

WAPENAMANDA CONFLICT RAPID ASSESSMENT REPORT 1

RELEASED: 20 MARCH 2024



At least 5,453 new internally displaced people in 1,090 households in Enga province since February 2024 killings. (49% Males and 51% Females).



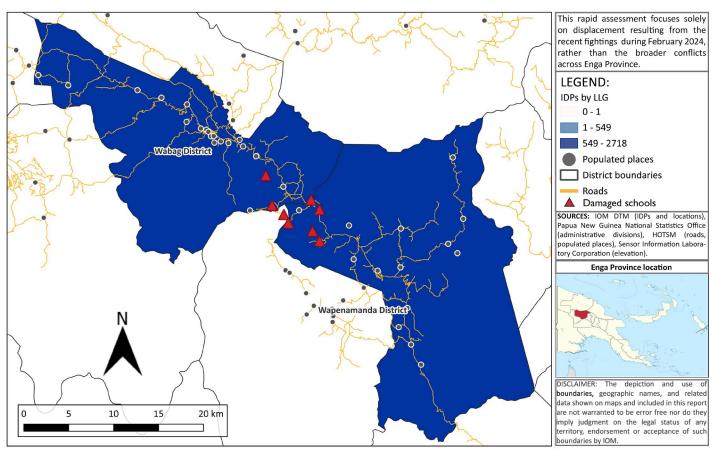
Each host family accomodates up to 10 displaced individuals placing additional strain on already limited resources such as food and shelter.



Over 20,000 protracted IDPs estimated by local authorities in the province due to previous conflicts.



Displaced persons are facing significant protection risks, particularly gender-based violence due to the ongoing conflict and the volatile security situation in the area.



OVERVIEW

Enga province in Papua New Guinea continues to grapple with heightened tensions stemming from recurring tribal conflicts. These conflicts have led to extensive damage to various essential infrastructure, including shelters, schools, churches, and healthcare facilities, particularly in the Middle Lai area of the Wapenamanda district. Reports indicate significant casualties and mass displacement of populations due to the ongoing fighting. Security forces, comprising both police and military personnel, are actively engaged in monitoring the situation and conducting awareness campaigns within local communities to mitigate tensions and prevent further violence.

Efforts are being made to prioritize civilian safety and prevent the escalation of hostilities. Tribal conflicts often arise from issues such as land disputes, competition over resources, and inter-clan rivalries.

The data collected from 25 wards across three Local Level Government (LLGs) in the Wapenamanda and Wabag districts of Enga Province provides insight into the demographic impact of the recent conflict.

Wapenamanda district emerged as the most affected area, hosting the largest number of IDPs with 2,718 individuals from 546 households displaced by the recent conflict. This represents approximately 50% of the total displaced population. Wabag Rural follows closely, accommodating 40% of the IDPs, totalling 2,186 individuals from 436 households. Wabag Urban also experiences displacement, with 549 individuals from 108 households seeking refuge.

The ongoing conflict contributes to the tense atmosphere within the affected conflict area, hindering comprehensive data collection.

SECTORAL NEEDS



The displaced persons from the recent conflict are dispersed across various wards in Wapenamanda, Wabag rural, and Wabag urban LLGs, where they are integrated into host communities and rely on shared accommodation with relatives and families. This displaced population comprises vulnerable groups, including women, children, the elderly, and individuals with special needs.

During focus group discussions (FGDs), conducted by provincial government authorities and IOM, it was revealed that, within these host communities, each family accommodates up to 10 displaced individuals, placing additional strain on already limited resources such as food and shelter. This overcrowding poses significant risks to the safety and well-being of both the displaced population and their host communities. Additionally, FGDs with faith-based organizations highlighted that some families seek shelter within a church in Wabag Rural. Similarly, many displaced families have resorted to constructing makeshift shelters, often in hazardous locations such as along the riverbanks, further jeopardizing their safety and well-being and exacerbating the humanitarian crisis.

Displaced persons are facing significant protection risks, particularly GBV, due to the ongoing conflict and the volatile security situation in the area.



The local authorities in Wabag town reported cases of GBV, including rape. These cases were reported to an identified office for further action. However, it was noted that many complainants later declined to pursue further action due to threats to their lives. Consequently, mothers and their children have sought refuge in nearby villages due to lack of shelter, food, and community protection. It is important to note that there may be many unreported cases of violence and assault due to fear and intimidation.

Additionally, the trauma and psychological distress experienced by those affected by the conflict further heightens their susceptibility to exploitation and abuse. Culture, social norms, and other factors such as distance to services, retaliation, stigma have posed challenges for at risk groups and affected population to access services. It is crucial to deliver mental health and psychosocial support, and protection services.



The majority of households among the Internally Displaced Persons (IDPs) heavily depend on the host communities for their main source of food. Following this, they rely on their own crops. However, due to recurrent tribal conflicts, many food gardens owned by the local communities have been destroyed. Additionally, some IDPs are unable to cultivate their agricultural lands due to security concerns. There is also a lack of availability of supplementary feeding for pregnant and breastfeeding women, as well as for children.



The main source of drinking water is located within 20 minutes walking distance in most of the sites. The types of water sources are mainly creeks, rivers, and rain-fed tanks for the Wabag and Wapenamanda stations. The increased population of displaced persons has strained existing infrastructure, leading to limited access to clean water and sanitation facilities. Displaced persons are scattered within the host communities, and overcrowding has led to issues of public health, including inadequate sanitation facilities and long queues for basic hygiene needs. Open defecation is prevalent due to the lack of proper sanitation facilities, posing public health risks to both the displaced population and the host community.

Furthermore, there is no water treatment available, further compromising the health and well-being of the affected population. The construction of makeshift settlements along the edge of the river exacerbates the Water, Sanitation and Hygiene (WASH) situation. Urgent action is needed to improve access to clean drinking water and sanitation facilities, as well as to promote hygiene practices among the IDPs and host communities.



Enga Provincial Hospital's Accident and Emergency Department is currently overwhelmed with patients affected by tribal conflict, with many injuries ranging from gunshot wounds to those inflicted by bush knives as well as trauma cases. The co-admission of patients from opposing factions poses a significant safety risk to medical staff.

Lakopenda Health Centre in Wabag district, along with Sapos and Pina community health posts in Wapenamenda, was completely razed during the recent fighting. Similarly, the Kwimamanda community post in Wapenamenda was destroyed during the previous fighting last year. Pombopaus Health Centre and Yaibus Community Health Post in Wapenamenda district are operating at reduced capacity, offering only emergency services, manned by two staff members due to recent fatalities.

The three most reported diseases include malaria, diarrhea, and pneumonia.



The recent conflicts have significantly impacted the education infrastructure, resulting in the suspension of three primary schools (Yaibos, Pombapos, and Saopas) in Wapenamanda LLGs. This is in addition to the 10 schools, (3 in Wabag and 7 in Wapenamanda) reported as burnt down since last year.

Although access to education services for displaced children was reported in all sites, there is overcrowding in schools with some institutions receiving closely double their initial enrolment.

SNAPSHOT: EDUCATION

The assessment team observed that the increased student population has strained school infrastructure, including water supply and sanitation facilities. For example, there is only one running water tap and limited latrines (10 in total, 5 for males and 5 for females), leading to long queues and open defecation. There is an urgent need for the provision of temporary learning spaces in identified locations, where access and learning is considered safe by local authorities, parents, and guardians; as well as the provision of school supplies, and additional teaching staff to ensure that all displaced children have access to education.

"The displacement crisis has placed an immense burden on our schools. With an additional 1,641 students in grades 3-8, our total enrolment has soared to 4,491 students. This unprecedented influx has stretched our resources to the limit, making this year particularly challenging for us. The class ratio is currently around 1:60, indicating severe overcrowding."

-Key Informant, Wabag Primary School.

In response to the conflict, a number of families from border communities have migrated to Wabag Urban due to safety concerns and ensure their children can attend classes. This has resulted in an influx of students at Pipi, Rakamamanda, Kipuli, and Wabag Primary Schools. The increased student population can be attributed to the fluid movement of women and children following the recent killings in February 2024. Mothers have migrated with school-aged children, seeking school placements for their children.



Students in line for the access restroom facilities at Wabag Primary School @IOM 2024



Focus group discussion with Wapenamanda Distric Officials @IOM 2024

DATA HIGHLIGHTS 2500 Boys, 872 2000 Boys, 692 1500 1000 Wapenamanda Wabag Rural



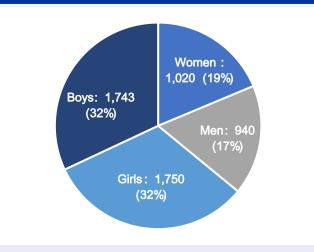


Chart 02. IDPs by age and sex group

DISTRICT	LOCAL LEVEL GOVERNMENT	NUMBER OF WARDS	DISPLACED HOUSEHOLDS	DISPLACED INDIVIDUALS
Wapenamanda	Wapenamanda	10	546	2,718
Wabag	Wabag Rural	11	436	2,186
	Wabag Urban	4	108	549
Total		25	1,090	5,453

LIMITATIONS: Security Concerns: The assessment faced significant challenges in accessing certain areas, particularly Tsak Valley LLG in the Wapenamanda district, due to ongoing security issues. This limitation hindered a comprehensive understanding of the situation in the epicenter of the conflict. Figures should be treated as preliminary findings only and are subject to change as the situation evolves.



INTENTIONS

The majority of IDPs expressed a desire to return to their homes, but they emphasized that they would only do so when the security situation improves. They did not express any immediate intentions to move, as the situation remains uncertain and tense due to the recent conflicts.

COORDINATION AND COMMUNICATIONS

The analysis of responses from the majority of IDPs indicates that their primary areas of concern and immediate needs revolve around food and shelter. These basic necessities emerged as the top priorities for the displaced population, highlighting a critical need for information and assistance related to accessing food and securing adequate shelter. Additionally, IDPs expressed significant interest in obtaining information on access to essential services, safety and security measures, and the situation in areas of origin. These findings underscore the urgent need for comprehensive support measures, particularly in addressing protection, food and shelter needs, and emphasize the importance of effective communication strategies to meet the pressing concerns of the displaced communities.

The top three preferred means of communication for IDPs are mobile phones, newspapers, and radios, as reported in most of the sites. Enga language was highlighted as a preference across all IDP sites, as it is widely spoken in the province. Additionally, Tok Pisin (Pidgin) and English languages were also mentioned as a preference across all IDP sites.

CONCLUSIONS

Food and nutrition insecurity, inadequate access to clean drinking water and sanitation, overcrowded shelter conditions, disrupted education services, and compromised healthcare facilities were among the key findings. Additionally, the precarious security situation and protection risks, including GBV, further compounded the vulnerabilities faced by the displaced population.

Despite the desire of IDPs to return to their homes, the uncertain and tense environment, exacerbated by recent violence, inhibits immediate movement.

The DTM rapid assessment aims to gather essential information on the needs of IDPs and host communities, enabling a coordinated and effective response. The sectoral needs identified through the assessment call for a collaborative effort among the government and humanitarian actors to provide lifesaving humanitarian assistance to the displaced people to meet their immediate needs, quickly recover, and return to their normal lives.

RECOMMENDATIONS:

Short-Term:

- Provide immediate assistance in the form of food aid and emergency shelter.
- Prioritize the provision of clean water and sanitation facilities, including the installation of water tanks in schools and health facilities, as well as the construction of gender segregated latrines.
- Implement measures to address overcrowding in schools, including the provision of temporary learning spaces and school supplies.
- Implement comprehensive GBV prevention and response programs, including awareness campaigns, training for community leaders and service providers, and provision of medical and legal support for survivors.
- Provide mental health and psychosocial support to address trauma and mental health challenges.

Mid- to Long-Term:

- Strengthen healthcare services by rebuilding damaged facilities and ensuring the availability of essential medical supplies.
- Foster collaboration among local authorities, humanitarian organizations, and community leaders to devise and enact sustainable solutions addressing the root causes of conflict and displacement. Implement peacebuilding programs, such as peace for development planning and implementation, to promote social cohesion and bolster resilience within affected communities.
- Reconstruct the damaged educational facilities.

INTERNATIONAL ORGANIZATION FOR MIGRATION

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