SUDAN MULTI-SECTOR NEEDS ASSESSMENT (MSNA)

Key Findings: **Inter-sector Coordination Group**

15 December 2020

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ANNEX: Supplemental maps, graphs & tables

01 Overview of the MSNA

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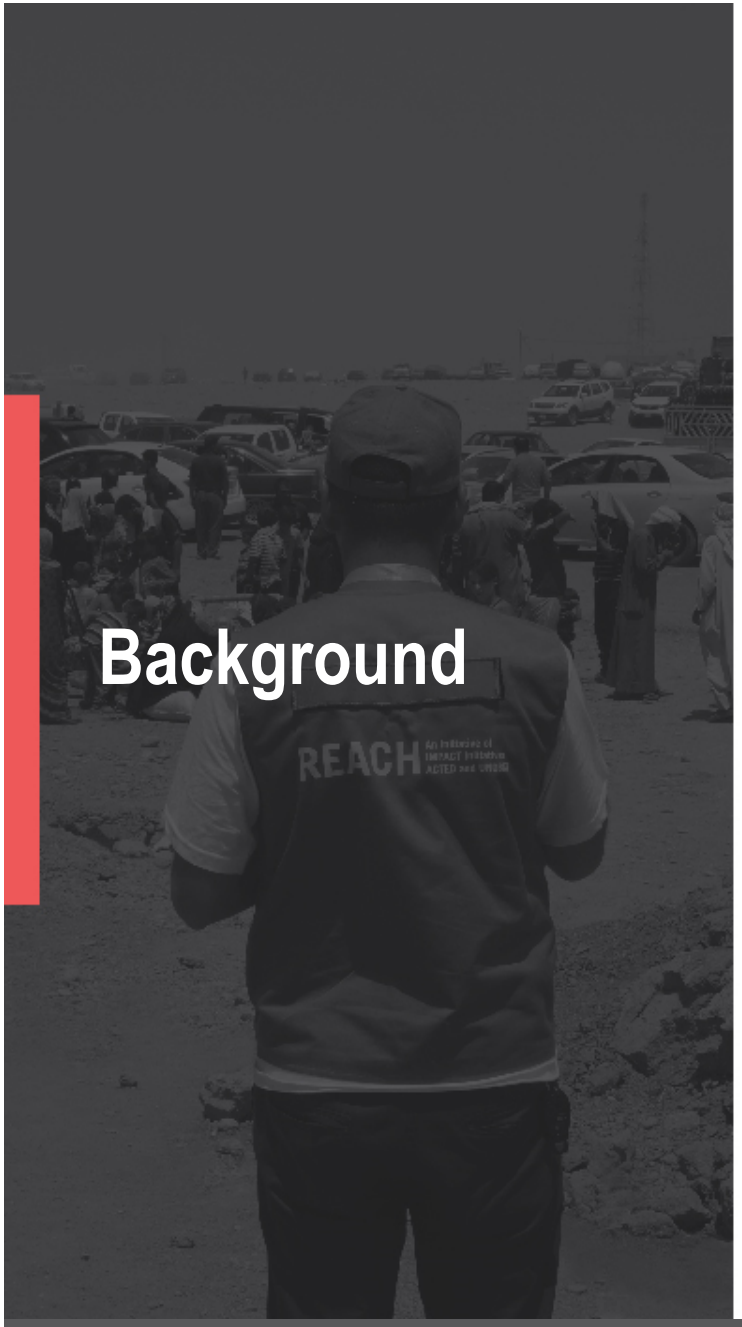

Background

Objectives of the MSNA

- The MSNA seeks to understand **multi-sectoral priority humanitarian needs** of populations and localities across the whole of Sudan.
- The findings intend to **provide timely updates** on key sectoral needs and priorities in order to **inform humanitarian response** and strategic programming for non-displaced, IDP and refugee households.
- The 2020 MSNA **aims to inform the 2021 Humanitarian Needs Overview** (HNO) and the **2021 Humanitarian Response Plan** (HRP).
- Contribute to a more **targeted and evidence-based** humanitarian response.

Coordination framework

Design

ISCG | Inter Sector Coordination Group

Coordination

National Assessment Task Team (NATT)

ISCG | Inter Sector Coordination Group OCHA

Partners

IOM UN MIGRATION

AND ADRA, Altawaki, ARC, CDF, CIS, DPI, DRC, EDCO, GPA, IRW, JMCO, Maarif, NaHA, NCA, NIDAA, NRC, NuWEDA, Plan International, SMOH, SOS Sahel, SRCS, UNHCR, UNICEF, VNRHD, WDECO, WFP, WHH, World Relief, ZOA

Donors

USAID FROM THE AMERICAN PEOPLE SHF Sudan Humanitarian Fund

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Quick guide to the versions of the MSNA HH survey dataset

Rationale: Versions 1 and 2 released to aid in the writing of the HNO and HRP

	Version 1	Version 2	Version 3
Date circulated	12 September	6 October	1 December
Dates of data collection	**HH surveys:** 16 August-7 September	**HH surveys:** 16 August-27 September	**HH surveys:** 16 August-27 October
Geographic coverage	**HH surveys:** 12 states and 36 localities	**HH surveys:** 17 states and 120 localities, plus Abyei PCA	**HH surveys:** 18 states and 165 localities, plus Abyei PCA
Number of surveys	**HH surveys:** 2,508	**HH surveys:** 9,003	**HH surveys:** 13,769
Criteria for including a stratum	**HH surveys:** ≥80% of the original sample quota, ≥30 surveys, and surveys validated	**HH surveys:** ≥80% of the original sample quota, ≥30 surveys, and surveys validated	**HH surveys:** ≥90% of the original sample quota and surveys validated

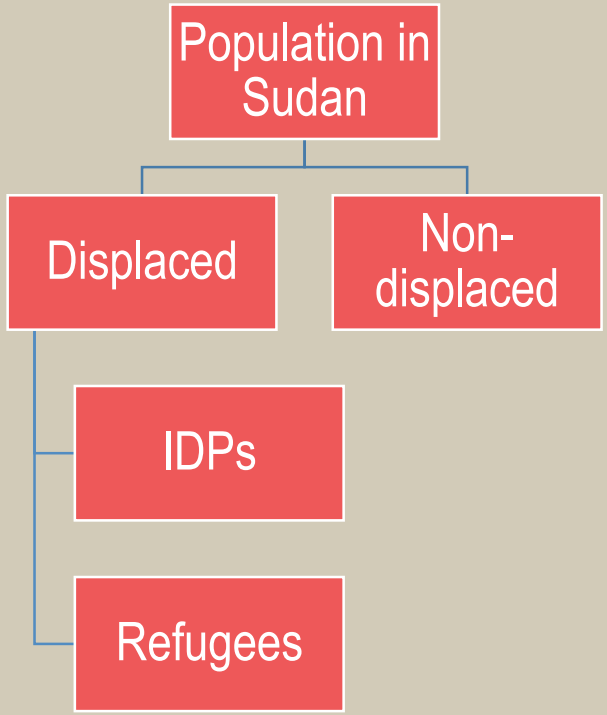
02 Scope and Coverage

Geographic and demographic scope

Geographic Scope

- Nation-wide
- All 18 states, 184 localities
  - In South Kordofan, 3 localities excluded
  - In Blue Nile, only government-controlled portions of localities included
  - In White Nile, Kosti excluded due to lack of partner
- Plus Abyei PCA

Targeted Populations



Thematic scope

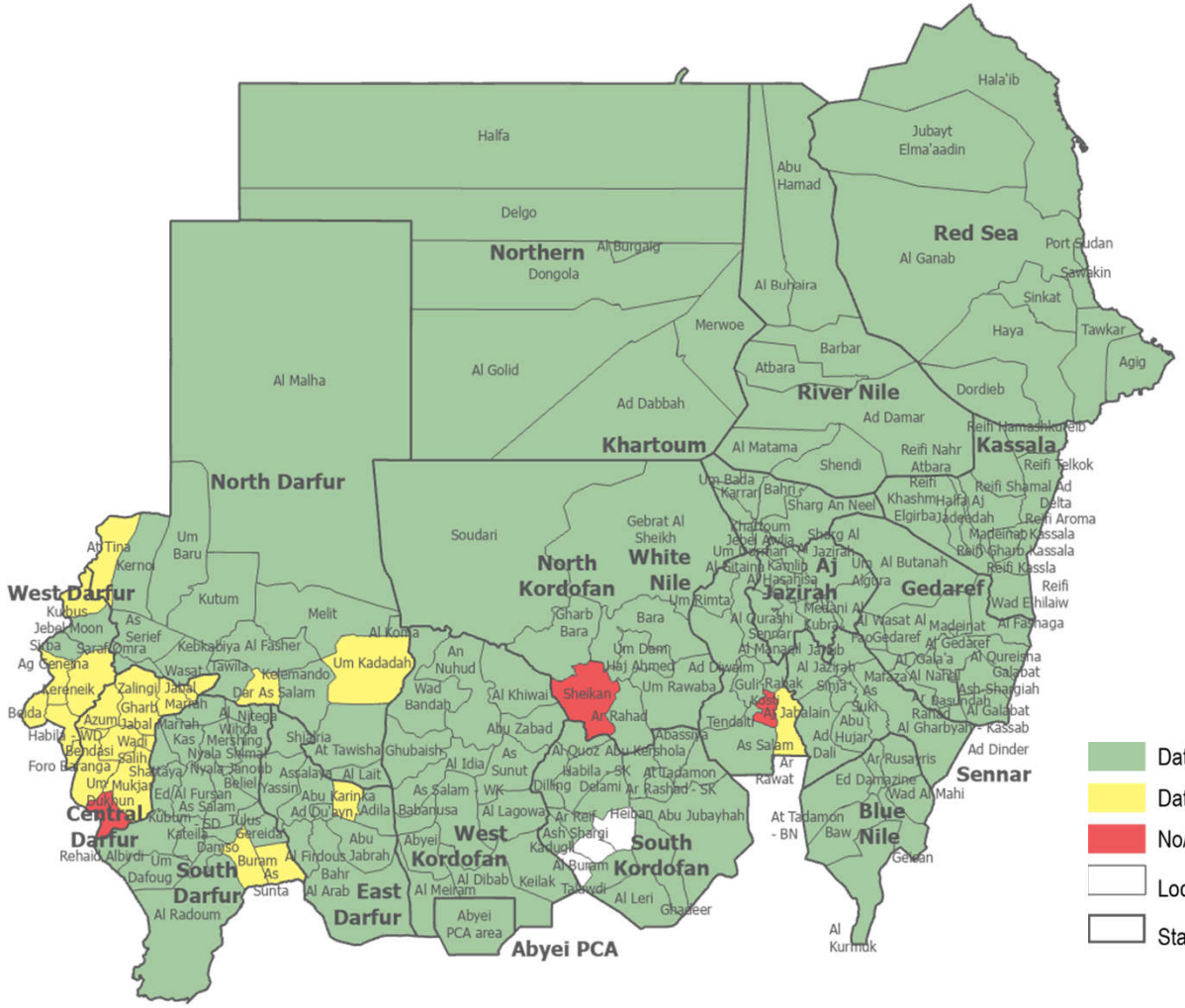
- Food Security & Livelihoods
- Health
- Nutrition
- WASH
- Emergency Shelter & NFIs
- Protection (including CP, GBV, HLP, and MA)
- Education
- \+ Accountability to Affected Populations

Data collection by the numbers

- Data was collected using both **household (HH) surveys** and **Area of Knowledge Key Informant Interviews (AoK KIIs)**.
- Initial target collection targets were ambitious. In the end, almost all non-displaced and IDP strata were completed. However, only about a third of refugee strata were completed.

Population group	# of strata	Completed with HH surveys	Completed with AoK KIIs	Total completed
Non-displaced	186	162 (87%)	22 (12%)	184 (99%)
IDPs	52	22 (42%)	28 (54%)	50 (96%)
Refugees	84	22 (26%)	5 (6%)	27 (32%)
Total	**322**	**206 (64%)**	**55 (17%)**	**261 (81%)**

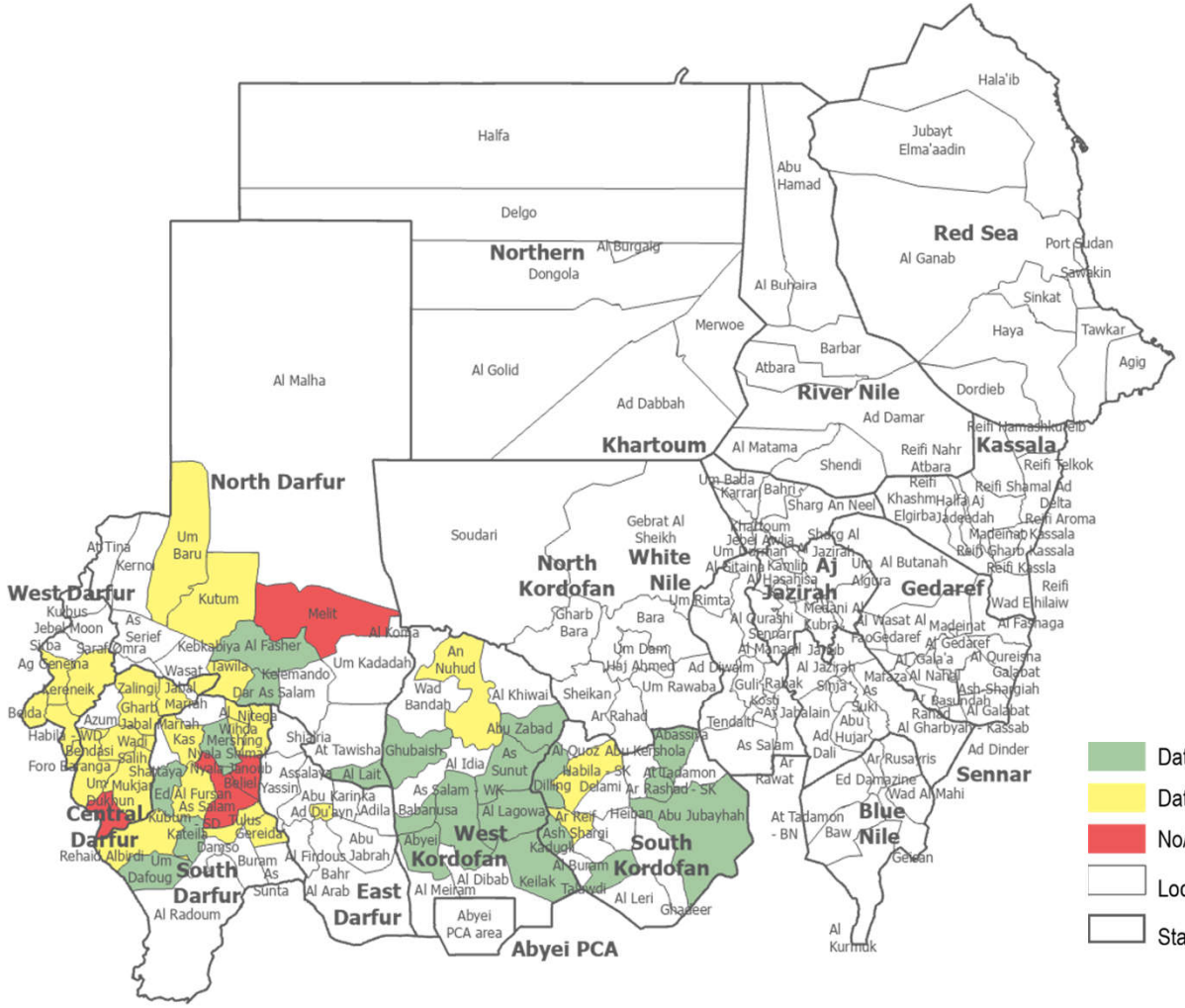
Details of non-displaced population coverage



12,065

Non-displaced HH surveys were included in the MSNA HH survey dataset v3

Details of IDP population coverage



820

IDP HH surveys were included in the MSNA HH survey dataset v3

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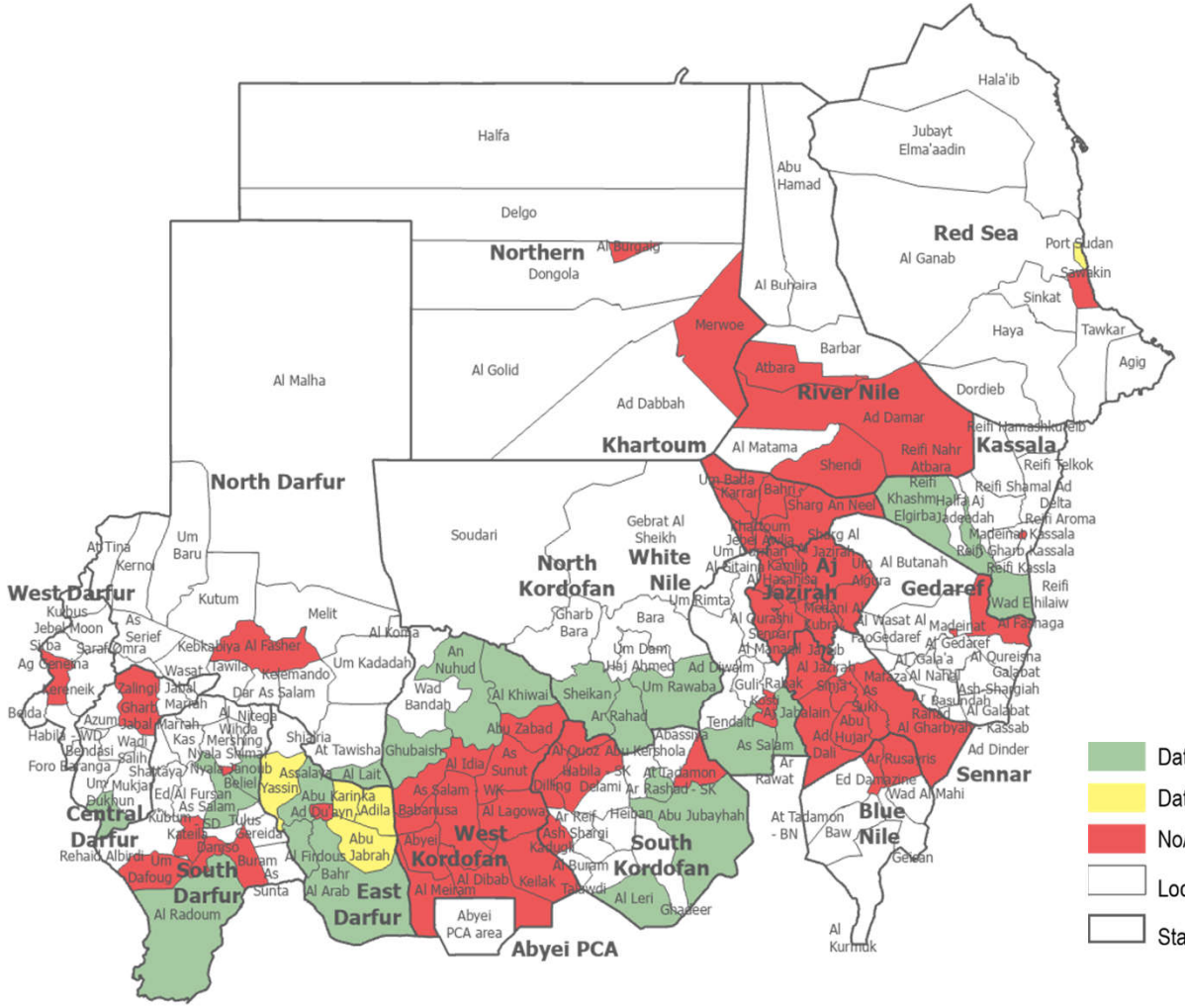
Details of refugee population coverage



884

Refugee HH surveys were included in the MSNA HH survey dataset v3

03 Methodology

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Sampling methods

Household surveys (HH surveys)

- Non-representative, snowball quota sampling
- Stratum = Population group in a specific locality
- Data collection targets determined proportionally, based on population size, with ≥ 33 HH surveys (30 + 10% buffer) per stratum
- Data collected via phone and face-to-face
- Data collection ran from 16 August-27 October
- Final total: 13,769 HH surveys
- Strata-specific sampling weights applied to data when calculating results

Area of Knowledge Key Informant Interviews (AoK KIIs)

- AoK KIIs were conducted for strata which could not be covered by HH surveys (e.g. due to partner capacity)
- Purposive sampling
- AoK KIs selected on the basis of their recent knowledge of humanitarian conditions for the targeted stratum
- Minimum of 3 AoK KIIs per stratum
- Data collected via phone and face-to-face
- Data collection ran from 27 October-26 November
- Final total: 196 AoK KIIs

Limitations (1 of 2)

Sampling approach

- **Results indicative, not representative:** Findings should be considered as indicative only, due to the applied non-probability sampling.
- **Limited comparability of HH survey and AoK KII data:** HH survey and AoK KII results cannot be directly compared since they were conducted using different sampling approaches. Comparison between the results of the two datasets should be qualitative (i.e., through narrative) only.

Geographic coverage

- **<100% geographic coverage:** <100% of the strata in the original sampling frame for all 3 population groups are covered in the final dataset. Refugee coverage was especially low, with only 32% of the original strata covered. This limits the extent to which findings can be considered indicative for the population groups as a whole, or for the country as a whole.
- **NSAG-controlled areas excluded:** NSAG-controlled portions of South Kordofan and Blue Nile were excluded.

Limitations (2 of 2)

Data collection period

- **Long data collection period:** Data collection started in August and ended in November. Since certain indicators (e.g., problems with drinking water) may fluctuate seasonally, their data was likely affected by the relatively long data collection period.

Data collection methods

- **Potential respondents limited by phone-based data collection:** Some of the HH survey and AoK KII data was collected via phone, as a way of reducing COVID-related risks. However, using phone-based data collection may have excluded some vulnerable HHs or individuals (e.g., women) that do not have access to a phone (theirs or borrowed) and/or who live in an area without mobile network coverage.
- **Protection needs likely under-represented by results:** Because the MSNA data is largely composed of HH surveys conducted with HoHs, protection needs are likely under-represented.
- **HH surveys and AoK KIIs not suitable for collecting certain types of data:** Certain indicators of interest to sectors (e.g., health care facility capacity) cannot be readily collected via HH survey, and especially via phone-based HH survey. For this reason, these indicators – although important – were excluded.

04 | Main takeaways

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Main takeaways from sector key findings

1. Most households are experiencing economic strain

2. Many households are struggling to access certain services (especially health care)

3. Higher proportions of surveyed IDP and/or refugee households showed greater need under certain indicators than non-displaced households did (e.g., FCS/rCSI scores, access to/quality of water, shelter type, reported movement restrictions)

05 Key Findings

Demographics of surveyed households

Typical characteristics of households overall

7
Median HH size

3
Median number of children per HH

43 years
Median age of Head of HH

21%
Of HHs were female-headed

Most common settlement typologies, by population group

60% of non-displaced HHs were living in **cities**, and **39%** of them were living in **villages**.
In contrast, **57%** of IDP HHs and **82%** of refugee HHs were living in **camps**.

Displacement

7% of **non-displaced** HHs were returnees

*Limited sample

Refugee HH countries of origin

1. South Sudan **(75%)**
2. Eritrea **(23%)**
3. Central African Republic, Ethiopia and other countries **(2%)**

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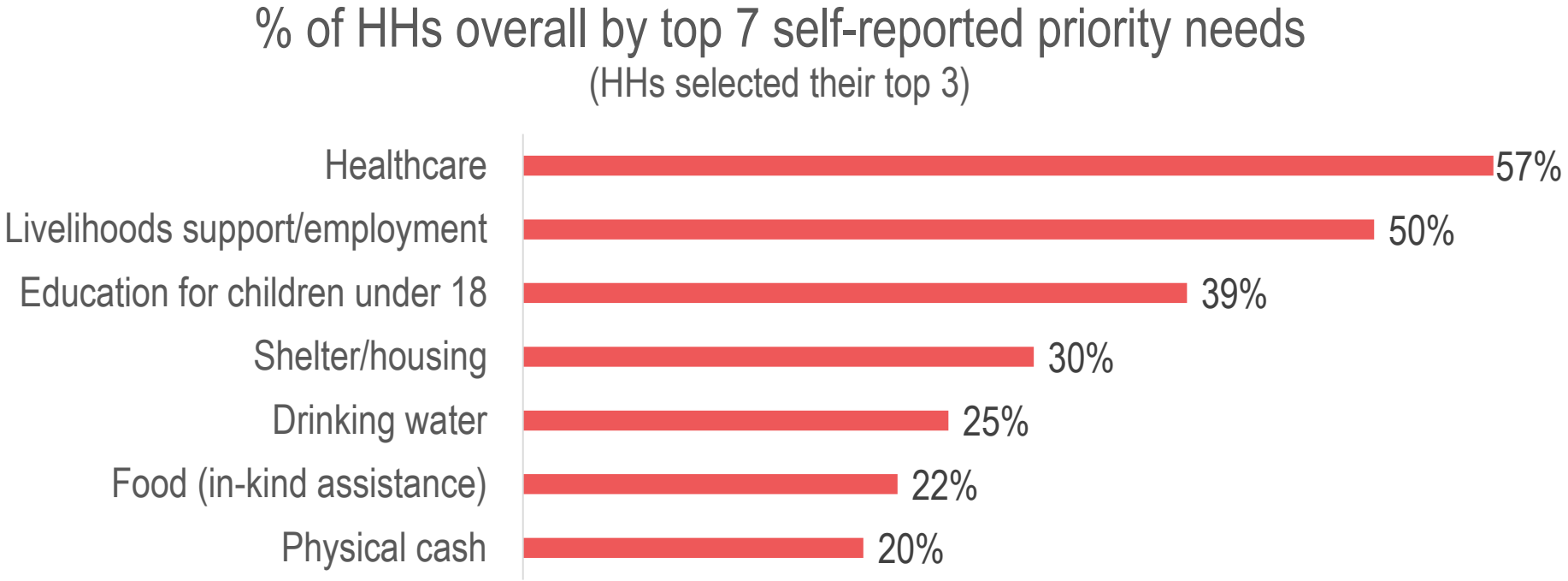
Self-reported needs: Top 7 needs

Health care was the most common self-reported priority need among surveyed HHs, followed closely by **livelihoods support/employment**.



Self-reported needs: Top 5 states for each of the top 7 most commonly-reported needs

1 - Health care

1. Northern **(68%)**
2. North Kordofan **(65%)**
3. South Darfur **(60%)**
4. Blue Nile **(60%)**
5. North Darfur **(60%)**

2 - Livelihoods support / employment

1. North Darfur **(63%)**
2. East Darfur **(56%)**
3. White Nile **(54%)**
4. Sennar **(54%)**
5. West Darfur* **(53%)**

3 - Education for children under 18

1. South Darfur **(55%)**
2. Blue Nile **(52%)**
3. North Darfur **(49%)**
4. North Kordofan **(47%)**
5. East Darfur **(46%)**

4 - Shelter / housing

1. Central Darfur* **(61%)**
2. South Kordofan **(38%)**
3. Sennar **(37%)**
4. East Darfur **(35%)**
5. North Darfur **(35%)**

5 - Drinking water

1. Red Sea **(46%)**
2. West Kordofan **(40%)**
3. Kassala **(38%)**
4. South Darfur **(38%)**
5. North Kordofan **(38%)**

6 - Food (in-kind assistance)

1. Central Darfur* **(86%)**
2. River Nile **(25%)**
3. Khartoum **(25%)**
4. Al Jazirah **(23%)**
5. Kassala **(22%)**

7 - Physical cash

1. West Darfur* **(63%)**
2. Khartoum **(26%)**
3. North Darfur **(25%)**
4. White Nile **(22%)**
5. River Nile **(21%)**

*Limited sample

Food Security & Livelihoods: Challenges obtaining enough money to meet basic needs & shocks

80%

Of HHs overall faced challenges in obtaining enough money to meet their needs in the 30 days prior to data collection

Non-displaced **(80%)**
IDP* **(98%)** Refugee* **(84%)**

76%

Of HHs overall experienced a shock in the 6 months prior to data collection

Non-displaced **(76%)**
IDP* **(91%)** Refugee* **(68%)**

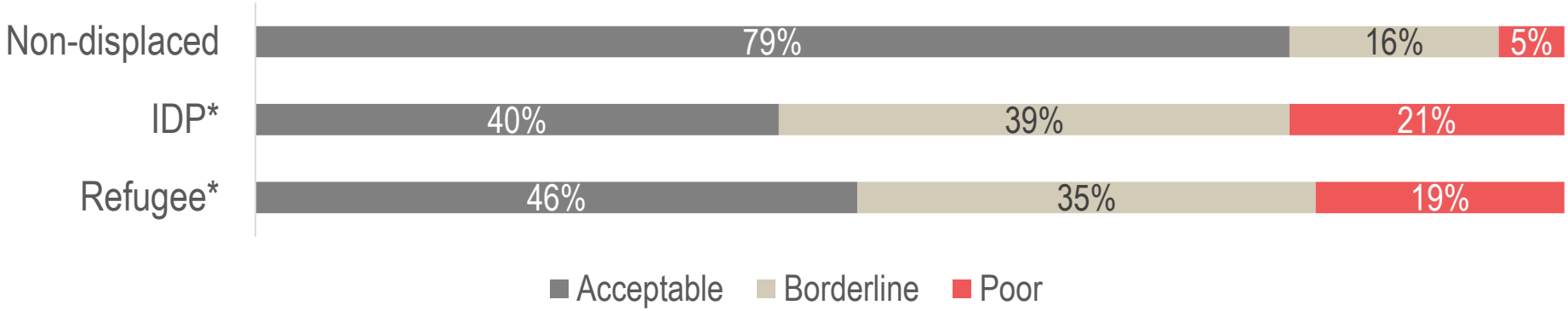
Among the 76% of HHs overall that experienced a shock in the 6 months prior to data collection, the 5 most commonly-reported types of shocks among HHs were
(HHs could select multiple):

1. Unusually high food prices **(69%)**
2. COVID-19 (i.e., any shock related to COVID) **(54%)**
3. Reduced income of any HH member **(53%)**
4. Unusually high prices of fuel/transport and other non-food prices **(23%)**
5. Loss of or reduced employment for any HH member **(22%)**

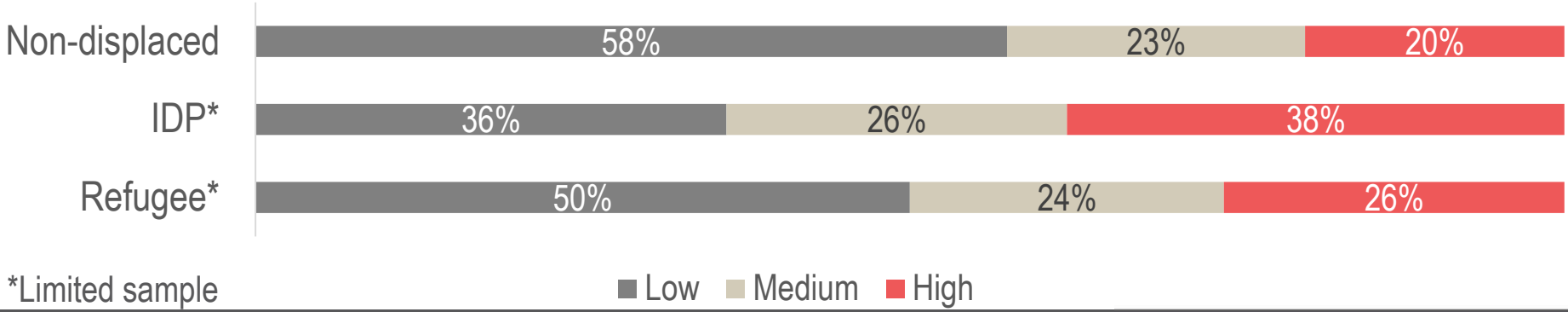
*Limited sample

Food Security & Livelihoods: Food Consumption Score & Reduced Coping Strategy Index

% of HHs in each Food Consumption Score category, by population group



% of HHs in each Reduced Coping Strategy Index category, by population group



*Limited sample

Health: Access to health care

91% of HHs overall can access the nearest primary health care facility from their dwellings in ≤1 hour

Non-displaced **(90%)** IDP* **(83%)** Refugee* **(93%)**

Among the **80%** of households overall that attempted to access health care in the 3 months prior to data collection,

81%

Of HHs overall experienced barriers to accessing this health care.

Non-displaced **(82%)**
IDP* **(96%)** Refugee* **(58%)**

And

97%

Of HHs had to pay for it.

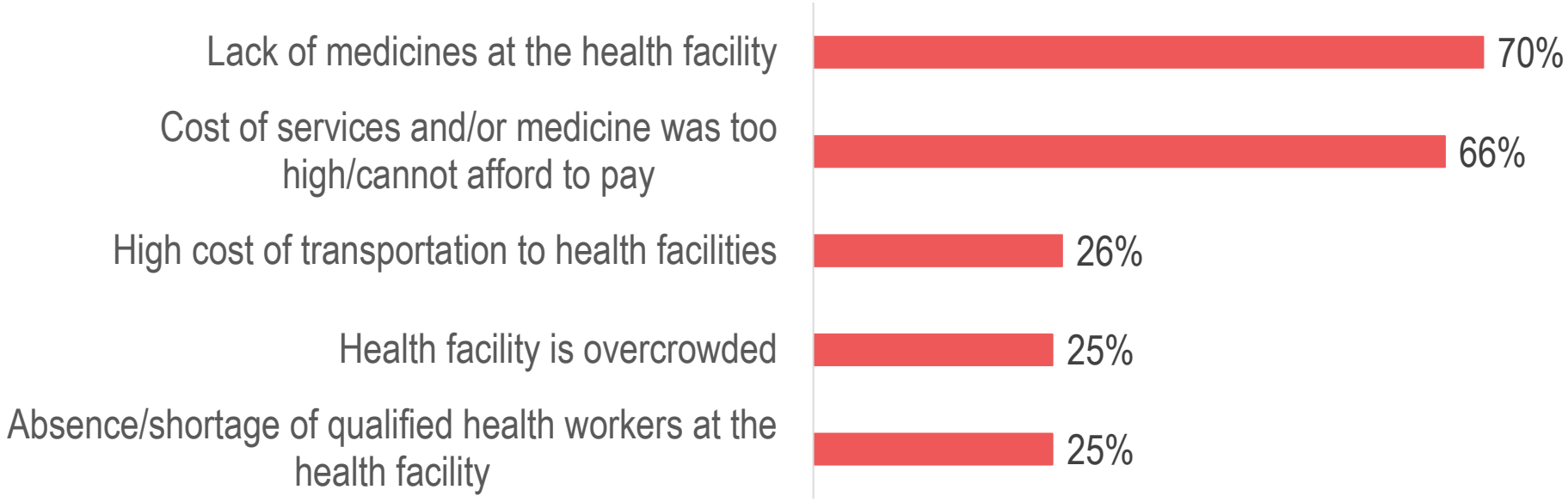
Non-displaced **(97%)**
IDP* **(97%)** Refugee* **(74%)**

*Limited sample

Health: Barriers to accessing health care

Among the **65%** HHs overall that attempted to access health care in the 3 months prior to data collection, and who experienced barriers to accessing this health care, top 5 barriers by % of HHs

(HHs could select multiple)



Nutrition: Therapeutic feeding programmes & exclusive breastfeeding

16%

Of HHs overall had ≥1 child aged 6-59 months enrolled in a therapeutic feeding programme

Non-displaced **(16%)** IDP* **(26%)** Refugee* **(22%)**

Among HHs overall with ≥1 woman who has given birth in the 2 years prior to data collection,

63%

of HHs relied exclusively on breastfeeding between the ages of 0-6 months

Non-displaced **(63%)** IDP* **(68%)** Refugee* **(64%)**

Water, Sanitation & Hygiene: Problems with access to or quality of water & sanitation

61% of HHs overall have problems related to access to or quality of water

Non-displaced **(60%)** IDP* **(80%)** Refugee* **(61%)**

Among the 61% of HHs overall with problems related to access to or quality of water, % of HHs by top 5 problems (HHs could select multiple)**:**

1. Do not like the taste/quality of the water **(41%)**
2. Water is too expensive **(32%)**
3. Cannot get enough water to meet all needs **(27%)**
4. Water points are not functioning **(25%)**
5. Water points are too far **(18%)**

37% of HHs overall primarily rely on unimproved sanitation facilities (i.e., **not** a pour/flush toilet or pit latrine with slab/platform)

Non-displaced **(37%)** IDP* **(59%)** Refugee* **(37%)**

*Limited sample

Emergency Shelter & NFIs: Shelter type & condition

27% of HHs overall were living in an unfinished/unenclosed building, collective shelter, tent or emergency shelter

Non-displaced **(25%)** IDP* **(75%)** Refugee* **(84%)**

Among HHs with shelter (i.e., excluding the 0.1% of HHs overall with no shelter of any kind),

62%

of these HHs overall were living in shelters that did **not** meet agreed technical and performance standards (i.e., had damage or structural problems) at the time of data collection

Non-displaced **(61%)** IDP* **(90%)** Refugee* **(78%)**

*Limited sample

General Protection: Movement restrictions, safety/security incidents & civil documentation

48% of HHs overall reported having experienced movement restrictions in the 6 months prior to data collection

Non-displaced **(48%)** IDP* **(63%)** Refugee* **(34%)**

6% of HHs overall reported having experienced safety or security incidents affecting HH members in the 3 months prior to data collection

Non-displaced **(6%)** IDP* **(6%)** Refugee* **(8%)**

22% of HHs overall reported having ≥1 members who were missing ≥1 types of civil documentation, such as a passport, national ID or birth certificate, at the time of data collection

Non-displaced **(22%)** IDP* **(36%)** Refugee* **(33%)**

*Limited sample

Child Protection: Psychological distress, child(ren) not living with the HH & child labour

30% of HHs overall reported having ≥1 member who had shown signs of psychological distress in the 3 months prior to data collection

Non-displaced **(30%)** IDP* **(30%)** Refugee* **(29%)**

3% of HHs overall reported having ≥1 child under the age of 18 who was **not** living with the HH at the time of data collection

Non-displaced **(3%)** IDP* **(5%)** Refugee* **(12%)**

57% of HHs overall reported having ≥1 child aged 6-17 years who was engaged in *any* form of child labour (inside or outside the home), in the 6 months prior to data collection

Non-displaced **(58%)** IDP* **(58%)** Refugee* **(40%)**

*Limited sample

Gender-based Violence: Feelings of safety, services/programs for women & reporting GBV cases

16% of HHs overall reported having women and/or girls who had avoided areas in their current location because they felt unsafe, in the 6 months prior to data collection

Non-displaced **(15%)** IDP* **(27%)** Refugee* **(18%)**

24% of respondents overall reported that they were aware of services or programs available in their community that were specifically for women

Non-displaced **(24%)** IDP* **(30%)** Refugee* **(38%)**

88% of respondents overall said that if they heard of a case of violence against a woman or girl, they would report it

Non-displaced **(88%)** IDP* **(90%)** Refugee* **(85%)**

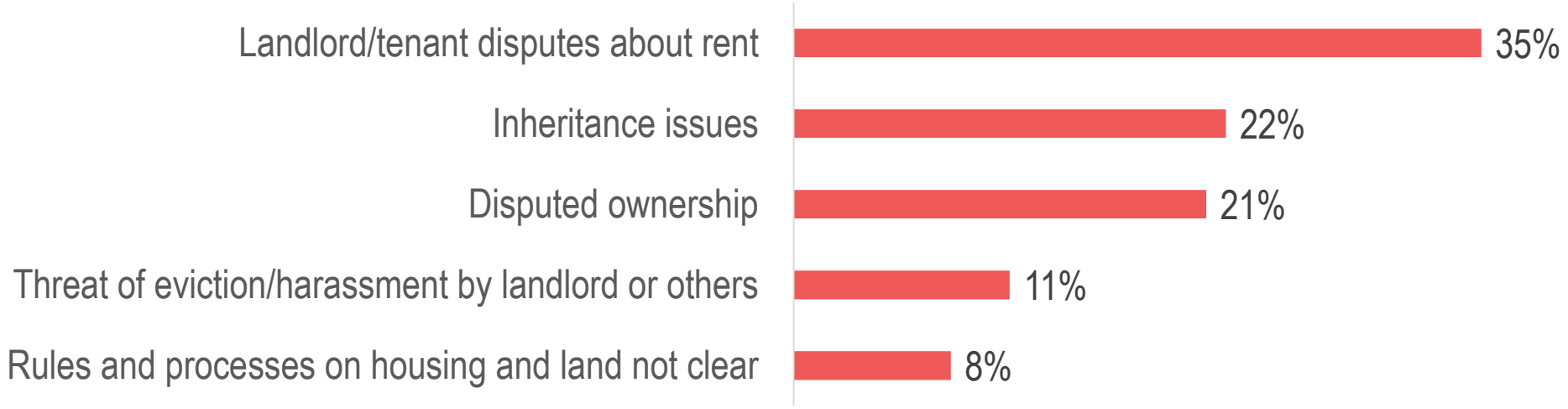
*Limited sample

Housing, Land & Property: Housing, land & property issues

13% of HHs overall reported that they had housing, land or property issues at the time of data collection

Non-displaced **(13%)** IDP* **(11%)** Refugee* **(7%)**

Among the **13%** of HHs overall that reported that they had housing, land or property issues, % of HHs by top 5 types of issues
(HHs could select multiple)



Mine Action: Contamination, awareness-raising & survivors

4% of HHs overall reported that they were impacted by contamination from landmines and/or Explosive Remnants of War (ERW) at the time of data collection

Non-displaced **(4%)** IDP* **(12%)** Refugee* **(<1%)**

and among these HHs overall,

↳ **58%** reported that they had members who had received awareness raising on ERWs**

2% of HHs overall reported that they had ≥1 member who is a landmine and/or Explosive Remnants of War (ERW) victim/survivor at the time of data collection (230/13,769 respondent HHs)**

Non-displaced **(2%)** IDP* **(4%)** Refugee* **(<1%)**

**Represents a small subset

Education: School attendance & remote learning

Among the **76%** of HHs with children aged 4-16 years,

76% of these HHs have children who were attending school regularly (≥4 days/week) during the 2019-2020 school year *before* the schools were closed on 15 March 2020 due to COVID-19

Non-displaced **(77%)** IDP* **(62%)** Refugee* **(49%)**

and among these HHs overall,

↳ **98%** declared that their children either would return to school once the schools re-opened, or if the schools had already re-opened, that they had already returned to school

↳ **40%** had children that continued learning activities remotely

↳ **72%** had parents, caregivers or older siblings who were able to support home-based learning

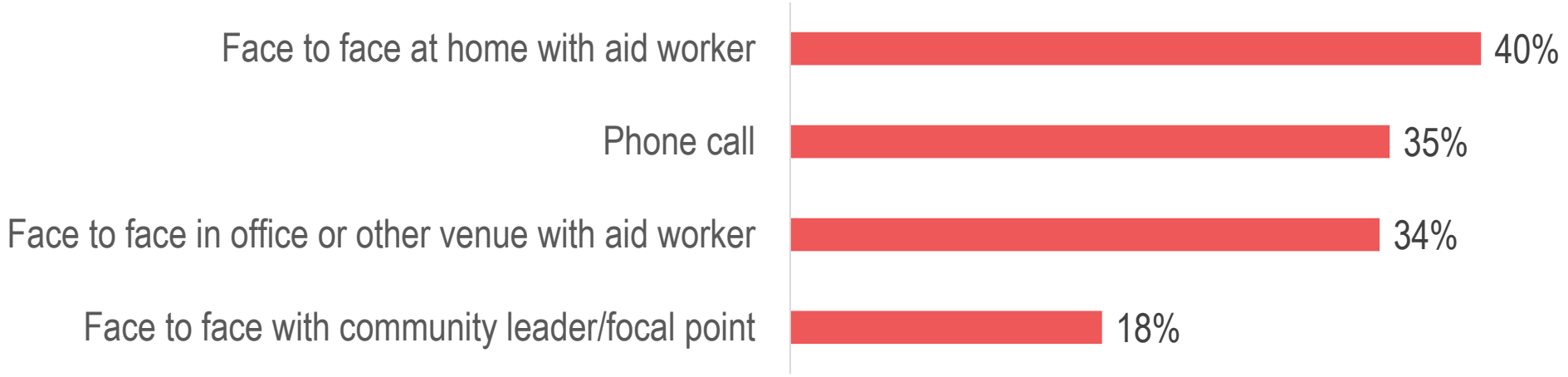
*Limited sample

Accountability to Affected Populations: Paying for aid & feedback mechanisms

16% of respondents said that they thought paying to receive humanitarian assistance was OK

11% of respondents said that they thought paying for humanitarian assistance *might* be OK, depending on the situation

% of respondents by top 5 preferred means of providing feedback to aid providers about the quality, quantity and appropriateness of aid
(HHs could select multiple)



Accountability to Affected Populations: Information on assistance

Among the **97%** of HHs overall that reported that they needed assistance, % of HHs by top 6 preferred sources of information on assistance (HHs could select multiple)

48% respondents said that they were aware of people who might be unable to access available information about humanitarian assistance because of their specific needs

06 Next Steps

Summary of next steps*

ANALYSIS TABLES

Analysis tables (Excel) will be circulated in **early December**

PRESENTATIONS

REACH will present findings to the sectors between **2-9 December** and to the ISCG on **15 December**

DASHBOARD

An online, interactive dashboard will go live at the **end of January**

FINAL REPORT

The final report with will be published at the **end of February**

*Dates are subject to change.

07 Discussion Points

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Questions to guide discussion

1. Any general thoughts on the MSNA findings?

2. Are there any lessons learned that you would like to raise for future MSNAs or other assessments in Sudan?

3. If the next MSNA were to include qualitative data collection (e.g., open-ended KIIs, FGDs), what type(s) of qualitative data would you like to see included?

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Annex

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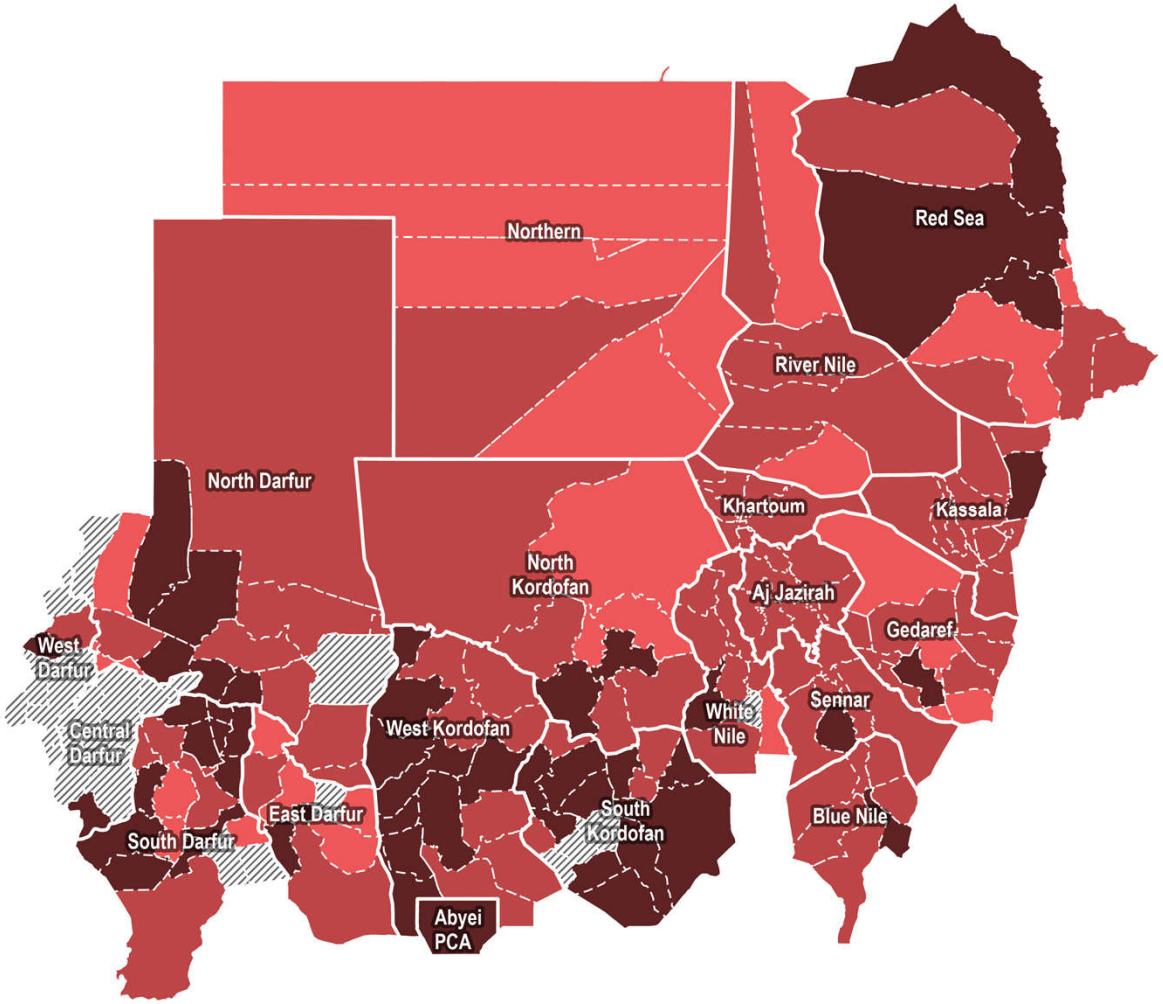
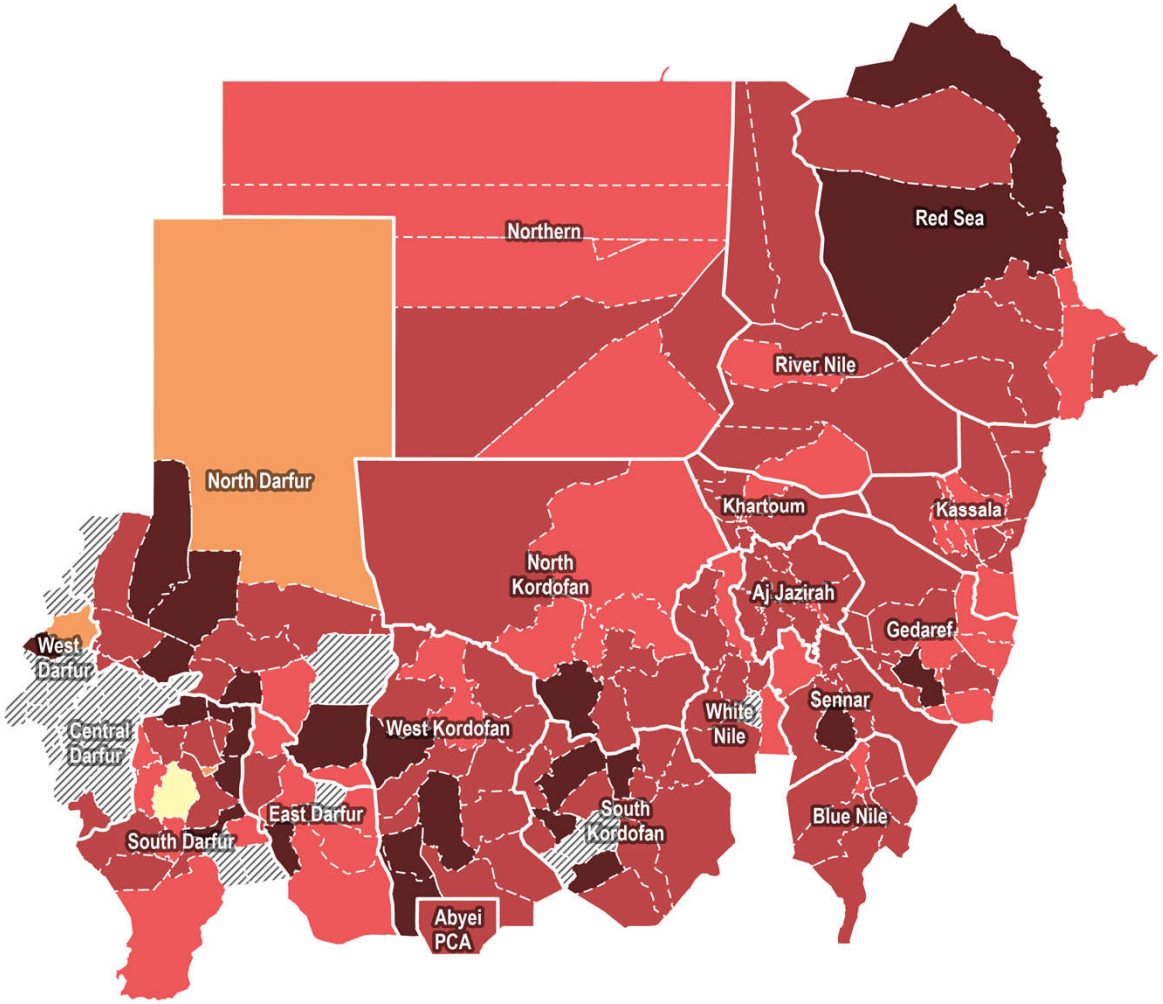
Food Security & Livelihoods: Challenges obtaining enough money to meet basic needs



% of households overall that faced challenges in obtaining enough money to meet their needs in the 30 days prior to data collection

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Food Security & Livelihoods: Shocks



% of households overall who said that they had experienced a shock in the 6 months prior to data collection

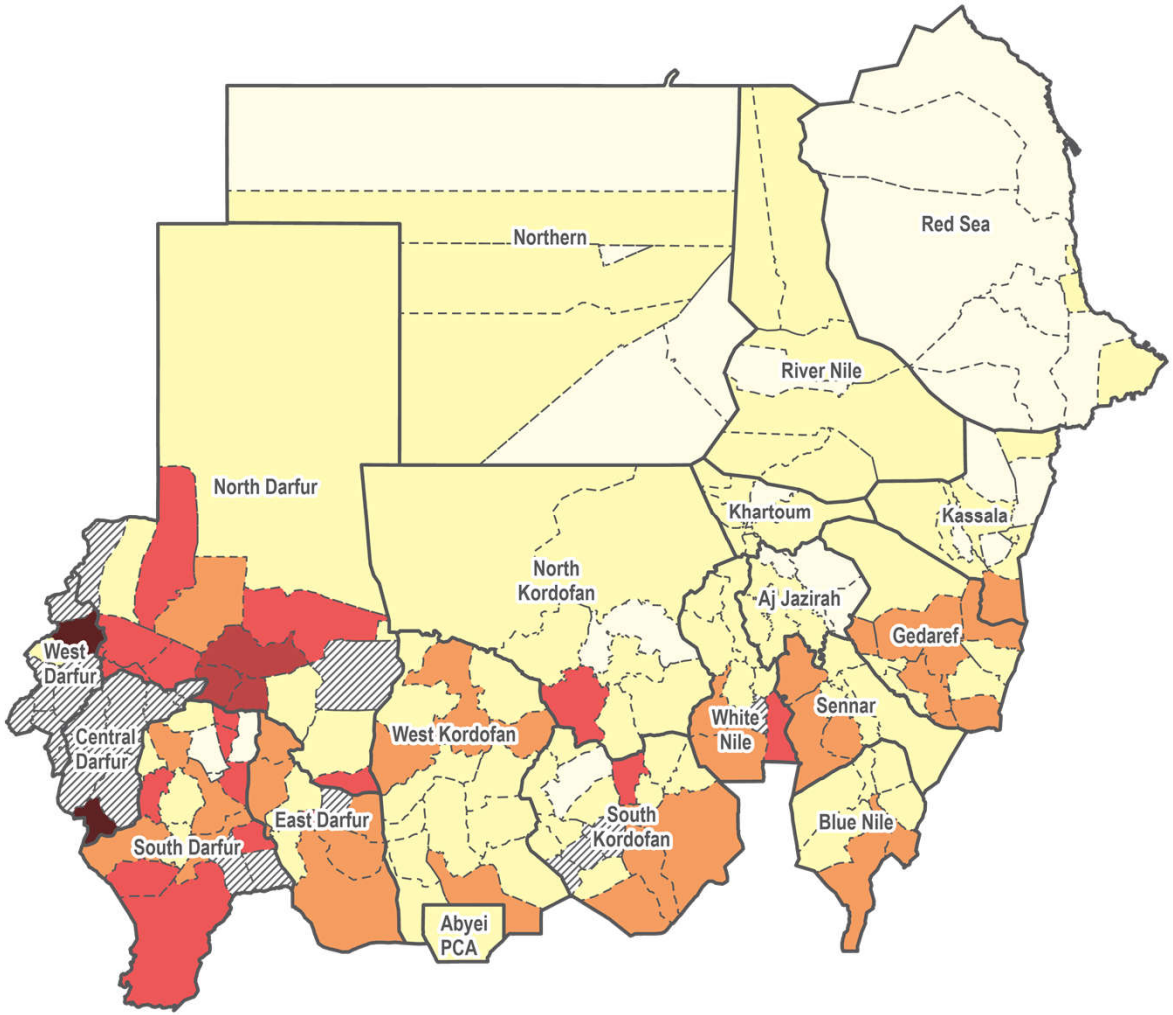
- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Food Security & Livelihoods: Shocks breakdown

Among HHs that experienced ≥1 shock in the 6 months prior to data collection, top 8 types of shocks (HHs could select multiple)	**Overall**	**Non-displaced**	**IDP**	**Refugee**
Unusually high food prices	69%	69%	82%	61%
COVID-19 (i.e., any shock related to COVID)	54%	55%	45%	36%
Reduced income of any household member	53%	53%	65%	53%
Unusually high prices of fuel/transport and other non-food prices	23%	23%	25%	12%
Loss of or reduced employment for any household member	22%	21%	32%	43%
Too much rain, flooding	11%	11%	6%	8%
Serious illness (other than COVID-19) or accident resulting in injury for any household member	4%	4%	4%	11%
Insecurity/violence/raiding/looting	3%	3%	11%	2%

*Limited HH survey sample

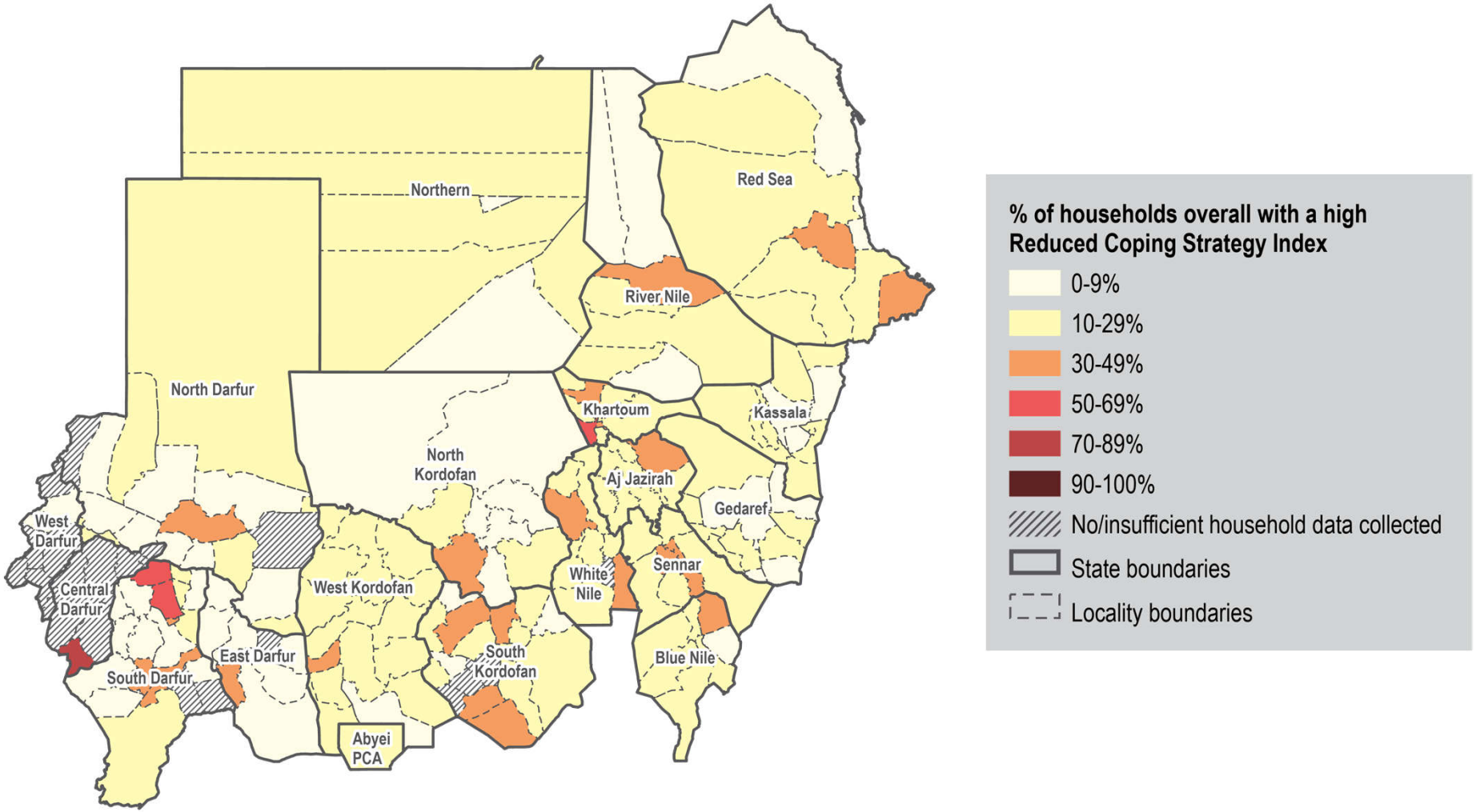
Food Security & Livelihoods: Food Consumption Score (scores of 'borderline' or 'poor')



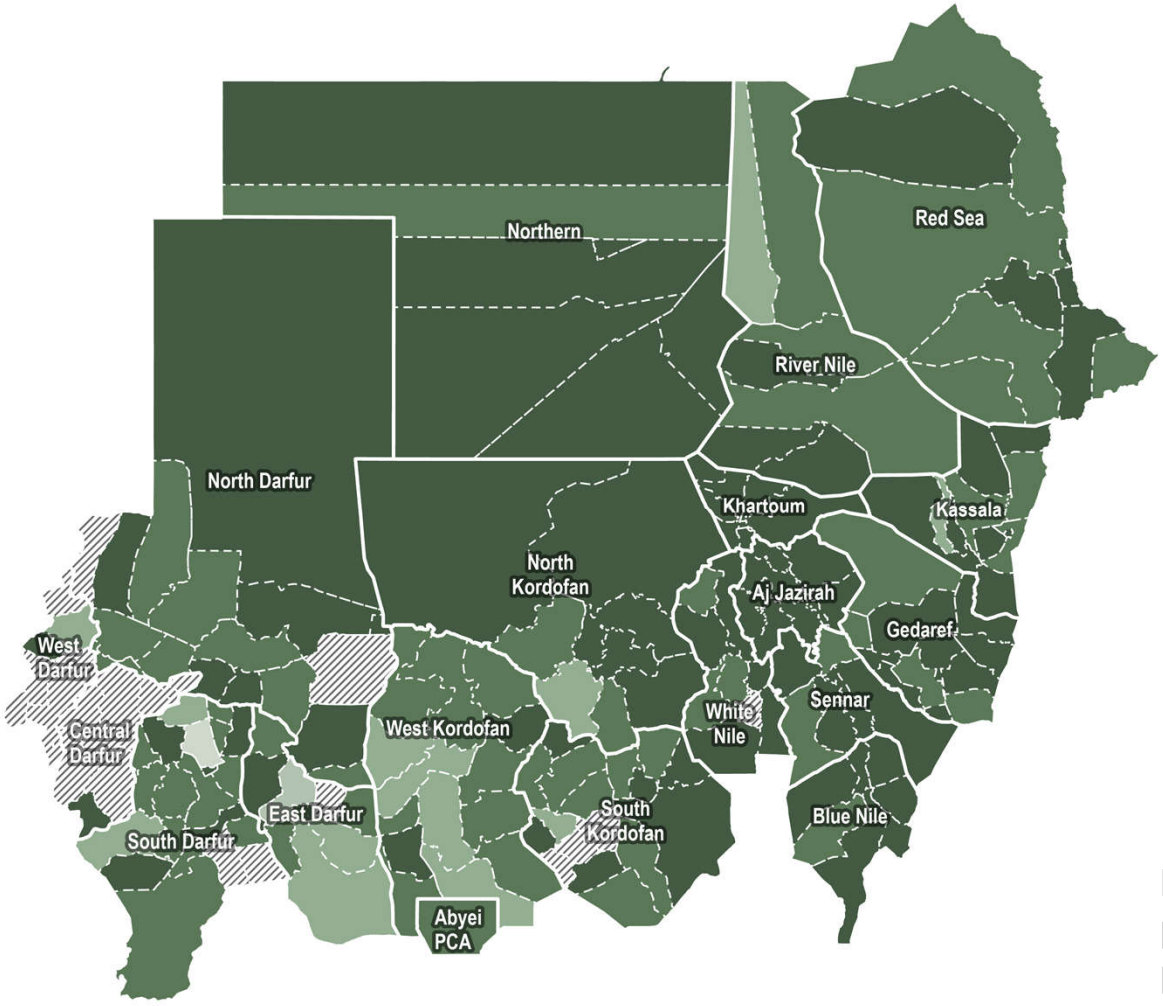
% of households overall with a poor or borderline Food Consumption Score

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Food Security & Livelihoods: Reduced Coping Strategy Index (scores of 'high')



Health: Duration to access primary health care facilities

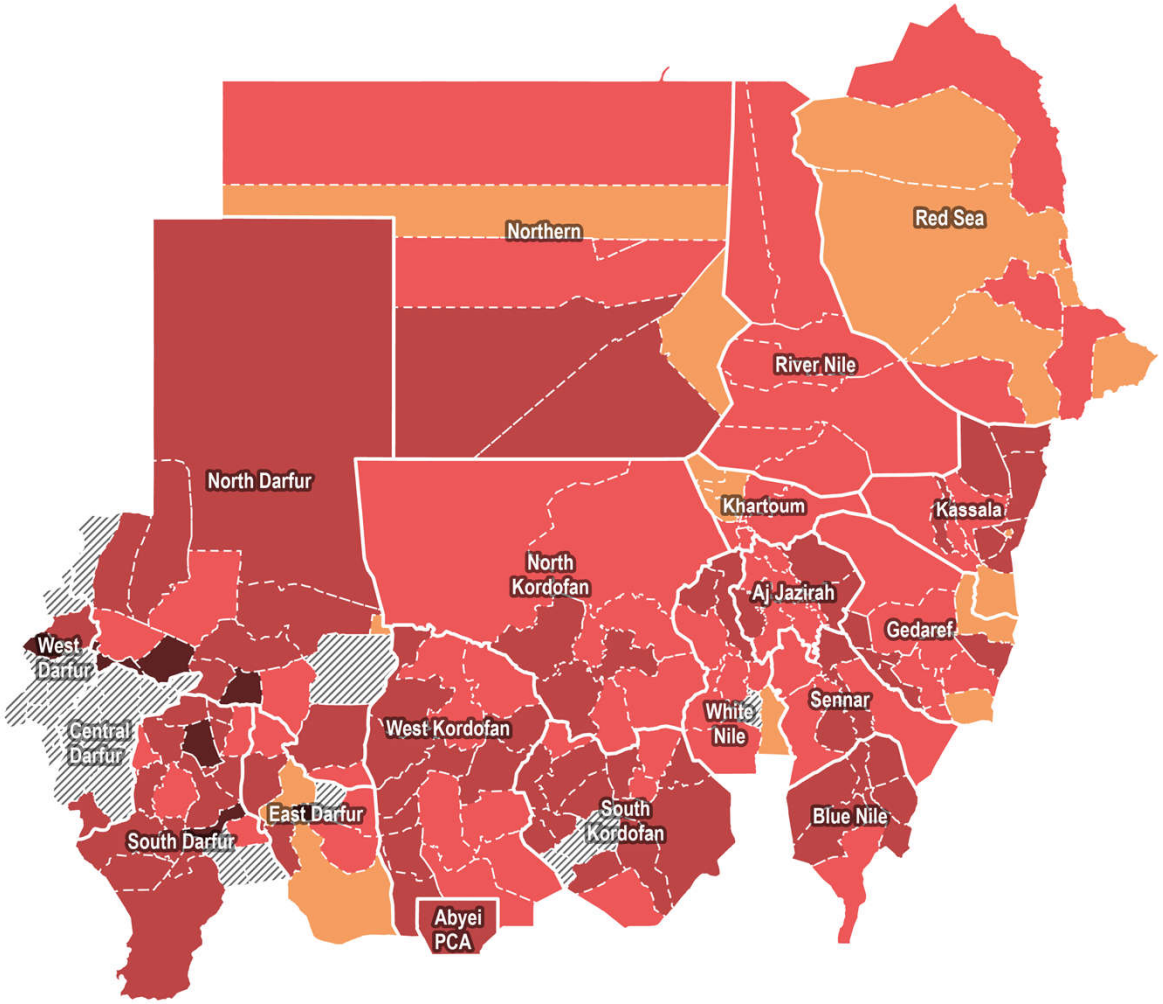


% of households overall needing <= 60 minutes to access primary healthcare from their dwellings

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Improved water source: Public tap/standpipe, piped connection to a house, handpump/borehole, protected well, protected spring

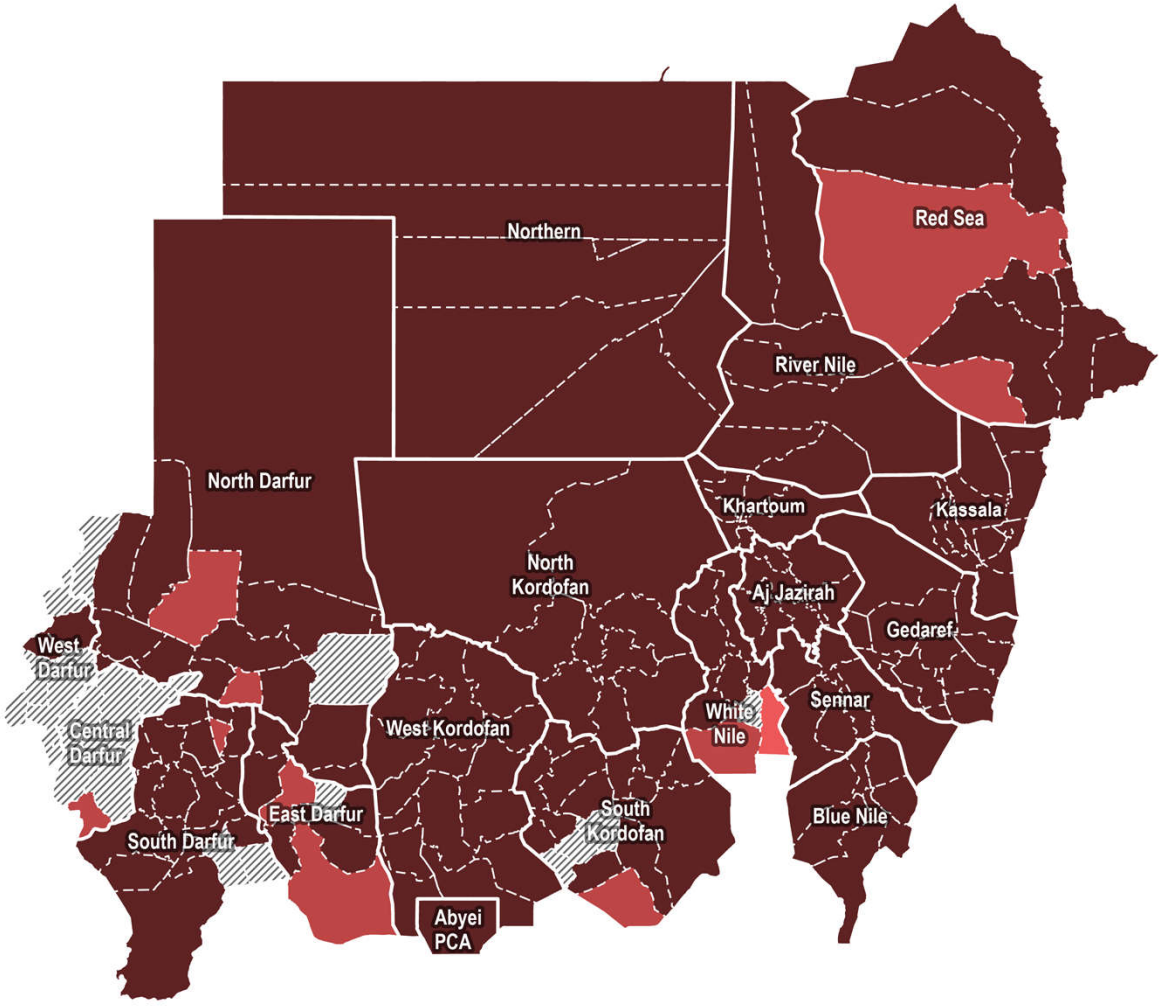
Health: Barriers to accessing health care



% of households overall that experienced barriers to accessing health care

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Health: Paying for health care



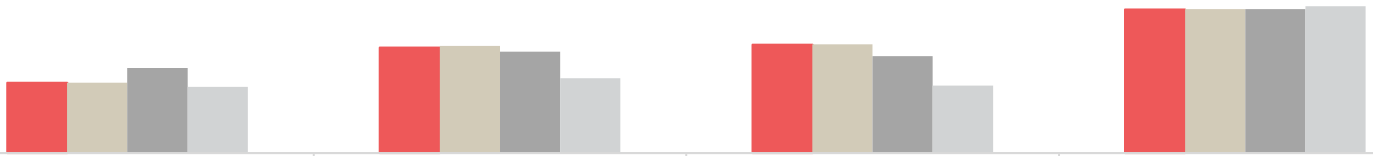
Among households overall that attempted to access health care in the 3 months prior to data collection, % of households that had to pay for it

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Health: Paying for health care breakdown

Among HHs that attempted to access health care in the 3 months prior to data collection, and who had to pay for it, services paid for by % of HHs

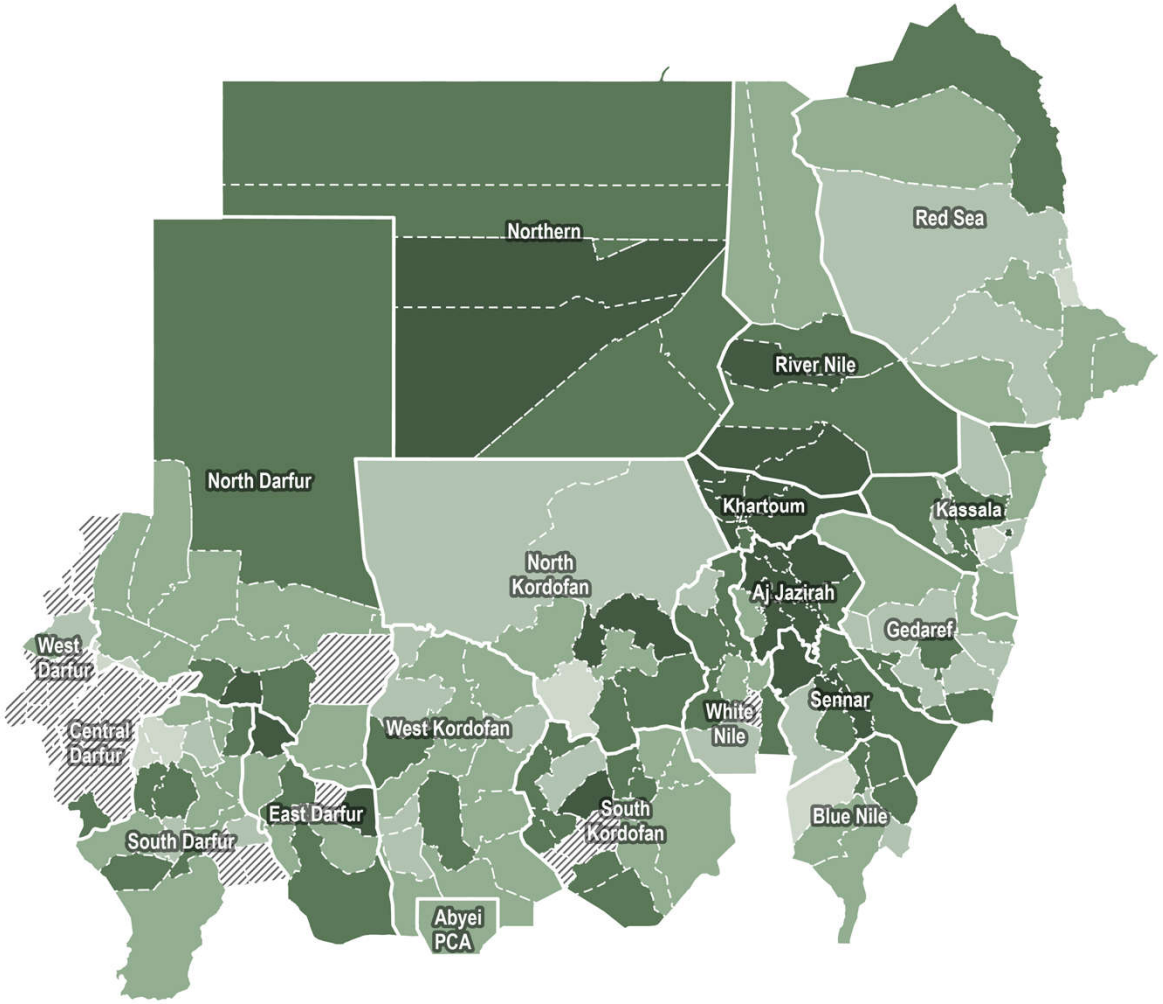
(HHs could select multiple)



	Treatment procedure	Lab analysis	Consultation (to see the doctor)	Medicines
Overall	48%	72%	74%	98%
Non-displaced	48%	73%	74%	98%
IDP*	58%	69%	66%	98%
Refugee*	45%	51%	46%	100%

*Limited sample

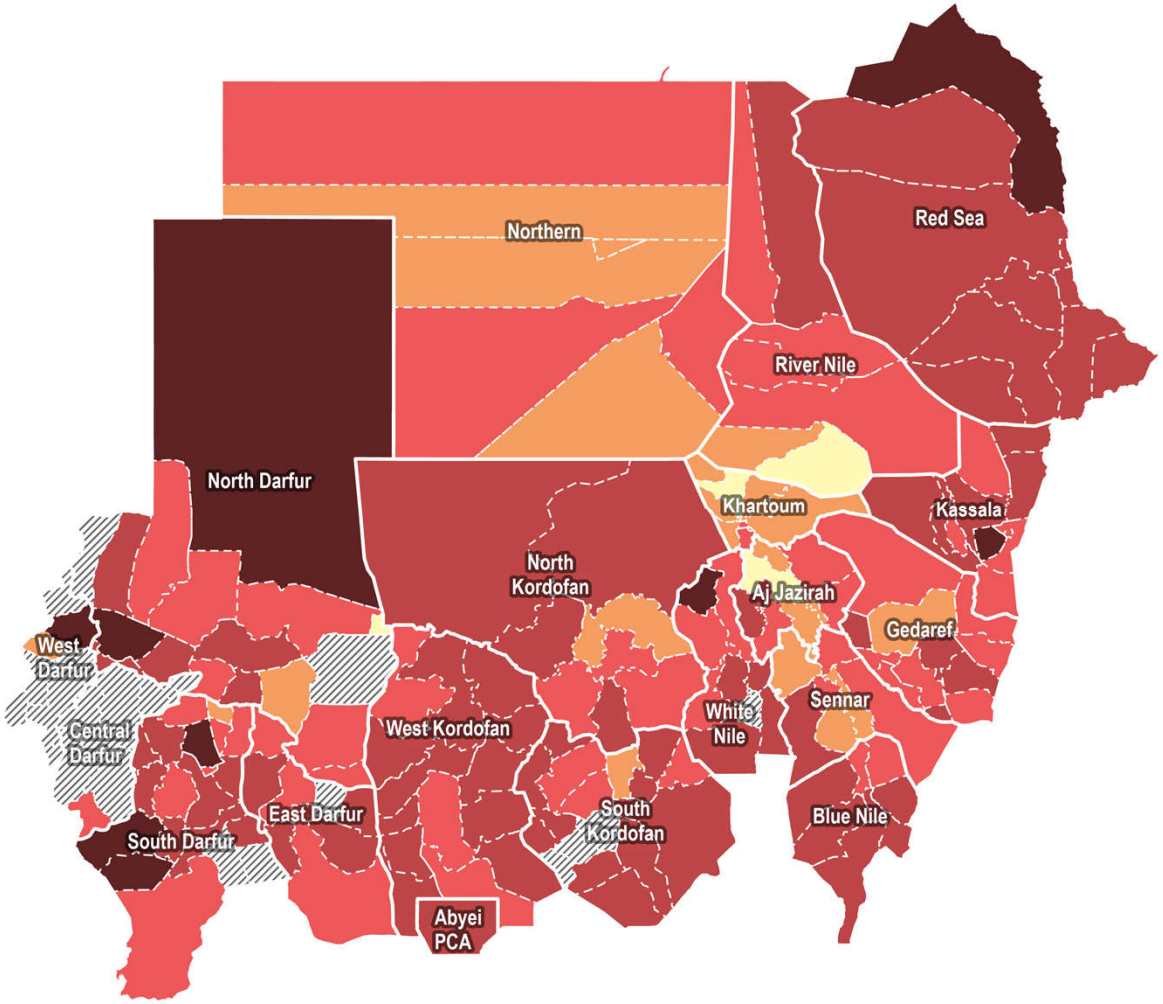
Water, Sanitation & Hygiene: Primary source of drinking water



% of households overall using an improved source as their primary source of drinking water

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No household data collected
- State boundaries
- Locality boundaries

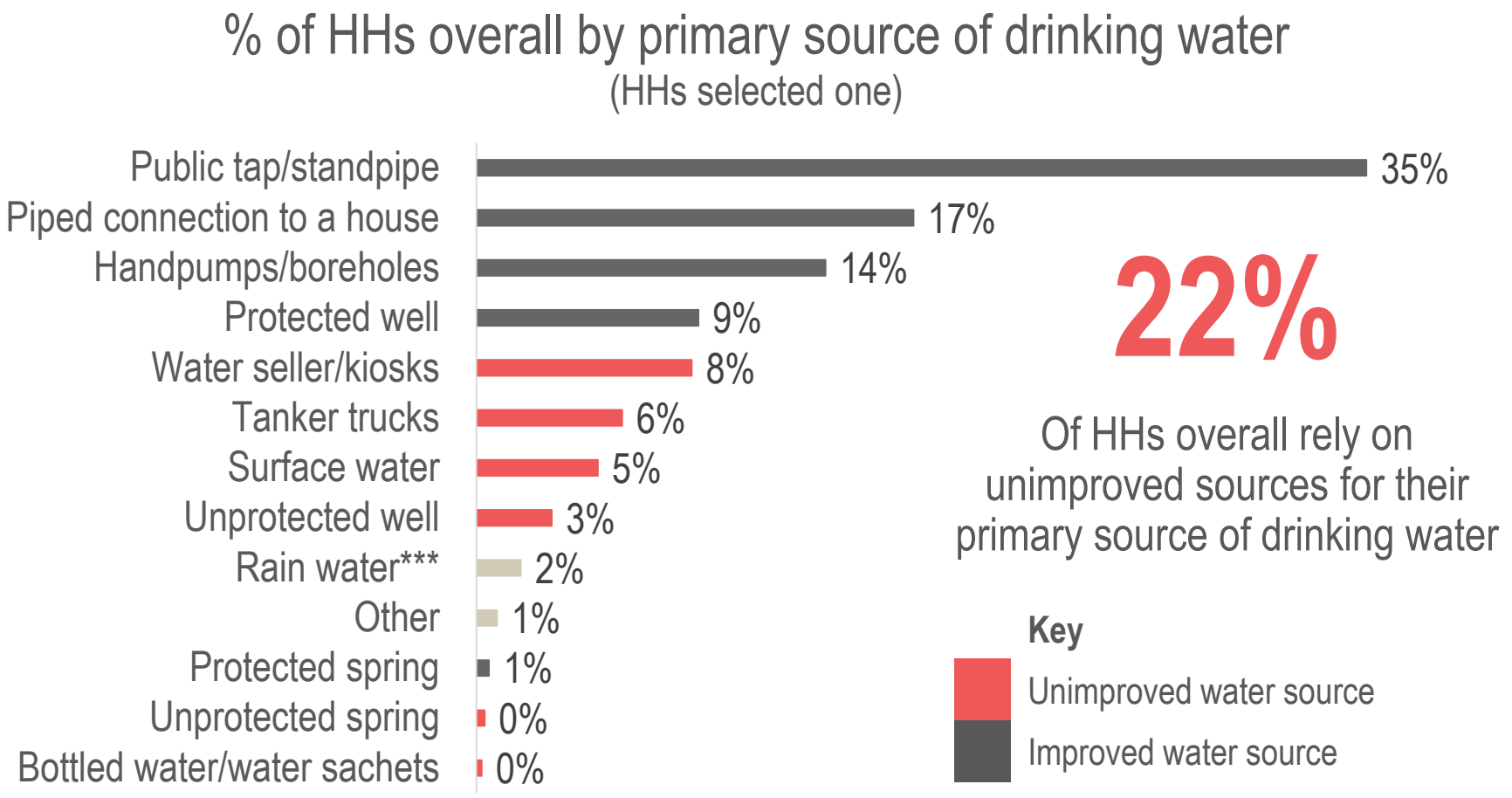
Water, Sanitation & Hygiene: Problems with access to or quality of water



% of households overall who said they had problems with access to or quality of water

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Water, Sanitation & Hygiene: Primary source of drinking water breakdown

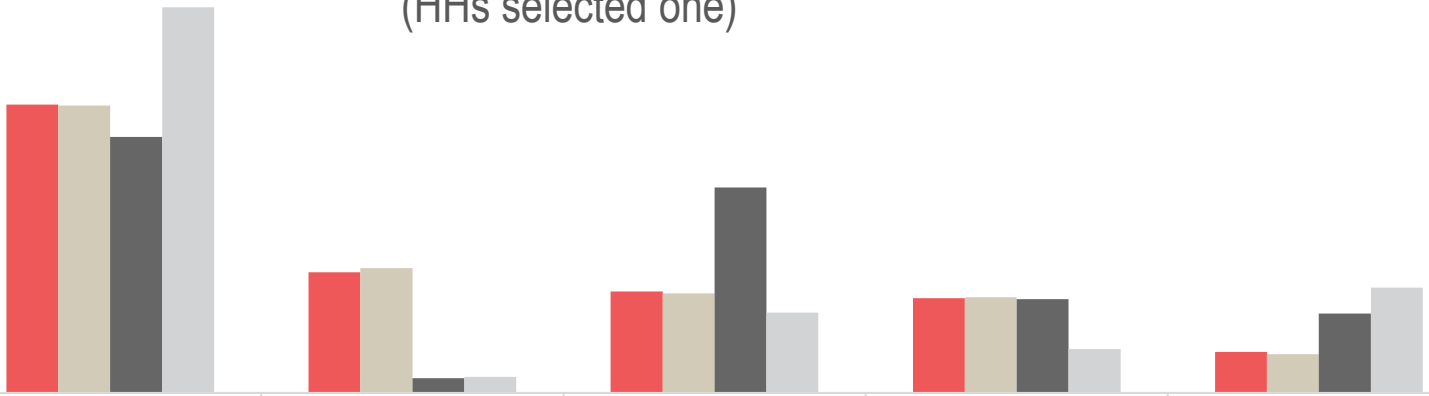


***Data collected did not distinguish between protected and unprotected rain water. Therefore, it is classified as neither 'improved' nor 'unimproved.'

Water, Sanitation & Hygiene: Sanitation facility breakdown

Top 5 types of sanitation facility, by % of HHs for whom this is the main type used

(HHs selected one)

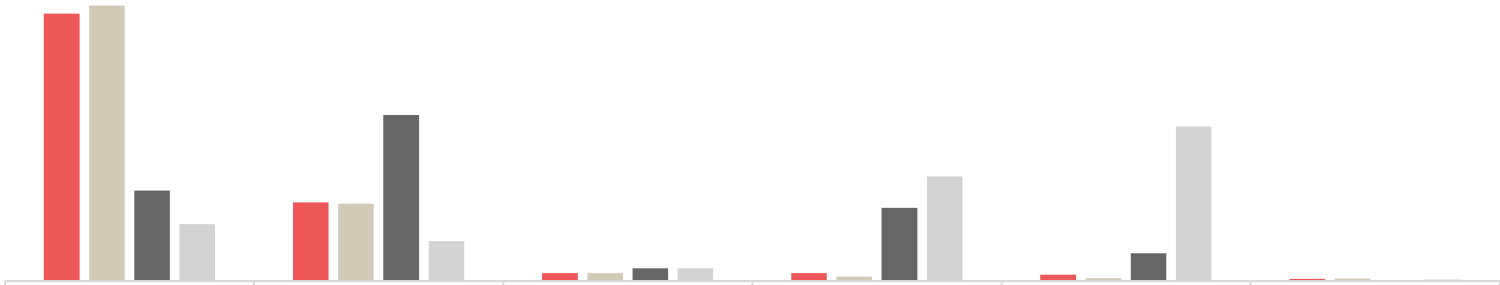


	Pit latrine with a slab and platform	Pour/flush toilet	Open hole	Pit latrine without a slab or platform	Open defecation
Overall	44%	18%	16%	14%	6%
Non-displaced	44%	19%	15%	15%	6%
IDP*	39%	2%	31%	14%	12%
Refugee*	59%	2%	12%	7%	16%

*Limited sample

Emergency Shelter & NFIs: Shelter type breakdown

% of HHs by type of shelter
(HHs could select one)

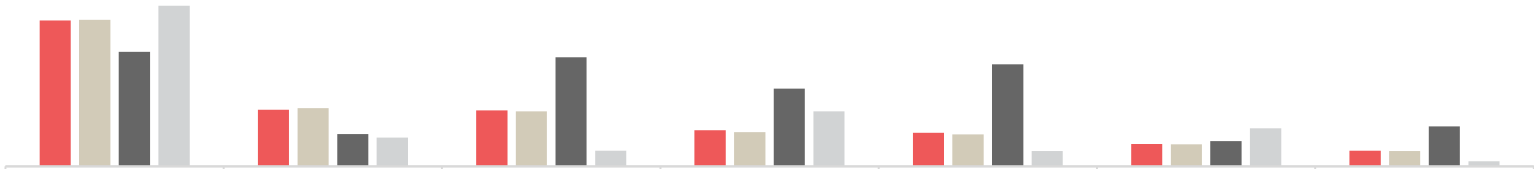


	Permanent / finished house or apartment	Unfinished / non-enclosed building	Collective shelter	Tent	Emergency shelter	Other
Overall	72%	21%	2%	2%	2%	1%
Non-displaced	74%	21%	2%	1%	1%	1%
IDP*	24%	45%	3%	20%	7%	0%
Refugee*	15%	11%	3%	28%	42%	0%

*Limited sample

Emergency Shelter & NFIs: Shelter condition breakdown

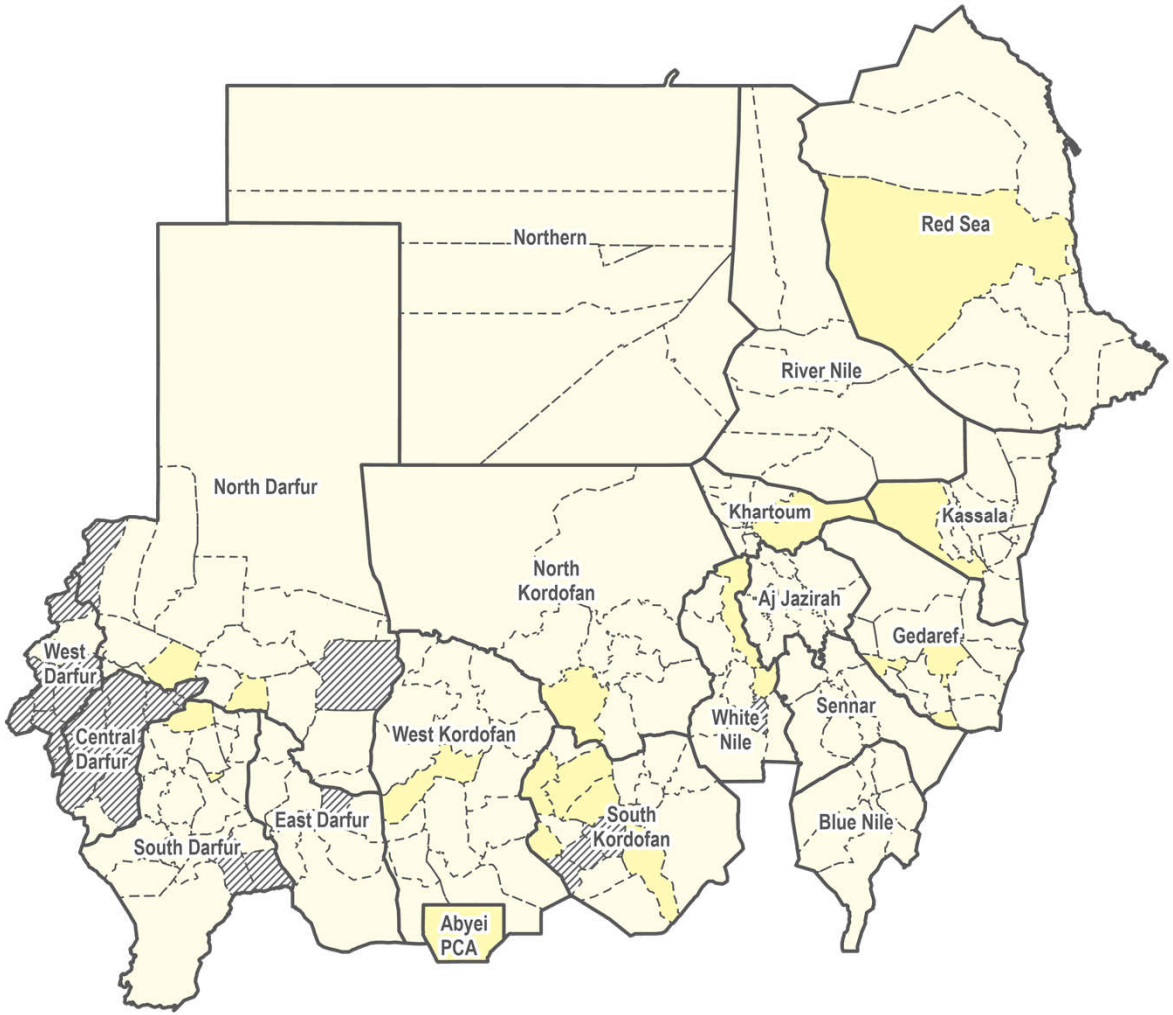
Among HHs whose shelter solutions did not meet agreed technical and performance standards at the time of data collection,
% of HHs by top 7 types of damage or defect
(HHs could select multiple)



	Opening or cracks in roof	Some cracks in some walls	Some walls fully collapsed	Roof partially collapsed	Severe structural damage and unsafe for living	Large cracks / openings in most walls	Total structural collapse
Overall	62%	24%	24%	15%	14%	9%	7%
Non-displaced	62%	25%	23%	14%	13%	9%	6%
IDP*	49%	14%	46%	33%	43%	11%	17%
Refugee*	68%	12%	7%	23%	6%	16%	2%

*Limited sample

General Protection: Safety and security incidents



% of households overall that have experienced safety or security incidents affecting household members in the 3 months prior to data collection

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

General Protection: Movement restrictions breakdown

Among HHs that reported having experienced movement restrictions in the 6 months prior to data collection, % of HHs by type of restriction (HHs could select multiple)	**Overall**	**Non-displaced**	**IDP***	**Refugee***
COVID-related lockdown	74%	75%	70%	40%
Unable to afford travel	34%	33%	58%	30%
Road closures	24%	23%	45%	10%
Fear for safety and/or security	14%	13%	35%	17%
Other government-imposed lockdown (not COVID-	5%	5%	17%	9%
Other	3%	3%	1%	3%
Difficulties to move around due to floodings	2%	3%	1%	0%
Lack of transportation	2%	2%	1%	1%
Discrimination because of other reasons	1%	1%	1%	12%
Discrimination because of my displacement status	1%	0%	14%	16%
Did not have appropriate civil documents to move freely	1%	0%	0%	24%

*Limited sample

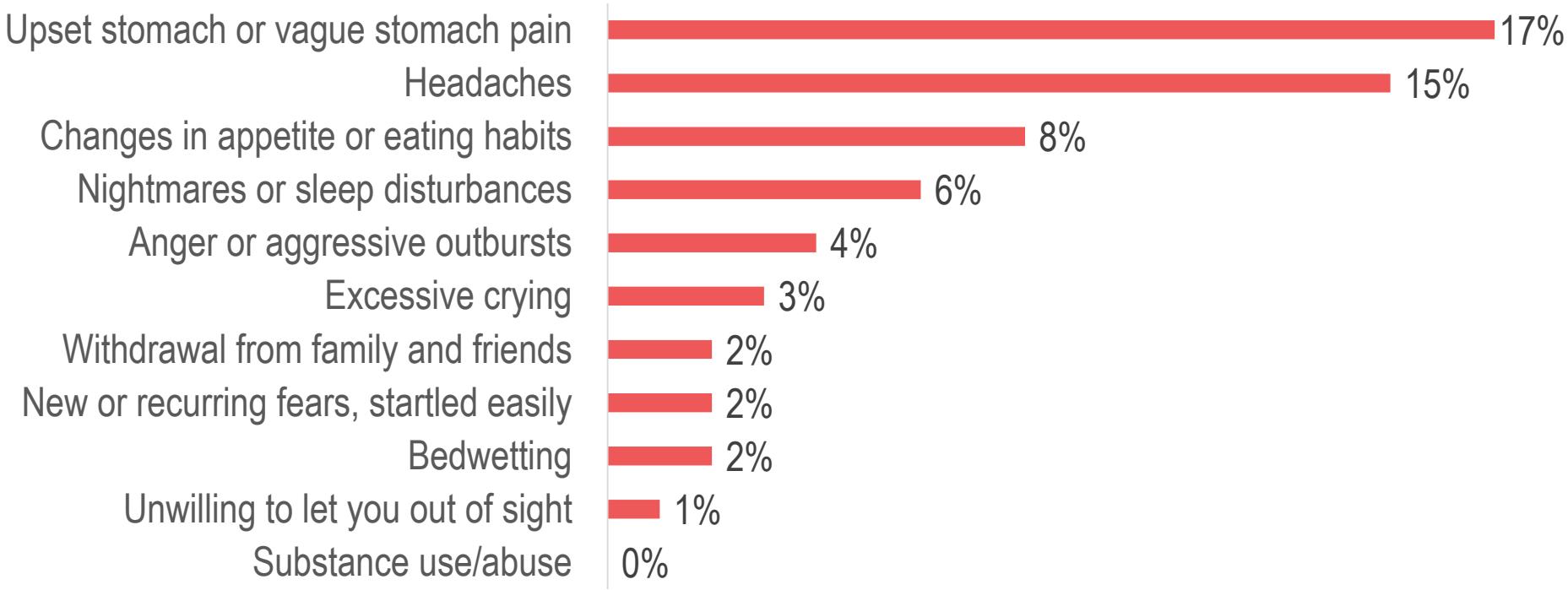
Child Protection: Reasons why child(ren) not living with HH breakdown

Among HHs that reported having ≥1 child <18 years who was not living with the HH at the time of data collection, % of HHs by reason (HHs entered the number of children for each reason)	**By population group**				**By HoH gender**	
	Overall	**Non-displaced**	**IDP***	**Refugee***	**Female-headed HH**	**Male-headed HH**
Studying	36%	36%	52%	37%	33%	37%
Married	35%	39%	2%	9%	33%	36%
Seeking employment	30%	28%	58%	39%	41%	27%
Prefer not to respond	9%	9%	3%	12%	9%	9%
Living at relatives'	5%	4%	0%	25%	3%	6%
Joined an armed group	3%	3%	1%	1%	4%	2%
Missing	1%	0%	1%	3%	0%	1%
Kidnapped	0%	0%	0%	0%	1%	0%
Arbitrarily detained	0%	0%	0%	0%	0%	0%

*Limited sample

Child Protection: Psychological distress breakdown

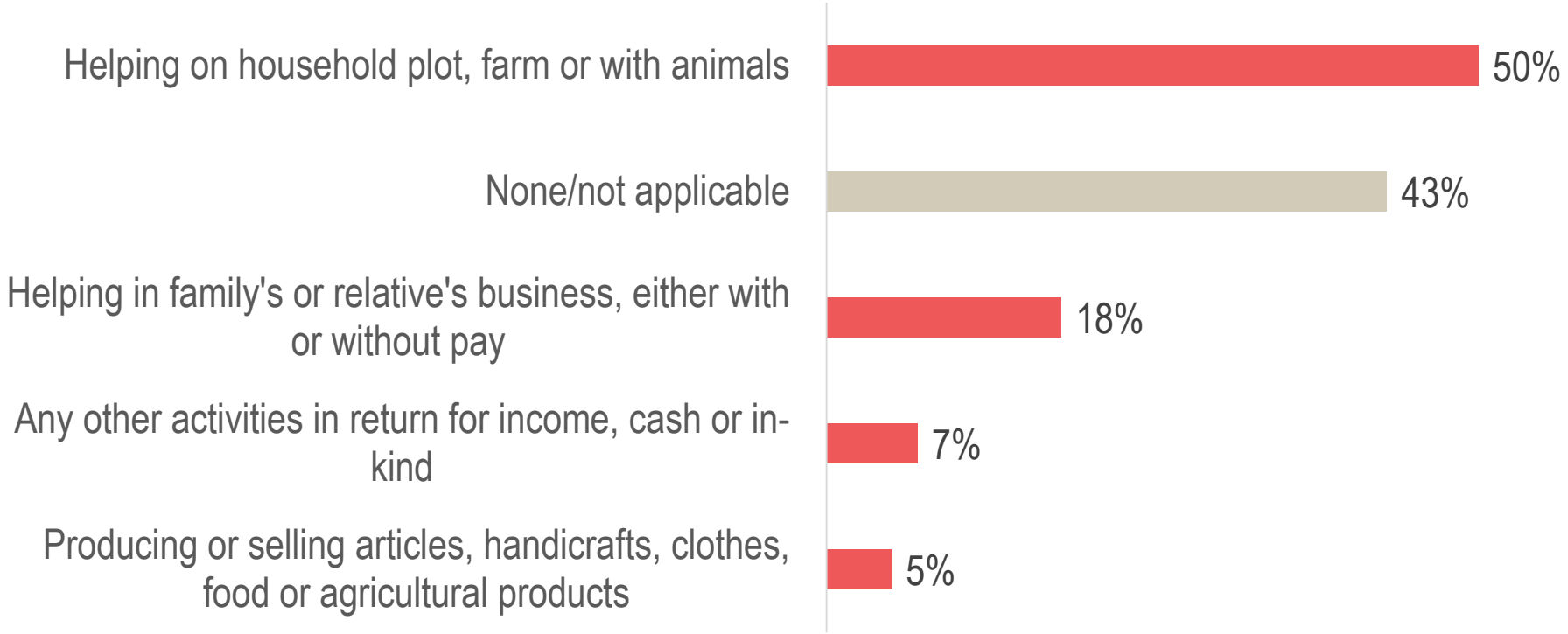
% of HHs that reported having ≥1 member who had shown signs of psychological distress in the 3 months prior to data collection, by type of distress sign
(HHs could select multiple)



Child Protection: Child labour breakdown

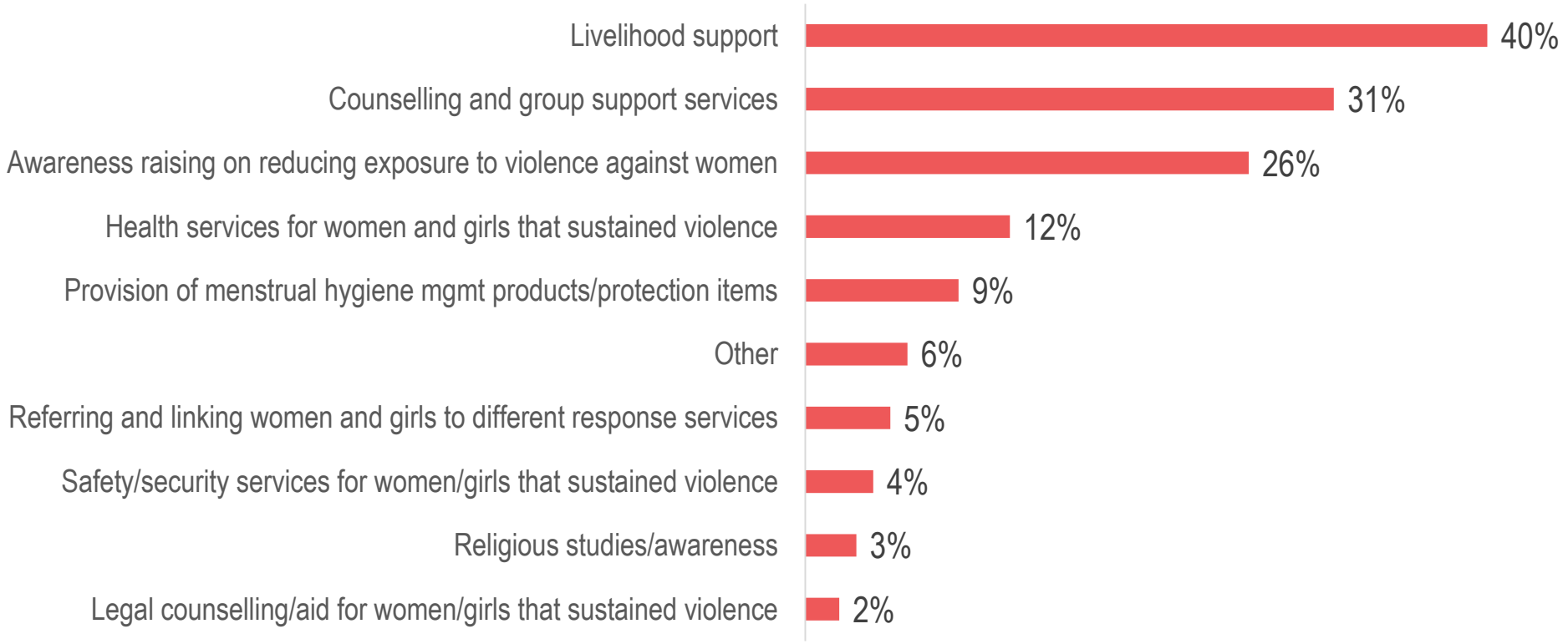
Most commonly-reported types of child labour in the 6 months prior to data collection, by % of HHs overall

(HHs could select multiple)



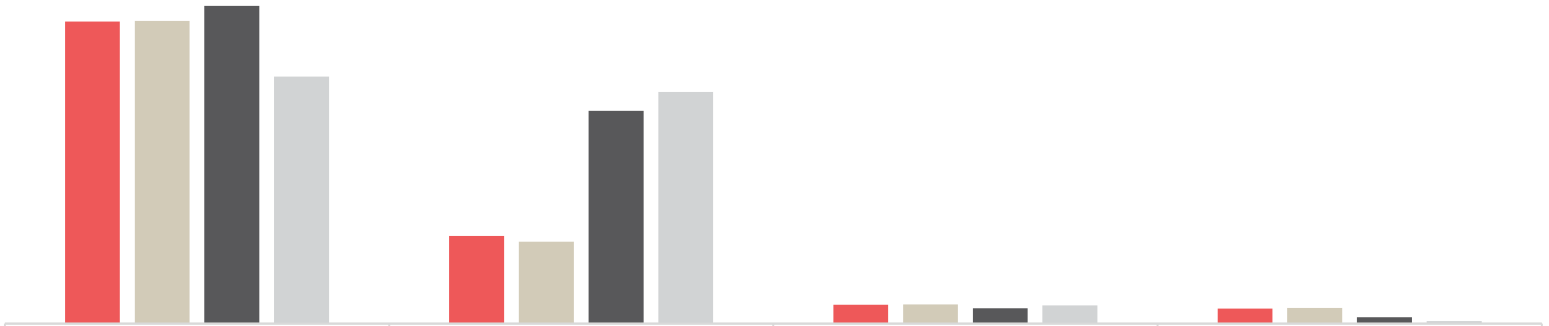
Gender-based Violence: Services/programmes for women breakdown

Among the **24%** of respondents who reported that they were aware of services or programmes available in their community that were specifically for women, % of respondents overall by type of programme
(Respondents could select multiple)



Gender-based Violence: Willingness to report GBV cases breakdown

Among respondents that said that if they heard of a case of violence against a woman or girl, they would report it,
% of respondents overall by top 4 preferred means of reporting
(Respondents could select multiple)



	Police	Community leader	Social worker	Other
Overall	88%	25%	6%	4%
Non-displaced	88%	24%	6%	5%
IDP*	92%	62%	4%	2%
Refugee*	72%	67%	5%	1%

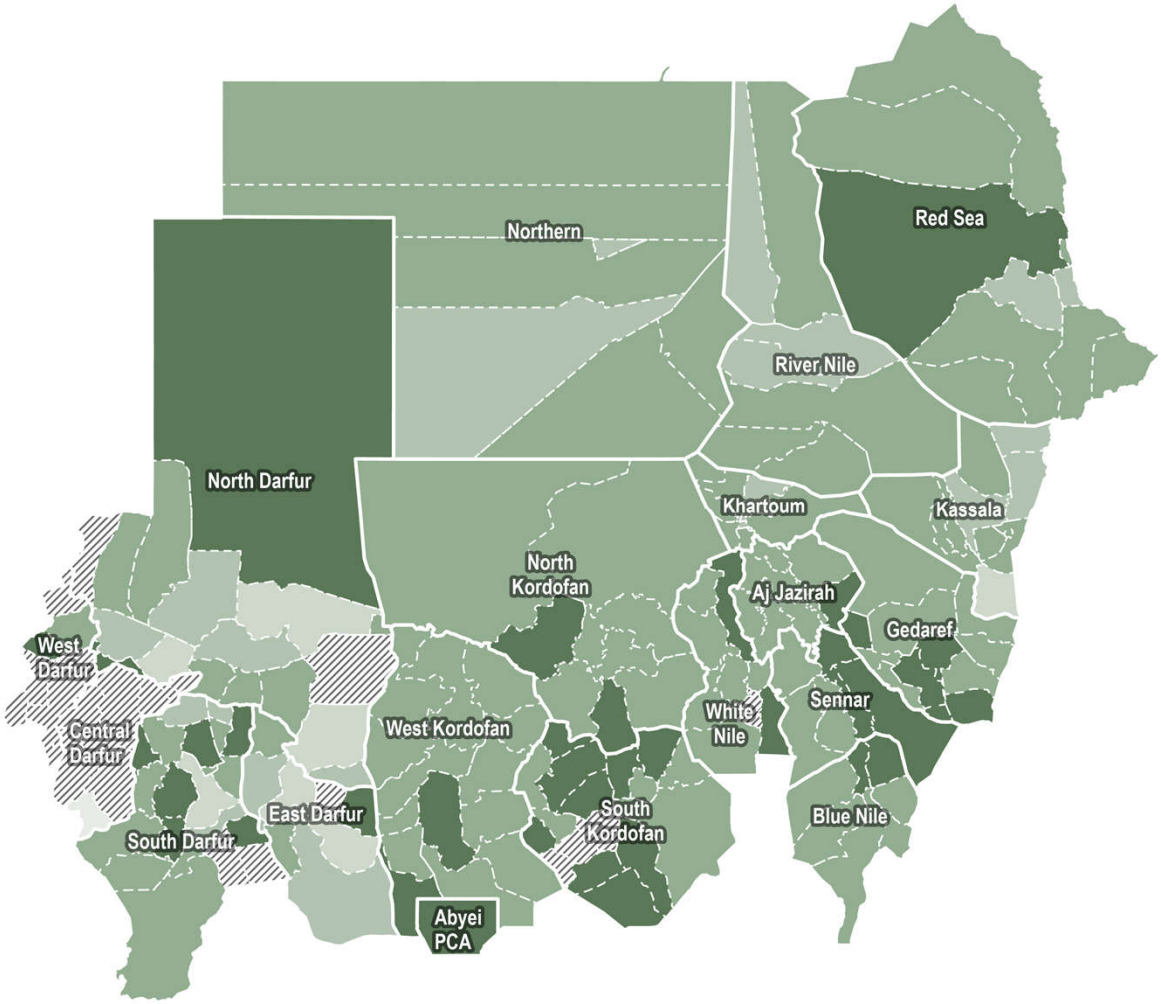
*Limited sample

Mine Action: Landmine/ERW contamination breakdown

Among the **4%** of HHs overall that reported that they were impacted by contamination from landmines and/or Explosive Remnants of War (ERW) at the time of data collection, % of HHs overall by top 5 types of affected areas**
(HHs could select multiple)

**Represents a small subset

Education: School attendance



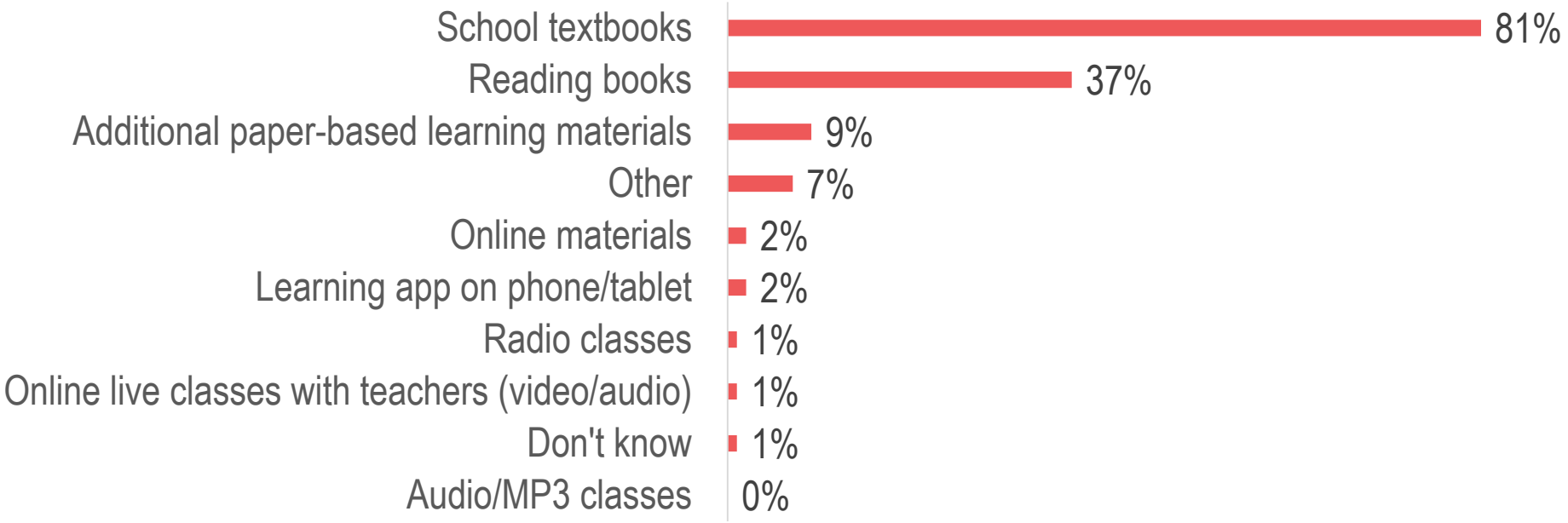
% of households overall who said that they have children who had been attending school regularly prior to the March closures

- 0-9%
- 10-29%
- 30-49%
- 50-69%
- 70-89%
- 90-100%
- No/insufficient household data collected
- State boundaries
- Locality boundaries

Education: Remote learning activity breakdown

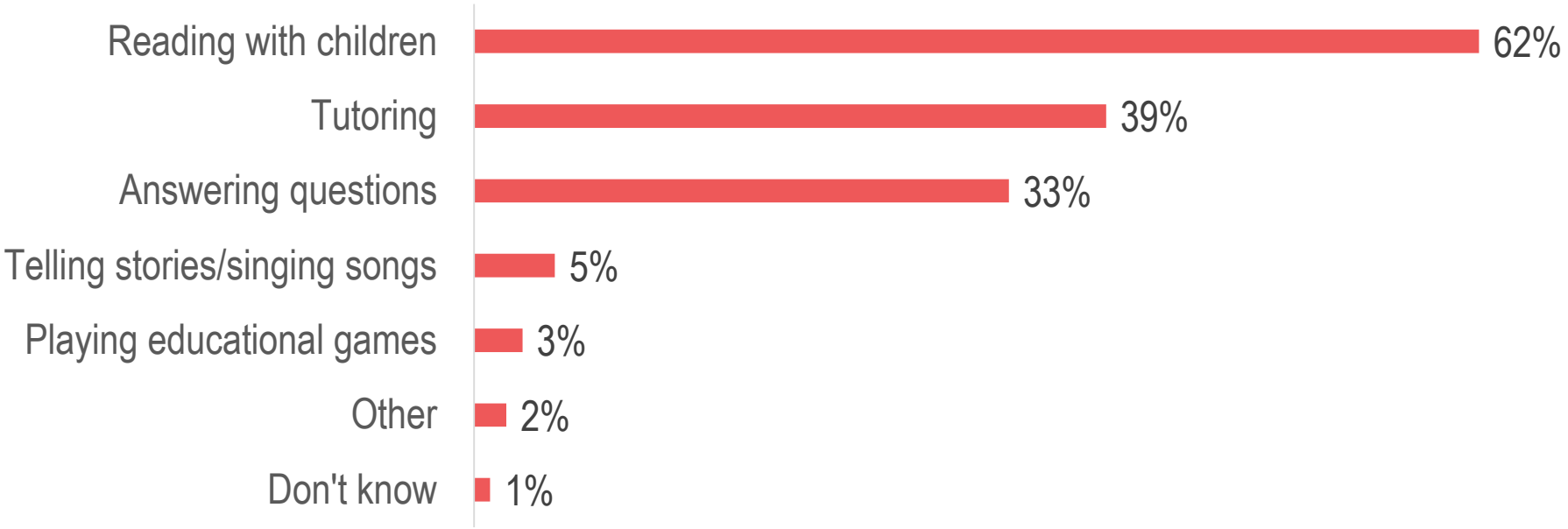
Among the **23%** of HHs overall that have children aged 4-16 years who were attending school regularly prior to the school closures on 15 March 2020 *and* who are continuing learning activities remotely, % of HHs by remote learning activity

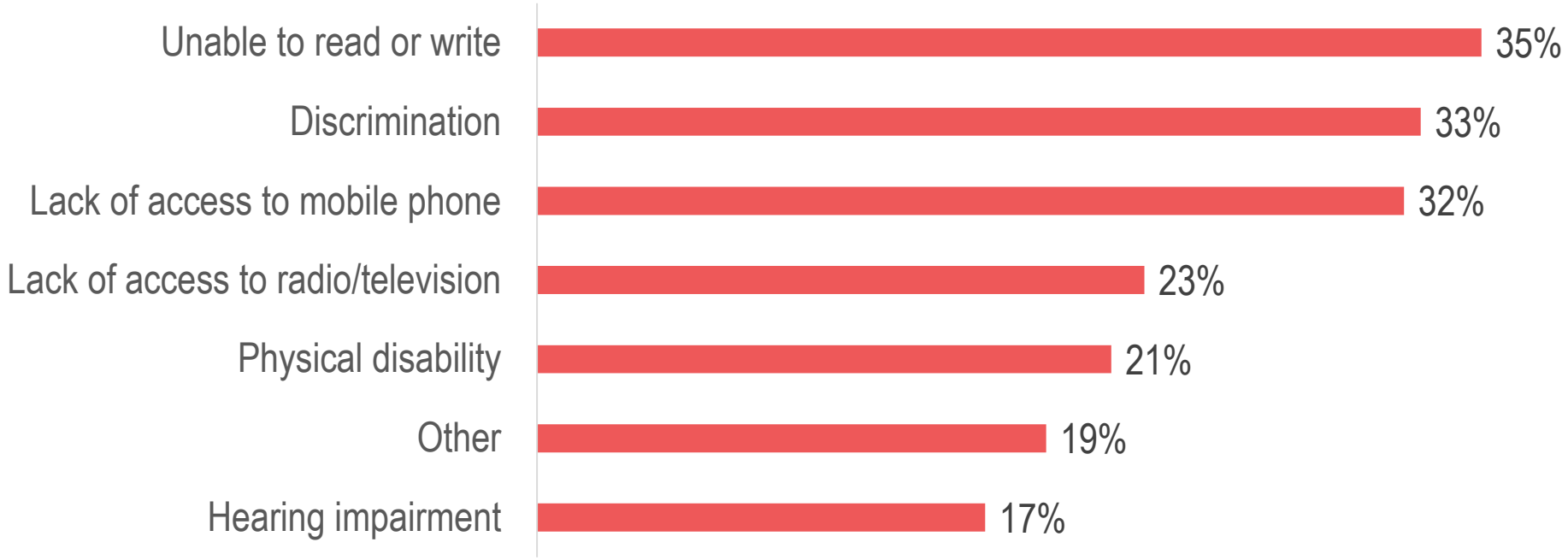
(HHs could select mu



Education: Parent/caregiver/older sibling at-home support breakdown

Among the **42%** of HHs overall that have children aged 4-16 years who were attending school regularly prior to the school closures on 15 March 2020, *and* who had parents, caregivers or older siblings who were able to support home-based learning, % of HHs by



Accountability to Affected Populations: Inability to access information on assistance breakdown

Among the **48%** of respondents who said they were aware of people who may be unable to access available information about humanitarian assistance because of their specific needs,
% of respondents by top 7 types of barrier
(HHs could select multiple)