

Multi-Sector Needs Assessment - July 2018

Camp 16, Ukhiya, Cox's Bazar, Bangladesh



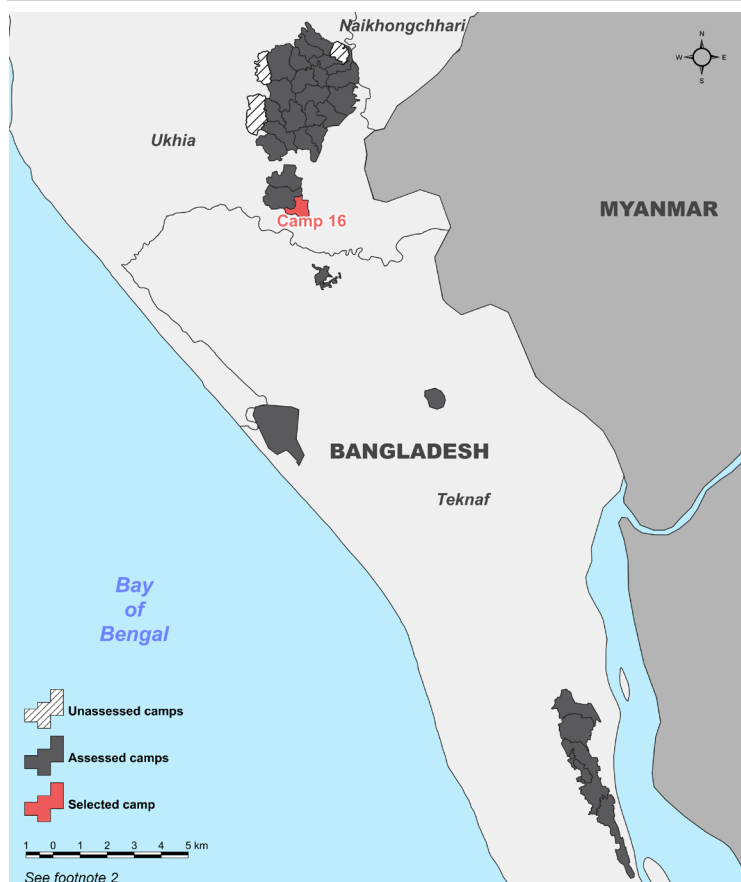
Background and Methodology

An estimated 723,000 Rohingya refugees have fled violence in Myanmar's Rakhine state since August 25, 2017¹. Most of the refugees rely on humanitarian assistance, having left with few possessions and exhausted their financial resources on the journey. The monsoon season began in May and continues into September, threatening the vast majority of refugees living in makeshift shelters and settlements highly vulnerable to floods and landslides.

To understand the evolving priority needs of the refugees, an inter-agency Multi-Sector Needs Assessment (MSNA), coordinated by the United Nations High Commissioner for Refugees (UNHCR) and with technical support from REACH, was conducted in 31 refugee sites using a household survey methodology. Support for questionnaire translation and enumerator language training was provided by Translators Without Borders.

Results of this MSNA are generalizable to the camp level with 95% confidence level and 10% margin of error. This factsheet presents an analysis of data collected in Camp 16 where 98 households were surveyed between 2 and 31 July 2018.

In order to avoid duplication, data on WASH and Food Security were not extensively collected. WASH data was collected by REACH in April 2018 and can be found [here](#)³. More information on Food Security can be found in the Light Food Security Monitoring exercise by VAM / WFP.



Population in camp (individuals)¹ 21,590

Population in camp (families)¹ 4,828

32.5

Average age of respondent



47% of respondents were female

4.8

Average household size

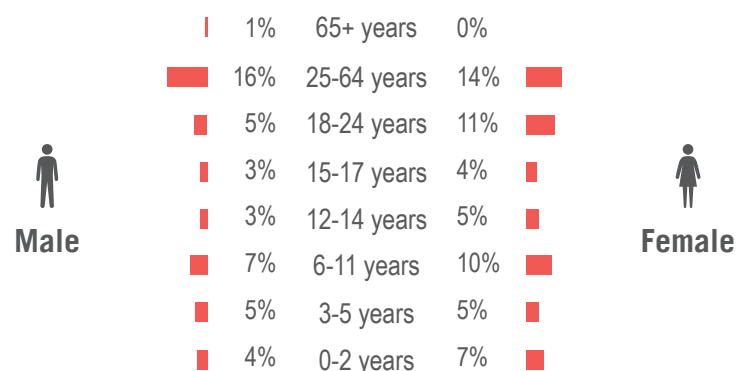


53% of refugees are under age 18



Demographics

Composition of surveyed households



89% of households with at least one child under 18 years old



53% of households with at least one child under 5 years old



20% of heads of households were female



53% of households with pregnant or lactating women



38% of households with at least one person with a disability or chronic illness

1. As defined by UNHCR in the population data and key demographical indicators (15 July dataset)

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

3. REACH, Bangladesh WASH Camp Profiling Factsheets, July, 2018. <https://bit.ly/2pgqFLX>

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Protection

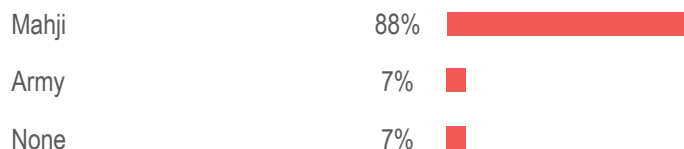
% of households reporting safety concerns (read: fears) for boys and girls (aged under 18)^{4,5}



96% of households reporting the presence of a youth group community watch during the night

48% of households reporting the presence of someone in the community outside of their own household who can assist them in case of need

% of households reporting first port of call for assistance in dealing with safety or security issues^{4,6}

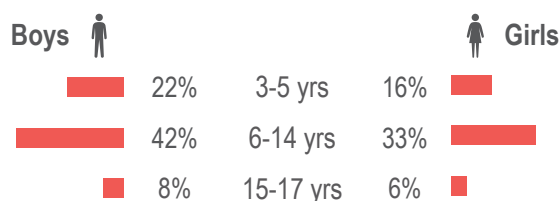


84% of households reporting not having enough light at night for household members to safely access latrines in their area of the camp

% of women reported to be attending activities at an NGO-run space where only women and girls are allowed in the 7 days prior to data collection⁷

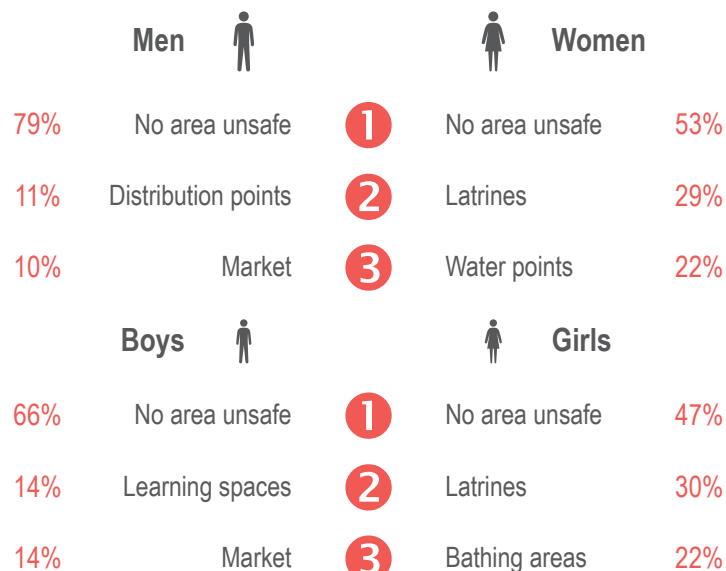


% of children reported to be attending activities at an NGO-run safe space for children in the 7 days prior to data collection⁸



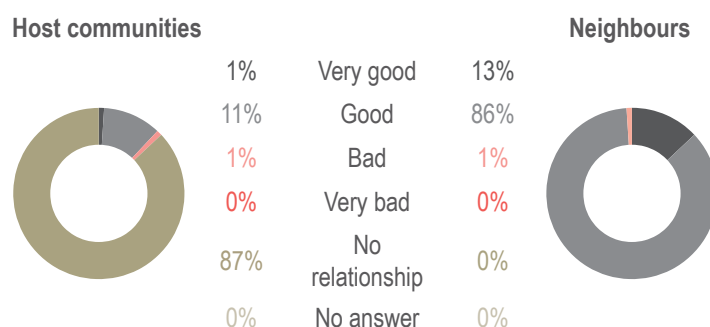
2% of all households with children under 18 reporting at least one child involved in hazardous labour in the 30 days prior to data collection⁹

% of households reporting areas in the camp where men, women, boys, and girls do not feel safe^{4,10}



68% of households reported the presence of groups or committees in their area working to protect their rights and protect them from harm

% of households reporting different relationships with Bangladeshi host community and refugee neighbours in the same block



4. Respondents could select multiple options

5. Three most common safety concerns for boys and girls are shown

6. Three most common first ports of call for assistance are shown

7. Respondents were asked to report information for each woman in their household. This indicator shows the proportion of all individual women reported

8. Respondents were asked to report information for each child in their household. This indicator shows the proportion of all individual children reported

9. In this assessment hazardous labour was defined as: working with heavy machinery or lifting heavy objects, exposure to harmful chemicals, exposure to extreme heat (eg. furnace, bakery), working more than 40 hours per week, working at night (between 8 pm and 6 am), and using sharp objects.

10. Three most common areas where men, women, boys and girls do not feel safe are shown

Multi-Sector Needs Assessment - July 2018

Camp 16, Ukhiya, Cox's Bazar, Bangladesh



Health

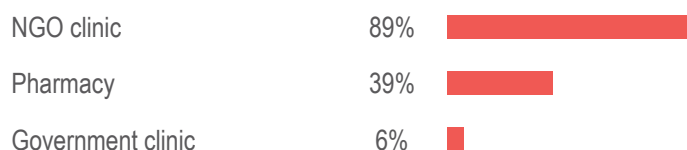


85% of households with children under 5 reported all children under 5 having an immunization card

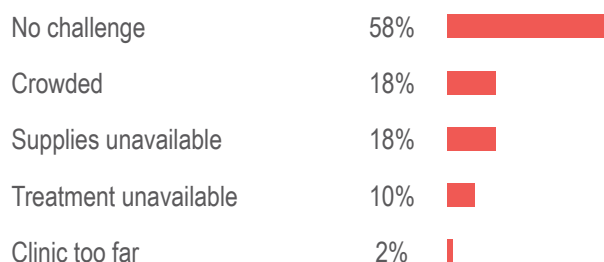


96% of households with children under 5 reported all children under 5 sleeping under a mosquito net the night prior to data collection

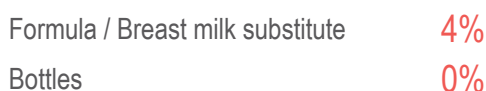
% of households reporting seeking treatment for an individual with a serious illness in the 30 days prior to data collection⁴



% of households reporting challenges in accessing NGO run clinics since arriving in the camp^{4,11}



% of households with children under 5 reported receiving a breast milk substitute, infant formula or baby bottles through donation in the 30 days prior to data collection⁴

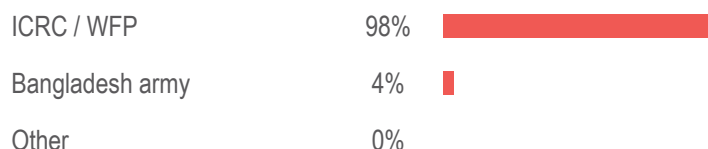


Food Security



100% of households reported possession of a ration card

% of households reporting receiving food assistance in the 30 days prior to data collection⁴



100% of households reported access to a market to buy food

% of households reporting travel time on foot to food markets

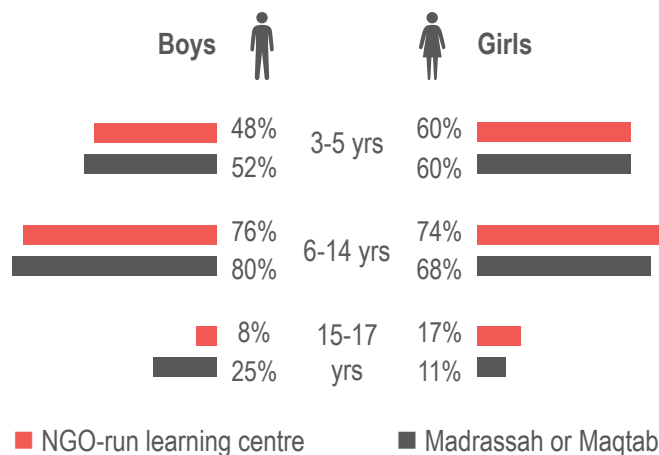


9%	<5 min
32%	5-15 min
46%	15-30 min
13%	+30 min
0%	Do not know



Education

% of children reported to be attending learning centres in the 7 days prior to data collection^{4,8}



Shelter & Non-Food Items



59% of households reported sharing their shelter with other households

% of households reporting destruction or damage of their shelter in the 30 days prior to data collection



4. Respondents could select multiple options

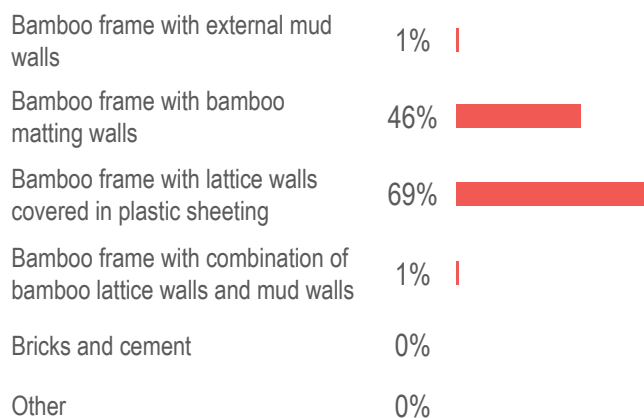
8. Respondents were asked to report information for each child in their household. This indicator shows the proportion of all individual children reported

11. Five most common health care access challenges are shown

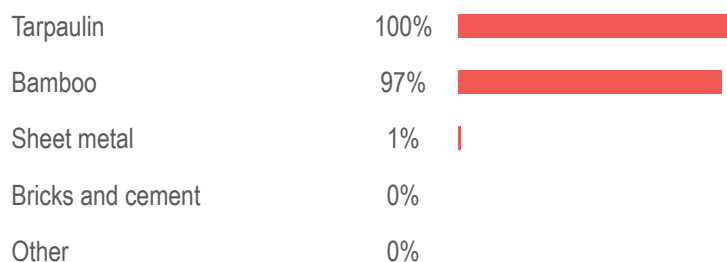
Multi-Sector Needs Assessment - July 2018

Camp 16, Ukhiya, Cox's Bazar, Bangladesh

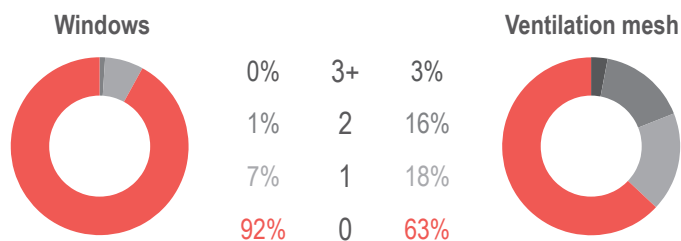
% of households reporting using different materials for the frame and walls of the household shelter⁴



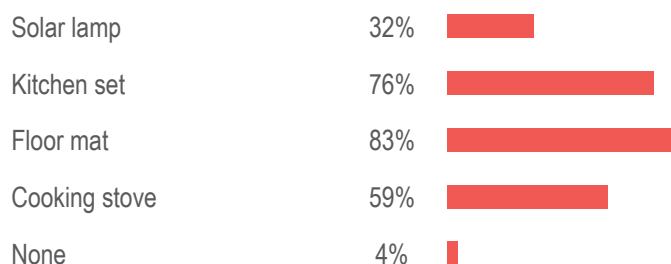
% of households reporting using different materials for the roof of the household shelter⁴



% of shelters with windows and ventilation mesh, by number of openings

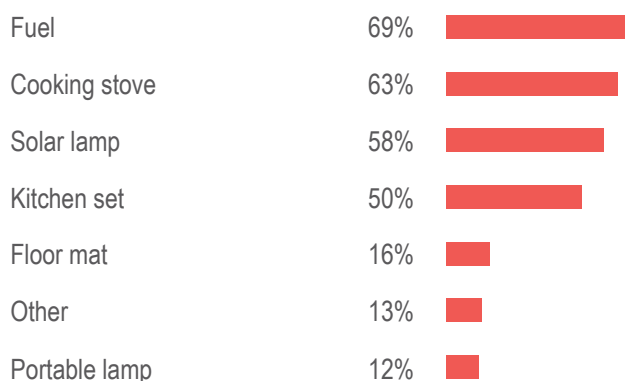


% of households reporting ownership of the following non-food items at the time of data collection



10% of households reported receiving a distribution of cooking fuel within the 30 days prior to data collection

% of households reporting most urgently needed non-food items^{12,13}

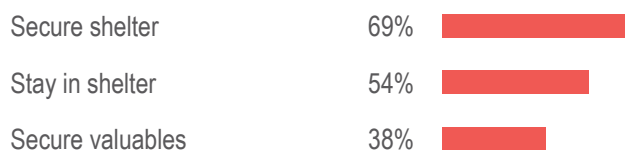


Site Management



61% of households reported being aware of the role of Cyclone Preparedness Program volunteers in their area¹⁴

% of households reporting steps they would take to prepare for an approaching cyclone^{4,15}

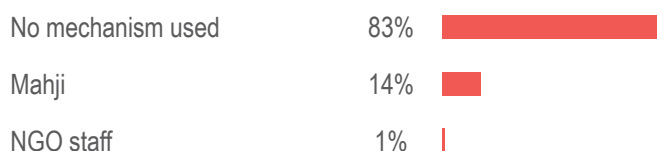


Communication with Communities



39% of households reported being aware of a complaint/feedback mechanism within their camp

% of households reporting use of complaint/feedback mechanisms in the 30 days prior to data collection^{4,16}



4. Respondents could select multiple options

12. Respondents could select up to 3 options

13. Seven most common non-food item needs are shown

14. CPP is a joint community-based disaster risk reduction initiative of the Government of Bangladesh and the Bangladesh Red Crescent Society. It trains volunteers to deliver cyclone warnings to communities, assist with shelter and rescue, and provide medical attention

15. Three most common steps for cyclone preparedness are shown

16. Three most common complaint mechanisms used are shown

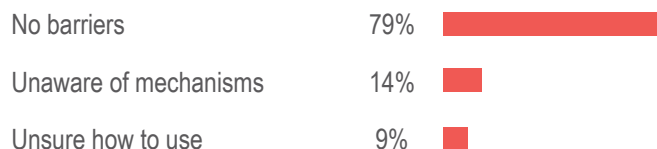
Multi-Sector Needs Assessment - July 2018

Camp 16, Ukhiya, Cox's Bazar, Bangladesh

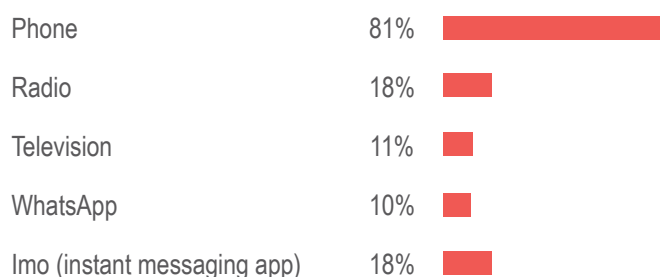


94% of households that reported using complaint/feedback mechanisms reported receiving a response to their complaint/feedback

% of households reporting barriers to using complaint/feedback mechanisms^{4,17}



% of households reporting use of information channels in the 7 days prior to data collection⁴

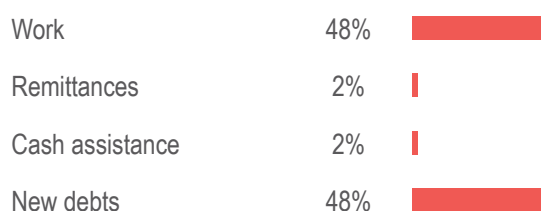


Livelihoods



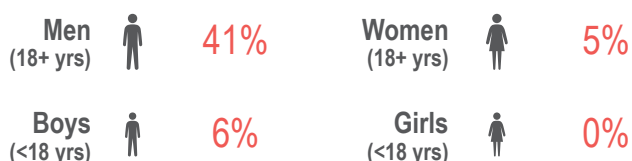
48% of households reported at least one member working to earn an income in the 30 days prior to data collection

% of households reporting income from different sources in the 30 days prior to data collection⁴

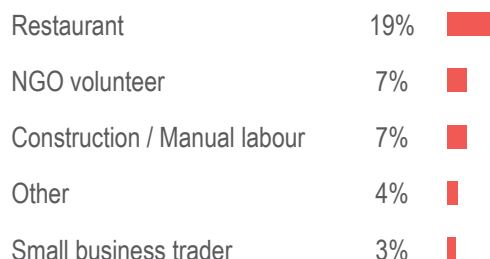


2,000 Median household income in Bangladeshi Taka (BDT)^{18,19}

% of individuals reported to be working to earn an income in the 30 days prior to data collection



% of households reporting earning an income from different types of employment in the 30 days prior to data collection^{4,20}

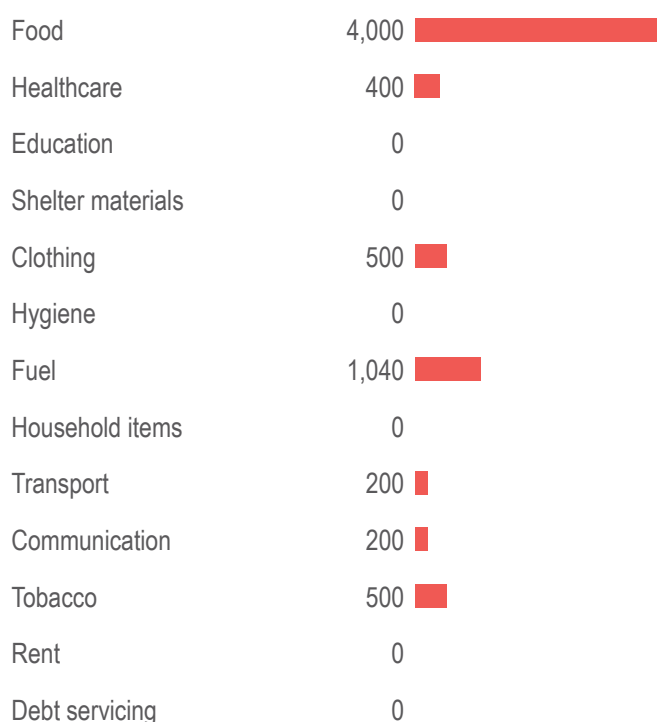


6% of households reported at least one individual carrying out construction or manual labour work that was paid by an NGO ("cash for work") in the 30 days prior to data collection



84% of households reported taking on new debts since arriving in Bangladesh

Median reported monthly household expenditure in the 30 days prior to data collection, in Bangladeshi Taka¹⁹



4. Respondents could select multiple options

17. Three most common barriers to accessing complaint mechanisms are shown

18. Income from employment, remittances, cash assistance and new debts

19. USD 1 = BDT 84.2 (as of 3 September 2018). Source: www.xe.com

20. Five most common employment sectors shown