

**MAGWI COUNTY PARTNERS RAPID NEED ASSESSMENT FOR THE DISPLACED PERSONS IN PALOTAKA,
ALIA BOMA OF OBBO PAYAM CATEGORIZED BASED ON CLUSTERS**

DATE OF ASSESEMENT: 27TH.11.2025

LOCATION: PALOTAKA, ALIA BOMA

Executive summary

The Initial Rapid Needs Assessment conducted in Palokaka reveals severe health service gaps, urgent basic need and a high burden of communicable diseases among the displaced population. Malaria, diarrheal diseases, and acute respiratory infections are the leading causes of morbidity. Immunization coverage is non-existent, and the nearby health facility (Palotaka PHCU) lacks essential medicines. Several children present with signs of acute malnutrition. Immediate health, nutrition, and WASH interventions are urgently needed.

Background

Following recent displacement of communities from Iyire payam in Torit County into Palokaka in Obbo Payam, partners conducted a rapid assessment to identify urgent health needs to guide immediate response. The rapid assessment of families displaced from Logwere, Balbal, Acimoro, Kalisoni, Nyara and Ifotu. These communities fled violence and insecurity and are now sheltering in Oboo Payam across five locations: Alia, Palotaka, Pambala, Lobanayi, and Camoni. The assessment involved interviewing IDPs, observation, and community consultations with community leaders (chiefs).

The purpose of this assessment was to understand the immediate protection concerns, Health, basic need food security and livelihood challenges, humanitarian needs, and risks faced by the displaced population, and to guide urgent donor support for life-saving interventions.

1 Health Cluster:

KEY FINDING REPORT ON THE IRNA IN PALOTAKA

Morbidity and mortality (Last 8 Days)

Assumption reported cases by IDPs

Disease	Under 5 years	Over 5 years	Deaths
Malaria	39	07	00
Diarrheal diseases	35	06	00
Acute respiratory infections	26	02	00
Pregnancy-related conditions	00	08	00
Skin infections & ear impairments	03	04	00
Measles, meningitis, cholera, injuries	0	0	0

Note: Several children were identified with acute malnutrition signs and were in nutrition program before the displacement occurred.

Births and Deaths

- Three (3) live births reported within the IDPs
- The births were not attended by skilled attendant
- No maternal deaths reported
- No neonatal deaths reported

Disease surveillance & outbreaks

- No unusual increases in illnesses reported
- No outbreak rumors
- Surveillance remains weak due to staffing and equipment gaps

Immunization status

- No EPI activities conducted among the displaced population
- Mothers have no child health cards, and coverage is zero
- High risk for measles and polio outbreaks

Health facility access & functionality

- The closest health facility is Palotaka PHCU which is located within the IDP site. However, the facility lacks drugs and adequate staffing
- Most of the IDP reported accessing the services from Obbo PHCC which is over 5km from the IDP site

Referral facility

- The referral facility is Obbo PHCC, located in Loudo Boma in Obbo payam

Utilization gaps

IDPs not fully utilizing services due to:

- Inadequate drugs availability
- Distance from IDP site to the health facility (Obbo PHCC)

Key challenges

- High burden of communicable diseases (malaria, diarrhea, ARI)
- Presence of acute malnutrition among children
- Zero immunization coverage
- Complete stock-out of essential medicines and supplies
- Weak surveillance and emergency response capacity
- Limited referral and transport mechanisms

Recommendations

- Deploy mobile clinic/outreach teams
- Provide emergency medicines (ACTs, antibiotics, ORS, zinc, analgesics)
- Conduct MUAC screening and refer SAM/MAM cases
- Initiate immunization activities

- Provision of mental health psychosocial support activities
- Strengthen surveillance and activate EWARS reporting
- Strengthen referral pathways with transport support
- Improve health promotion activities, and distribution of insecticide treated mosquito net

Conclusion

The health situation of IDPs in Palokaka is critical due to high disease burden, complete medicine stock-out, and lack of immunization. The presence of acute malnutrition and disrupted preventive services increases the risk of severe health deterioration. Immediate multisectoral intervention such as health, nutrition, and WASH is essential to prevent morbidity and potential outbreak emergencies within the internally displaced persons.

2. Non-Food Items (NFIs) Cluster:

KEY FINDINGS

- The IDPs are living peacefully with the host community
- They were displaced from their various areas on the 18th.11. Up to date
- They were from various villages that is Longwere, Balbal, Acimoro, Kalisoni, Ifotu and Nyara
- Through direct observation, majority of the IDPs are women and Children
- Currently the IDPs are hosted in a church Compound where demining operation is on going
- The IDPs have no shelter they live under the trees in the Palotaka church Compound
- Through a KII, members among the displaced thought of erecting a temporary shelter, but they fear to go to collect the building materials in the far forests since the situation is tense.
- One of the displaced persons stated that, food is available in the market and there is no money to purchase it
- In KII, it is found out that most of the displaced persons have left most of their NFIs like;
 - **Water containers** –Pots, Jerricans, buckets and so on
 - **Sleeping materials**- Beds, Mattresses, mats, carpets, bed sheets, blankets and mosquito nets
 - **Food items**-source pans, knives, cups, plates and so on
 - **Agricultural tools**-Hoes and Pangas
- In an interview with some of the displaced, they are sharing things like source pans, cups and plates that are given to them by the host community
- Due to covering materials like bed sheets, lack of shelter and lack of mosquito nets, the children are mostly suffering from illnesses.
- Due to one water source (Bore hole) and shared water Containers, there is a big problem of most people practicing health Hygiene of bathing, since the water is only reserved for drinking
- In a FGD, it's found out that dignity kits for young mothers and Girls like Always, soaps and other sanitary materials are very hard to get
- Most of the displaced left everything including clothes and other valuable things like food, chicken and goats.
- The displaced persons also mentioned that, there is a challenge of source of fire for cooking since they still fear going to the bush to collect fire wood.

The immediate needs IDPs suggested to rescue them for the mean time are;

1. Carpets, water containers, cooking utensil and mosquito nets
2. They also requested if they can be camped together in one descent place
3. They also requested for food assistance since they left everything of theirs in their homes.

3. Protection cluster:

1. Key Findings

1.1 Threats and Protection Concerns

- Families were forcibly displaced by armed forces activity.
- Food items were confiscated or looted during flight.
- At boreholes, IDPs face exploitation and are asked to pay for water.
- Movement is restricted due to hostile soldiers.
- Humanitarian actors currently have no access to the affected areas but access is within the communities in Obbo payam.

1.2 Casualties and Injuries.

- Between 20–30 women and children sustained injuries while evacuating.
- Two families reported the loss of loved ones from Logwere.

1.3 Population Composition

- IDPs arrived with community leaders, including chiefs, women leaders, and youth leaders.
- Vulnerable groups include separated and unaccompanied children, orphans, widows, and widowers.
- Seven children remain missing.

1.4 Psychosocial and Behavioral Impacts.

- Children show signs of fear, anxiety, and illness.
- Behavioral challenges include sleep disturbances, aggression, difficulty concentrating, and persistent fear.
- Trauma and insecurity have heightened vulnerability across the population.

1.5 Infrastructure and Services

- Health centers and infrastructure have been destroyed.
- No functional health facilities are accessible to IDPs especially essential drugs.
- Malnutrition and untreated health conditions are widespread.
- Families lack food, clothing, and women and girls lack sanitary items for dignity.

2. Risks Identified

- Children abandoned without social protection.
- Exploitation at water points.
- Heightened vulnerability due to lack of humanitarian access.

- Increased risk of malnutrition, disease outbreaks, and psychosocial distress.

3. Immediate Needs

- Protection, Child protection services, family tracing and reunification, psychosocial support, prevention of exploitation at water points.
- Health, Emergency medical care, rehabilitation of health centers, provision of essential medicines.
- Nutrition, Food distribution targeting children, women, and vulnerable households.
- WASH, Free and safe access to water, dignity kits for women and girls, sanitation facilities.
- Shelter & NFIs, Clothing, blankets, and basic household items for cooking.
- Education: Safe spaces for children to reduce trauma and restore normalcy.

4. Recommended Interventions for Donor Support

4.1. Protection Programming

- Establish child-friendly spaces and psychosocial support programs.
- Deploy protection officers to monitor and prevent exploitation at boreholes.
- Support family tracing and reunification for missing and separated children.

4.2. Health and Nutrition Response

- Provide mobile clinics for immediate healthcare.
- Conduct nutrition screening and therapeutic feeding for malnourished children.
- Rehabilitate damaged health centers.

4.3. WASH Interventions

- Guarantee free access to boreholes and water points.
- Distribute hygiene kits and dignity kits for women and girls.
- Construct emergency latrines and bathing facilities.

4.4. Food Security and Livelihoods

- Deliver emergency food assistance to vulnerable groups.
- Support community-led livelihood recovery initiatives.

4.5. Shelter and Non-Food Items (NFIs)

- Provide emergency shelters.
- Distribute clothing, blankets, and cooking utensils.

4.6. Psychosocial and Education Support

- Establish temporary learning centers.
- Train teachers and community leaders in trauma-informed care.

5. Conclusion

The displaced families in Oboo Payam are facing severe protection risks, health challenges, and a lack of basic needs. Children are missing, women and girls lack dignity items, and families are struggling to survive without food, water, or healthcare.

Immediate donor-funded interventions are essential to safeguard lives, restore dignity, and prevent further deterioration of humanitarian conditions. Without urgent action, the situation will worsen, leaving already vulnerable populations at even greater risk.

4. Wash cluster:

KEY FINDINGS

- The IDPs and the Host Community have inadequate water sources and Peoples are Fighting at the water Sources, out of four (4) Boreholes, (1) one functional and three (3) non function.
- All the Households don't have containers for facing water
- The available water sources is Hand Pump (Borehole and Stream Ayii)
- 100 % of the population depend on one Borehole and the stream.
- 100% of the IDPs Defecating in the bush.
 - (a) Men 10%
 - (b) Women 10%
 - (C) Children 10%
- Household pit Latrine shared Family.
 - (a) Men 10%
 - (b) Women 10%
 - (c) Children 10%

Both IDPs and Host Community some home have Latrine others don't have.

- There is presence of faeces in the following Places.
 - (a) Along the roads.
 - (b) Along the foot paths
 - (c) Near the water sources.
- Peoples wash hand during eating foods without soap
- Women and Girls don't have basic Hygiene Product.

5. Food Security and Livelihood (FSL) cluster:

Key findings

- IDPs rely heavily on host community members, friend, and relative for daily meals due to total lack of food stocks.
- Host communities do not have enough food to support displaced households as they are also food-insecure.
- IDPs have no access to cash to purchase food items available in the local market.
- Food commodities available in the market includes beans, okra, cabbage, maize grain, and Jews mallow, but IDPs cannot afford them
- Due to desperation, IDPs are surviving on raw fresh pawpaw, wild yams, wild vegetable, and other forest product-posing risks of malnutrition and possible poisoning.

Livestock impact

- Livestock (goats, pigs, poultry) belonging to the IDPs were taken or looted during the attacks.

- Farms and standing crop were burnt, leaving households without harvest or seeds for the next season.
- Beekeeping and honey hives were destroyed, eliminating a major income source for many households
- Houses, granaries, Tools, and other livelihoods assets were burnt or destroyed, pushing families deeper into poverty.
- Daily income-generating activities such as petty trade and casual labour have been disrupted.

Implication of the crisis.

- High risk of acute malnutrition especially among children under 5, pregnant and lactating women, and elderly.
- Dependence on forest product for survival may cause overharvesting and environmental degradation.
- Burning of farms and destruction of assets will create long-term food insecurity, affecting the next planting season.
- Loss of livestock and tools reduces households' ability to recover and resume agriculture activities.
- Pressure on host community resources may cause tension or conflict between displaced families and local residents.
- Limited market purchasing power results in market stagnation, affecting local traders and reducing food flow.
- The humanitarian situation may worsen if support is not provided urgently.

Ongoing and planned activities

- Some **NGO** are exploring possible multipurpose cash or food assistance distributions, subject to funding.
- Distribution of cash to vulnerable people.

Recommended urgent action

- Immediate provision of emergency food ration (or cash-based transfers where feasible) to prevent hunger and malnutrition.
- Target supplementary feeding for children, PLW, pregnant and lactating women, elderly, and person with disability.
- Distribution of seeds, tools, and starter kits to restore agricultural activities, before the next season.
- Support for restocking small livestock for the most affected households.
- Provision of beehives and beekeeping equipment for the households whose honey production assets were destroyed.
- Introduce multipurpose cash assistance where markets are functional to allow IDPs to buy available food items.

IDPs Quantitative Data Summary

	Male			Total	Female			Total	Grand Total
	0-17	18-50	50+		0-17	18-50	50+		
Age	0-17	18-50	50+						
# of HH	0	265	154	419	0	286	178	464	883
# of HH Size	1621	634	278	2533	1895	652	218	2765	5298
Accompanied child	1502	0	0	1502	1839	0	0	1839	3341
Unaccompanied child	119	0	0	119	56	0	0	56	175

PARTNERS INVOLVED IN RAPID NEED ASSESSMENT

RRC
 LWF
 IMA
 CRSO
 CORWADO
 CARE
 SUSTAIN INITIATIVE
 HRS
 AYIN
 ADRA
 HBF
 CDI
 HRSS
 SPADP
 AVSI
 CORDAID
 STAR TRUST
 BASE NET

The Pictorial for the rapid need assessment









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