

Multi-Sector Needs Assessment II

Camp 10 Ukhiya, Cox's Bazar, Bangladesh

July 2018 and January 2019 comparison



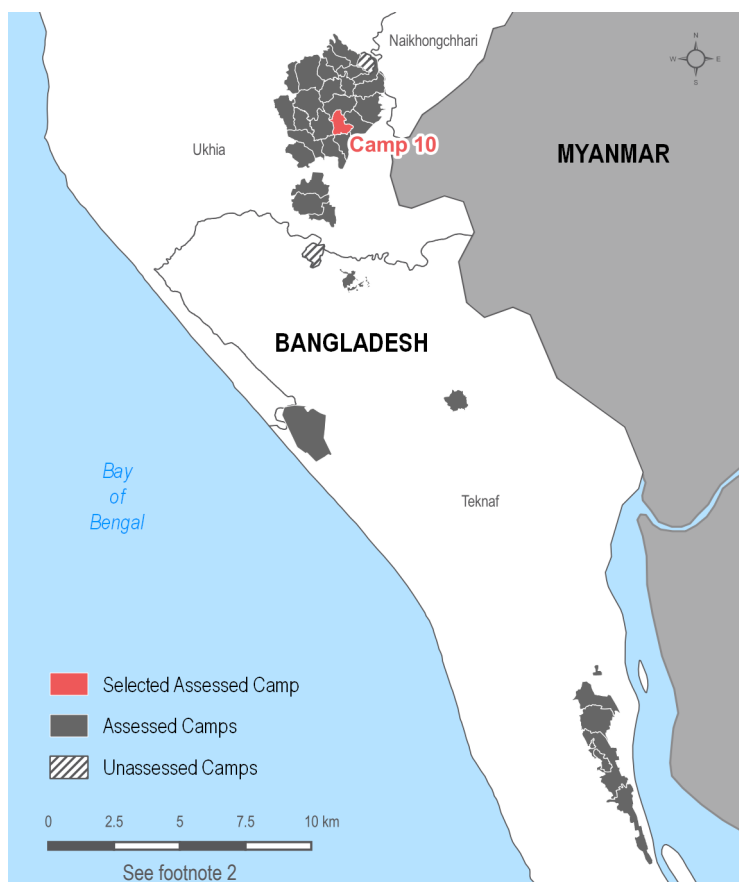
Background and Methodology

An estimated 738,000 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 cyclone and monsoon seasons, stretching from May to October, further threatened the living conditions of the vast majority of refugees who are living in makeshift shelters and settlements highly vulnerable to floods and landslides.

To understand the evolving priority needs of the refugees, and to understand change over time, this Multi-Sector Needs Assessment (MSNA), coordinated by the United Nations High Commissioner for Refugees (UNHCR) and with technical support from REACH, was conducted in 33 refugee sites using a household survey methodology. It is a follow up assessment to the baseline MSNA conducted in July 2018.

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 10 where 101 households were surveyed between 8 and 26 January 2019. Support for questionnaire translation and enumerator language training was provided by Translators Without Borders.

January 2019 data is presented in **red**, and July 2018 data is presented in **beige**.



Camp population:

Families¹ **7,649** Individuals¹ **32,963**

Demographics³

30.0

Average age of respondent



52% of respondents were female

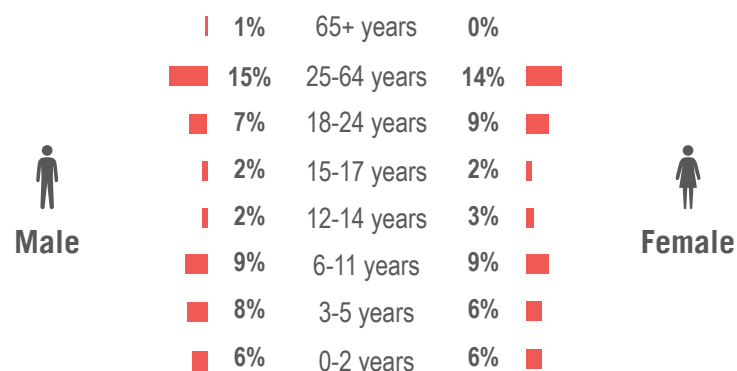
4.7

Average household size



53% of refugees are under 18

Composition of surveyed households



95% of households with at least one child under 18 years old



66% of households with at least one child under 5 years old



32% of heads of households were female



54% of households with pregnant or lactating women



10% 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 (31 December dataset)

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

3. January 2019 data only

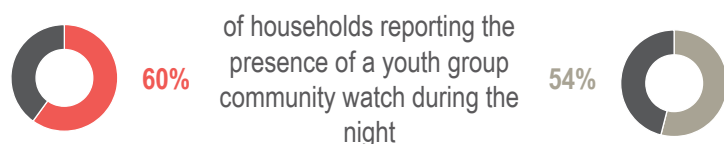
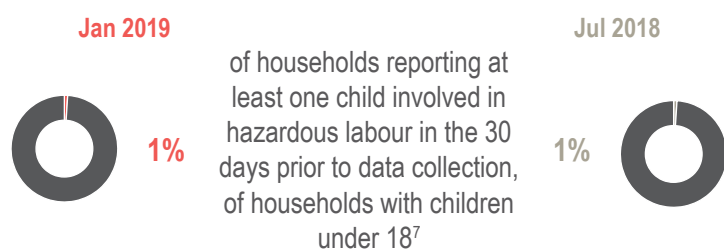
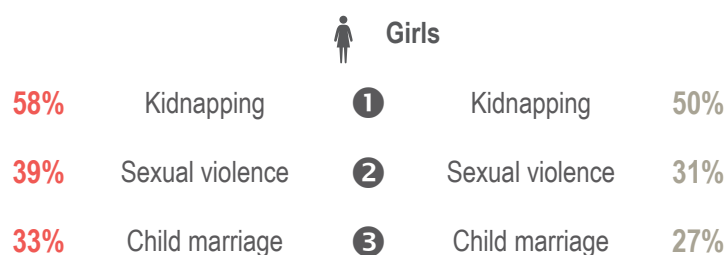
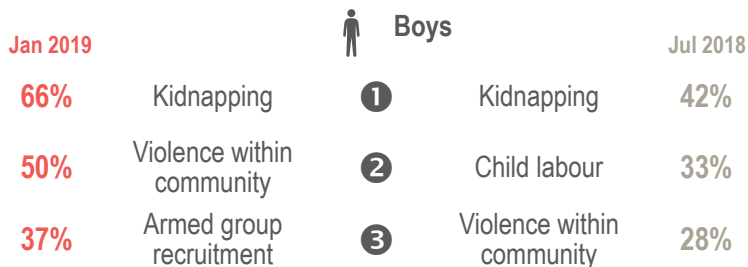
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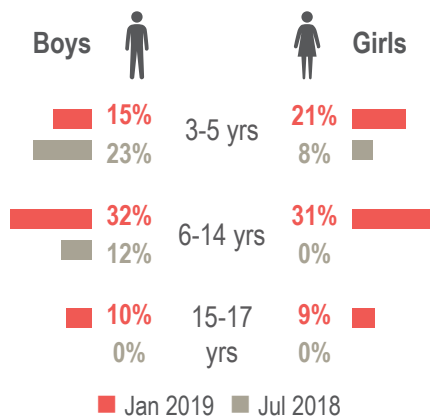
July 2018 and January 2019 comparison

Protection

% of households reporting safety concerns (read: fears) for boys and girls (aged under 18)^{4,5,6}



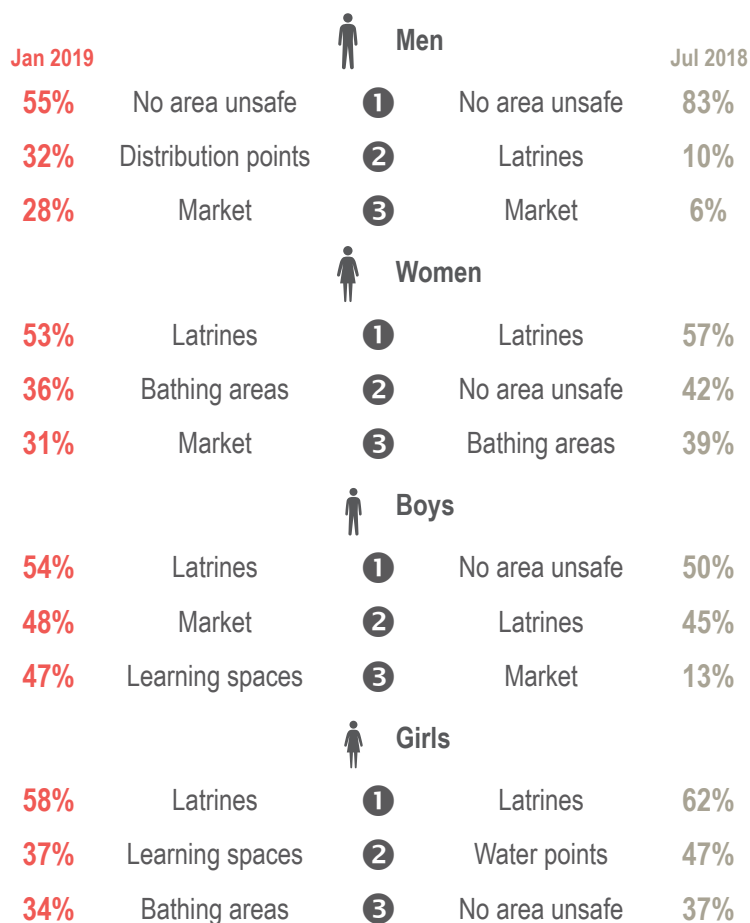
% of children reported to be attending activities at an NGO-run safe space for children in the 7 days prior to data collection⁸



% of females reported to be attending activities at an NGO-run space where only women and girls are allowed in the 7 days prior to data collection⁹



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



4. Respondents could select multiple options

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

6. These results are based on the respondent's subjective perception of risks in the camp, and not the actual number of security incidents

7. 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

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

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

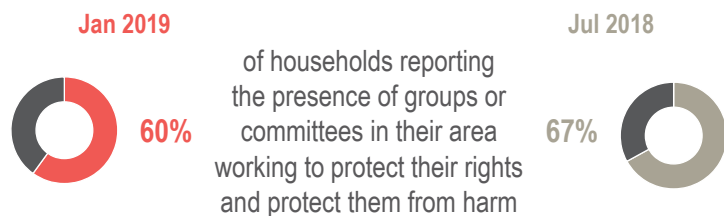
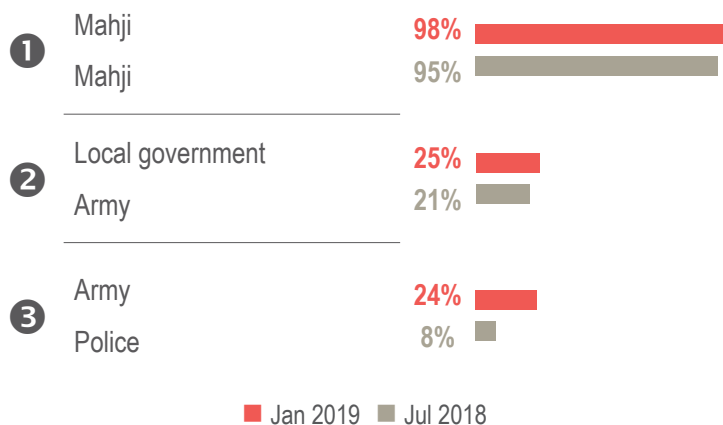
10. Three most common areas where men, women, boys and girls do not feel safe are shown

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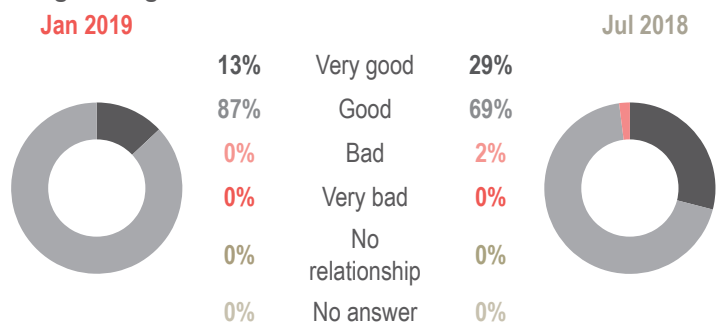
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July 2018 and January 2019 comparison

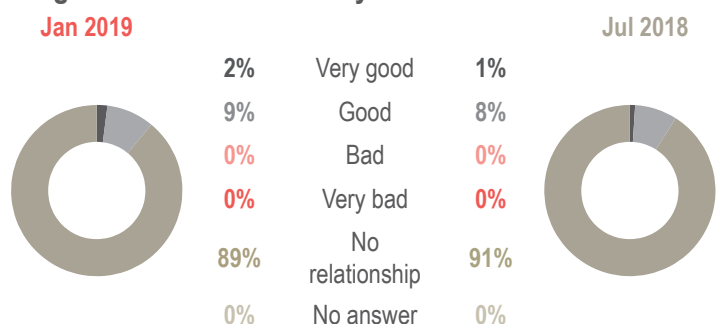
% of households reporting first port of call for assistance in dealing with safety or security issues^{11,12}



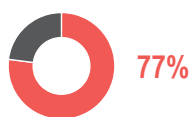
% of households reporting different relationships with refugee neighbours in the same block



% of households reporting different relationships with Bangladeshi host community



Jan 2019



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

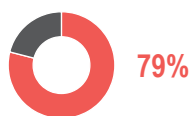
Jul 2018

82%



Health

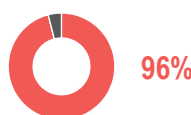
Jan 2019



of households with children under 5 reporting all children under 5 having an immunization card¹³

Jul 2018

82%



of households with children under 5 reporting all children under 5 sleeping under a mosquito net the night prior to data collection¹³

98%



% of households with children under 5 reporting receiving a breast milk substitute or baby bottles through donation in the 30 days prior to data collection¹¹

Jan 2019

3%

Breast milk substitute

Jul 2018

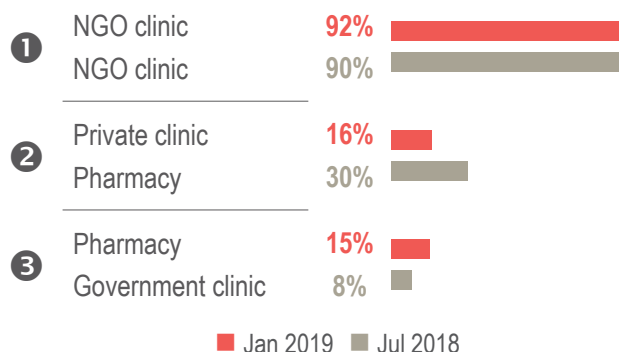
0%

6%

Baby bottles

0%

% of households reporting seeking treatment for an individual with a serious illness in the 30 days prior to data collection, by source of treatment^{11,14}



11. Respondents could select multiple options

12. Three most common ports of call for assistance are shown

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

14. Three most common sources of treatment are shown

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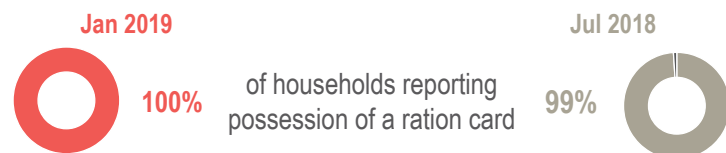
July 2018 and January 2019 comparison

% of households reporting challenges in accessing NGO run clinics since arriving in the camp^{15,16}

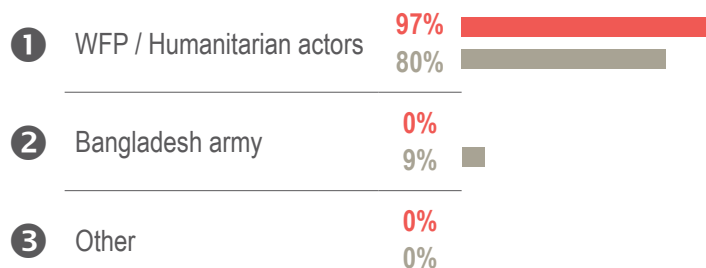
| Jan 2019 | | | | Jul 2018 |
|----------|-----------------------|---|-----------------------|----------|
| 44% | Treatment unavailable | ① | No challenge | 53% |
| 39% | Clinic too far | ② | Crowded | 31% |
| 37% | Supplies unavailable | ③ | Clinic too far | 25% |
| 37% | Crowded | ④ | Treatment unavailable | 20% |
| 16% | No challenge | ⑤ | Supplies unavailable | 13% |



Food Security



% of households reporting receiving food assistance in the 30 days prior to data collection, by source¹⁵



% of households reporting travel time on foot to food markets



15. Respondents could select multiple options

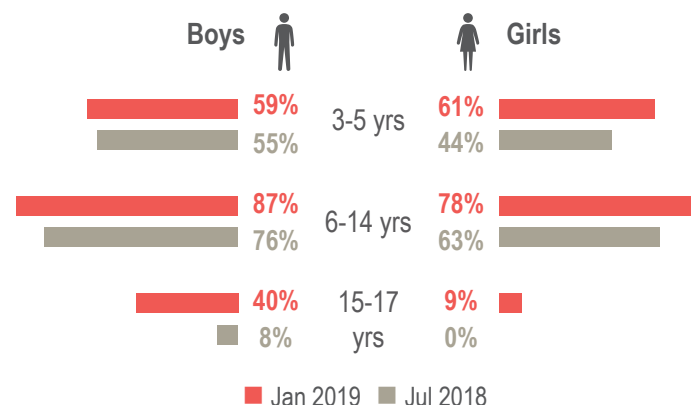
16. Five most common health care access challenges are shown

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

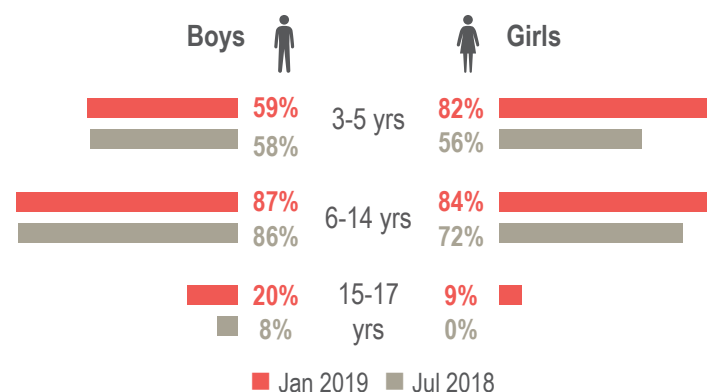


Education

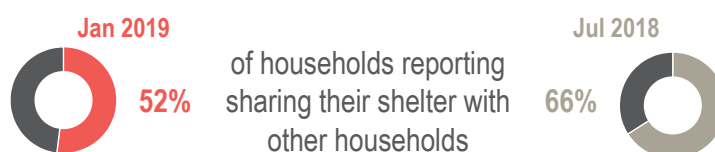
% of children reported to be attending NGO-run learning centres in the 7 days prior to data collection¹⁷



% of children reported to be attending Madrassas in the 7 days prior to data collection¹⁷



Shelter & Non-Food Items



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

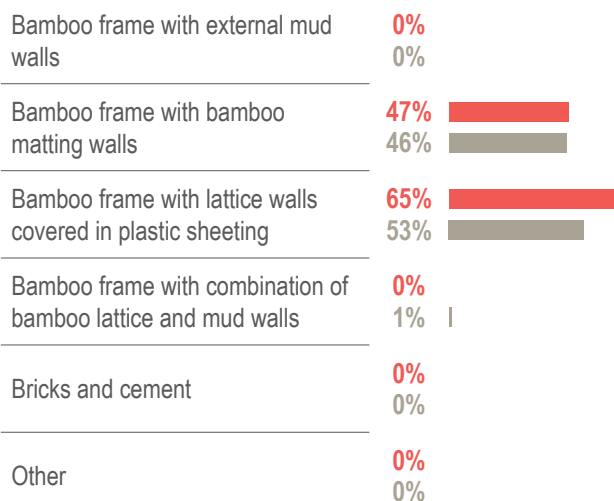
| Jan 2019 | | Jul 2018 |
|----------|----------------|----------|
| 12% | Roof damaged | 16% |
| 12% | Roof destroyed | 20% |
| 9% | Wall damaged | 13% |
| 11% | Wall destroyed | 17% |

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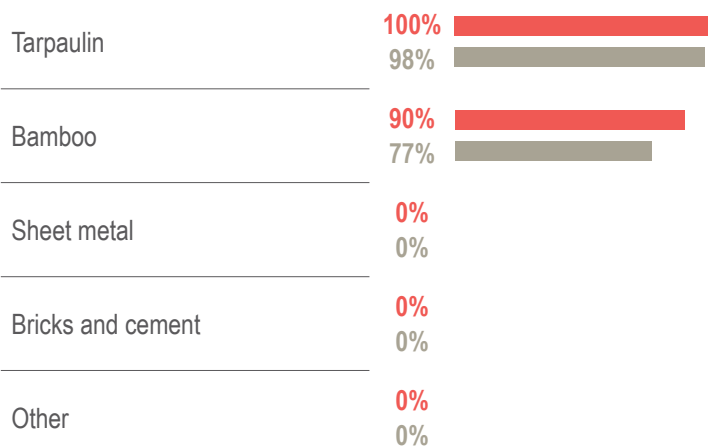
July 2018 and January 2019 comparison

% of households reporting using different materials for the frame and walls of the household shelter¹⁸



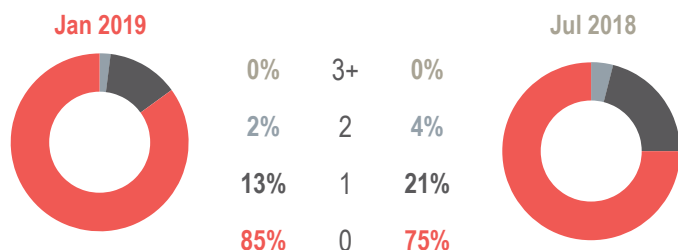
■ Jan 2019 ■ Jul 2018

% of households reporting using different materials for the roof of the household shelter¹⁸

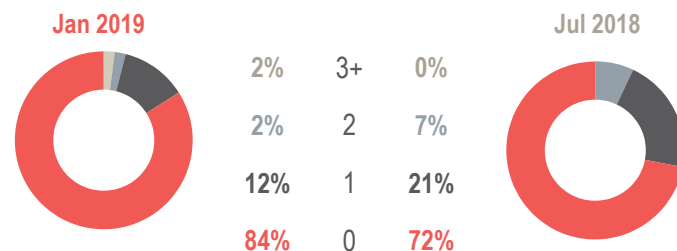


■ Jan 2019 ■ Jul 2018

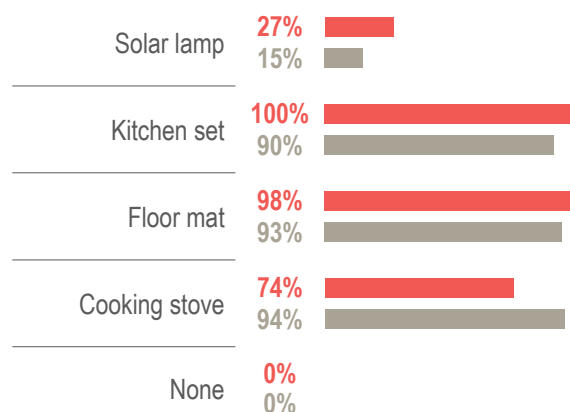
% of shelters with windows, by number of openings



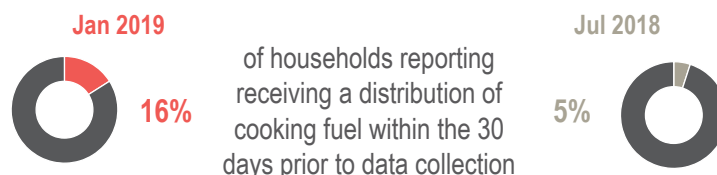
% of shelters with ventilation mesh, by number of openings



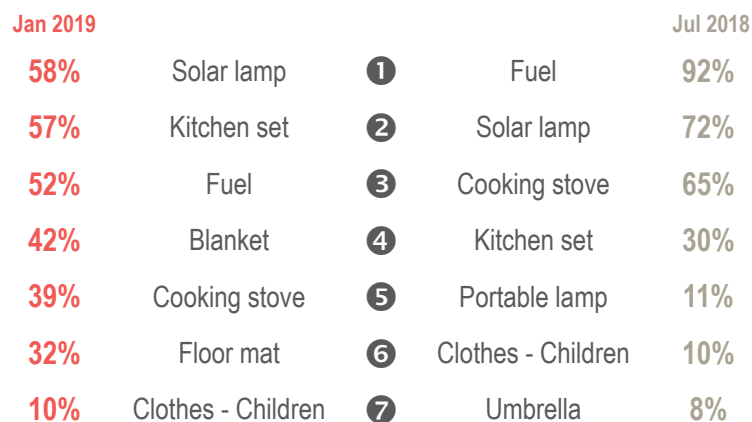
% of households reporting ownership of the following non-food items at the time of data collection



■ Jan 2019 ■ Jul 2018



% of households reporting most urgently needed non-food items^{19,20}



18. Respondents could select multiple options

19. Respondents could select up to 3 options

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

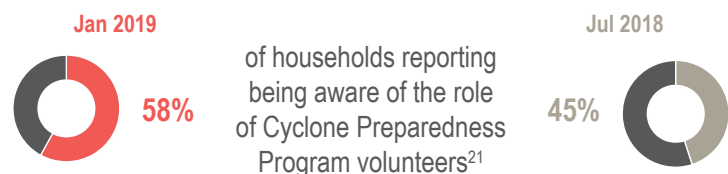
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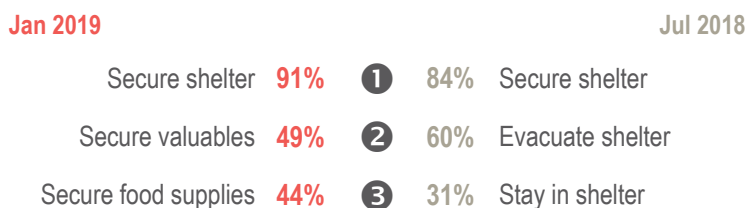
July 2018 and January 2019 comparison



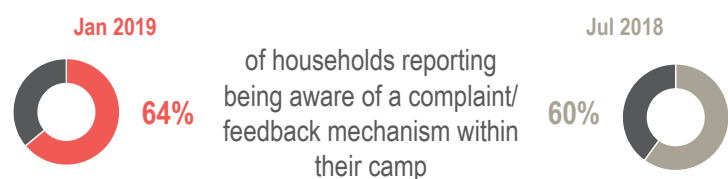
Site Management



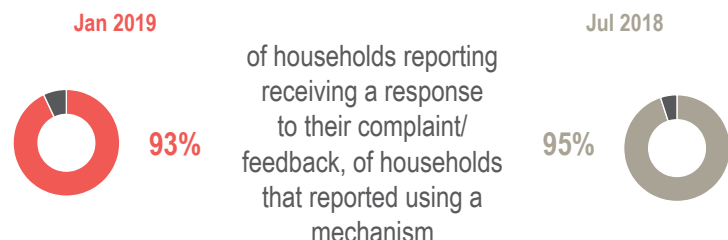
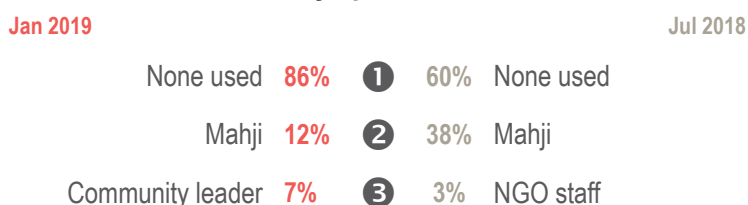
% of households reporting steps they would take to prepare for an approaching cyclone^{22,23}



Communication with Communities



% of households reporting use of a complaint/feedback mechanism in the 30 days prior to data collection^{22,24}



21. 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

22. Respondents could select multiple answers

23. Three most common steps for cyclone preparedness are shown

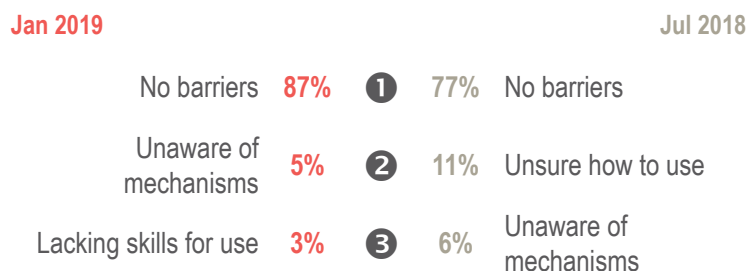
24. Three most common complaint mechanisms used are shown

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

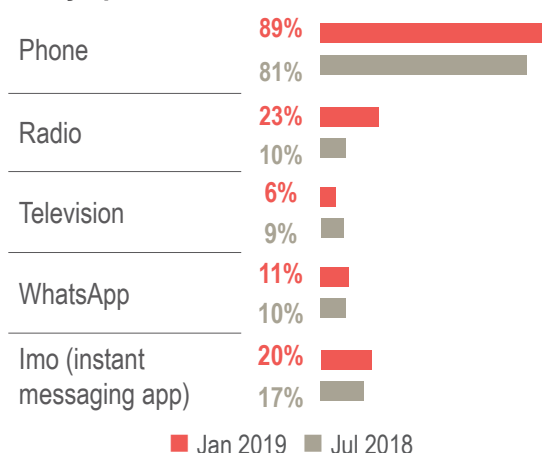
26. Income from employment, remittances, cash assistance and new debts

27. 1 USD = 83.4 BDT (as of 28 January 2019). Source: www.xe.com

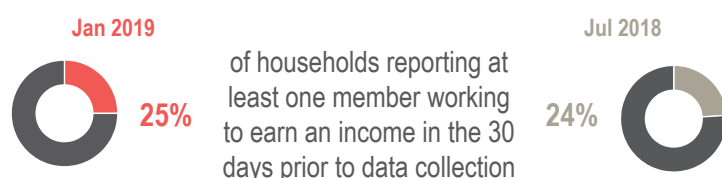
% of households reporting barriers to using complaint/feedback mechanisms^{22,25}



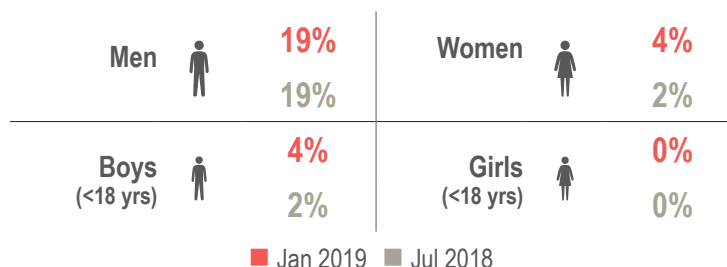
% of households reporting use of information channels in the 7 days prior to data collection²²



Livelihoods



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



Jan 2019

1,500

Median household income in Bangladeshi Taka (BDT)^{26,27}

Jul 2018

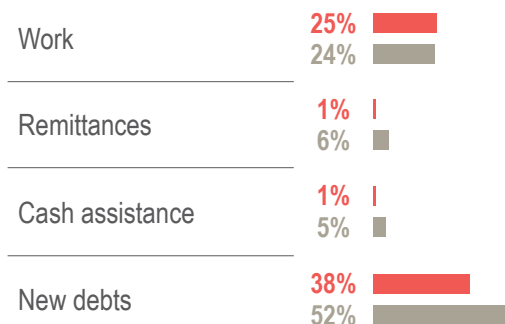
1,750

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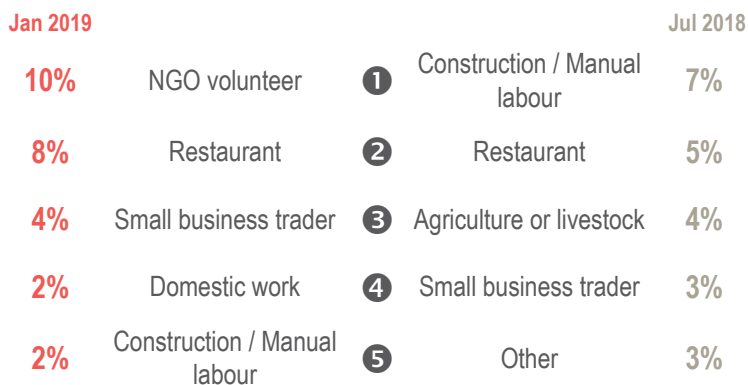
July 2018 and January 2019 comparison

% of households reporting income from different sources in the 30 days prior to data collection²⁸



■ Jan 2019 ■ Jul 2018

% of households reporting income from different types of employment in the 30 days prior to data collection^{28, 29}



Jan 2019



2%

of households reporting at least one individual engaging in work paid by an NGO ("cash for work") in the 30 days prior to data collection³⁰

4%



Jul 2018



64%

of households reporting taking on new debts since arriving in Bangladesh

81%



Jan 2019

7,000

Median household debt in Bangladeshi Taka (BDT)³¹

Jul 2018

3,750

28. Respondents could select multiple answers

29. Five most common employment sectors are shown

30. Only households reporting that an individual had worked Construction / Manual labour in the 30 days prior to data collection were asked if this work was 'Cash for Work'. The finding is a proportion of the entire camp population

31. 1 USD = 84.1 BDT (as of 5 March 2019). Source: www.xe.com

32. Data from only January 2019 presented, as WASH indicators were not included in the July 2018 MSNA

33. Top three sources of drinking water are shown

34. Top three locations for defecation shown

Water Sanitation and Hygiene³²

% of households reporting main source of drinking water³³



45%

of households reporting witnessing someone treating water with chlorine the last time they were at a water point, of households using tubewells / boreholes as a main source of drinking water

13

Average litres of potable water collected per person per day for each household

Water collection - % of households reporting:

at least 3L of drinking water per person per day

94%

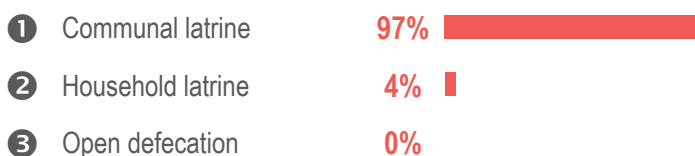
at least 10L of protected water storage capacity per person

29%

at least 15L of water for all domestic uses per person per day

76%

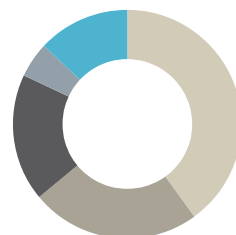
% of households reporting where households members usually go to defecate^{28, 34}



90%

of households reporting having soap in their shelter

% of households reporting the most common method of solid waste disposal



| | |
|-----|------------------------|
| 40% | Designated waste pit |
| 24% | Undesignated waste pit |
| 18% | Stream or water source |
| 5% | Burn it |
| 13% | Bury it |
| 0% | Other |
| 0% | Do not know |