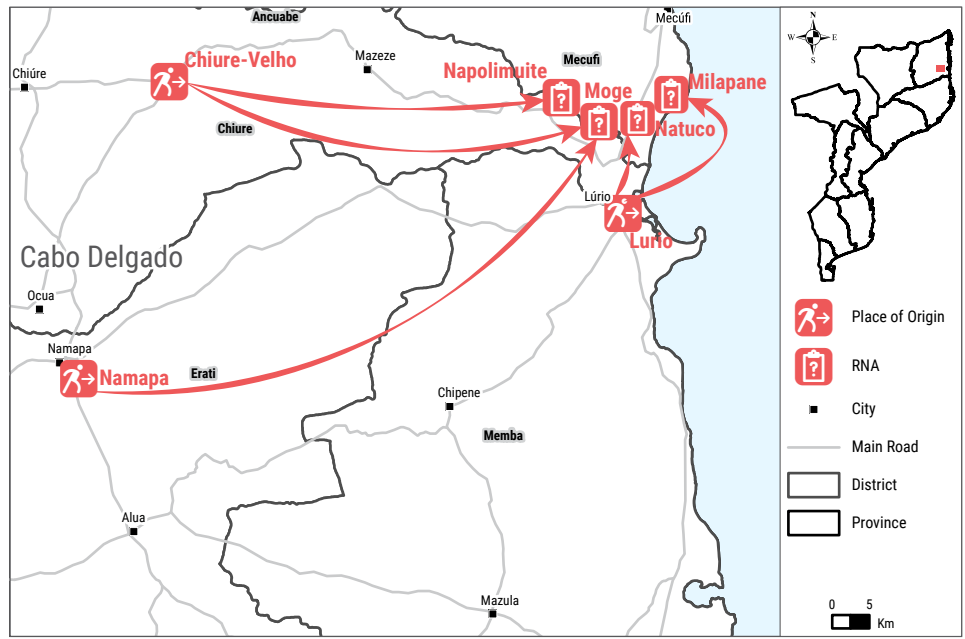


# Rapid Needs Assessment (RNA) Rapid Response Mechanism (RRM)

Milapane, Moge, Napoilimuite and Natuco - Mecufi District  
Cabo Delgado, Mozambique  
18 - 20 October 2025

## CONTEXT & RATIONALE



**BETWEEN SEPTEMBER AND OCTOBER 2025**, sporadic attacks by non-state armed groups (NSAGs) increased in Chiure district (Cabo Delgado) and in Erati and Memba districts (Nampula Province). The attacks involved the burning of houses, churches, schools, and public buildings, shootings causing casualties, and looting of food and other goods. According to local sources, around 1,364 families from Lúrio and Memba (Nampula) and Chiure (Cabo Delgado) arrived in Mecufi district. Of these, 681 families settled in Natuco (631 from Lúrio, 50 from Chiure–Mazeze–Napala), 287 in Napwilimuite (31 from Lúrio, 256 from Chiure–Mazeze), 239 in Melapane, and 42 in Moge. Population movements in Mecufi–Natuco and Napwilimuite remain ongoing.<sup>1</sup>

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:** The route from Pemba to Mecufi via Natuco, Napwilimite, Melapane, and Moge consists mainly of dirt and sandy roads, which are accessible with a 4x4 vehicle. Traffic flow is generally normal, and the overall security situation in the area is considered relatively stable.

### TOP 3 REPORTED PRIORITY NEEDS by % of households

<p> <b>89%</b> <b>Food</b></p> <ul style="list-style-type: none"> <li>82% of households reported having <b>problems accessing food</b></li> <li>76% of households reported a <b>reduction in the number of meals consumed since the event</b></li> <li>48% of households had <b>high rCSI</b>, indicating <b>severe reliance on coping strategies</b></li> </ul>	<p> <b>74%</b> <b>Shelter</b></p> <ul style="list-style-type: none"> <li>85% of IDP households <b>did not intend on returning to their place of origin</b> in the 30 days following data collection</li> <li>More than half of IDP households (55%) were living in <b>houses borrowed from the host community</b></li> </ul>	<p> <b>47%</b> <b>NFI</b></p> <ul style="list-style-type: none"> <li>Approximately <b>42%</b> of households reported <b>not owning any essential non-food items (NFIs)</b></li> </ul>
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## HOUSEHOLD PROFILES

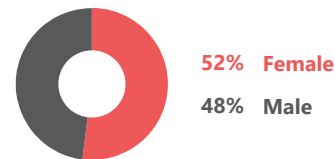
**1249** Number of IDP households in the affected population

**66** Number of assessed households

Population groups, by % of households



Respondent gender, by % of households



## DISPLACEMENT

**85%** of IDP households did **not intend** on **returning** to their **place of origin** in the 30 days following data collection (n=66)

**92%** of IDP households reported **lack of security** as the **principal barrier to return** to their place of origin (n=61)

### QUALITATIVE INSIGHTS

The communities of origin remain unsafe. Between September and October 2025, sporadic attacks by non-state armed groups (NSAGs) increased in Chiure district (Cabo Delgado) and in Erati and Memba districts (Nampula Province). The team leader reported that this was the third time insurgents entered villages such as Mazeze, prolonging the sense of insecurity. The attacks included the burning of houses, churches, schools, and public buildings, shootings causing casualties, and looting of food and other goods.

## FOOD SECURITY, LIVELIHOODS & MARKETS

% of households that reported having problems accessing food

**82%**

Average number of meals consumed per household member per day

**1.6**

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

**76%**

**Top 3 reported barriers to food access**, by % of households that reported having problems accessing food (n=54)\*

- 87% Lack of financial resources
- 26% Limited food availability
- 15% Lack access to land

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

- 44% Food in exchange for work
- 38% Borrowing food from relatives
- 21% Received as gift from relatives

**Top 3 reported primary livelihood activities**, by % of households

- 62% Subsistence farming
- 18% None
- 9% Small business

### PRIORITY ACTION

**Food assistance: 89% of assessed households reported food security as a top 3 priority need**

82% of households reported having problems accessing food, with 48% of households categorized as "high" in the RCSI, indicating heavy reliance on coping strategies.

% of households per Reduced Coping Strategy Index (RCSI) category<sup>2</sup>

Low	Medium	High
11%	41%	48%

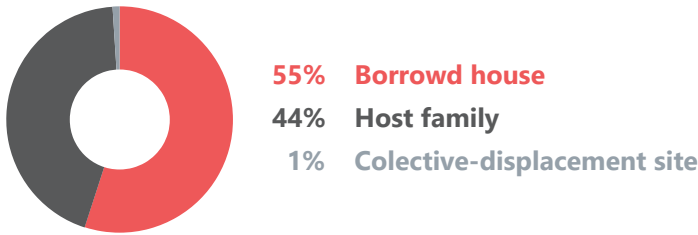
**6%** of households that reported having **access to land for cultivation**

**39%** of households that reported having **access to mobile money (M-Pesa/e-Mola)**

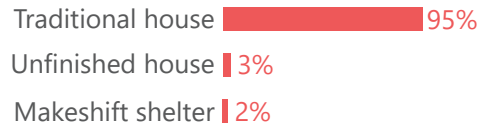
\*select multiple, the total value may exceed 100%

**SHELTER & NFIs**

Most reported living arrangement, by % of households



Most reported shelter condition, by % of households



**PRIORITY ACTION**

**Shelter assistance:** Shelter (74%) and NFI (47%) were reported amongst the top 3 priority needs by assessed households

55% of households were in **houses borrowed from the host community**. Qualitative observations indicated that the houses are built with conventional materials and walls made of a mixture of earth. In the same vein, the team leader emphasized that shelter remains one of the most immediate needs of IDPs.

Essential NFIs were also scarce: Approximately **42%** of households reported **not owning any essential NFIs**, such as soap, stove, lamps, etc. Community leaders highlighted that the most immediate needs of the affected population include NFIs, particularly blankets and cooking utensils.

Ownership of essential NFIs, by % of households\*

Essential NFI	% of HH
None	42%
Lamp	0%
Stove	0%
Soap	3%
Clothes	3%
Sleeping mats	5%
Mosquito nets	5%
Sleeping sheets	6%
Cooking utensils	18%
Water buckets	24%
Pots > 5 Lt	42%

**HEALTH & NUTRITION**

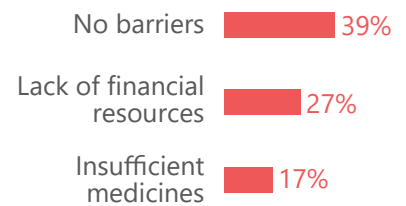
**52%** of households reported having at least **one household member above age 5 who was sick in the 2 weeks prior to data collection**, with fever (15), diarrhea not severe (2), and skin problems (2) as the most reported conditions

**5/27** households with at least one child under age 5 (n=27) reported having **at least one child who was sick in the 2 weeks prior to data collection**

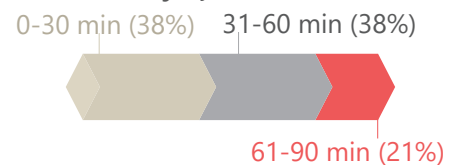
**15/20** households with a sick member above age 5 (n=20) **received treatment for their condition**

**0/7** 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



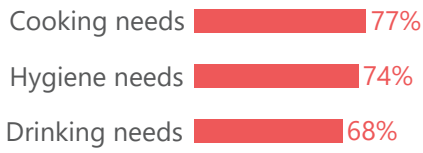
**QUALITATIVE INSIGHTS**

According to reports from the team leader, health facilities did not have sufficient capacity to meet the existing demand. For instance, the community of Milapane relied on the Nacate Health Center, located about 1 km away, which had limited capacity to provide adequate healthcare services.

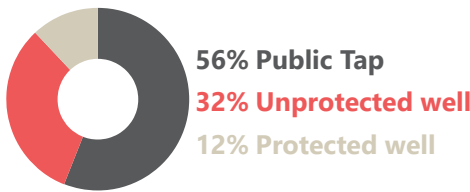
\*select multiple, the total value may exceed 100%

## WATER, SANITATION AND HYGIENE

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



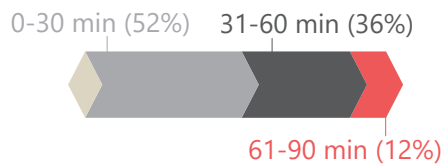
**Most reported primary source of drinking water, by % of households**



**Top 3 reported barriers to accessing clean water, by % of households\* (n=21)**

- 15/21 Distance
- 6/21 Not enough containers
- 4/21 Limited water access

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



**33%** of households reported **having problems related to sanitation facilities** (toilet/latrine)

**94%** 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=22)**

- 8/22 Facilities were very destroyed
- 4/22 Facilities were occupied
- 3/22 Facilities were unclean

### QUALITATIVE INSIGHTS

In Milapane, there were four water points, three of which were functional while one was out of service. All functional water points provided good quality water and had well-maintained infrastructure. Most households had latrines; however, many of them faced collapse issues due to the sandy soil conditions.

## EDUCATION

**30%** 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=57)

**28%** 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=53)

**3%** of households with children reported having their children participate in **non-school educational activities** (n=33)

**Most reported barriers to school attendance for girls, by number of households\* (n=33)**

- 9 Lack of financial resources
- 5 Protection risks at school
- 4 No documentation

**Most reported barriers to school attendance for boys, by number of households\* (n=32)**

- 11 Lack of financial resources
- 6 Lack of interest
- 4 No school nearby

**Top 3 reported most pressing educational needs for children, by % of households\* (n=60)**

- 25% Needs enrollment
- 23% Needs transport support
- 22% School continuation needed

### QUALITATIVE INSIGHTS

In the Milapane community, a masonry school was available, and some internally displaced children were already attending it, as noted by the team leader. However, quantitative data showed relatively low school attendance rates among girls (30%) and boys (28%) across all assessed communities, indicating that the education sector should receive particular attention.

\*select multiple, the total value may exceed 100%

## PROTECTION, MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT (MHPSS)

**77%** of households reported a **good or very good relationship between IDPs and the host community**

**5%** of households had **heard or encountered separated/unaccompanied children among the newly arrived population**

**47%** of households **reported at least one member with missing identity documents**

**3%** of households were **concerned about protection issues in their community** (n=2), with fears of **discrimination** (2) and **armed conflict** (1)

**Most reported causes of separated/unaccompanied children, by number of households (n=3)\***

- 2** Parents disappeared after the attack
- 1** Loss of parents due to displacement

**0%** 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\***

- 88%** Sadness and discouragement
- 58%** Anxiety or fear
- 12%** Nightmares

**Top 3 reported psychosocial signs in girls, by % of households (n=57)\***

- 77%** Sadness and discouragement
- 60%** Anxiety or fear
- 18%** Nightmares

**Top 3 reported psychosocial signs in boys, by % of households (n=53)\***

- 77%** Sadness and discouragement
- 57%** Anxiety or fear
- 15%** Nightmares

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

- 35%** None
- 23%** Ethnic differences
- 23%** Tension over assistance

### QUALITATIVE INSIGHTS

The team leader highlighted that the relationship between internally displaced persons (IDPs), returnees, and the host community has been good. Several NFI items, such as hygiene products and clothing, have been shared by the host community with the IDPs. Additionally, the community has supported the IDPs by facilitating their access to water and food.

## ACCOUNTABILITY TO AFFECTED POPULATIONS



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

- 42%** Community leaders
- 30%** Face to face with humanitarian worker (any)
- 27%** Phone call

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

- 47%** Community leaders
- 27%** Face to face with humanitarian worker (any)
- 15%** Linha verde

**Preferred modalities of assistance, by % of households**

- In-kind  **85%**
- Cash  **11%**

\*select multiple, the total value may exceed 100%

## METHODOLOGY OVERVIEW AND LIMITATIONS

The Rapid Response Mechanism (RRM) team of Solidarité International (SI) conducted 66 structured, face-to-face household surveys with households in Mecufi district on 18 to 20 October 2025: 36 with displaced families living in Natuco, 15 in Napoilemuite, 11 in Milapane and 4 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.

## PLANNED RRM INTERVENTIONS BY SI

Sites	Intervention	Beneficiaries
Napoilemuite	Value vouchers for food and non-food items (NFIs)	332 HH
Moge	Value vouchers for food and non-food items (NFIs)	314 HH

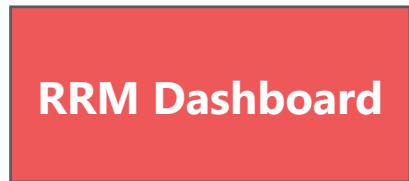
## ENDNOTES

1. RRM Mozambique. Alert\_SI\_MEC\_16102025. October 2025 (for access, please contact SI Deputy Area Coordinator for Programs, Amorim Manuel, at rrm.pm@solidarites-mozambique.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:



## 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).

### COOPERATING PARTNERS



### FUNDED BY:

