

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

Naschitenge Resettlement Center (Alert: SI_NAM_30092024)
Mueda District - Cabo Delgado, Mozambique
14 October 2024

KEY MESSAGES

- Food security** was the most commonly reported priority need by all 39 respondents, with the **lack of financial resources** as the most commonly reported barrier to food access.
- Water access (56% of assessed households)** was the second most reported priority need. **Distance to the nearest functional water point** was the most commonly reported barrier to water access (85% of assessed households).
- Both quantitative and qualitative findings highlighted **shelter and non-food items (NFIs)** as a priority need. Most shelters are precariously constructed and vulnerable to damage, especially in the coming rainy season. In addition, less than 10% of respondents owned essential NFIs such as stoves and soap.

CONTEXT & RATIONALE

The rural area of Naschitenge in the northern Mueda District has faced significant challenges due to the ongoing insurgency in Cabo Delgado. Initially, while insurgent activity primarily targeted coastal districts like Mocímboa da Praia and Palma, the subsequent escalation of violence gradually extended to more remote areas. Naschitenge became increasingly inaccessible for humanitarian intervention due to the intensification of insurgent raids and military operations. Access was sporadic until the end of 2023 when the area became completely inaccessible due to poor road conditions.¹

In September 2024, Naschitenge became accessible once again as conditions improved on the road from Mueda to Namatil. The RRM team of Solidarités International (SI) conducted an RNA to understand priority needs of the 757 households in the Naschitenge Resettlement Center. This document presents the key findings.

ASSESSMENT OVERVIEW

This assessment utilized a mixed-method approach. The quantitative element consisted of 39 household surveys conducted on October 14th with displaced families living in the Naschitenge Resettlement Center, most of whom have resided there since the onset of the conflict.

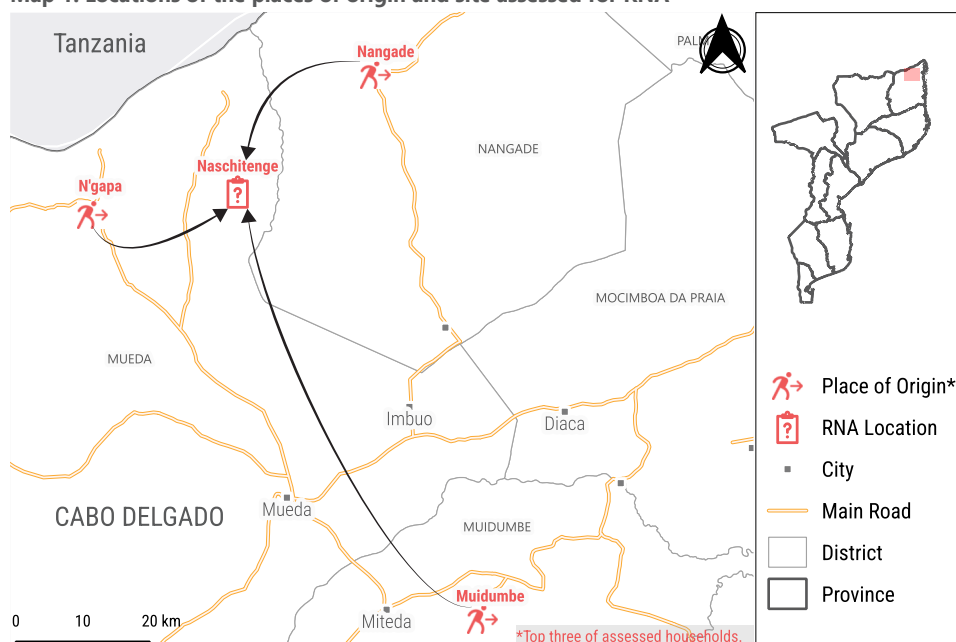
The quantitative findings were supplemented with a qualitative component consisting of observations, community leader engagement, and insights from the data collection team.

Results are indicative. Please refer to the Methodology Overview and Limitations for further detail.

84%

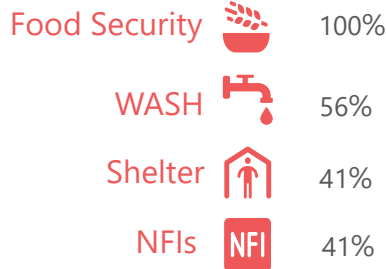
of assessed households have been at the Naschitenge Resettlement Center for more than 2 years.

Map 1: Locations of the places of origin and site assessed for RNA



PRIORITY NEEDS

Top 4 most commonly reported priority needs, by % of assessed households*



DISPLACEMENT

81%

of assessed IDP households **do not intend on returning to their place of origin**, with the **lack of security** and **lack of basic services** cited as the most common barriers to return.

FOOD SECURITY, MARKETS & LIVELIHOODS

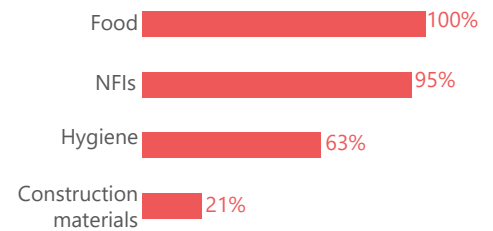
69% of assessed households had **problems accessing food** at the time of data collection, with the **lack of financial resources as the most commonly reported barrier**.

Primary sources of food, by % of assessed households*



49% of assessed households **do not have access to a market nearby**.

Reported types of products available at the market, by % of assessed households*



Average number of meals consumed per assessed household member per day

1.82

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

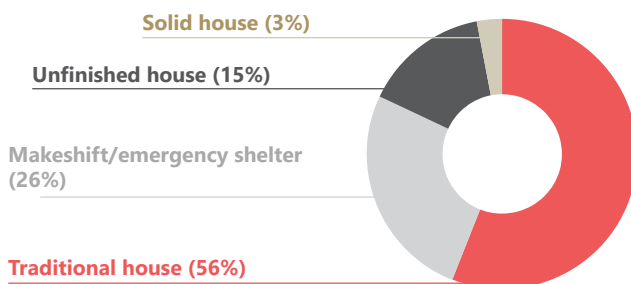
Low	Medium	High
8%	67%	26%

67% of assessed households reported **having access to land**.

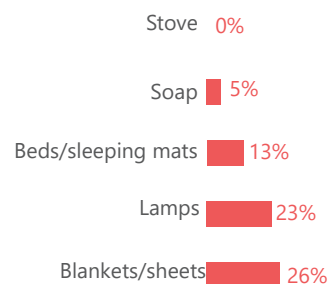
64% of assessed households had access to **mobile money** (M-Pesa/e-Mola) at the time of data collection.

SHELTER & NFIs

Most commonly reported condition and material of current shelter, by % of assessed households



% of assessed households that own essential NFIs, by type of NFI*



Qualitative observations suggested that most homes were precariously constructed with local material such as *matope* (mud-brick), bamboo, plastic, and grass.

*select multiple, the total value may exceed 100%

WATER, SANITATION, AND HYGIENE

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



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

- 23% Cooking needs
- 21% Drinking needs
- 13% Hygiene needs

Both quantitative and qualitative findings suggested that **distance to the nearest water point was the primary barrier to water access** for the assessed households. There is no public tap in Naschitenge and many households have resorted to collecting water from the river.

79%

of assessed households reported **using an open-pit latrine (without slab)** at the time of data collection.

38%

of assessed households reported **having problems related to sanitation facilities**, with facilities too crowded/shared amongst too many people and facilities being damaged as the most commonly reported barriers.

HEALTH

56%

of assessed households reported **an adult member who was sick in the past 2 weeks** (n=39).

6/12

of assessed households with at least one child (under age 5) reported having **at least one child who was sick in the past 2 weeks** (n=12).

Most commonly reported conditions, by number of assessed households* from the 22 assessed households who reported at least one sick adult in the past 2 weeks

- 9 Body pain
- 6 Stomach illness
- 6 Malaria
- 6 Respiratory illness(cough, tuberculosis, etc.)

Most commonly reported symptoms, by number of assessed households* from the 6 assessed households who reported at least one sick child (under age 5) in the past 2 weeks

- 4 Fever
- 4 Cough
- 2 Vomiting
- 1 Malaria

90%

of assessed households reported **visiting a health center for healthcare**. However, distance was cited as the primary barrier to healthcare - **69% of respondents reported taking more than 1 hour to reach the nearest health center**.

PROTECTION

59%

of assessed households are currently **missing their identity documents**.

31%

of assessed households with at least one child (under age 18) reported having **at least one child who is currently not residing in the household** (n=50).

While most cases were due to study or employment, and **1 household reported that their child was separated during displacement**.

1

assessed household is currently **concerned about violence in their community**, with regard to theft.

*select multiple, the total value may exceed 100%

EDUCATION

82%

of assessed households with at least one child aged 5-17 reported **that all children in the household attended school at the time of data collection** (n=38).

Qualitative observations highlighted that the host community has welcomed children of displaced families to study at the local primary school.

ACCOUNTABILITY TO AFFECTED POPULATIONS

Preferred modalities of assistance, by % of assessed households*



Community leader engagement revealed that families were frustrated with the humanitarian response as many organizations have come to Naschitenge for needs assessments, however none have yet to deliver any assistance this year.

*select multiple, the total value may exceed 100%

METHODOLOGY OVERVIEW AND LIMITATIONS

On October 14th, 2024, the RRM team of Solidarités International (SI) conducted 39 quantitative, structured face-to-face household surveys with displaced families residing in the Naschitenge Resettlement Center in the rural northern region of the Mueda District in Cabo Delgado. The survey tool is owned by IMPACT Initiatives and was deployed through KoBo software. The surveyed households consisted of primarily displaced families and were selected using an on-site purposive sampling method.

The household surveys were complemented by a qualitative semi-structured team leader feedback form consisting of observations, community leader/local authority engagement, and insights from the data collection team in the same communities as the household surveys. This data was used to contextualize the shock, triangulate information, and gain detailed observations and descriptions of the site and affected population.

The assessment was designed by REACH in collaboration with RRM partners, Solidarités International (SI) and Action Contre la Faim (ACF). Data collection teams in both organizations participated in a 2-day training and pilot session led by a REACH Assessment Officer.

The scope of the RNA is restricted by the quick turnaround required by the RRM and need to work within existing partner resources. Therefore, the quantitative findings are indicative only. Furthermore, the questionnaire is designed to be quick (hence Rapid Needs Assessment), so only the most essential indicators were included for each sector.

Please refer to the [Terms of Reference](#) for more details.

ENDNOTES

- 1 RRM Mozambique: Alert SI_RRM_MOC_30092024. September 2024.
- 2 The RCSI is a proxy indicator of household food insecurity that is based on a list of behaviors (coping strategies) that people do to manage their food insecurity situation. The higher the score, the more extensive use of negative coping strategies and hence potentially increased food insecurity.

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).

