# SHELTER/NFI ANALYSIS REPORT

Field with (*) and italicized questions are mandatory. For checkboxes (☐), tick all that apply.

Use charts from mobile data collection (MDC) wherever possible.

<table>
<thead>
<tr>
<th>1. General Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Location* (State/County/Payam/Boma)</td>
<td>YEI RIVER STATE, OTOGO COUNTY</td>
</tr>
<tr>
<td>Alert Date* (first time the location mentioned to the Cluster)</td>
<td>Feb 2019</td>
</tr>
<tr>
<td>Analysis Dates*</td>
<td>From 7/5/2019 to 16/5/2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Location Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Report Date* (date completed)</td>
<td>23rd May 2019</td>
</tr>
<tr>
<td>GPS Coordinates*</td>
<td>Latitude: Longitude:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Team Details*</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Organisation</td>
</tr>
<tr>
<td>Harriet Akot Vincent</td>
<td>PAH</td>
</tr>
<tr>
<td>Benson Morbe Samson</td>
<td>PAH</td>
</tr>
<tr>
<td>Duku Richard Pitia</td>
<td>PAH</td>
</tr>
<tr>
<td>Mori Moses Kara</td>
<td>PAH</td>
</tr>
</tbody>
</table>

If this is a joint mission, what %s will each partner report?

[Partner PAH]:100 %  [Partner 2]: ___%  [Partner 2]: ___%

| 4. Desk Research: Displacement, Movement, and Conflict Trends |  |
|----------------------|  |
| **What information did you find about the context and trends in this location more than six months ago?** | The population was displaced as result of armed conflict between government and opposition forces. The population were displaced from Lasu to various locations like Yei town, Juba some to neighbouring Countries like Uganda and Congo. Since the revitalise Peace agreement was signed, calm has been witnessed in some part of Yei River State, some of the displaced population are voluntarily returning to their place of origin. Source: Local Authority |

List all previous S/NFI and food distributions in this area, with key details (date, # beneficiaries, bomas, S/NFI types).

**Possible sources:** SFPs, Cluster IMO

UMCOR distributed NFIs (blankets, mosquito nets, cooking sets and solar lamps) to about 200 HH in Mugwo County in November 2018

UNHCR distributed Plastic sheets to less than 20 HH in Lasu in April 2019

Source: UMCOR & UNHCR

**Housing, Land, and Property issues?**

What mechanisms are in place to handle HLP disputes? What groups are marginalized by land ownership?

**Possible sources:** SSLS, HLP WG, Protection Cluster, NRC

- There was no HLP issues reported during the needs analysis, both the IDPs, returnees are host communities are peacefully coexisting. According to the analysis findings, neither an IDP or returnee had reported forced eviction or land grabbing

Source: Local Authority & the affected population

**Do people come only during food drops and other aid?**

**Possible sources:** REACH, DTM, Static NGOs, WFP, SFPs

People are residing in Lasu

Source: Local Authority and the affected population

**How has aid affected displacement and conflict in this area?**

**Possible sources:** INSO, WFP, CSRF, SFPs
- There was no report that linked aid with conflict or crisis in Otogo County in the recent time since the Peace agreement was signed and people are returning back to the county living their normal lives armed
  
  **Source:** UNHCR, UMCOR, Local Authority

**What aid actors are static in this location? What aid actors visit regularly?**

*Possible sources: SFPs*

- Concern Worldwide, ACROSS, ARD-Africa, LCED, Titi Foundation and MaCDA are humanitarian actors in Yei county but they do not operate in Lasu Payam
- UMCOR & UNHCR does regular visit to Lasu because of the activities in Nyori refugee settlement
  
  **Source:** UMCOR, UNHCR

**What community groups have already been in place in this location? PwD committees? Women’s groups?**

- No community group is existing
  
  **Source:** Local Authority

**Have any risk or security assessments been done in this area?**

*Possible sources: INSO, WFP, CSRF, SFPs, UNDSS*

- UNMISS & OCHA first conducted risk analysis and security assessment along Yei-Lasu road to neigeotâtes for access the road test before giving approval to other partners
- Access to Lasu had opened up since humanitarian partners can travel without any hinderance.
  
  **Source:** OCHA Yei,

**Have any market assessments been conducted here, or cash-based interventions?**

*Possible sources: IACWG, SFPs, FSL Cluster*

- No market assessment was conducted in Lasu
  
  **Source:** Local Authority

**GPS coordinate:** 04°06'00"N 30°40'12"E

### 5. Summary of Population Type / Numbers

Where possible, teams can paste a chart instead of entering all of the data below.

| Population Count from: RRC Otogo county (Lasu) | HH: 6,700 | Individuals: 38,175 |
| Population Count observed by team | HH: 2,619 | Individuals: 13,095 |

**Population breakdown**

- Men _16 % / Women _27 % / Boys _24 % / Girls _33%

**Population details: origin, plans to stay, available lists, breakdown, and sources:**

*Section II of the HH Questionnaire*

- The population of Otogo County consist of Host Community, Internally displaced persons and the returnees.
- The IDPs came to Lasu seeking for safety because it is closer to the main road and deemed safe to the IDPs, they have planned to stay Lasu until peace returns to their place of origin, while the returnees have come from Congo, Uganda and some from Juba, Yei and other neighbouring counties and returned back to their place of origin
- There was no current registration list available, all the figures given were based on estimates

### POPULATION RESIDING IN SETTLEMENT SITE

- IDP directly affected by conflict
- Host directly affected by conflict
- IDP affected by disaster: __________
- Host affected by disaster: __________
- Refugees from: __________
- Protracted IDPs (living in collective site for 1+ years)
- Returnee: government-facilitated

### POPULATION IN NEED OF S/NFI

- IDP directly affected by conflict
- Host directly affected by conflict
- IDP affected by disaster: __________
- Host affected by disaster: __________
- Refugees from: __________
- Protracted IDPs (living in collective site for 1+ years)
- Returnee: government-facilitated
- Other returnee
6. Protection/Vulnerability Concerns and Power Dynamics

<table>
<thead>
<tr>
<th>Question</th>
<th>Option A</th>
<th>Option B</th>
<th>Option C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do people feel safe here?</td>
<td>☒ Yes _92%</td>
<td>☒ No _4%</td>
<td>☒ Somehow _4%</td>
</tr>
<tr>
<td>How would services coming to this location affect safety?</td>
<td>☒ Beneficiaries would be safer</td>
<td>☐ Beneficiaries would be less safe</td>
<td>☐ Service provider would not be safe</td>
</tr>
<tr>
<td>What are the specific protection concerns and considerations?</td>
<td>Safety concern when accessing basic services from Yei town, long distance to access health, education</td>
<td>There should be regular risk sensitivity assessment during the response</td>
<td>Coordination and discussion with the local authorities in the selection of the distribution site so that affected population are not into further harm</td>
</tr>
<tr>
<td>What stood out in the Safety Audit?</td>
<td>There is water point available nearby the proposed distribution site</td>
<td>There is shade available in the proposed distribution site.</td>
<td>There is nearby military barracks</td>
</tr>
<tr>
<td>The distribution site is close to the beneficiary’s settlement</td>
<td></td>
<td></td>
<td>There are bushes around the proposed distribution site</td>
</tr>
<tr>
<td>What are the vulnerability dynamics?</td>
<td>☐ Children at Risk (CR): ___</td>
<td>☐ Unaccompanied/Separated child: ___</td>
<td>☒ Other person at Risk (ER): ___</td>
</tr>
<tr>
<td>☒ Women at Risk: ___</td>
<td>☐ Single parent/caregiver (SP): ___</td>
<td>☒ Disability (DS): ___</td>
<td>☐ Serious medical condition: ___</td>
</tr>
<tr>
<td>☒ Minorities/ Detached from community: ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who controls in the community? Who provides?</td>
<td>Local Authority and elders are the decision and lawmakers. They control the entire community decision making and provide security to the families. The second group that controls the community is the youth (young men). The youth</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
guards and provides defence from external attack. Men also dominate decision making at household making on the usages of resources.

There are no registered cases of HLP issues such as land grabbing and forced eviction. Majority of the population both host and returnees are in their place of origin. In this location, the land belong to the community (ancestors) thus no own claims the responsibility of land.

7. Community group questions

How many kilometers and hours away is the closest water point by foot (one way)?

600 m 30 Minutes by foot

What type of water sources are used for drinking water?

☒ Borehole ☐ River ☐ Hand-dug well
☐ Tap stand ☐ Other

How many kilometers and hours away is the closest functioning health clinic by foot (one way)?

1 km 30 minutes__ by foot

Specific illnesses reported in the area

The Three common Diseases affecting the community in Otogo

<table>
<thead>
<tr>
<th>Percentage of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malaria</td>
</tr>
<tr>
<td>Pneumonia</td>
</tr>
<tr>
<td>Diarrhea</td>
</tr>
</tbody>
</table>

The Three common Diseases affecting the community in Otogo

The Three common Diseases affecting the community in Otogo

What type of food sources does the community use?

☒ Farming ☐ Fishing ☐ Market
☐ Wild fruits ☐ Other

When was the last harvest in the area?

Started: April 2018_________ Ended: Jan 2019_________

Area prone to severe rapid onset flooding?

☐ Yes ☒ No ☐ Extremely rare

Preferred communication channels/methods?

• Through the RRC/RRA
• Through community leaders
• Directly to the agency[NGOs]

8. S/NFI Observations and Findings

What NFI or Shelter materials (if any) are available in the market for purchase, or available through utilizing natural resources?

<table>
<thead>
<tr>
<th>ITEM</th>
<th>COST IN MARKET</th>
<th>NATURAL RESOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wooden poles</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Bamboo</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Ropes</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Framing materials</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

List the cost if it is available in the market. Explain how the item is made/used from natural resources, if any.

General level of activity (buying/selling) in market?

☐ Busy ☐ Good ☒ Slow
If active, refer to the Market Assessment questions.

General summary of market assessment:
Lasu Payam has very market which operates only twice in a week, which limited foodstuff and basic NFI items. Secondly, the population’s purchasing power is intensely affected.

Explain the community’s ways of supporting themselves.
*(Section IV of HH Questionnaire)*

According to household interviews, 90% of host community support themselves through agricultural activists or Communal farming and whereas, returnees & IDPs support themselves mainly by borrowing from the host community households and sharing household items especially Saucepans and food.

Do the population have access to tools?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Limited</th>
</tr>
</thead>
</table>

How do they shelter themselves and support their household NFI needs without aid support? *Fully explain the community’s coping and resilience strategies.*

- The host community are sleeping in tukuls made out of local materials.
- In Lasu Centre, both the IDPs and returnees are living in public places like Primary Health building, churches, market shops and in primary schools. Over 150 HHs are observed been accommodated in these public buildings making the situation difficult for smooth running of the health facility, while in
- In Asole and Rubeke, 70% of the IDPs and returnees are sheltering in the market, abandoned shops and church
- The affected community has developed a coping strategy of sleeping on the grass. However, this strategy has affected them health wise. The skins of their children were observed with small wounds as a result of sleeping on the grass
- 6% of the returnees came with their household items which they currently use as their coping strategy for survival

What shelter materials are available for collection in the natural environment?

<table>
<thead>
<tr>
<th>Grass</th>
<th>Bamboo</th>
<th>Trees</th>
</tr>
</thead>
</table>

If people are generally hosting, what is the host’s general condition?

<table>
<thead>
<tr>
<th>More/less normal for South Sudan</th>
<th>Emergency level of need</th>
<th>Strained resources / cannot share</th>
</tr>
</thead>
</table>

Number of shelters counted
211

Number of HH with no form of shelter (and source)
573

Number of individuals sharing each shelter (average)
7-10

What are the top 5/NFI priorities? *List only 3-4 items, in order of priority*

**WHY?**
Explain thoroughly why each item was given its priority # designation.
Cite: coping mechanisms, health issues, weather-related information, life-threatening risks, market/nature availability, protection risks, preference of beneficiaries, and observations.

**WHAT CONCERNS ARE THERE WITH THE RECOMMENDED ITEM?**
Consider the recommended items in the context of the community where you will distribute: Are they accustomed to using this item? Has the community used this item before (and if so, what did the PDM reveal)? How does the item fit into the environment in which they live?

1 – Plastic Sheets

- The first priority item is the plastic sheet, affected community needs plastic sheets to construct shelter that can provide protection from rain and other diseases. There is no dry grass for covering the roofs of their shelters thus all the interviewed war affected population demanded plastic sheet
- The affected population are sheltering in public places (Health, facility, Market and Church that can further expose them to protection risk. Secondly, there is fear that when the shop owners come, the beneficiaries will be driven away from the market

2 – Blanket

- The second item recommended is Blanket. 70% of the population needed blankets to cover themselves during cold weather. The area is bush and deep in the forest with many mosquitos. It is very cold during rainy season,
causing respiratory tract infection, and pneumonia was mentioned as highly prevalent sickness during the needs analysis exercise, more especial among the children and the elders

3 – Mosquito net

- High rates of malaria cases were reported during the needs analysis exercise. 10% of the households were observed using old mosquito nets. The area is bush and deep forest many mosquitos at late evening and in the morning thus prone to malarial infection, since trees provide excessive breeding ground for mosquitos.
- Therefore the persons of concern will use mosquito nets to prevent malaria from mosquito and infectious bites.

[4] – Sleeping Mats

- Sleeping mat was recommended the fourth priority because IDPs sleeps on the grasses, which in turn can affect their skins and developed to another disease. Not only basing on the observation, but also the IDPs and returnees mentioned the need for sleeping mats since they cannot able to access from market.

(5) – Cooking Sets

- Cooking set was recommended the fifth because some few IDPs came along with their pot which they use for cooking, IDPs cook one after the other, if you finish cooking, you transfer the food on the cassava leave and give to the post to the next person to cook, the team look at this as a coping strategy but still that practice need to be subsides, because same women expressed their concern that, most of the times they cook late at night when their children had already sleep

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**Photos of S/NFI situation:**

*(At minimum: one photo per recommended S/NFI)*
Figure 1: Showing an IDP’s tukul without a roof but in use in Lasu Boma.

Figure 2: Showing old blankets and torn blanket use by the IDPs.

Figure 3: Showing old mosquito net use by the returnees.

Figure 4: Showing old elephant grass use by the IDPs.

Figure 5: Showing an IDP sheltering at the health facility.
9. Methodology

☒ Desk research
☒ Observation
☒ Key informant interviews: #_4
☒ Household interviews: #_75
☒ FGDs: #_3
☐ CFM: #_____ (attach complaint record)

Additional notes on methodology used:

How much time did the team spend on the ground?
The team spent 5 days

AAP / Communications & Community Engagement

How has the S/NFI team:

- engaged the community, beyond the gatekeepers?
The needs analysis team fully engaged the community right from the beginning of the process. The team first presented their TOR and work plan to the office of RRC. Later the team met the beneficiary's leaders and conducted KII explaining clearly the objective of the exercise. The team used community mobilizers and translators whom are members of local community to inform the community of the intended needs analysis exercise.

During the needs analysis exercise, the team clearly communicated to the community that the objective of the exercise is to understand their needs more specifically, shelter and NFI situation and does not grantee distribution of shelter and NFI – the findings of this exercise will determine the next step. The team engaged people of different age groups; women, girls, men and boys during needs assessment at household level. The team gave freedom of choice for the community members to choose prioritized the most three S/NFIs items needed

- empowered community members?
The S/NFI team will recruit and train the demonstrators on the usage of Shelter/NFI items will be distributed in the local community. The demonstrators and the beneficiaries will be encouraged to pass the same message to the neighbours who will not come for the distribution.

- adjusted the intervention because of community feedback, thus far?
The team used the RRC structure to collect complaints and feedback from the community. Village chiefs were used to find out the complaints from the community. During the intervention phase, the team with identify representatives of group to form a complaint and feedback committee to informed, make decisions and recommendations on behalf of the community.

- implemented feedback mechanisms?

There was complain and feedback mechanism in place (mostly; RRC, Payam administrators, village chiefs and church leaders), the team used feedbacks/complains forms to collect feedback from the community and encouraged the community to use the easiest way of communication so as to have effective coping mechanism strategies

10. ANALYSIS AND RECOMMENDATIONS

Check all that apply:
☒ NFI intervention recommended
☐ No intervention recommended

☐ Training activity recommended

☐ Shelter intervention recommended
☐ Cash intervention recommended (Type: _____)

☐ Continue to monitor needs

Integrated sector response recommended; sectors: __________

Explanation

Justify the recommendation by pulling facts from different sections of this report (e.g. these IDPs need in-kind now because: there are no markets, no clinics, long foot travel is dangerous, they have been stuck for over a year, the people live

- The IDPs needs emergency response because all their houses were burnt down and HH NFIIs looted, while at this season of the rain children are exposed to cold weather which can result server malarial and pneumonia cases
- The population in Lasu has been cut off completely from accessing the market for the last two years
### Define targeting criteria

**How did the team define “vulnerability”?**

Explain how the target group is unable to help themselves with S/NFI.

- 70% of the population needed blankets to cover themselves during cold weather. The area is thick and deep in the forest, it is very cold during rainy season, causing respiratory tract infection, and pneumonia was mentioned as highly prevalent sickness during the needs analysis exercise, more especial among the children and the elders.

- The targeted groups are IDPs, returnees and most vulnerable host community.
  - The returnee’s houses were burnt down during the crises and back belongings were confiscated at the border when they are returning home, hence making their lives difficult to cope with life, couple to that there is limited access to resource to purchase the NFIs.
  - The IDPs left behind all the back NFIs in their place of origin while seeking for safety in Lasu, they are not able to access them in the current location, and the host community are lacking the items to donate. The population is totally cut off from major market places to access basic social services.
  - The targeted host community are female household, persons with disabilities, separated minors, persons with mental problems.

### Specify items to be distributed

**Include number and S/NFI type per household. Will HH size will change the recommended quantity? Explain calculations. Refer to Section 8’s prioritized items (no need to repeat the information).**

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plastic sheets</td>
<td></td>
</tr>
<tr>
<td>Blankets</td>
<td></td>
</tr>
<tr>
<td>Mosquito nets</td>
<td></td>
</tr>
<tr>
<td>Sleeping mats</td>
<td></td>
</tr>
<tr>
<td>Kitchen sets</td>
<td></td>
</tr>
</tbody>
</table>

Based on the analysis findings and the beneficiary’s priorities, the team recommended for the distribution of the following items:

1. Plastic sheets
2. Blankets
3. Mosquito nets
4. Sleeping mats
5. Kitchen sets

The quantities of these items to be distributed, shall be determined after registration is done.

### Communications/AAP

**What key messaging should go with the response? From Section 9, how will the team build on already existing AAP efforts during response?**

- The team will hire community mobilizers that can help dissemination of the distribution messages, the targeting criteria, the recommended items, the beneficiary’s entitlement, the date and the venue of the distribution.
- The team will give messages and demonstration on the safe and correct usage of the items that shall be distributed.
- The team will train community members that will be part of the complaint feedback committee, that will handle all complaints from beneficiaries regarding the distribution process and the items distributed.
- The community will be encouraged to keep helping themselves with the little resource whenever emergency occurred before the aid workers comes in.

### Key considerations for distribution:

- **Airstrip** (List plane types: __Fixed wing and Heli__)  
- **UNHAS destination** (Frequency/schedule of flights: Yei has UNHAS regular flight which fly twice in a week, Tuesday and Thursday)
- **River access** (Explain: ____________________________)
- **Footing access** (Explain: ____________________________)

### Other logistics information for people and cargo:

The road to Lasu is accessible, meaning items will be deliver to Lasu direct on road.

### Where/how the distribution will take place:

- The targeted host community are female household, persons with disabilities, separated minors, persons with mental problems,

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**next to a swamp, and the area is inaccessible during rainy season; cash project should start after food distribution because people’s highest priority is food and they have no livelihoods)**
The distribution will take place in different Payams where the affected people are staying. The targeted beneficiaries will receive their items from their respective Payams.

**Security/Access issues:**
There is free access to Lasu and other Payam, but the security situation is still fragile, the team will work closely with the relevant authorities to ensure that safety of both staff are taken care of.

**Protection concerns, push/pull factors:**
(HLP: will a response to certain groups legitimate any groups and cause conflict?)
During our FGDs with the community members, they indicated that targeted response would not cause conflict because they understand that different group of people have different vulnerability and needs, community leaders assure the team about the target response not bring any conflict in the community.

**Other actors/stakeholders with whom S/NFI staff can work:**

**Humanitarian Actors:** The team will coordinate all activities through OCHA office in Yei and S/NFI partners

**Government Actors:** RRC at the state and county level and all the relevant local authority

### Next steps

**Recommendation for other sectors:**
There is urgent need for health intervention in Lasu Payam

<table>
<thead>
<tr>
<th>Immediate next steps</th>
<th>Timeline</th>
<th>Who Is Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Verification and registration</td>
<td>1 week</td>
<td>PAH and partners</td>
</tr>
<tr>
<td>2 Submitting the pipeline request</td>
<td>After the verification and registration exercise</td>
<td>PAH /Pipeline team</td>
</tr>
<tr>
<td>3 Delivery /Prepositioning of the items to Yei</td>
<td>As soon as the PLR is approved</td>
<td>Log Cluster and PAH</td>
</tr>
<tr>
<td>4 Distribution of the items to the beneficiaries</td>
<td>After the delivery of the items to Lasu Payam</td>
<td>PAH team &amp; Partners</td>
</tr>
</tbody>
</table>

Please submit to [scsouthsudan-pipeline@googlegroups.com](mailto:scsouthsudan-pipeline@googlegroups.com)

If distribution is recommended, include the completed Pipeline Request Form.