

Multi Cluster Site Assessment - CHIURE

Megaruma

25 August 2021

Attendees: WASH Cluster (Helvetas), CCCM Cluster (IOM), Protection Cluster (UNHCR), Health Cluster (WHO)

The objective of the assessment was to gain a better understanding of:

- Physical layout and suitability of the proposed areas for relocation site in Chiure, Megaruma.
- The location of the site and access constraints

The findings presented in this report will inform on the capacity of the site to accommodate people and recommendations for development before any relocations.

Assessment Methodology

Each visit consisted of a conversation with the community leader about the current situation within the host communities, the situation with the IDP's and walk to the proposed sites. Before the visit CCCM team had carried out flood risk assessments of each site to ensure the locations were fit for habitat.

Megaruma

Main Findings – Summary

The proposed relocation site is located 20 minutes from the community of Megaruma, on the Chiure-Metoro road. The IDP community was provided space in the area and identified plots to build the shelters. During the assessment the leadership agreed to stop the construction until CCCM intervenes to avoid later to have to rebuild it for site planning purposes. Most of the IDPs received food support by WFP and a hygiene kit by Helvetas. A total of 598 HH coming from 4 different districts: Macomia, Muidumbe, Mocimboa and Quissanga. Some families have recently arrived from Palma, but have not received support yet.

CCCM

The proposed area is not flood prone based on flood risk analysis and on-site assessment.

The site has an area of 38.4 hectares and an estimated capacity to accommodate 750 families in a plot size of 15m x 20m.

There are 598 families that have been accommodated in the host community of Megaruma since 2019, they came from Macomia, Mochimboa de praia, Muidumbe, Quissanga and Palma.

Contacts:

86 0138170 – Arlindo (chefe IDPs Quissanga)

86 3444813 – Modesto (chefe IDPs MdP)

Protection

Shelter: There are already some constructions in the site, however there are not enough local materials, bamboos and grass, available to all families. There are many IDPs open air sleeping, including a majority of women and children.

WASH: no **water** in place for the community. A hole was dug by the residents to collect water, but the source dried rapidly. There are no **latrines** or any other facility available. The IDPs resource to open

air defecation. Helvetas distributed hygiene kits for around 500 households (2 buckets, 2 solar lamp, soap, mosquito net, toothbrush, caps, pens).

Health: Once per month the local community receive the visit of a mobile clinic. There are 16 activists supporting the local community on health issues. The closest health center is located 24 km away, in Chiure sede. The transportation to the city costs around 50 MZN. The main diseases are malaria and cholera.

Schools: some IDP kids are schooling in the host community. No number on that.

Child Protection - reports of unaccompanied minors but no official number from the community leaders.

GBV: women and girls sleeping in open air exposing them to sexual violence.

HLP: donation of the land by the landlord (DUAT by using the land). The donation was formalised by SDPI through documentation. Machambas: some IDPs already have plantation. The leaders said there will be machambas to everybody.

Electricity: no public lighting in place.

Security: there is no police station in the community. The closest is in Chiure sede.

In general, access is not compromised for the provision of humanitarian life-saving assistance all year round, and based on the brief assessment, there was no indication of significant security risks in the area.

HEALTH

The nearest Health facility is 24 km away, with maternity (Chiure District Hospital). There are not APE and traditional midwife.

Main challenge for health is the lack of provision of services by mobile brigades (only once a month) and medicines. No EPA (elementary polyvalent agent).

WASH

Water

The proposed area is 4.5 km southern of the Megaruma river, on a top of a hill delimited at the north and the south by two seasonal rivers. On the southern limit, in a riverbed of a seasonal stream, people excavated 3 artisanal water points, about 2 meters depth and without any protection to the walls. The sandy soil does not allow them to excavate deeper, thus the quantity of water they can collect is limited and they must wait the recharge time every 10-15 collected buckets. Water is reported "drinkable", not salty.

Nearby the area there were no manual pumps nor wells, thus it is not possible to do any evaluation about the presence and depth of the aquifer. Nevertheless, the consistent presence of termite nests suggests the presence of exploitable fresh water.

Considering the number of estimated people, as emergency solution, are needed 5 AfriDev (ratio 1:500).

The area does not present ponds or stagnant water, it is elevated and thus less prone to floods and it presents green vegetation and termite nests.

Nevertheless, the presence of water can be confirmed only with the geoelectrical tests that will be done before the realization of the boreholes.

Sanitation and Hygiene

At the moment the area is completely missing of any infrastructure. The first group of IDPs moved out from the aldeia of Megaruma and came here, to build their houses. For this reason, emergency latrines are needed as soon as possible, at least 20 in this first stage (ratio 1:50).

SANTOLIC and hygiene promotion activities are needed, starting with the setting up of the site. This will facilitate families in the construction of a proper latrine with bath unit, dish/pans rack and garbage pit.

On the 24/08 HELVETAS with AMASI distributed hygiene and dignity kits to all the families hosted in Megaruma. The closest market is in Megaruma, about 20 mins walking.

SHELTER

N/A

Conclusion:

Based on the findings and feedback from each Cluster and the flood assessment conducted by CCCM, this area can be developed to accommodate displaced people, with the following recommendations:

- (i) Urgent need of intervention as part of the community are already in the site.**
- (ii) the government`s plan on the provision of services;**
- (iii) access to water, health, schools to be improved;**
- (iv) ensure that all 598 families will have access to the plots;**
- (v) present a clear messaging on the need of planning, in contrast with the constructions already in place.**