1,208
Teachers

EDUCATION



Education is a high priority need across five of the visited locations. There are currently an estimated 29,051 students enrolled in school, with a larger percentage being female (17,736 females and 14,861 males). There are 1,208 teachers in Kadugli – producing an average of 24 students per class. Almost 82 per cent of the population have access to education – primary schools constituting the largest availability. Finally, 99 per cent of existing schools are reportedly functional, with 87 per cent constructed from brick.

FOOD SECURITY



Food security is a high priority need in five of the locations in Kadugli. The main reasons for food shortages are the lack of finances, the difficulties in accessing agricultural land, the stealing of crops and the lack of agricultural activities. Food aid has been provided at 11 locations. The main income generating activities observed in this locality are agriculture and small trading. Veterinary services are only available in one village.

Main reasons for food shortages



Lack of finances



Difficulties in accessing agricultural land



Stealing of crops

170



Water sources

72%



Functional

38%



Non-functional

WASH



WASH is the highest priority need in 22 of the locations in Kadugli. Currently, there are 170 water sources, of which 72 per cent are functional. Primarily, these water sources consist of hand pumps (67%) that are maintained by the community. On average it takes between 0-30 minutes for households to collect water – 72 per cent of which is free of charge.

SHELTERS



Shelters was mostly constructed with brick across 62 per cent of all locations. The number of occupied shelters is lower than Abu Jubaiha (with 15% left vacant). In total, 54 per cent of villages in Kadugli are in the process of building new shelters for the existing population.

Shelter construction materials

15%



Clay hut

21%



From Grass (Rakooba)

62%



Brick houses

2%



Plastic sheets

15%



Unoccupied

13



Locations with police presence

97%



Mobile network coverage

OTHER SERVICES



In Kadugli, police are present in 13 villages. Tribal justice systems are also functioning at nine locations. Mobile network is available in 97 per cent of the locality and most of the population own a radio – far more than Abu Jubaiha. Eighty-two per cent of the population with radio access reported to listen to non-local radio stations.

Reif Ashargi



49 Locations visited

113,555 Individuals

3,180 Single female-headed households

POPULATION PRESENCE & VULNERABILITIES

The current population in Reif Ashargi is 113,555 individuals, comprising:

88,331
Host community

21,747
IDPs

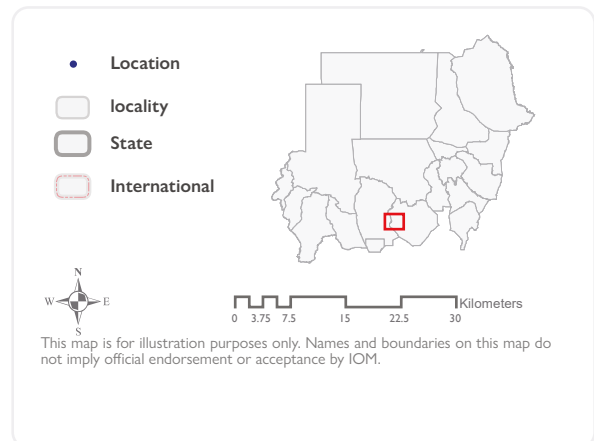
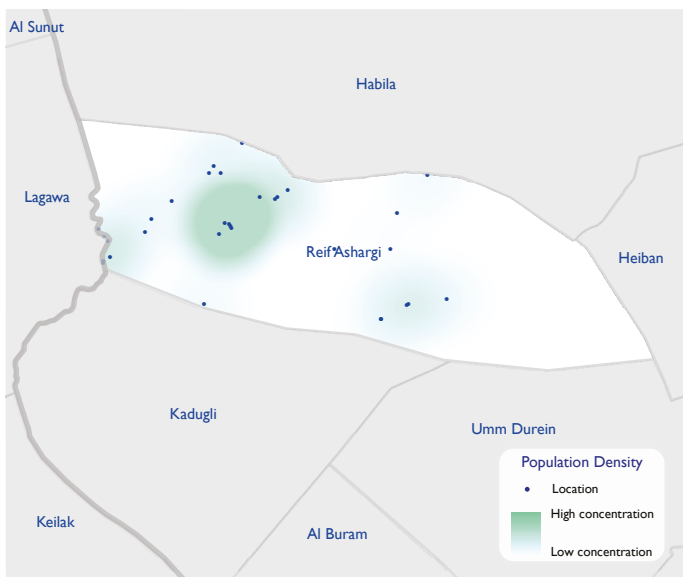
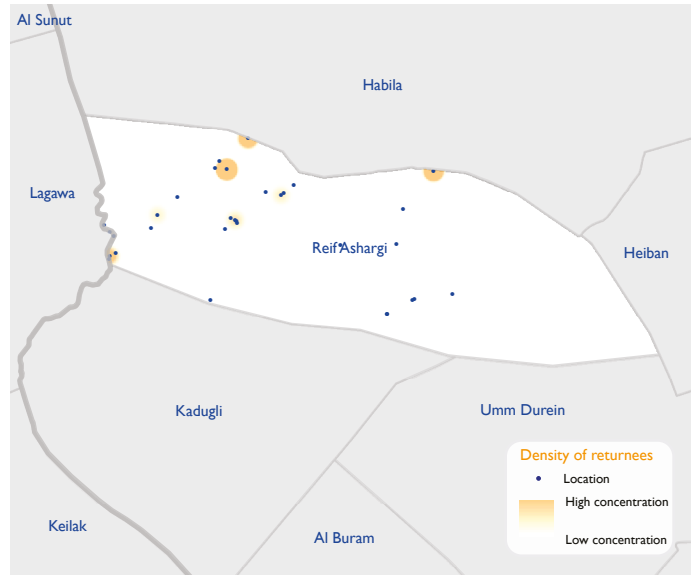
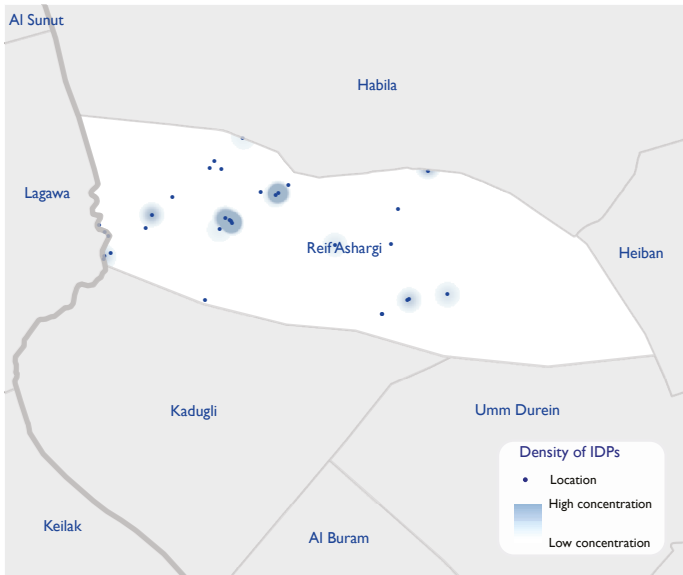
3,477
Returnees

Almost 86 per cent of the locations visited have a higher population of females than males, with 3,180 single female-headed households. Additional vulnerabilities recorded in Reif Ashargi are:

4,032
Breastfeeding mothers

3,171
Pregnant women

2,907
Orphaned children



HEALTH



Health presents a high priority need in two (out of the 49 visited) locations in Reif Ashargi. At present, there are zero doctors, nine medical assistants and 14 nurses, in addition to 93 midwives. Fifty-one per cent of villages do not have available health facilities – 94 per cent without any pharmacies. Although dependent on the medical service required, 50 per cent of medical care – when available – is free of charge. At present, there are 1,648 persons with physical disabilities, 352 persons with mental disabilities and 1,897 persons with chronic diseases/serious medical conditions.

Locations with no available health facilities



Locations with no available pharmacies



Vulnerabilities



1,648
Persons with physical disabilities



352
Persons with mental disabilities



1,897
Chronic diseases/serious medical conditions



9,188
students enrolled in school



470
teachers

EDUCATION



Education is a high priority need in eight of the locations in Reif Ashargi. There are 9,188 students enrolled in school, 5,901 of which are females and 4,297 of which are male. Out of the 470 teachers available, only 97 are female. In this locality, 71 per cent of the population have access to education. As evident across all localities, there is a greater presence of primary education – only 11 per cent of schools are at a secondary educational level. Ninety-one per cent of existing schools in Reif Ashargi were reported functional, but with a wider variety of construction materials used – rakooba (made from grass/straw) featuring in addition to brick.

FOOD SECURITY



Food security exists as a high priority need in one of the locations in Reif Ashargi. The main reasons for food shortages this past year were the low levels of rainfall, the damage to crops and the lack of finances. Food aid has been provided to eight locations. The main income generating activities in Reif Ashargi are agriculture and livestock husbandry. Veterinary services are available at only six sites.

Main reasons for food shortages



Lack of finances



Crop damage



Low rainfall



Water sources



Functional



Non-functional

WASH



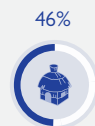
WASH is the highest priority need in 29 of the visited locations in Reif Ashargi. At present, there are 193 water sources, of which only 54 per cent are considered functional. The main water sources available are hand pumps (78%) and these are maintained by the community. For 17 per cent of the population, it takes between 30 minutes to one hour for households to collect their water supply – 88 per cent of which is free of charge.

SHELTERS



Shelters in Reif Ashargi are mostly constructed from rakooba grass (46%), however almost 45 per cent of the remaining locations have shelters constructed with either brick or clay. Twelve per cent of existing shelters are unoccupied and 53 per cent of the locations visited are currently constructing new shelters.

Shelters construction materials



From Grass (Rakooba)



Clay hut



brick houses



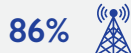
Plastic sheets



Unoccupied



Locations with police presence



Mobile network coverage

OTHER SERVICES



In Reif Ashargi, police are present in seven locations. One location has a formal justice system, whereas 22 villages have tribal justice systems. Mobile network is available across 86 per cent of the locality, but 14 per cent of the locations have no access to a radio.



Alternatively, Click [here](#) for the interactive dashboard to view the available data in more detail or use your mobile to scan the QR code:



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