

CRISIS IN NORTHERN MOZAMBIQUE: CABO DELGADO EXHAUSTED AFTER 5 YEARS OF CONFLICT



PHOTO:

In June 2022, Zaina Amade, displaced shortly before, was picking up a non-food items kit at Ntele, in Cabo Delgado, Mozambique.

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**The dizzying escalation
of displaced people is
indicative of the
growing complexity of
the conflict**

The displaced families on Maganja beach in Palma district had been waiting for two years to return to Mocimboa de Praia. Since Mocimboa was taken over by a group now calling itself Islamic State in the Province of Mozambique, these families had been living on a strip of beach a few dozen metres wide. They scavenged what they could from coconut trees, abandoned vegetable gardens and what they could catch without straying too far out among the reefs. Humanitarian aid was sporadic because access through dunes made it difficult for trucks to pass. Living conditions in Maganja were appalling, huddled on the beach strip, with no tarpaulins for a roof, and many without a miserable mat to sleep on, nowhere to wash or relieve themselves, family possessions limited to a bundle of whatever they could carry on their heads. And with no prospect of change.

The irony is that these 1,000-odd families are located at the back of the large LNG (liquefied natural gas) extraction complex on the Afungi peninsula. Beyond the beach or the safety of the gas complex very few people venture. A few fishermen and a few traders walk briskly along the sandy tracks, and at the slightest noise they wander into the forest until it is quiet again. There is no transport as private transport is not profitable in this area. Where would they go in any case, to Palma? This city has been trying to return to normality for a year now, ever since its 60,000 inhabitants fled an attack on the city that lasted several days. But Palma still has no hospital, no bank, no public services, the market is barely functioning and the service companies that work for the gas companies are closed.

In October 2022, families who were displaced in Maganja have been moved to Mocimboa de Praia by bus by the district authorities and with the support of the gas company. They are returning to the epicentre, where the conflict in Cabo Delgado began in a public way at the end of 2017. That year Mocimboa suffered a first assault and from that moment on became the emblematic of the situation. Repeatedly attacked, it fell into the hands of armed groups in August 2020 and it took a full year before Mozambican forces, with support of the Rwandan army, were able to take control of the town. And it has taken another full year before the population has started to return. By now, 25,000 people have returned to find the city destroyed in many of its neighbourhoods; everything still needs to be rebuilt. In the early hours of the morning, the only visible activity, apart from the military presence, is the queue at the temporary health post set up in a fish market in what used to be a shop, and the departure of dozens of fishermen in fragile boats.

The returns to the towns of Palma and Mocimboa, protected by Mozambican and Rwandan armed forces, could suggest that the situation is stabilising. Nothing could be further from the truth. Barely 40 kilometres away, a village in the same district has just been raided, the little food that was there has been stolen and a farmer has been found beheaded. A hundred kilometres from Mocimboa, the small village of Ntoli (district of Nangade) suffered a night raid a few days ago. The health centre was set on fire, many houses were burnt down and the precarious camp for displaced people which housed fifteen hundred families was emptied, with all the inhabitants fleeing to hide in the surrounding bush. Ntoli and other villages in districts such as Meluco, Ancuabe, Mueda and Chiure had not been directly affected by the conflict until a few months ago. During the 5 years of conflict in Cabo Delgado, these places were where the population fled to in order to take refuge from the attacks, and

where the local community, authorities and civil society would welcome and assist the displaced. They are no longer stable and safe places of refuge.

In 2020 there were 6 districts that had experienced attacks on villages, violence against the population, and clashes between police, military and armed groups. Now more than 12 districts are affected. Incidents have escalated in terms of frequency and civilians have been increasingly directly affected. During 2022, pockets of violence have been shifting geographically to the south. In January and then in June, violent incidents have led to further mass displacement near the provincial capital of Pemba: 80,000 people fled their homes, for some it was already the third or fourth time they have been displaced. Two neighbouring provinces, Niassa and Nampula, have also suffered attacks and displacement this year.

The spiraling number of IDPs is indicative of an increasingly complex conflict with a massive impact on the population: In March 2020, there were around 156,000 people affected by violence in Cabo Delgado, including IDPs. Three years later, the UN estimates that now 2 million people are in need of humanitarian assistance due to the conflict, including more than 1 million IDPs¹ in the province, who rely on ration distributions from the World Food Programme². Most of the displaced have no land to cultivate, insufficient land to cultivate, or land already depleted by the resident populations.

Cabo Delgado is also known as "Cabo Olvidado" (Forgotten Cape)

With the arrival of Rwandan and SADC forces a year ago, the Mozambican government hoped to stabilise the situation and resume the key economic activity for Cabo Delgado and the whole country - the exploitation of gas from the Rovuma basin. The government's control of towns such as Palma and Mocimboa has resulted in a dispersal of attacks to other districts and provinces. The situation in the coastal strip between Palma and the capital Pemba does not allow for the resumption of economic activity, so any gas extraction and its contracted onshore services remain virtually paralysed. Only one of the three farms is operating. The surrounding communities see no future with the creation of jobs and economic opportunities postponed again and again.

The hopelessness of the population is not limited to the lack of opportunities, jobs and livelihoods. These prospects have always been difficult in a region where the majority of the population lives on subsistence farming or fishing. Development plans for coconut or cashew nuts have suffered from the drop in global food trade. A region that has always been far from the metropolis, people also refer to Cabo Delgado as Cabo Olvidado (Forgotten Cape). Despite being key protagonists during the war of independence, and an epicentre of the struggle against the Portuguese, this population has remained ignored afterwards. The institutional presence is fragile, consisting of a few civil servants, a school made mostly of reeds and mud, a small health centre and an administration station. The police, army, and local militia are present in small groups. Community and family networks are severely weakened by forced

1 UNHCR Mozambique Cabo Delgado. Update, Internal Displacement Response, March 2023. The data have been updated after initial publication in December 2022.

2 OCHA. Mozambique. 2023 Humanitarian Response Dashboard. The data have been updated after initial publication in December 2022.

displacement and the lack of prospects. In any case, it will be time to run away again in a few weeks' time.

The conflict has done considerable damage to the minimal progress that had been made. Water wells are abandoned and pumps broken, health centres vandalised and their equipment unusable, teachers have fled, and transport consists of sporadic trucks with dozens of people sitting up on the cargo. Crops are abandoned because it is not safe to go to the fields to plant and cultivate. And the roads are ruined from lack of maintenance. Tourist attractions are neglected and empty. It gives the impression that life is on hold until something different happens. What? It is not clear.

Lack of prospects for progress and hopelessness mark the lives of those affected by the conflict in Cabo Delgado. In the resettlement villages, where the administration has taken in displaced people, life is on hold, always wondering when they will be able to return to their places of origin. Families cannot afford to go to great lengths to settle only to find themselves rehoused elsewhere or displaced by the next wave of violence. With no work, minimal land to cultivate, no savings, no transport, getting clean clothes or paperwork to secure a job outside the camp is a feat. Spending hours in line waiting for the water tank to fill up or going to the nearest watering hole is the main activity for many women and children. Hopelessness is palatable in the camps. So it is not surprising that mental health problems are widespread, and almost as urgent as physical health problems.

The health conditions of the population of Cabo Delgado are poor

For the most part the displaced population is accustomed to not having health services. The closest access for the population is an Agente Polivalente Elemental (APE), a community worker employed by the ministry of health. They are there to provide first aid, health promotion, and referrals to health posts. They are responsible for integrated community case management of childhood pneumonia, diarrhoea, and malaria. Each APE is responsible for 500 to 2000 inhabitants and are almost always located in hard-to-reach areas between 8 and 25 kilometres away from health facilities. They are trained in a very basic way, they are barely literate, they do not have the necessary medicines, to transfer a pregnant woman or wounded person they find the assistance of a neighbour who has petrol in their motorbike, and the pay they receive is not enough to live on, so they look for other jobs. In the same village, you can also find the witch or the traditional healer, and there are many of them, to the point of outnumbering the APEs in the whole province.

These two are the alternatives for treating medical conditions of the population in the villages. People have always resorted to them, indiscriminately and as the only alternative. The other alternative often means unaffordable costs: the transport, the payment of a small fee to be treated at the health centre, and almost always having to buy medicines that are not available at the health post and rarely at the little stall where they sell single pills. A proper treatment requires a further costly move to a larger village where hopefully there is something like a pharmacy. For this reason, there is often little that can be done when someone actually arrives at a hospital. Patients avoid this step because they can't afford it, and by the time they get there it is often too late.

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poor. During the rainy season, malaria has a considerable impact, and cholera is endemic. Rainy periods have been erratic in recent years. Cyclone Idai and Cyclone Kenneth hit the coastal area and for the first time two cyclones created havoc in the same season. In contrast, in 2021, it did not rain until January, resulting in delayed production and poorer quality of the harvest. This season, nine to ten cyclones are expected by the end of the year, with the hope that La Niña phenomenon will be positive this time and not cause catastrophic rainfall.

It is a province where the prevalence of HIV infection is around 13%. Lower than other provinces and regions in southern Africa, yet tens of thousands of people are affected. Many of them have been displaced and have stopped treatment. As a result, they are not close to the health centres where they are registered as patients and the treatments are thus not available for them there. There are many young mothers, very young mothers, who are not even aware of the disease. Children are still being born with HIV because of lack of prenatal care. The children under five are the worse off, those with HIV often die in Mueda Hospital.

After two years of distortion due to COVID-19, the vaccination programs falter

Maternal and infant mortality is also of concern. Complications in childbirth most often occur in villages far from the nearest functional hospital. The modest hospital in Mueda is the only reference hospital with a delivery room and operating theatre within a hundred kilometres, and several districts are forced to use this hospital or to send the patient to Pemba or Montepuez, some five hours away on difficult roads. After two years of distortion by COVID, vaccination programmes are faltering and there are increasing cases of measles and polio among a population group that is not receiving all the necessary doses; they are constantly on the move and have difficulty maintaining young children's vaccination status. The yellow vaccination card is the most precious commodity for mothers, not only because it guarantees their children's protection from preventable diseases but also because it serves as a proof of identity for children who have not even had the opportunity to be registered in a civil registry.

As the conflict in Cabo Delgado continues, social, environmental, health and economic problems intensify. Due to insecurity, humanitarian assistance is disproportionately distributed across the province, with more aid being provided in the south of the province, which has been considered more stable until now and where the 30 or so most populated resettlement camps and villages are concentrated. In some of the districts where MSF works, such as Macomia, Nangade and Mocímboa da Praia, there are few local or international organisations with a regular presence. More assistance is needed for people living in hard-to-reach areas. MSF has often been one of the first humanitarian organisations to start operations in the difficult to reach districts and remains the only organisation with a continuous presence in some others. The humanitarian aid available is insufficient for the needs of the affected communities.

The assistance provided by UN agencies and national health programmes funded by international institutions is not sufficient. The environment in Cabo Delgado is complicated, there are peaks of extreme insecurity, forcing extensive displacement, logistics are complex, causing challenges in the anticipation and regular planning of assistance to displaced people and patients. More reactivity is needed from both local

Local development cooperation organisations have been badly affected by the conflict

and international organisations, adapting programmes and activities, to be able to recruit and treat patients in time and to assist and support the newly displaced. Local organisations working on development have been greatly affected by the conflict, especially with staff no longer being available and facilities damaged or destroyed. They need extraordinary support to be able to position themselves as actors with presence and leadership in the communities. It is complicated and extraordinary for a community radio station, a farmers' association or a women's working group to adapt their programmes and activities to such a changing and traumatic situation, with the few means at their disposal.

The year 2023 will also begin with major uncertainties regarding the funding of development and aid programmes. The energy crisis may have a major impact on available funds and UN appeals, and the World Food Programme will reduce rations significantly as other crises, particularly food crises, compete for the same funding. There are different allocations for international aid and cooperation projects, yet humanitarian aid funds are insufficient and have a very limited role.

And the hoped for revenue from gas extraction, most of which have not yet started, is not yet available. The fact that Europe needs gas at any price may be beneficial to Mozambicans in the short term, but the sword of Damocles over communities where natural resources are present is always there.

The funds that could change the situation and the future of the Cabo Delgado communities are those that the province's natural resources can produce. But this is not the case; instead, the whole conflict is deeply linked to the fabulous profits generated by gas extraction.

If the marginalisation of the populations does not stop, it is very difficult for families to govern a life project in these conditions. And the economic and social situation will not improve with soldiers and police alone. It is a war that has emptied 15,000 square kilometres of territory where today no one lives, no one sows, no one harvests, no one fishes. Under these conditions, the economy cannot function even at a minimum level, the subsistence level to which most of the inhabitants of Cabo Delgado are unfortunately accustomed. There is no short-term resolution on the horizon. The issues on which the evolution of the conflict will depend: the absolute lack of protection of the population from attacks and forced displacement, the lack of an economic and social vision aimed at building solid communities with a future, distorted by the appropriation of the territory by local and multinational elites.

MSF teams have been responding to the current crisis in Cabo Delgado since 2019; MSF also has a longer history in Mozambique dating back to 1984, during the Mozambican civil war. MSF currently has projects in Macomia, Palma, Mocímboa da Praia and Mueda, Muidumbe, Meluco, Nangade and Quissanga. MSF's assistance includes primary health care consultations in both fixed and mobile clinics (including sexual and reproductive health and family planning components), mental health services, water and sanitation improvements, and secondary health care support in local hospitals and distributions of basic items, shelter and emergency food rations to displaced people.

Médecins Sans Frontières also contributes in other areas of

Mozambique, which are not affected by the conflict, to improving the health of the population. In collaboration with international institutions and health authorities, a programme to treat HIV complications in extremely vulnerable populations is being implemented in Beira and another programme for the eradication of tropical diseases with a strong community component is being implemented in Nampula.

With the conflict ongoing for five years, we draw attention to the immense humanitarian and health needs we see. This is a conflict with a devastating and unpredictable impact on the lives of communities in Cabo Delgado.

