

Vulnerability in the Rohingya refugee camps





Presentation outline





Our definition of vulnerability

The characteristics of an individual, household or sub-group within the Rohingya population, and their situation in Cox's Bazar, that influence their capacity to meet basic needs, as well as their exposure to physical or mental harm.



Why investigate vulnerability?

- **AIM: *Identify***
 - types of **households** having the hardest time meeting needs
 - types of **individuals** vulnerable to harm
- **Why?**
- ***A greater understanding of vulnerability and its impacts should***
 - allow humanitarian agencies to provide a more nuanced response
 - improve the design of future assessments



Underlying assumptions

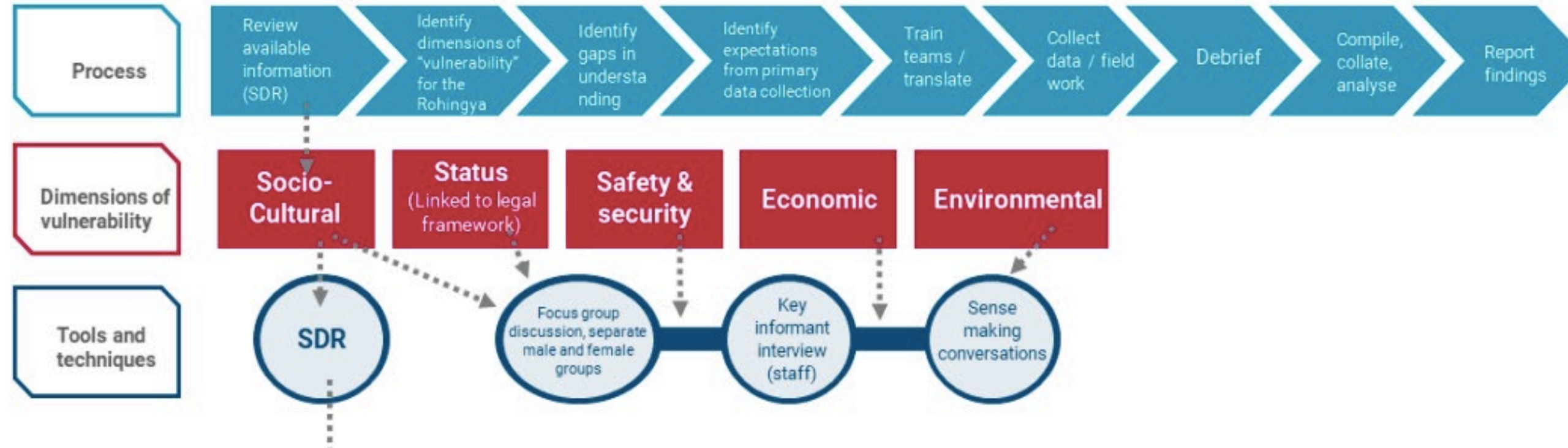
- All the Rohingya Refugees are vulnerable
- The Rohingya population is not homogeneous
- Within the overall population there are some households and individuals who are more vulnerable than others.

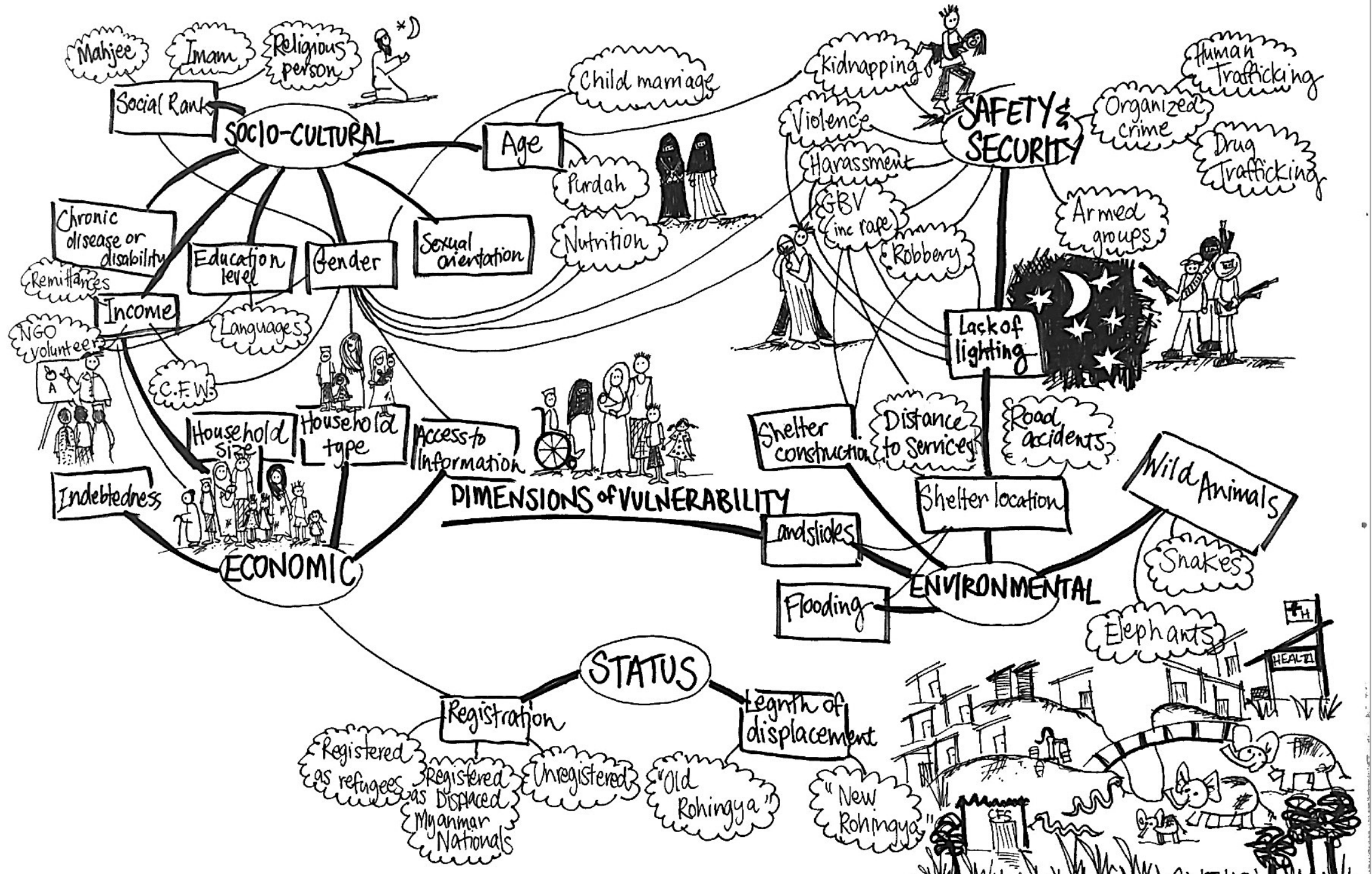


Research questions

- Which types of Rohingya refugee households and individuals are more vulnerable and more at risk ?
- What factors influence capacity to meet basic needs and make exposure to physical or emotional harm more likely?

Extract of the Conceptual Framework & Methodology







Overarching Findings from discussion with refugees:

1. Everyone in the camps is vulnerable to some degree; no one has all their basic needs fulfilled, and everyone experiences challenges in terms of safety and security.
2. Access to income is the key feature that sets people apart and gives them a better life in the camps. Also additional expenses impacts vulnerability to the same fact.
3. Social connection to Mahjees increases households' access to assistance and opportunities.
4. Age, gender and sexuality are key factors contributing exposure to physical or mental harm.

Who has the hardest time meeting their needs and why?

Participatory ranking exercise with FGD revealed that household with these characteristics have a harder time meeting their needs:

- Single Female Headed Households esp. HH with no adult males
- Households without an income
- Households many dependents
- HH with no formal education

Types of households	Median Ranking
Single female headed family	1.0
Family with no income	2.3
Family with many children	2.6
Family with disabled member	3.9
Family with elderly members	4.0
Normal families	6.5
Family with educated member	6.8
Families with NGO volunteer	7.5
Family with Mahjee	8.0

Table 2 – Household vulnerability ranking results



Quantitative investigation: J-MSNA & IOM CwC/NPM Pilot Political Economy Study

Based on the results of the study we when went through two quantitative research assessment to see whether the data collected using different methodology supported what came out of the qualitative study.

The refugees stressed that no ones' needs are fully met and that one of the main defining factors that sets HH apart is income and additional expenses, so we investigated in indicators such as;

- Food consumption score (FCS)
- Debt
- Expenditure
- Access to income
- Coping mechanism such as selling assistance
- Etc.

We found that the quantitative results generally supported the results from the vulnerability study both the overarching findings and the difference for HH characteristic.



Interactive exercise- 5 volunteers needed

Instead of just displaying the results on PPT we are going to show you them.

- We have altered the ‘power walk’ exercise to communicate what happened when we investigated the results of the vulnerability study using the data from the MSNA and Pilot Political Economy Analysis (PEA).
- **This exercise is aimed to show how income generation interacts with vulnerability**
- Each volunteer will be given a card that represents a type of HH in the camps.
- We will read out results from the various studies and each HH needs to either step forward/step back/remain still depending on how that result impacts their HH’s ability to meet their needs.



Comparison 1:

J-MSNA findings suggest that coverage of basic services is extensive and are not indicative of widespread extreme gaps in basic household-level outcomes.

At the overall response level, only 4% of refugee HH had FCS of “poor”, and the proportion of HH with a “poor” FCS did not exceed 9% in any camp

Comparison 2:

Overall findings:

The recent MSNA found that:
All HH are spending money to meet their basic needs.

All households (95%) reported engaging in coping mechanisms due to a lack of income to meet basic needs.

% of households reporting spending any money on items / services in the month prior to data collection

96%	Food
77%	Transportation
74%	Communication costs
72%	Medical expenses
46%	Clothing and shoes
41%	Festivals or community events*
37%	Debt repayment
30%	Hygiene items
27%	Shelter materials
26%	Kitchen items
25%	Educational materials

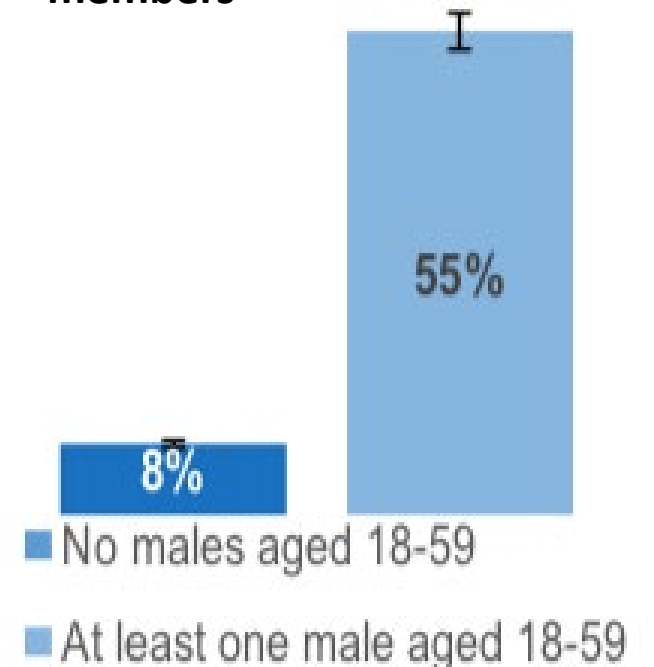
*the data collection period included the festival of Eid al-Adha

Comparison 3:

Decrease income opportunities for females

- All male and female FGD from vulnerability study identified single FHH as having a harder time due to a lack of income generating opportunities.
- **MSNA found** 55% of HH had at least one male aged 18-59 working to earn an income, compared with just 8% of HH with no males aged 18-59.
- **Pilot PEA found that** Male HH have more access to Income Generating Activities (IGAs) than Female HH—**3X higher percentage of MHH working as NGO volunteers than FHH.**

MSNA Graph: HH working for income vs. male members



Comparison 4:

Incurring New Debts (borrowing money and purchasing items on credit)

- MSNA found that 69% of HH incurred new debts in the 30 days prior to data collection to fulfill immediate food (57%) and health needs (55%).
- The proportion of HH incurring new debts appears to be increasing (35% July 2018, 45% June 2019, 69% latest results).
- Both the MSNA and PEA found that borrowing money was similar for MHH and FHH both borrowing mainly from family members within the camp.
- **But, HH with no males, HH with many children and HH with at least one member above 5yrs requiring daily assistance were more likely to take on new debts.**



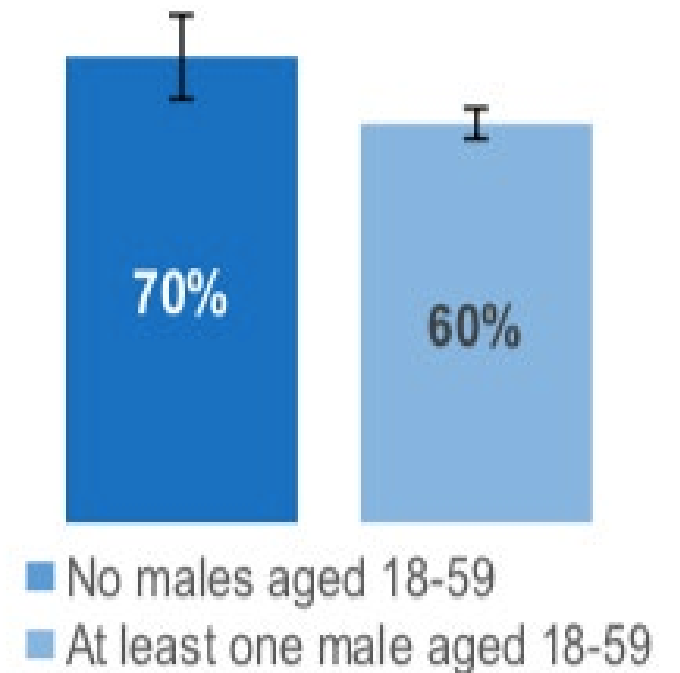
Graph: HH incurring new debts vs. members that require daily assistance

Comparison 5:

Selling assistance to meet basic needs

MSNA :

- 41% of HH reported selling non-food items provided as assistance
- 30% of HH reported selling, sharing and / or exchanging food rations
- But, MSNA found that HH with no males between 18-59 were more likely to: sell, share and exchange food rations; sell NFIs, and sell HH goods.
- **Pilot PEA** study also found that FHH were more likely to rely on negative coping mechanism such as selling assistance.





Comparison 6:

Gender is key factors contributing to vulnerability in terms of exposure to physical or mental harm.

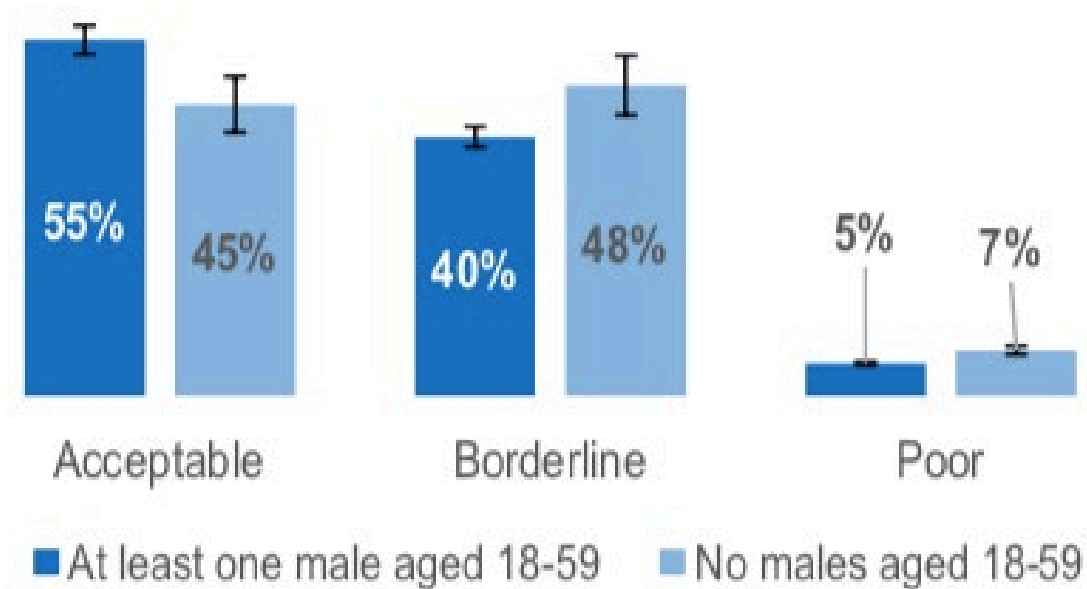
Both the MSNA and the Vulnerability study discuss female's exposure to physical and mental harm:

- Rohingya women and girls often face violence and intimidation while traveling through camps, including on the way to pick up aid distributions.
- The FGD and KII discussions revealed that female headed households are the target of continuous harassment, sexual assault, and rape, with men breaking into their homes at night.

Comparison 7:

Food Consumption Scores

Figure 5: % of households by food consumption score, by whether or not the household had at least one male aged 18-59¹⁰²



Comparison 8:

Education increase income opportunities and interaction with service providers:

1. As HH education attainment increases so does access to income earning, esp. for CfW.

2. Interaction with the humanitarian system:

44% HH reported facing challenges picking up aid distributions. Main barriers were:

- “language” (11%);
- “do not understand the jargon / terms” (10%);
- “humanitarian workers are rude or disrespectful” (3%).

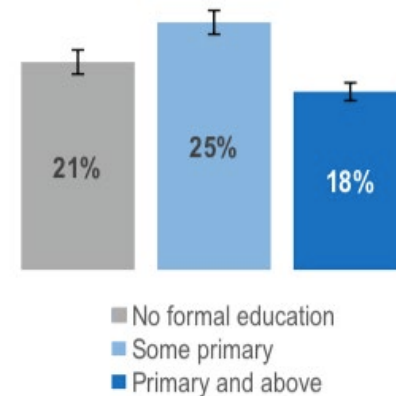
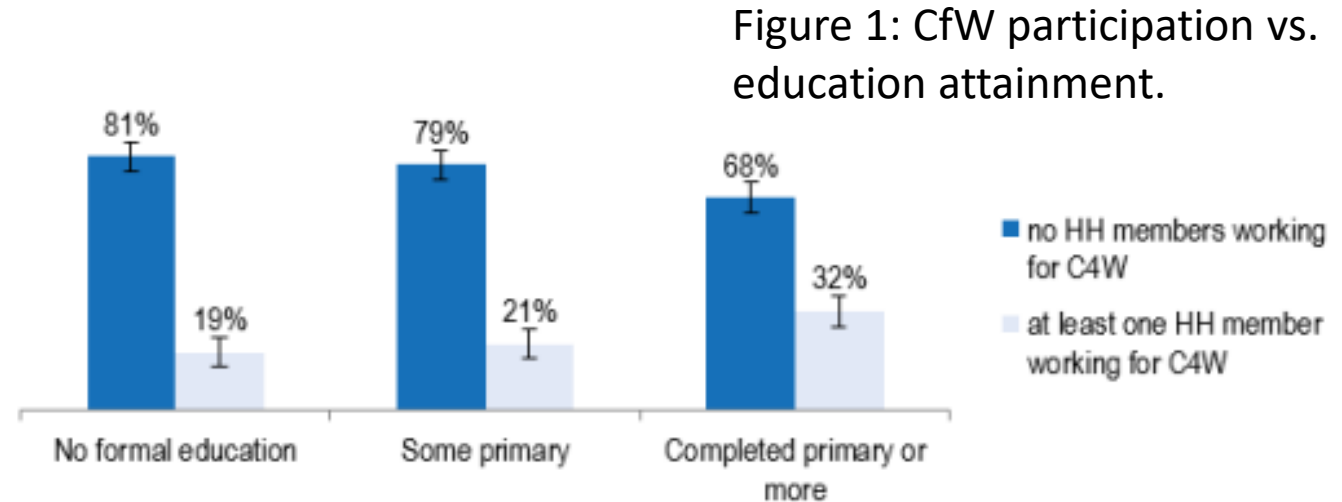


Figure 2: HH facing barriers interacting with humanitarian workers vs. education attainment.



Comparison 9:

Additional Expenses

HH with at least one member requiring assistance to complete daily tasks

- According to the MSAN and PEA, this HH types spend more on medical expenses.
- The PEA found that these HH spend 45% more on average on medical expenses. The reason given by those HH is that the treatment required is not available at the clinic (67.8%).

Large HH size with many children

- Pilot PEA found that as HH size increases wealth attributed per capita decreases. Though HH have the capacity to earn more money they have a higher costs which is more than the additional amount that they earn.
- This was evident in large HH with 10-12 members with 70% or more children under 18 have higher need for cash purchases due to additional expenses.
- *However, MSNA found that HH dependency ratio did not necessarily have a relationship with worse-off outcomes on key wellbeing indicators.*

MSNA Graph: Medical expense vs HH with 1 member requiring daily assistance.



Key Takeaways:

- **Please note that** there is not the evidence base to say that one single household characteristic stood out as consistently producing worse-off outcomes across the board (e.g. accessing water sources, shelter repairing).
- But, what these three studies do say is that even if all HH types are generally able to for example, fix their shelter at similar rates, there is evidence that some households have a harder time meeting certain types of basic needs than others.
- The evidence also suggests that access to income generating activities impacts vulnerability. The HH types that face more obstacles when accessing income find it more difficult to supplement assistance to meet all their basic needs.
- More research is needed to identify whether large scale targeting is appropriate and for what types of assistance. However, with more research there is potential that for some forms of assistance target programming could be used to support HHs with different characteristics such as HH with no males of working age.