



A set of 13 indicators and a scoring mechanism was developed in consultation with the Health Sector to determine two vulnerable population categories per mantika: 'intersectoral vulnerability to increased mortality from COVID-19' and those 'at risk of higher infection rates of COVID-19'. The 'intersectoral vulnerability' takes into account reported access to health care facilities by households, drivetimes to COVID-19 designated facilities, age distribution of the population, prevalence of chronic diseases, and the ratio of total population per bed in a COVID-19 designated facility. Vulnerability due to increased 'risk of higher infection rates' is determined by urban population density, the number of IDP/returnee/migrants/refugees living in substandard shelter types, the presence of detention centres, population movement across national/mantika borders, and access to WASH facilities and products. For more information on methodology, data sources and rationale, please refer to the methodology note: [link](#).

Data sources

Administrative boundaries: OCHA

Data analysis: IOM DTM Round 29, REACH MSNA 2019, MoH list of COVID-19 designated facilities, Service Availability And Readiness Assessment (SARA) 2018, Global Detention Project, Cash & Markets JMMI, WorldPop