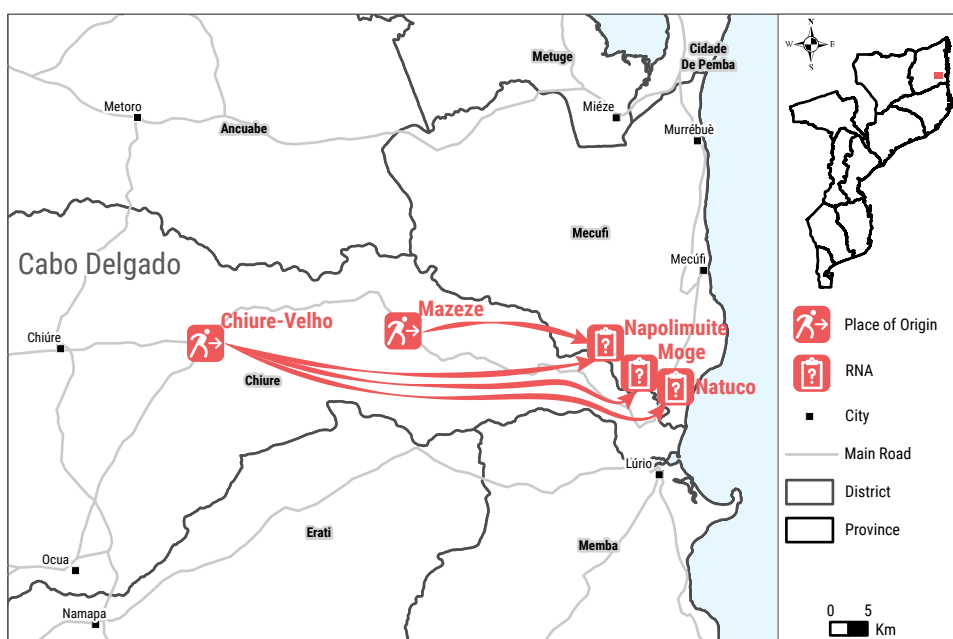


Rapid Needs Assessment (RNA) Rapid Response Mechanism (RRM)

Moge, Napuilimuite and Natuco - Mecufi District
Cabo Delgado, Mozambique
1-2 October 2025

CONTEXT & RATIONALE



SINCE 27 SEPTEMBER 2025, new arrivals of internally displaced persons (IDPs) have been reported in Mecufi District, totaling 414 families as of 28 September. Mecufi Sede (Sassalane) hosts 6 families (48 people). In Natuco locality, Natuco Sede hosts 260 families (743 people, including 176 women, 99 men, and 468 children), Moge hosts 33 families (134 people, including 71 children and 60 adults; full disaggregation pending), and Napuilimuite hosts 115 families (462 people, including 140 boys, 130 girls, 97 adult women, 84 adult men, 2 pregnant women, and 9 elderly persons). Families are being hosted within the communities, and additional arrivals are expected in the coming days.¹

This document presents the main findings of the assessment. All findings are indicative of the priority needs of the displaced population. Further details can be found in the Methodology Description and Limitations section at the end of the document.

Access Conditions: Natuco (1h30 from Pemba) is accessible by road via the N1 to the Muxara junction and along the R760; Napuilimuite is reachable from Natuco by R760 (8.7 km), with Moge en route. Security is generally stable with three checkpoints manned by FADM and PRM at Muxara junction, Muitua and the entrance to Mecufi Sede, though the situation remains volatile and should be monitored prior to deployment.

TOP 3 REPORTED PRIORITY NEEDS by % of households

98%
Food

- **97%** of households reported having **problems accessing food**
- **60%** of households depended on **gifts from relatives as their primary source of food**
- **Agricultural inputs**, in particular, were specifically requested to support **IDPs regain self-sufficiency**.

90%
NFI

- Displaced households left their areas of origin with few belongings - approximately **28%** of households reported **not owning any essential non-food items (NFIs)**

85%
Shelter

- **47%** of IDP households **did not intend on returning to their place of origin** in the 30 days following data collection
- IDP households (**97%**) were **living with host families from the host community**

HOUSEHOLD PROFILES

414 Number of IDP households in the affected population

60 Number of assessed households

Population groups, by % of households



Respondent gender, by % of households



DISPLACEMENT

53% of IDP households **intended** on **returning** to their **place of origin** in the 30 days following data collection (n=59)

100% of IDP households reported **lack of security** as the **principal barrier to return** to their place of origin (n=49)

QUALITATIVE INSIGHTS

Prior to displacement, the affected families relied on agriculture and fishing for livelihoods in their areas of origin in Chiure (Cabo Delgado) and Memba (Nampula). While, many families were eager to return home to resume these activities, insecurity in the areas of origin continued to deter them.

FOOD SECURITY, LIVELIHOODS & MARKETS

% of households that reported having problems accessing food

97%

Average number of meals consumed per household member per day

1.7

% of households that reported a decrease in the frequency of meals per day since the shock

77%

Top 3 reported barriers to food access, by % of households that reported having problems accessing food (n=61)*

- 97%** Lack of financial resources
- 48%** Lack access to land
- 21%** Limited food availability

Top 3 reported sources of food, by % of households*

- 60%** Received as gift from relatives
- 38%** Borrowing food from relatives
- 27%** Personal production

Top 3 reported primary livelihood activities, by % of households

- 80%** Subsistence farming
- 7%** Craftsmanship
- 3%** Small business

PRIORITY ACTION

Food assistance: 98% of assessed households reported food security as a top 3 priority need

Nearly all households (97%) reported challenges accessing food. Many stressed the importance of receiving agricultural inputs alongside food assistance to help restore self-sufficiency.

% of households per Reduced Coping Strategy Index (RCSI) category²

Low	Medium	High
15%	53%	32%

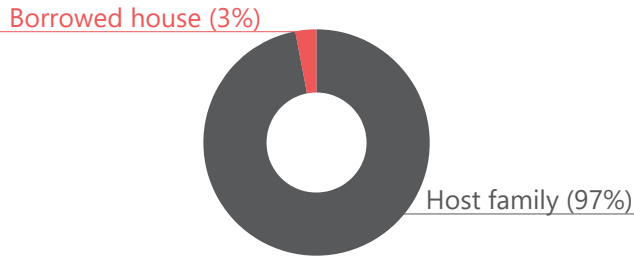
7% of households that reported having **access to land for cultivation**

48% of households that reported having **access to mobile money (M-Pesa/e-Mola)**

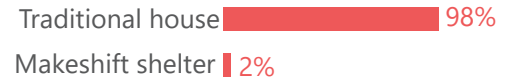
*select multiple, the total value may exceed 100%

SHELTER & NFIs

Most reported living arrangement, by % of households



Most reported shelter condition, by % of households



PRIORITY ACTION

Shelter assistance: NFI (90%) and shelter (85%) were reported amongst the top 3 priority needs by assessed households

91% of households were living with host families from the host communities. Qualitative observations added that homes in all 3 communities were made from precarious traditional material (matope with grass roofs).

Essential NFIs were also scarce: Approximately 28% of households reported not owning any essential NFIs, such as soap, stove, lamps, etc. Community leaders stressed the need for clothes, covers, and cooking utensils, as most families fled their areas of origin with few belongings.

Ownership of essential NFIs, by % of households*

Essential NFI	% of HH
None	28%
Soap	0%
Stove	0%
Lamp	0%
Mosquito nets	3%
Sleeping mats	5%
Sleeping sheets	7%
Cooking utensils	7%
Pots > 5 Lt	17%
Water buckets	17%
Clothes	50%

HEALTH & NUTRITION

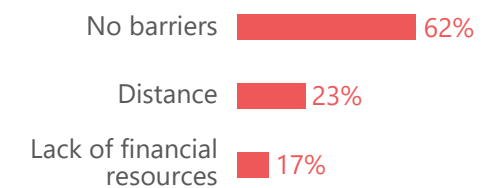
38% of households reported having at least **one household member above age 5 who was sick in the 2 weeks prior to data collection**, with fever (10), skin problems (6), and respiratory illness (4) as the most reported conditions

17/37 households with at least one child under age 5 (n=37) reported having **at least one child who was sick in the 2 weeks prior to data collection**

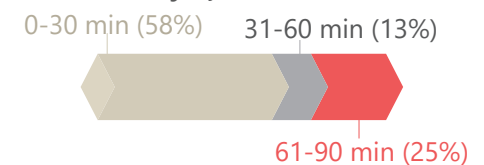
10/23 households with a sick member above age 5 **received treatment for their condition**

6/12 households **with newborns (less than 6 months old) reported that their infants consumed anything other than breast milk** during the 24 hours prior to data collection

Top 3 reported barriers to healthcare, by % of assessed households*



Reported distances to the nearest health facility, by % of households



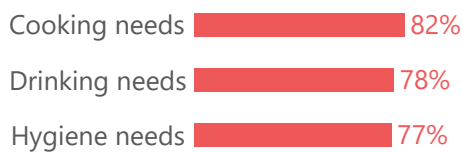
QUALITATIVE INSIGHTS

Natuco had one health center, but it lacked the capacity to provide care to all of the new arrivals. According to community leaders, Napulimuite has one mobile brigade that passes through 3 times a month. Moge did not have any health facilities, with residents going to Natuco for medical care.

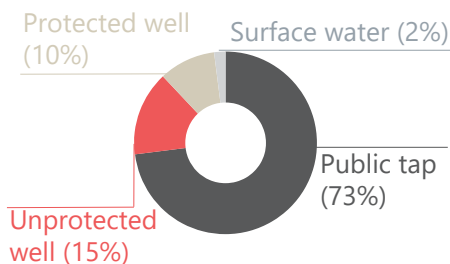
*select multiple, the total value may exceed 100%

WATER, SANITATION AND HYGIENE

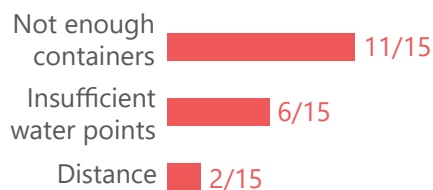
% of households that reported having enough water to meet the following needs



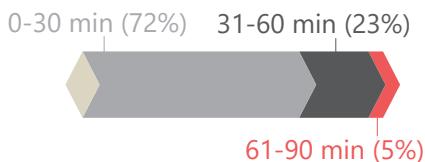
Most reported primary source of drinking water, by % of households



Top 3 reported barriers to accessing clean water, by % of households* (n=15)



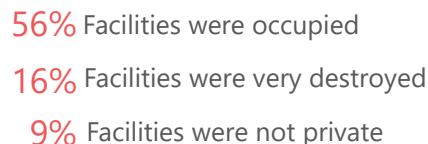
Reported water collection times (including travel time and wait time at water point), by % of households



53% of households reported **having problems related to sanitation facilities** (toilet/latrine)

95% of households reported **using a non-hygienic sanitation facility** (open pit latrine or open defecation)

Top 3 reported barriers to access a hygienic sanitation facility, by % of households who reported having sanitation facility issues (n=32)



QUALITATIVE INSIGHTS

Observations revealed a wide discrepancy between WASH facilities in the three sites: Natuco, where the majority of affected households resided, had 7 functional water points with clean water. Napulimuite had 4 functional water points, but many new arrivals were using surface water from the Megaruma River. Moge had 3 water points, but only 1 was functional.

As for sanitation facilities, nearly all households (IDPs and HC) used open-pit latrines -- those of Napulimuite and Natuco were particularly prone to unhygienic practices due to unstable soil conditions underneath.

EDUCATION

44% of households with at least one girl aged 5-17 reported having **all school aged girls attending school at the time of data collection** (n=43)

35% of households with at least one boy aged 5-17 reported having **all school aged boys attending school at the time of data collection** (n=40)

28% of households with children reported having their children participate in **non-school educational activities** (n=43)

Most reported barriers to school attendance for girls, by number of households* (n=23)

- 8 No documentation
- 5 Recent returnee
- 2 Lack of interest

Most reported barriers to school attendance for boys, by number of households* (n=26)

- 8 No documentation
- 5 Recent returnee
- 3 Lack of interest

Top 3 reported most pressing educational needs for children, by % of households* (n=49)

- 53% School supplies
- 47% Needs ID card
- 45% Recover missed school days

QUALITATIVE INSIGHTS

Napulimuite and Moge had primary schools up to the 6th class, whereas Natuco had a basic school up to the 9th class. However, many classrooms in the Natuco school were still damaged from Cyclone Chido from December 2024.

*select multiple, the total value may exceed 100%

PROTECTION, MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

100% of households reported a **good or very good relationship between IDPs and the host community**

18% of households had **heard or encountered separated/unaccompanied children among the newly arrived population**

78% of households **reported at least one member with missing identity documents**

33% of households were **concerned about protection issues in their community** (n=20), with fears of **armed conflict** (15) and **violence physical** (6)

Most reported causes of separated/unaccompanied children, by number of households (n=11)*

11 Loss of parents due to displacement

32% of households reported **knowing children** in the community that **worked with armed groups**, with **roads, schools, and resettlement sites** as the most commonly reported **recruitment location**

Top 3 reported psychosocial signs in adults, by % of households*

- 72%** Sadness and discouragement
- 28%** Anxiety or fear
- 27%** Nightmares

Top 3 reported psychosocial signs in girls, by % of households (n=43)*

- 35%** Sadness and discouragement
- 28%** Resilience and adaptation
- 21%** Anxiety or fear

Top 3 reported psychosocial signs in boys, by % of households (n=40)*

- 28%** Sadness and discouragement
- 25%** Resilience and adaptation
- 15%** Anxiety or fear

Top 3 reported reasons for social tension in the community, by % of households*

- 91%** None
- 2%** Religious differences
- 2%** Access to land

QUALITATIVE INSIGHTS

The host communities of Natuco, Moge, and Napulimuite have welcomed the displaced families and shared their limited resources and services. However, both displaced and host community leaders stressed the need for agricultural inputs to help displaced families regain self-sufficiency.

Child protection services are also needed, with many reported cases of separated children and recruitment by armed groups.

ACCOUNTABILITY TO AFFECTED POPULATIONS



Top 3 preferred sources of information on humanitarian aid, by % of households*

- 57%** Community leaders
- 53%** Face to face with humanitarian worker (any)
- 10%** Call phone

Top 3 preferred complaint mechanisms of humanitarian aid, by % of households*

- 55%** Face to face with humanitarian worker (any)
- 52%** Community leaders
- 10%** Call phone

Preferred modalities of assistance, by % of households

- In-Kind  **88%**
- Cash  **12%**

*select multiple, the total value may exceed 100%

METHODOLOGY OVERVIEW AND LIMITATIONS

The Rapid Response Mechanism (RRM) team of Action Contre la Faim (ACF) conducted 60 structured, face-to-face household surveys with households in Mecufi district on 1 and 2 October 2025: 37 with displaced families living in Natuco, 18 in Napuilimuite and 5 in Moge. The survey tool, deployed via KoBo Collect, targeted displaced households, which were selected using an on-site purposive sampling method. The household surveys were complemented by a qualitative, semi-structured team leader feedback form, which included observations (shelter conditions, water points, health facilities, schools), engagement with community leaders and local authorities, as well as insights from the data collection team. This qualitative data helped to contextualize the shock, triangulate information, and provide detailed descriptions of the assessed sites and living conditions of the affected population.

The scope of the RNA is limited by the rapid response requirements of the RRM and the need to operate within the resources available from partners. Therefore, the findings of the RNA are indicative rather than representative. Additionally, the questionnaire was designed to prioritize only the most essential indicators for each sector, which constrains the depth of the data collected. While the survey captures general living conditions across households, it does not explore differences between individual members or intra-household dynamics, including power relations related to gender, age, or disability. Please refer to the [Terms of Reference](#) and the [Dataset and Analysis](#) for more details.

HUMANITARIAN ACTORS PRESENT IN MECUFI

Organization	Type	Intervention Sectors
Action Contre la Faim	INGO	RRM - SNFI, WASH, Food
Solidarités International	INGO	RRM - SNFI, WASH, Food
Save the Children	INGO	Education, Child Protection, MHPSS
CARE	INGO	WASH
SEPPA	INGO	Food Security, Agriculture
IOM	UN	SNFI, CCCM
FDC	INGO	RRM - Child Protection
Helpcode	INGO	Protection, Child Protection
AVSI	INGO	Shelter, Livelihoods

ENDNOTES

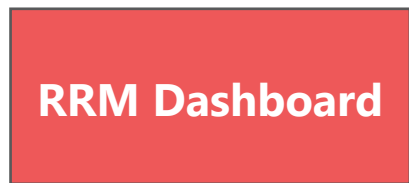
1 RRM Mozambique. Alert ACF_MEC_29092025. September 2025 (for access, please contact ACF Deputy Area Coordinator for Programs, Capucine Peignier, at dfccd@mz-actioncontrelafaim.org).

2 The RCSI is a proxy indicator of household food insecurity that is based on a list of coping strategies (relying on less preferred or less expensive foods, borrowing food or relying on help, reducing meal frequency, reducing portion sizes, and restricting food consumption for adults to prioritize children) that people do to manage their food insecurity situation. The higher the score, the more extensive the use of negative coping strategies and hence potentially increased food insecurity.

ABOUT THE RRM

The Rapid Response Mechanism (RRM) in Northern Mozambique, composed of two consortia—one led by Solidarités International with Action Contre la Faim, A Fundação para o Desenvolvimento da Comunidade, Acted, and IMPACT, and the other led by the Norwegian Refugee Council with Ayuda en Acción—provides emergency assistance to populations affected by conflict, epidemics, or located in newly accessible areas.

For more up-to-date information on RRM alerts and interventions, please use the link below to access the RRM Dashboard:



COOPERATING PARTNERS



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ABOUT REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).