

 62 assessed sites

 47,419 IDP households

 198,991 IDPs



Focus Group Discussion with IDPs in Minapo site, Meluco, Cabo Delgado during MSLA Round 6 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 6 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 22 September to 23 October 2021 and presents trends from 59 assessed sites hosting internally displaced persons across nine districts in Cabo Delgado, 2 sites in Niassa, and 1 site in Nampula.

In total, 198,991 internally displaced persons (IDPs) (an increase of 3% since the previous round) or 47,419 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 642,404 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 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 22 September to 23 October 2021, in close coordination with provincial government and INGD partners, the International Organization for Migration (IOM)'s Displacement Tracking Matrix (DTM) teams conducted Multi-Sectoral Location Assessments (MSLA) in 59 sites hosting 192,721 internally displaced persons (IDPs) in Cabo Delgado province, 1 site with 5,934 IDPs in Nampula province, and 2 sites with 336 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 198,991 individuals in the assessed sites, 62,045 (or 31%) are women, 32,022 (16%) are men, and 107,948 (53%) are children. Demographic data in Figures 2 and 3 is a sample collected through random sampling of twenty households per site.

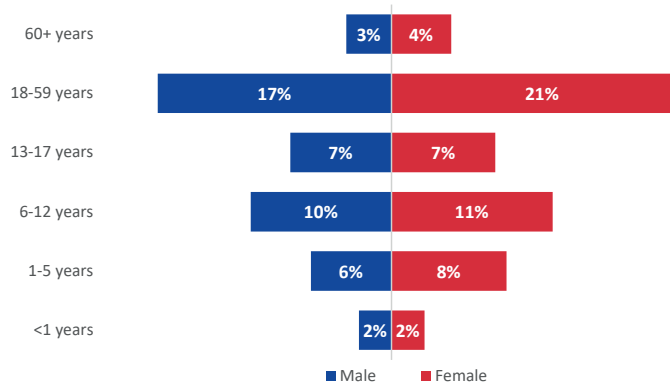


Figure 3: Sex and age demographics of IDPs in Cabo Delgado, Nampula and Niassa

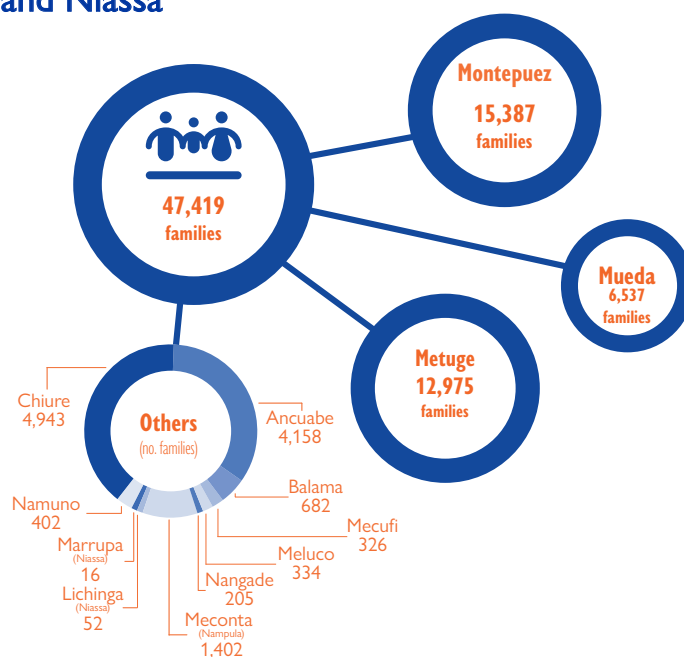


Figure 1: IDP households per district in Cabo Delgado, Nampula and Niassa

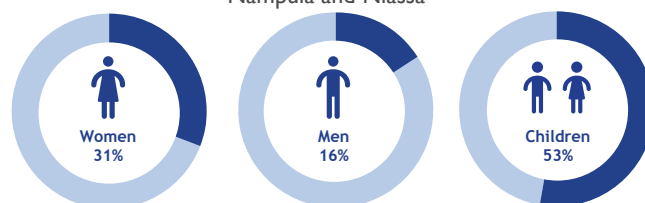
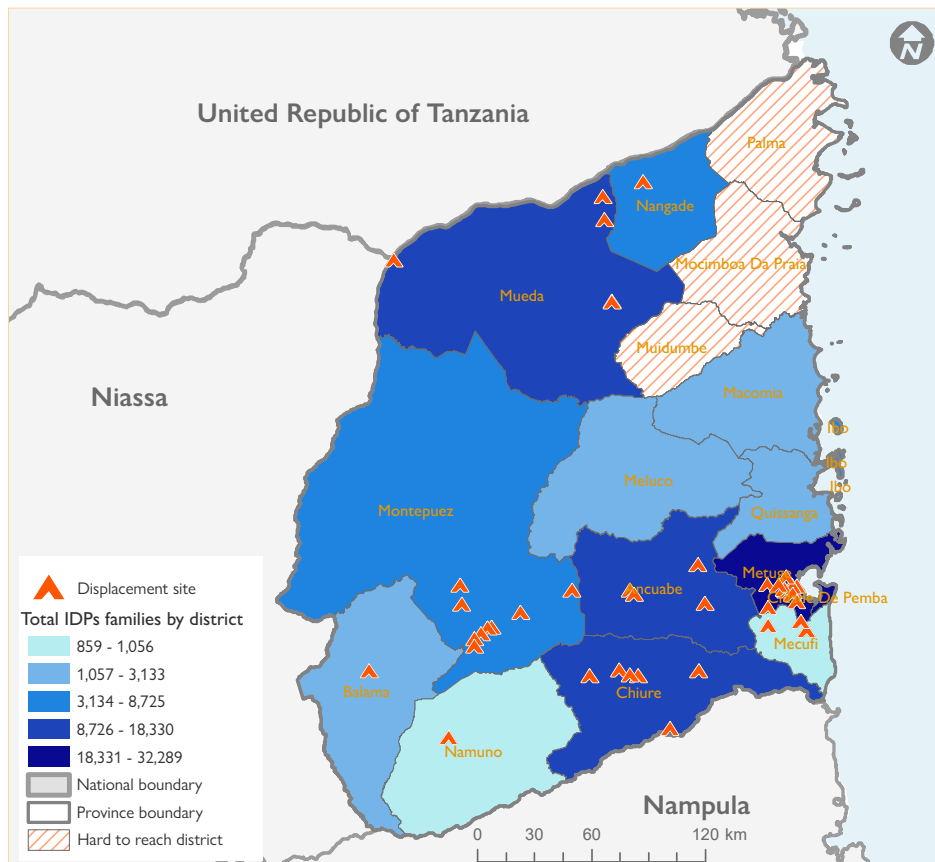


Figure 2: Proportion of adult female, adult male, and child IDPs

Based on demographic data, gathered through a random sampling of IDPs in the sites, 55% of IDPs are female and 45% are male. According to the sampling, 55% of the IDP population is under 18 years of age (close to the 53% estimate from KIs). There are an estimated 9,010 infants (under 1 year of age) in the IDP population, and 26,928 children aged 1 to 5 years old - for demographic breakdown see [MSLA 6 dataset](#).

Demographic data for Round 6 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	Separated children	Elderly without carers	Child-headed households	Elderly-headed households
Ancuabe	17,443	4,158	116	0	113	0	24	2	0	9
Balama	2,977	682	24	36	12	3	17	0	7	58
Chiure	27,190	4,943	58	0	73	0	5	0	0	0
Mecufi	1,357	326	48	250	20	25	0	8	25	35
Meluco	1,097	334	26	68	12	8	0	0	0	30
Metuge	54,047	12,975	693	459	354	6	46	14	7	204
Montepuez	60,288	15,387	214	15	53	5	104	134	6	0
Mueda	25,656	6,537	101	176	165	0	51	39	18	32
Namuno	1,987	402	10	121	9	36	0	0	0	50
Nangade	679	205	0	36	8	3	7	1	0	20
Meconta (Nampula)	5,934	1,402	46	42	25	35	0	141	0	50
Lichinga (Niassa)	269	52	5	12	3	5	0	4	0	4
Marrupa (Niassa)	67	16	0	0	0	0	0	0	0	5
<b>Grand Total</b>	<b>198,991</b>	<b>47,419</b>	<b>1,341</b>	<b>1,215</b>	<b>847</b>	<b>126</b>	<b>254</b>	<b>343</b>	<b>63</b>	<b>497</b>



196,745 IDPs

46,922 IDP households

59 assessed sites

Fifty-nine 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 eight per cent in EPC 25 de Junho. Thirty-six are relocation sites, 21 are temporary sites, and two are host community extensions. Six sites reported limited physical accessibility - they can only be accessed with 4x4 vehicles. Forty-two 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: 16% adult males (32,156 individuals), 31% adult females (60,666), 53% children (103,923). There are an estimated 9,030 infant children (under one year old), and 26,928 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Unaccompanied Minors	Elderly with-out carers	Child-headed households	Elderly-headed households
1,290	1,161	737	86	222	198	63	438

Mobility

The insecurity situation was a cause of displacement of IDPs in 57 out of 59 sites assessed (in Centro de Ngunga, natural disasters and insecurity were reporting as displacement drivers, and food insecurity in Chiote site). In 59 per cent of sites, the majority of the IDP population arrived more than six months ago, 22 per cent between three and six months ago, and 12 per cent between one and three months ago. In the past month, four new sites have been opened. In 46 per cent of sites, it is reported that the sheltered population is increasing.

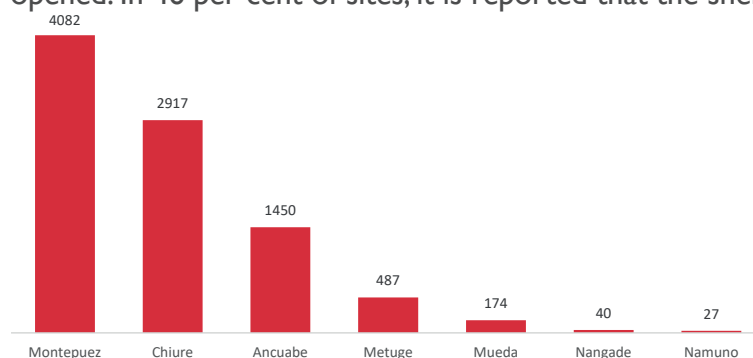


Figure 4: Number of arrivals in last month per district

Sites reported 9,117 arrivals in the past month. Forty-four per cent of the recorded arrivals were in Montepuez, 32 per cent in Chiure, and 16 per cent in Ancuabe. The largest individual influx was in Centro de Muanona in Montepuez, with 3,055 arrivals.



## Priority Needs

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

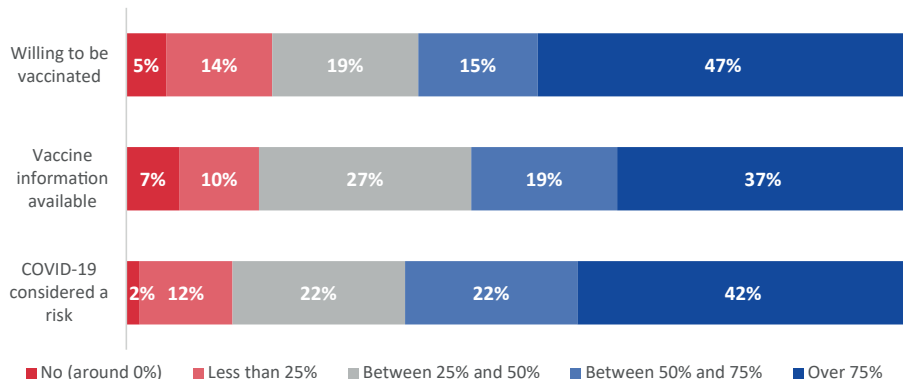
Aggregated across all the sites in Cabo Delgado, the average sectoral needs for the sites are as follows: Food **4.4** ; Water **4.3** ; Shelter **4.3** ; NFIs **4.2** ; Healthcare **4.2** ; Education **4.2** ; WASH **4.0** ; Energy **3.8** ; Other **2.2** . The table below shows the sectoral needs of each site as reported by Key Informants.

District	Site Name	Food	Water	Shelter	NFIs	Healthcare	Education	WASH	Energy	Other
Ancuabe	Milamba	5	5	5	5	4	5	5	5	5
	Minhewene	5	4	5	5	5	5	5	5	5
	Muaja	5	5	4	5	5	5	5	5	5
	Nacussa B	4	5	5	5	5	5	3	5	5
	Nanjua A	5	5	4	5	5	5	5	5	5
	Nanjua B	5	5	5	5	5	3	2	5	5
	Nankumi	5	5	5	5	5	3	4	5	5
	Natove	5	5	3	5	5	5	5	5	5
Ngeue	4	5	5	3	5	5	3	5	5	
Balama	Bairro de Impire	2	2	1	2	1	1	1	0	2
	Bem-Vindo	1	1	2	2	3	4	2	0	2
Chiure	Chiure velho	2	2	3	2	2	2	3	0	2
	Katapua	3	2	3	3	3	3	3	0	2
	Maningane	1	1	3	2	1	3	2	0	2
	Marrupa	3	2	3	2	2	3	5	0	2
	Meculani	3	2	3	3	2	3	3	0	2
	Megaruma	3	2	3	2	1	2	2	0	2
	Ocuá-sede	3	2	3	3	2	2	2	0	2
	Chiote	4	4	4	4	4	4	4	4	5
Mecufi	3 de Fevereiro	3	2	4	2	0	4	0	0	1
Meluco	Minapo	4	4	4	4	4	4	5	5	4
Metuge	25 de Junho	5	5	5	5	5	5	5	5	0
	Centro Agrário de Namupala	5	5	5	5	5	5	5	5	0
	Centro de Bandar	5	5	5	5	5	5	5	5	0
	Centro de Mpiri	5	5	5	5	5	5	5	5	0
	Cuaia	5	5	5	5	5	5	5	5	0
	Epc Manono	5	5	5	4	5	4	4	4	0
	Nacobo	5	5	5	4	5	4	4	5	0
	Namarua	5	5	5	5	5	5	4	4	0
	Naminaue	5	5	5	5	5	5	5	5	0
	Nangua 1	5	5	5	5	4	4	4	3	0
	Nangua 2	5	5	5	5	5	5	5	5	0
	Ngalane	5	5	5	5	4	5	4	4	0
	Ngunga	5	5	5	5	5	5	4	5	0
	Nicavaco	5	5	5	5	5	5	4	5	0
	Ntrocota	5	5	5	5	5	5	5	5	0
	Pulo	5	5	5	4	5	3	4	5	0
	Saul	5	5	5	5	5	5	5	5	0
	Tratara	5	5	5	5	5	5	5	5	0
	Unidade	5	5	5	5	4	5	4	4	0
	Montepuez	Bairro de Upajo	5	5	4	4	4	5	5	5
Bairro de Campona		5	5	4	5	5	5	4	4	4
Bairro de Namoro		4	5	4	5	5	5	5	5	4
Centro de Mararange		5	5	4	4	5	5	5	5	5
Centro de Marcune		5	5	4	4	5	5	5	5	4
Centro de Mirate		4	4	4	4	4	4	4	4	4
Centro de Muanona		5	5	4	5	5	5	5	5	4
Centro de Nanhupo B		5	5	5	5	5	5	5	4	4
Centro de Ntele		5	4	5	4	4	4	4	4	4
Centro de Ujama		5	5	5	4	4	4	4	4	4
Massasse		5	4	3	4	4	4	4	4	4
Nacaca		5	3	3	4	4	4	4	4	4
Mueda	Eduardo Mondlane	5	5	4	4	5	4	4	4	0
	Centro de Lyanda	5	5	4	4	5	4	4	4	0
	Centro de Negomano	5	5	5	4	5	4	4	4	0
	Centro de Naschitenje	5	5	4	5	5	4	5	4	0
	Centro Namatil	0	5	5	4	5	4	4	4	0
Namuno	Nquiriquele	5	5	5	5	5	4	4	5	4
Nangade	Centro de Reassentamento	5	5	5	4	4	4	4	5	4



COVID-19 Preparedness

In 12 per cent of sites there are no precautionary measures against the spread of COVID-19, while in 75 per cent of sites IDPs wear masks. In 37 per cent of sites, most IDPs wear face masks in public spaces, while in 54 per cent only some IDPs do, and in 7 per cent no one does. In 68 per cent of sites, IDPs sometimes wash their hands, while in 19 per cent they almost never do. In 76 per cent of sites, masks haven't been distributed. In 77 per cent of sites, functional hand washing stations with soap are not available. In 84 per cent of sites, information, education, or communication materials related to COVID-19 are not available. Awareness sessions have been held in 64 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 47 per cent of sites, the majority of IDPs (over 75% of the population) are willing to be vaccinated, in 37 per cent of sites the majority of IDPs have information on vaccines available to them, and in 42 per cent of sites the majority of IDPs consider COVID-19 a personal health risk.

Figure 5: Percentage of sites where a proportion of the site populating is (a) willing to be vaccinated (b) is able to access vaccine related information (c) considers COVID-19 a risk



Shelter & NFIs

Throughout Cabo Delgado, on average 10 per cent of households sleep outdoors, 36 per cent sleep in emergency shelters, and 54 per cent sleep in permanent shelters. For a breakdown of shelter conditions for each site, consult the [MSLA 6 dataset](#). In 68 per cent of sites, local building materials are available and accessible to IDPs, in 80 per cent of sites IDPs are constructing shelters. In 14 per cent of sites, shelters have leakages, and in 10 per cent shelters have flooded. In 53 per cent of sites, markets are reportedly functioning.

IDPs received shelter/NFI support in 54 per cent of sites. IDPs in 80 per cent of sites urgently need NFI/shelter support. The most needed types of support are for emergency shelters (81% of sites), NFIs (79%), shelter upgrades (70%), technical support (45%), retrofitting (15%), and labour support (13%). In 75 per cent of sites the majority of IDPs do not have access to flashlights. IDPs in site acquired NFIs/shelter materials in the following ways: through aid distributions (56% of sites), purchased at local market (36%), brought with them when displaced (29% of sites), donated by the local community (25%). The main barriers to accessing NFIs are: lack of money (49% of sites), items are too expensive (24%), market not accessible (17%), transport too expensive (15%), market is not safe (10%), and markets do not sell items (3%).

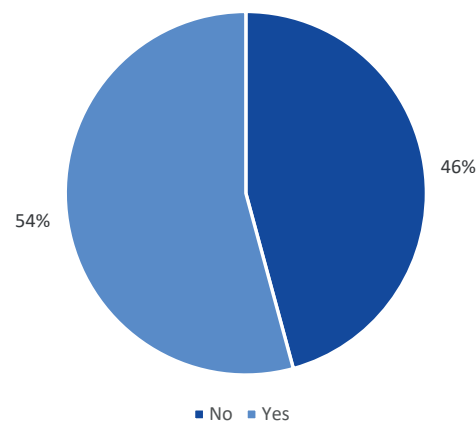


Figure 6: Percentage of sites where IDPs received shelter/NFI support

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 6 dataset](#).

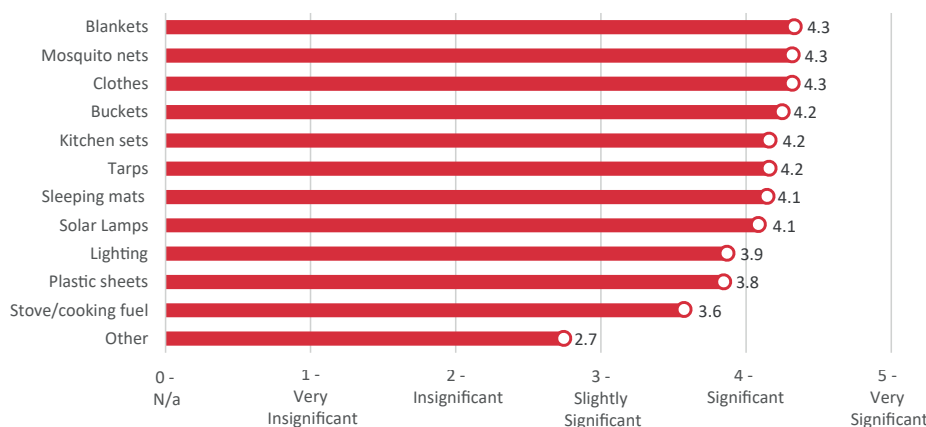


Figure 7: Average NFI needs of all sites using Likert Scales



In three sites around half (50%) of IDPs live in areas where open defecation is visible. In one site most (around 75%) of IDPs live in areas with visible defecation, and in one site, all IDPs live near visible defecation. In 76 per cent of sites no open defecation is visible. In 95 per cent of sites, no one has access to showers or bathing facilities. In 49 per cent of sites no one has access to enough soap, while in 41 per cent of sites a few (around 25%) have access. In 10 per cent of sites no one has enough drinking water. In 68 per cent of sites, there are no hand washing stations. There have been hygiene/WASH communications in 53 per cent of sites. In 93 per cent of sites, there are no systems for managing solid waste. In 75 per cent of sites, there was no WASH related distribution in the last month. In 32 per cent of sites, draining systems function very poorly.

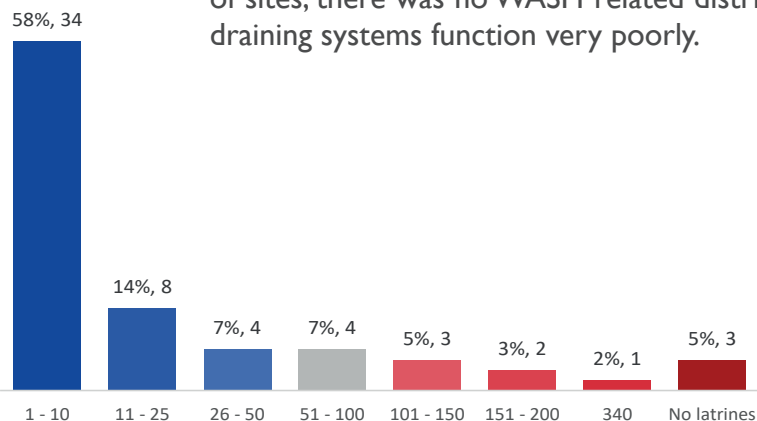


Figure 8: Number of IDPs in sites for each available and functional latrines as percentage (%) and number (n) of sites

The graph beside presents the number and percentage of sites, against how many IDPs are present on site for each available latrine. In 58 per cent of sites there are between 1 and 10 latrines for each IDP, while in 14 per cent there are between 11 and 25 IDPs for each latrine, and 7 per cent have 26 to 50 IDPs per latrine. In Centro de Reassentamento (Nangade), there are 340 IDPs for each latrine. In 3 sites there are no functional latrines. Following WASH support since Round 5, the number of IDPs per latrine has decreased in Eduardo Mondalane site from 521 to 15



Eighty-eight per cent of sites received a food distribution in the last month. In 37 per cent of sites, the majority of IDPs have access to farming lands. In 19 per cent of sites, households have received agricultural inputs from a distribution. Of those sites where the majority have access to farming land, in 45 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 36 per cent of sites, households do not own any livestock, while in 45 per cent of sites a few households (around 25%) own livestock.



In 98 per cent of sites, the first course of action when family members get sick is to go to a health facility. In 78 per cent of sites, IDPs have access to a hospital, in 27 per cent access to mobile brigades, an on-site clinic in 8 per cent of sites, and ambulance services in 5 per cent of sites. In 76 per cent of sites, the majority of women give birth in health facilities, while in 17 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 97 per cent of sites, IDPs are aware of HIV support services, and in 97 per cent they are aware of Tuberculosis support services. In 17 per cent of sites, IDPs have been presenting symptoms of diarrhea or vomited. Overall, IDPs are satisfied with the provision of healthcare in 51 per cent of sites in Cabo Delgado.



In 74 per cent of sites, the majority of children have access to schools/education facilities. In 63 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 42 per cent are enrolled and attending education. The graph below shows the distance to school facilities for the sites in Cabo Delgado.

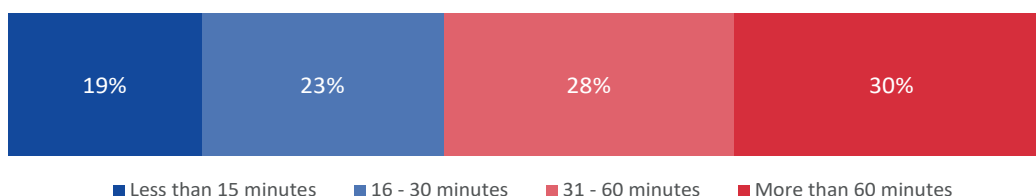


Figure 9: Distance to school/education facility as percentage of sites





Protection

There are no police stations/security posts in 71 per cent of sites. There are no child friendly spaces in 93 per cent of sites. In all sites, communal facilities are not lit. In 68 per cent of sites, there is a security provider/mechanism to ensure the safety of IDPs. In 71 per cent of sites, there is a referral mechanism for Gender Based Violence (GBV) survivors.

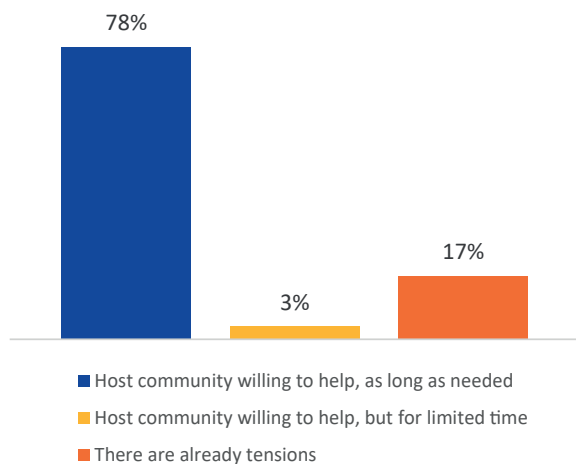


Figure 9: Relationship with host community as percentage of sites

In 31 per cent of sites, there is a support mechanism for the psychosocial needs of the population. In 78 per cent of site, the host community has said that IDPs can stay as long as is needed. In 17 per cent of sites, there are already tensions between the IDP and host communities (sites: Nanjau A, Nanjua B, Chiure Velho, Maningane, Marrupa, Ngalane, Unidade, Eduardo Mondalane, Lyanda). In 98 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, 69 per cent of sites report that the main barrier to getting the necessary documentation is due to a lack of financial means, and 21 per cent due to heavy bureaucracy. In 42 per cent of sites, the majority of IDPs present can neither read or write.



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%).

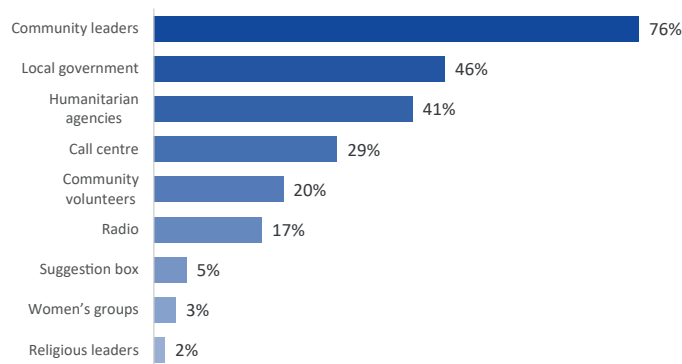


Figure 10: What are the main communication mechanisms used by IDPs to communicate with the humanitarian community, as percentage of total sites

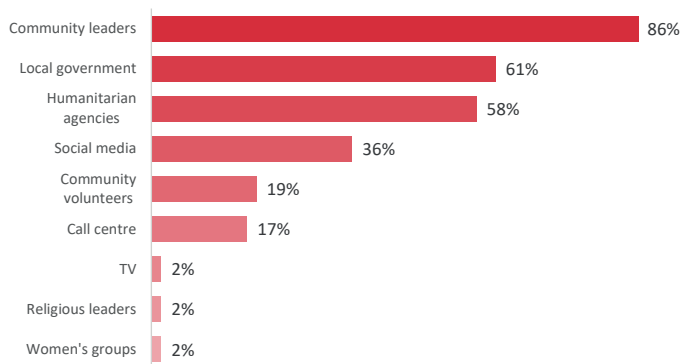


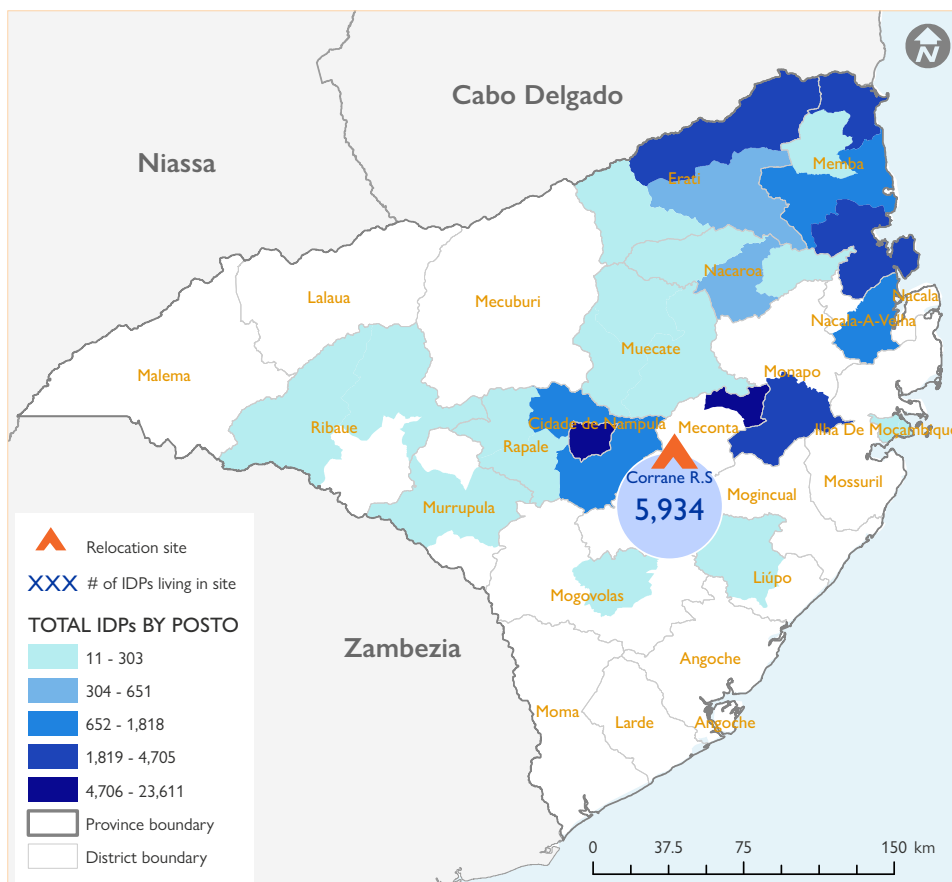
Figure 11: What are the main communication mechanisms used by the humanitarian community to communicate with IDPs, as percentage of total sites



Energy

In 46 per cent of sites, households do not need to use any coping strategies associated with a lack of fuel, while in 31 per cent households spend their savings, and in 22 per cent of sites they may skip meals/reduce portion sizes. In 63 per cent of sites, households generally manufacture their cooking stoves. In 63 per cent of sites, households generally produce or manufacture their cooking fuel. In 36 per cent of sites, households spend between 1h30 and 3h00 per week collecting fuel. In 48 per cent of sites they spend less than 1h30 collecting fuel. In 42 per cent of sites households generally do their cooking outdoors. In 86 per cent of sites, it is reported that either electricity points are not functioning or that fuel/wood is not available at the local market. A total of 39 per cent of sites reported that gathering/collecting the electricity/fuel is dangerous. The main priorities for energy services included phone charging in 73 per cent of sites, household lighting in 61 per cent of sites and community lighting in 58 per cent of sites.





5,934 IDPs

1,402 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. The majority of people were displaced more than 6 months ago. The site is increasing in size: in the last month there was an inflow of 1,024 individuals from Meconta.

**Demographics**

In Corrane relocation site, the IDP demographics are as follows: 14% adult males (813 individuals), 22% adult females (1,292), 64% children (3,829). There are an estimated 430 infant children (under one year old), and 814 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Separated children	Elderly without carers	Child-headed households	Elderly-headed households
46	42	25	35	0	141	0	50

**Priority Needs**

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

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

**COVID-19 Preparedness**

Regular hand washing is the most common preventative measure against COVID-19 on site, and IDPs sometimes 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 & NFIs**

In Corrane, 100% of IDP households are sleeping in emergency shelters, but households are currently not building their own shelters. IDPs need emergency shelters, shelter upgrades, and technical assistance for shelters. Shelter/NFI support has been received by IDPs in the site. Corrane reported significant needs for all NFIs apart from solar lamps. The main barrier to accessing NFIs is a lack of money to purchase items 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 poorly functioning. IDPs use hand pumps to access water. Long waiting times for water is a key issue reported by IDPs.



## Food Security and Livelihoods

A food distribution occurred in the last month. In each case, and around 100% of households received food in the distribution. In the site, the majority of IDPs have access to farmland. They haven't received an agricultural distribution in the last month. When asked whether the families were working there farmland/machambas, there was no response, similarly for whether how many own livestock.



## 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 though an ambulance service is also present. 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 3,829 children). The school is described as non-functional. No reason is given for the lack of a functioning education facility. 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 no functioning police post on-site, and 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 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.



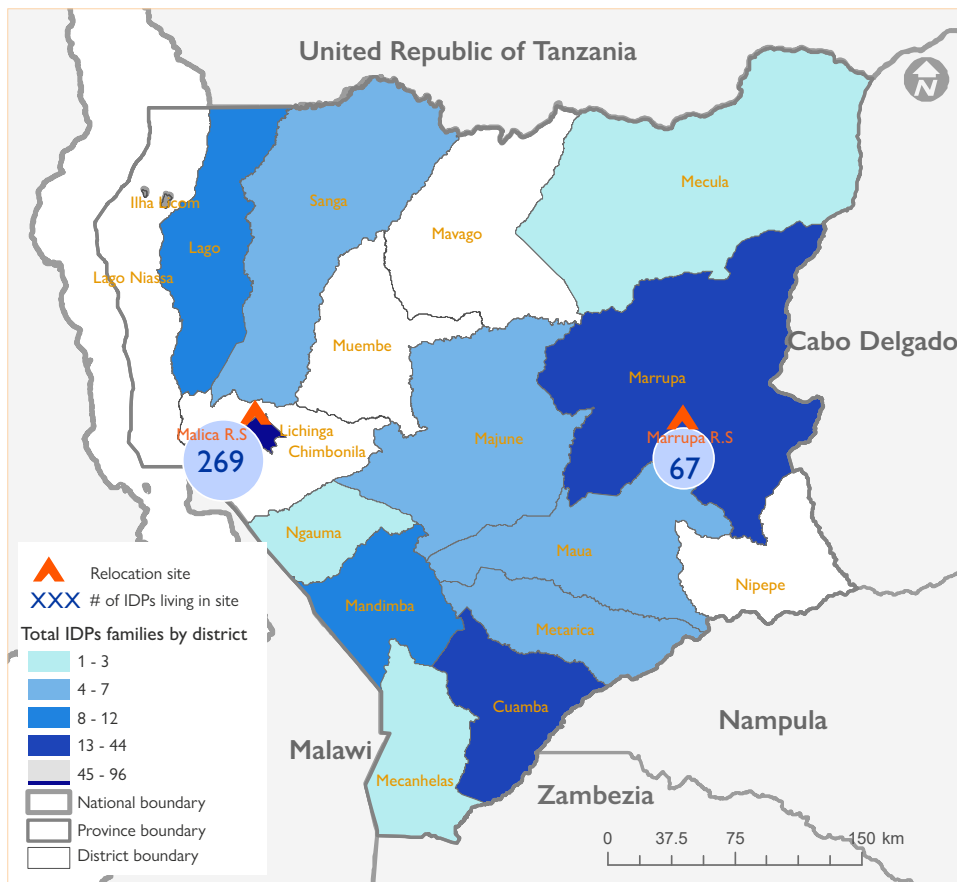
## Communication

To communicate with the humanitarian sector, the community uses the following: community leaders, humanitarian agencies, and community volunteers. 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, WASH, Nutrition, Protection, Child Protection, GBV, and Education. It is reported that in the majority of households, no members can either read or write.



## Energy

Households report having enough fuel, indicating no need to employ any coping mechanisms. Households generally produce/manufacture their own cooking stoves, and generally acquire/collect fuel themselves. Households report that they fulfill their energy needs either at local markets, or that they have functional electricity. There are no reported barriers to accessing energy for households in the site. The main priorities in the site are energy services for mobile phone charging, household lighting, and energy for street lighting



336 IDPs

68 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: 16% adult males (53 individuals), 26% adult females (87), 58% children (196). There are an estimated 18 infant children (under one year old), and 38 children aged 1-5 years.

Pregnant women	Breastfeeding mothers	Disabilities	Chronic conditions	Separated children	Elderly without carers	Child-headed households	Elderly-headed households
5	12	3	5	4	0	0	9

**Priority Needs**

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

Food, Water, Shelter, NFIs, Health, Education, WASH, Energy

**COVID-19 Preparedness**

Wearing masks is prevalent amongst some IDPs on both sites. IDPs almost never wash their hands in Malica, but sometimes in Marrupa 2. Hand washing stations have not been installed. There have been no mask distributions. There are no information materials, and no COVID-19 awareness sessions 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 & NFIs**

In Malica, all IDP households are sleeping in emergency shelters, while in Marrupa 2 half are in emergency shelters and half in permanent shelters. Shelter/NFI support has not been received in Marrupa 2. The most significant needs are for NFI assistance, shelter upgrade assistance and technical support in both sites. The most significant NFI needs in both sites, are for blankets, clothes, buckets, kitchen sets, sleeping mats, and solar lamps.





There are functioning latrines on-site, and there is one available latrine for every two households. There are no hand washing stations in Malica or in Marrupa 2. Hygiene campaigns have not been conducted in either site. 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.



Food Security and Livelihoods

Food distributions have been received in the last month, and approximately all households received the distribution. In both sites, IDPs have access to farmland. Households in Marrupa 2 did not receive an agricultural distribution in the last month. All households in Malica are working their farmland, while none in Marrupa 2 are. Around 25 per cent of households in Malica own livestock, while in Marrupa 2 no one does.



Health

When members of the household fall ill, the first course of action is to go to the local health facility, which is a hospital in Malica (no is no longer an on-site facility in Marrupa 2). 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.



Education

In both sites, the majority of school age children have access to school, and in both sites schools are described as functional. In both sites the schools is 16-30 minutes away when walking. It is reported that IDPs with disabilities face significant barriers to accessing education.



Protection

There is a functioning police posts only in Malica, and are no child-friendly spaces in either site. There are security providers or mechanisms present for the safety of residents in the sites, and referral mechanisms for GBV survivors in both sites. Communal facilities are lit in Malica. 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.



Communication

To communicate with the humanitarian sector, the communities use the following: community leaders, local government, community volunteers, and religious leaders. When communicating with the displaced communities, the humanitarian sector uses the following avenues: staff from humanitarian agencies, local government, community leaders, and community volunteers. Volunteers are on-site only in Marrupa 2, and have organised social activities for the following sectors: Health, Nutrition, PSEA, 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, households in both sites spend their savings and sell assets as a coping strategy. Households, in both sites, individually produce/manufacture their cooking stoves and households manufacture/produce/collect their cooking fuels. In Malica, households spend on average 30 minutes a week or less collecting fuel, but 30 minutes to 1h30 in Marrupa 2. In both sites households normally cook outdoors. There are no available/functioning energy sources on either site. The main reported barriers are that electricity/fuel collection points are too far, and that electricity/fuel is too expensive. The main energy priorities are for mobile phone charging and household lighting in both sites (with an additional need for streetlighting reported only in Marrupa 2).

DTM activities are supported by:

