1. Executive Summary

Refugees and asylum seekers residing in Aftit and Alemwach refugee settlements in Amhara Region continue to face compounded protection risks driven by insecurity, restricted freedom of movement, limited access to basic services, and strained relations with host communities. The broader security situation in surrounding areas has negatively affected humanitarian access, service delivery, and livelihoods, exacerbating vulnerabilities among persons with specific needs (PSNs), including women, children, persons with disabilities (PWDs), elderly persons, child-headed households (CHH), and unaccompanied and separated children (UASC).

The Protection Monitoring Survey was conducted to systematically identify protection risks, service gaps, and negative coping mechanisms, and to generate evidence to inform UNHCR and partners' protection response, advocacy and solutions-oriented programming in Amhara region.

*The boundaries and names and designations used on this map do not imply official endorsement or acceptance by the United Nations

2. Introduction

This PMS report presents findings from protection monitoring activities conducted through Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs) in Aftit and Alemwach refugee settlements. The analysis draws on both qualitative and quantitative data to provide an overview of protection concerns across key thematic areas, including safety and security, access to services, documentation, child protection, gender-based violence (GBV), mental health and psychosocial support (MHPSS), and community dynamics.

The findings aim to support evidence-based planning and strengthen the integration of protection across sectoral responses in Amhara Region.

3. Operational Context

The protection context in Amhara remains complex, shaped by regional security dynamics, multiple authorities, and host community sensitivities. Protection risks remain high and structural in Aftit and Alemwach

Alemwach presents higher risk exposure; **Aftit under increasing pressure**

Systems are functioning, but risk reduction is limited.

3.1 Site Snapshot

Aftit - More established site with relatively predictable protection trends. However, we are seeing increasing pressure driven by economic strain and security incidents. GBV risks persist at household level, child protection concerns are linked to school drop-out and child labour risks, and documentation remains a challenge. While risks are stable, they are slowly intensifying.

Alemwach - Presents a higher-risk environment - limited services, and heavy dependency on assistance exacerbate vulnerabilities. We are seeing elevated GBV and child protection risks, alongside recurring concerns related to the civilian and humanitarian character of the site. Protection incidents and vulnerability trends are increasing, making Alemwach a priority site for focused attention.

3.2 Protection Risk Heat Map

Risk Area	Aftit	Alemwach
Child Protection	Medium	High
GBV	Medium	High
PSNs	Medium	High
Community Tensions	Medium	Medium–High
Access & Security	Medium	High
Overall Risk Level	Medium	High

Fig. 1 Data collection process in the refugee site

4. Methodology

4.1 Data Collection

Protection monitoring was conducted using qualitative and quantitative approaches:

Key Informant Interview (KIIs)	Focus Group Discussions (FGDs)
Aftit: 28KIIs	Aftit: 15FGDs
Alemwach: 33KIIs	Alemwach: 10FGDs
KIIS targeted diverse refugee community members across age, gender, occupation, and specific needs profiles.	FGDs included 10–15 participants per group and were disaggregated by: • Boys and girls (≤18 years) • Men and women (18–59 years) • Men and women (60+ years)

4.2 Geographic Coverage and Timing

Data collection was conducted at settlement level in Aftit and Alemwach refugee settlements. The assessment focused on protection risks, access to services, and community dynamics within and around the settlements.

4.3 Ethical Considerations and Limitations

Participation was voluntary and confidentiality was ensured. Findings reflect perceptions and reported experiences at the time of data collection and may be influenced by access constraints linked to insecurity and information gaps.

5. Key Protection Findings

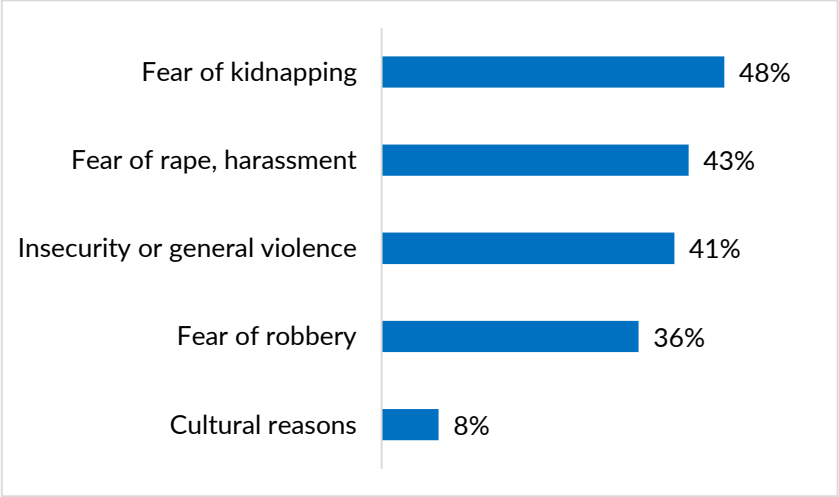
5.1 Safety and Security

Restricted freedom of movement emerged as the most significant protection concern across both settlements.

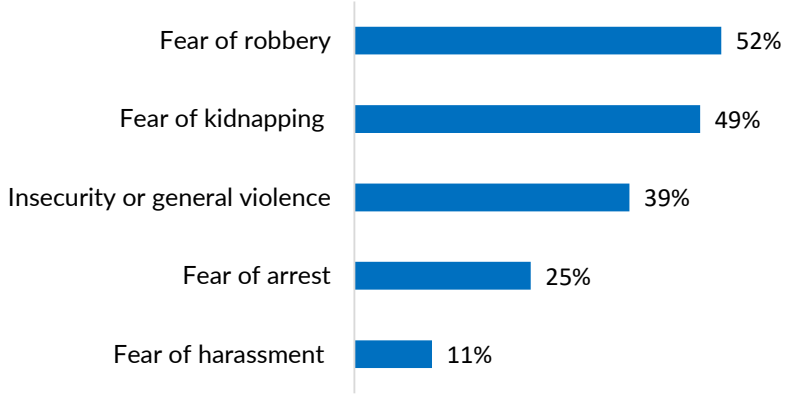
In **Aftit**, 80 per cent of FGD participants reported limited freedom of movement due to fear of robbery, kidnapping along the Metema–Gondar Road, and general insecurity. Poor lighting within the settlement, particularly around latrines and pathways, was cited by 80 per cent of participants as a major risk factor, disproportionately affecting women and girls and increasing exposure to GBV. Refugees also reported the presence of unknown armed men at night and incidents of hostility, including verbal and physical abuse, from some host community members. The majority of participants indicated that existing security measures are insufficient.

In **Alemwach**, 70 per cent of participants identified restricted movement as a key concern, followed by conflict within the community and distance to services. Sixty per cent reported that no security measures are currently in place, while nearly half indicated that existing measures require improvement.
Across both sites, women and girls face heightened risks related to fear of rape, harassment, kidnapping, and inadequate lighting, while insecurity significantly undermines overall perceptions of safety.

Limiting factors for the freedom of movement for Women and girls at both sites.

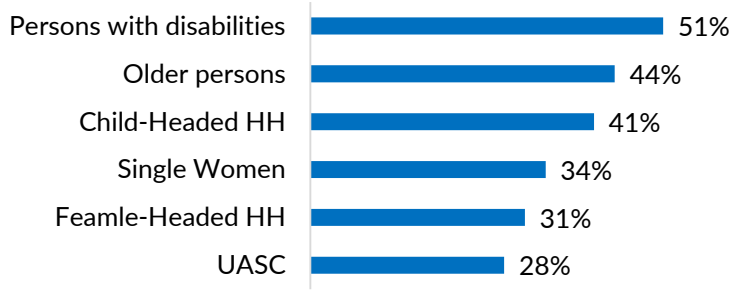


Limiting factors for the freedom of movement for men and boys at both sites.



5.2 Access to Fundamental Right and Basic Service

Groups facing challenges on accessing assistance service in the site



Access to Information

Refugees in both settlements reported receiving information on available humanitarian assistance primarily through community leaders, protection desks, humanitarian actors, and IEC materials. However, the consistency of information dissemination varies, with refugees in Alemwach reporting more irregular access compared to Aftit.

Service Availability and Gaps

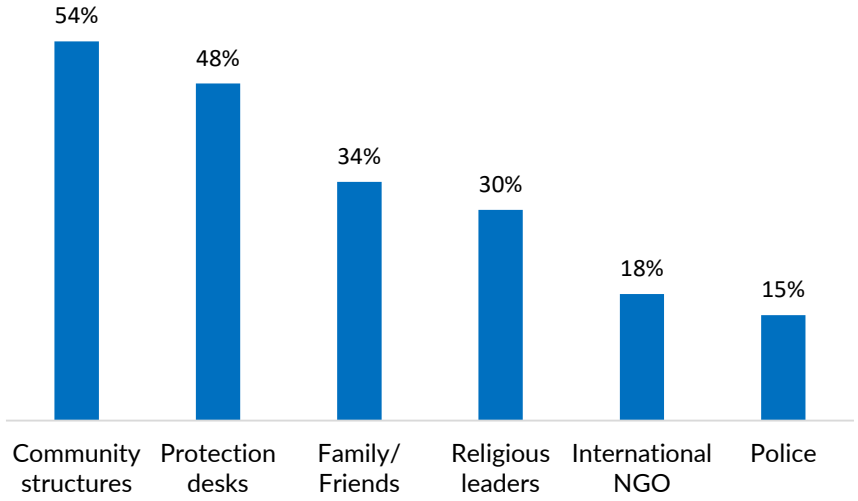
In **Aftit**, key barriers to accessing services include limited police presence, lack of electricity, and inadequate sexual and reproductive health (SRH) services, including delivery care. CHHs and elderly persons were most frequently identified as facing challenges in accessing services, followed by PWDs, single women, and UASC.

In **Alemwach**, lack of security and police presence emerged as the most critical gap, alongside limited access to documentation and SRH services. PWDs, elderly persons, CHHs, and single women were reported as the most affected groups.
Priority needs across both settlements include food and nutrition support, documentation, security, employment opportunities, awareness of refugee rights, and child protection services.

5.3 Access to Justice and Conflict Resolution Mechanisms

In **Aftit**, refugees primarily approach protection desks, community structures, and religious leaders to address protection concerns and disputes.
In **Alemwach**, community structures, family and social networks, and protection desks are the main mechanisms used.
These findings highlight the continued importance of both formal and informal community-based mechanisms in resolving protection concerns and underscore the need to strengthen referral pathways and coordination.

People most likely approach with protection concerns, problems and disputes within the settlement



5.4 Access to Basic Services

Food Security

Irregular food supply, insecurity affecting delivery, and reduced rations were consistently cited as the main barriers to food access in both settlements. These challenges are closely linked to the broader security context.

Health

Limited availability of medication, insecurity affecting referrals, distance to health facilities, and documentation barriers significantly constrain access to healthcare services. These challenges are more pronounced for women, children, elderly persons, and PWDs.

Education

In **Aftit**, language barriers, lack of teaching and learning materials, and unpaid teachers were identified as key constraints. In **Alemwach**, safety concerns while travelling to school, distance, and financial barriers were the main obstacles. Children with disabilities and chronic illnesses face additional exclusion from education services.

Water, Sanitation and Hygiene (WASH)

In Aftit, inadequate lighting and locks at latrines, delays in accessing water, and limited water storage capacity were highlighted. In Alemwach, shortages of sanitary pads, poor latrine conditions, and inadequate lighting were the primary concerns, particularly affecting women and girls.

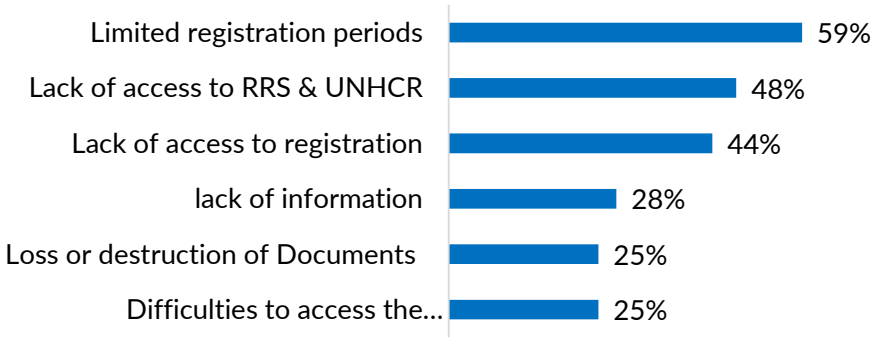
Shelter and Non-Food Items (NFIs)

In **Aftit**, most refugees reported having received shelter and NFI assistance; however, the majority described shelters as being in poor condition. In **Alemwach**, most respondents indicated that they had not received adequate shelter or NFI support. Priority needs include shelter repair, blankets, solar lamps, clothing, and improved quality and targeting of NFIs.

Coping Mechanisms POC use to meet their basic needs

Coping Mechanism	Always	Don't know	Never	Sometimes
Withdrew children from school	11%	4%	29%	57%
Sex in exchange for life saving assistance/cash	11%	18%	46%	25%
Selling humanitarian assistance received	86%	4%	4%	7%
Illegal activities (such as theft)	25%		4%	71%
Early marriage for girls		7%	64%	29%
Child labor	21%		14%	64%
Begging	11%	14%	36%	39%

5.5 Legal and Documentation Issues



Lack of documentation is a significant protection risk in both settlements. It was reported by 65 per cent of FGD participants in Aftit and 60 per cent in Alemwach. Restricted freedom of movement is the primary consequence, followed by difficulties accessing services and assistance.

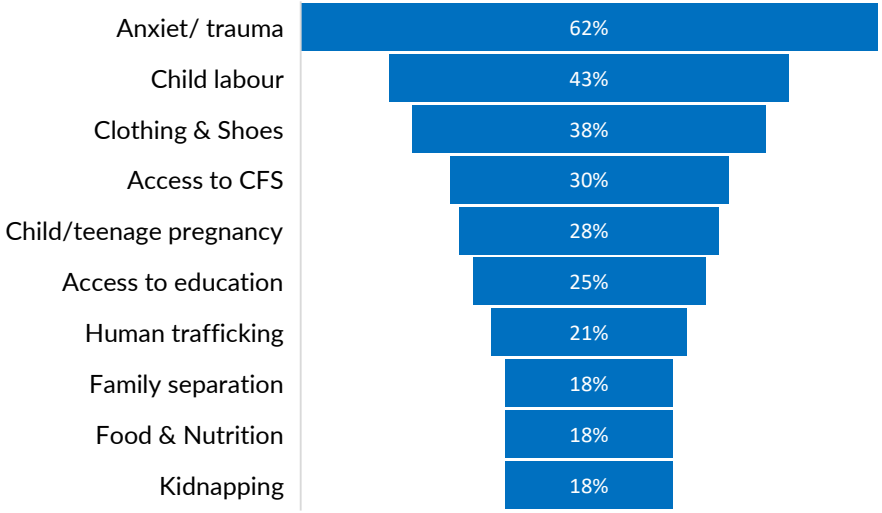
Barriers to obtaining documentation include limited registration periods and insufficient access to registration staff, highlighting the need for expanded and mobile civil documentation services.

6. Child Protection

High numbers of UASC were reported in both settlements, with many children separated from caregivers during displacement. The most significant risks facing children include anxiety, stress, and trauma, child labor, and limited access to child-friendly spaces. In Alemwach, concerns related to kidnapping by armed groups were also reported and warrant further investigation.
Care arrangements for UASC primarily involve foster care within the community or support from relatives, underscoring the need for strengthened case management and monitoring.

Fig. 2 Child friendly space Aftit

The most significant problems children (boys & girls) are facing in your community.



7. Gender-Based Violence (GBV)

GBV is widely recognized as a key protection concern in both settlements. Risk factors include poor lighting, cultural practices such as early marriage, economic dependency, limited access to basic needs, and exclusion of women from decision-making processes.

The most significant problems women and girls are facing in the community.

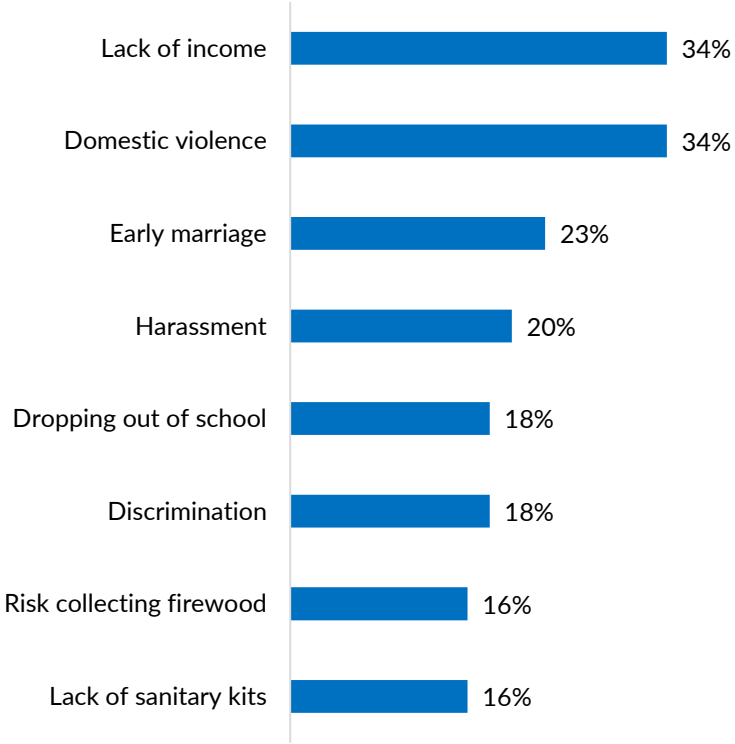


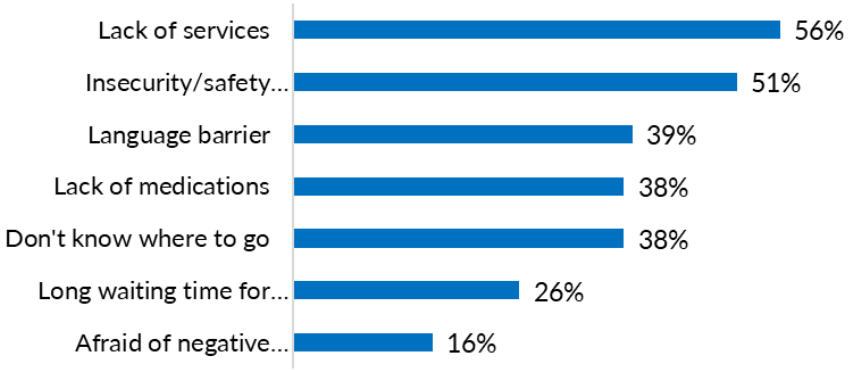
Fig. 3 Women and Girls friendly space Alemwach

8. Mental Health and Psychosocial Support (MHPSS)

High levels of distress were observed across both settlements, with women and girls reported as the most affected. While some community-based and professional MHPSS services are available, access is constrained by insecurity, limited-service availability, language barriers, and lack of information on referral pathways.

Fig. 4 Children engaged in expressive Art activity in Aftit to promote a positive outlet for emotions and their experiences.

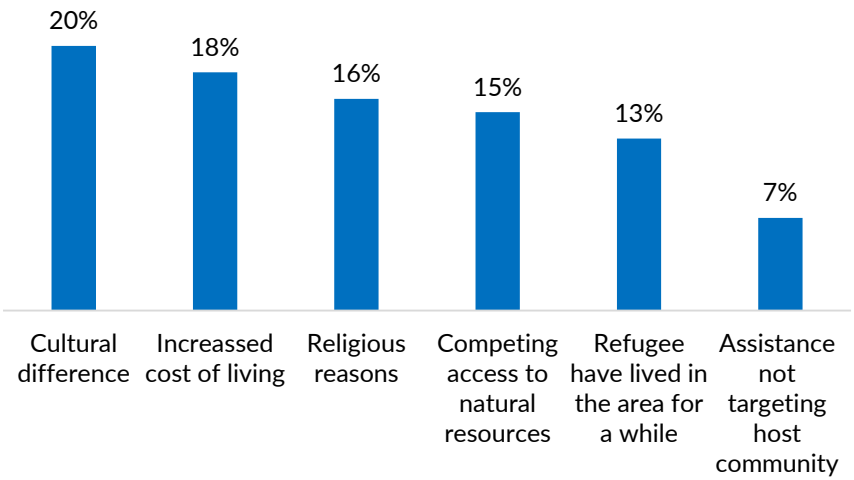
The main challenges to access mental health and psychosocial support service for the community members



9. Community Dynamics and Social Cohesion

Interactions between refugees and host communities are largely described as difficult. Key drivers include language and cultural differences, competition over natural resources, economic pressures, and security concerns related to the presence of armed actors. These dynamics increase protection risks and undermine peaceful coexistence.

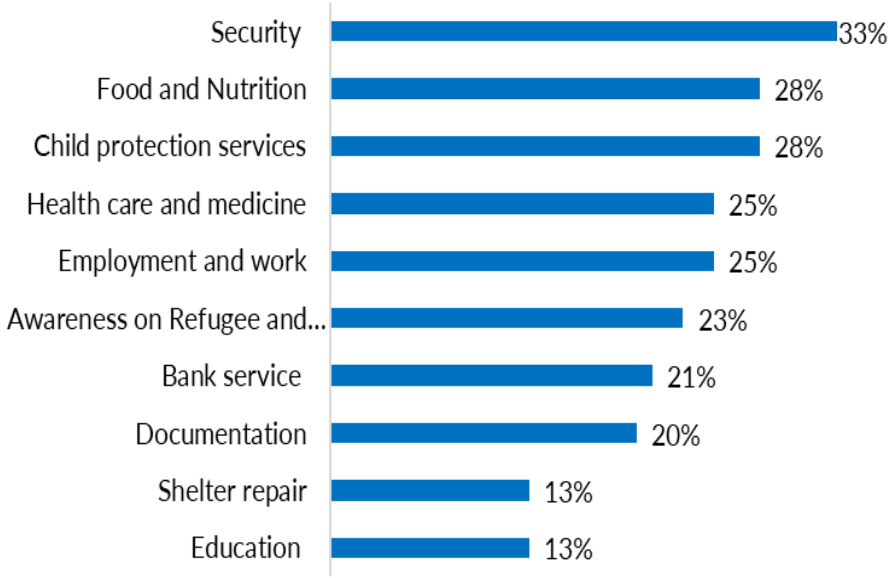
The reasons for the negative nature of interaction between host community and refugees.



10. Analysis and Interpretation

The findings indicate that insecurity is a key cross-cutting driver of protection risks, affecting freedom of movement, access to services, livelihoods, and community relations. Vulnerabilities are disproportionately concentrated among women, children, PWDs, elderly persons, and CHHs. Information and documentation gaps further exacerbate exclusion, while limited livelihood opportunities contribute to negative coping mechanisms.

The priority needs in the settlement based on POC opinion



11. Priority Recommendations

- Strengthening security measures, including improved lighting and community-based protection mechanisms.
- Expand access to food, health, SRH, education, and WASH services, with targeted support for PSNs.
- Scale up mobile registration and legal assistance for civil documentation.
- Strengthen child protection and GBV prevention and response services, including safe spaces and referral pathways.
- Expand MHPSS services and improve community awareness of available support.
- Support initiatives to improve social cohesion and peaceful coexistence with host communities.

11.1 Specific recommended activities

ACTIVITY	OBJECTIVE	KEY ACTIONS	Practical Next Steps
Strengthening Safety, Security, and Freedom of Movement	Reduce exposure to violence, GBV, and movement-related protection risks, especially for women and girls.	**Improve physical safety infrastructure** Install solar-powered street lighting along main pathways, around latrines, water points, and communal facilities. Prioritize lighting in GBV "hotspots" identified through FGDs (latrines and peripheral zones). **Reinforce community-based protection mechanisms** Continued strengthening of community-based protection structures, ensuring representation of women, youth, elderly, and PWDs. **Strengthen coordination with security actors** Material support for night patrols/watch groups to enhance their response, strengthen referral pathways mechanism with RRS and local authorities, review and update SOPs Continued advocacy with local authorities for regular police presence or mobile patrols, particularly at night. Set up incident reporting and referral pathways linking community structures, protection desks, and police.	-Develop a lighting prioritization map and phased installation plan. -Refresher training community committees on early warning, referral, and confidentiality.
Expand Access to Basic Services with Targeted Support for PSNs	Ensure equitable access to life-saving and essential services for the most vulnerable.	**Adopt PSN-sensitive service delivery** Enhance priority queues, escorts, and home-based outreach for elderly persons, PWDs, CHHs, and single women, on needs basis. Strengthen integration of PSN identification into all sectoral activities (Food, Health, WASH, Education). **Improve access to health and SRH** Strengthen community health outreach services and access to SRH services. Ensure stock availability of essential medicines. **Reduce access barriers in education** Identify language barrier gaps not yet addressed through incentive refugee teachers and translation modalities. Provide learning materials and advocate for incentives or support to unpaid teachers. **Strengthen WASH services** Improve latrine conditions, locks, lighting, and water storage capacity. Ensure regular distribution of dignity kits and sanitary materials, especially in Alemwach.	-Update service mapping and referral pathways, translate and disseminate them in accessible formats. -Introduce PSN tracking indicators in partner reports. -Conduct quarterly service gap reviews using protection monitoring data.

Scale Up Civil Documentation and Legal Assistance	Reduce protection risks linked to lack of documentation and restricted movement.	**Strengthening legal awareness** Conduct legal information sessions on refugee rights, movement regulations, and documentation procedures. Use multiple channels: community meetings, IEC materials, radio messages where feasible. **Prioritize individuals without documentation, new arrivals, and PSNs.** **Strengthen coordination between UNHCR, RRS, and partners to raise awareness on reasons for registration backlogs/challenges.**	
Strengthening Child Protection Systems	Reduce risks to children, especially UASC, and improve care and protection outcomes.	**Enhance identification and case management** Strengthen UASC identification, BIA/BID processes, and follow-up monitoring. Train child protection caseworkers in both settlements. **Improve care arrangements** Support and monitor foster care arrangements through regular home visits and caregiver support. **Expand child-friendly spaces (CFS)** Scale up CFS access offering structured psychosocial and recreational activities; review activity schedule and availability of referral pathways and capacity of child minders and training needs/gaps. **Prevent harmful coping mechanisms** Strengthen integration of child labor and school dropout prevention into community awareness activities.	-Update UASC caseload analysis and staffing needs. -Establish monthly CP case review meetings. -Link CP activities with education and livelihoods partners.
Strengthen GBV Prevention and Response	Reduce GBV risks and ensure survivor-centered access to services.	**Reduce environmental GBV risks** Improve lighting, latrine safety, and shelter privacy. **Expand survivor services** Strengthen safe spaces for women and girls, including access to PSS and life skills. Ensure confidential referral pathways to health, legal, and MHPSS services. **Community-based prevention** Conduct GBV awareness sessions targeting men, boys, and community leaders.	-Update the GBV referral pathway and disseminate widely. -Train community structures on safe identification and referral. -Monitor GBV risk trends through protection monitoring.

		Address harmful practices such as early marriage through dialogue and engagement.	
Expand Mental Health and Psychosocial Support (MHPSS)	Address high levels of distress and improve coping mechanisms.	**Scale up layered MHPSS services** Increase community-based PSS activities, especially for women and adolescents. Strengthen referral to specialized mental health services for severe cases. Strengthen psychological interventions to reduce reliance on clinical interventions and possible over reliance on medication. **Improve awareness** Conduct targeted outreach on available MHPSS services and referral pathways. **Address access barriers** Integrate MHPSS into existing services (health, CFS, women's spaces) to reduce stigma.	-Conduct an MHPSS service capacity assessment. -Refresher training for community volunteers in psychological first aid (PFA). -Include MHPSS indicators in partner monitoring tools.
Promote Social Cohesion and Peaceful Coexistence	Reduce tensions between refugees and host communities and mitigate conflict drivers.	**Dialogue and joint activities** Facilitate regular dialogue forums between refugee and host community leaders. Implement joint livelihood, WASH, or environmental projects benefiting both communities. **Conflict sensitivity** Ensure all interventions are conflict-sensitive and do not exacerbate competition over resources. **Youth engagement** Enhance engagement of refugees and host community youth in sports, skills training, and peacebuilding initiatives.	-Develop a social cohesion action plan with RRS and local authorities. -Monitor community tensions through protection monitoring and feedback mechanisms. -Integrate coexistence indicators into partner reporting.