

Refugee influx Emergency Vulnerability Assessment (REVA-4)

Summary Report

Data collection supported by:

April 2021



World Food Programme













Key highlights

- Overall vulnerability levels have reached an all-time high in the refugee camps since the influx, with latest findings showing that 96 percent of all refugees are moderate to highly vulnerable and remain entirely dependent on humanitarian assistance. These results reflect the impact of COVID-19 and forced adjustments in humanitarian operations on an already fragile and low resilient population with no income sources nor livelihood opportunities.
- Overall vulnerability in the host community also increased, with 51 percent of the population being moderate to highly vulnerable in 2020 compared to 41 percent in 2019. This increase is also reflected nationally where poverty rates were found to have increased in 2020. The economic contraction and decline in economic activity across most sectors during the COVID-19 lockdown in a population highly dependent on daily wage labour was the main driver.
- Compared to 2019, food consumption among Rohingya and host communities has deteriorated. Unacceptable food consumption
 has increased from 42 percent to 50 percent among Rohingya and from 21 to 33 percent among host communities. For the host,
 residual effects of the COVID-19 lockdown on the local economy led to substantial reduction in household incomes affecting their
 economic ability to acquire food from markets.
- Rohingya households allocate 77 percent of their monthly budget on food; an average above the severe economic vulnerability threshold of 75 percent.¹
- Despite the current level of humanitarian assistance, 49 percent of Rohingya households cannot afford the minimum expenditure basket (MEB). Compared to 2019, economic vulnerability has slightly increased among Rohingya (3 percent) and host communities (7 percent).
- Discounting the value of assistance (a simulated scenario), economic vulnerability would significantly increase to 96 percent of Rohingya households consuming below the MEB, reflecting the fragility of the camp economy and its fully dependence on aid to cover the essential needs of almost all households.
- Two thirds of Rohingya and one third of host community households are engaged in crisis or emergency livelihood coping strategies to cover food and/or their basic needs compromising their resilience and future productivity. Among Rohingya households, 36 percent reported no ways to cover any unforeseen future emergency expense.
- One out of three income sources in the camps come from negative coping methods such as selling assistance, borrowing money
 or help from relatives and friends. For Rohingya households with an income source, monthly earnings are on average ~75 percent
 lower than host community households and are equivalent to 37 percent of the Minimum Expenditure Basket², barely covering for
 basic needs.
- There is no evidence of asset accumulation or self-sufficiency among the Rohingya community in meeting basic needs. Food and other complimentary assistance only allow refugees to complement their consumption needs.
- The proportion of Rohingya households selling part of their food assistance has reduced from 53 percent in 2019 to 32 percent in 2020, mostly driven by the shift from the in-kind to e-voucher food assistance modality associated with lower rates when it comes to selling of assistance. Households receiving e-vouchers increased from about 70 percent in November 2019 to 97 percent one year later. Oil, rice, pulses, dry fish and potatoes are frequently sold to mainly buy food items of their preference.
- COVID 19 and preventive measures has resulted in an increase in Multi-Dimensional Deprivation or multi-dimensional poverty: driven by deprivation in education due to school closures, deprivation on health, income and food access. The disruption on livelihoods and self-reliance activities, combined with increased food prices, have reduced household purchasing power and capacity to cover their basic needs.

¹ Consolidated Approach to Reporting Indicators of Food Security (CARI)- 2015. Technical Guidance Note. WFP.

² Household Minimum Expenditure Basket is at BDT 8681 while the Minimum Food Expenditure Basket is at BDT 5691.

Introduction

Bangladesh continues to accommodate Rohingya refugees who've been fleeing political persecution in Myanmar since the 1970s. The last influx occurred in August 2017, when an estimated 726,000³ Rohingyas arrived in Cox's Bazar and settled in camps in Ukhiya and Teknaf sub-districts, joining the other group of Rohingyas who arrived earlier.

The Covid-19 pandemic added another layer of crisis to the Rohingya refugee crisis that was beginning to stabilize and take a protracted nature: it altered the landscape and modality of providing humanitarian assistance besides disrupting lives and livelihoods in both host and camp economies.

This technical summary report highlights findings from the fourth round of the Refugee Influx Emergency Vulnerability Assessment (REVA-4) conducted in November-December 2020, by the World Food Programme (WFP), in collaboration with partner organizations. The main objectives of this assessment were to:

- Assess the current situation and trends in severity of food insecurity, livelihoods and other essential needs of the Rohingya
 and host communities adjacent to the camps.
- Understand the experienced and sustained impacts of COVID-19 lockdowns and regulations on the Rohingya and surrounding host communities.

REVA-4 constitutes a panel survey of REVA-3 households (interviewed in December 2019).

Overall Vulnerability

Compared to 2019, overall vulnerability⁴ increased in 2020 among the Rohingya and host communities. For Rohingya households, 96 percent were found to be highly to moderately vulnerable, a 2 percent increase from 2019, and the highest since the influx (Figure 1). The high vulnerability among Rohingya likely reflects the limited economic and livelihoods opportunities as well as work restrictions, further compounded by the COVID-19 crisis. The lockdowns and government directive to scale down humanitarian services to critical ones only resulted in reduction in some activities that were essential in supporting refugees' consumption needs, like self-reliance activities.

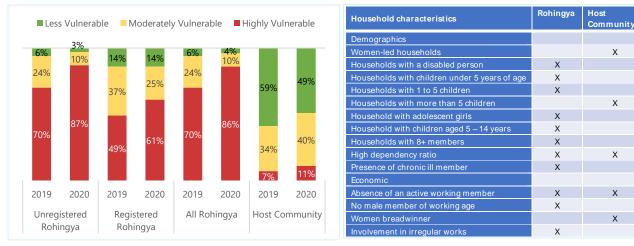


Figure 1: Overall vulnerability levels in 2019 and 2020



In the host communities, the increase in levels of vulnerability was also the highest since the influx, reflecting the economic hardships the community went through due to lockdowns and contraction of economic activities. The informal sector, which absorbs most of the labour force, was the most affected. Whilst the survey was conducted at a time when the economy was in a recovery phase, the residual impacts of the contraction on the economy continued to be felt, with many poor households still struggling to actively re-integrate back to the economy.

³ https://data2.unhcr.org/en/situations/myanmar_refugees

⁴ Overall vulnerability is a composite index based on food consumption score (FCS), economic capacity to meet essential needs (ECMEN) and livelihood coping strategies (LCS).

Examining the determinants of vulnerability at household level reveal a continuation of patterns observed in 2019 (Table 1). Persistent lack of economic opportunities drove Rohingya households into high vulnerability at a significantly faster rate than other sociodemographic attributes. Women-led households in the host community remain among the poorest and most vulnerable. Their economic conditions varied depending on marital status, the social context of women leadership, access to productive resources and the ability to generate income. Other observable vulnerability characteristics included households with more than five children, those with high-dependency ratio and households with a woman as the main breadwinner.

Food consumption score (FCS)

Compared to 2019, food consumption deteriorated in Rohingya and host communities (Figure 2). Despite the reduction of poor food consumption in Rohingya households from four to one percent, households with food consumption below acceptable levels increased from 42 to 50 percent. In host communities, it increased from 21 percent to 33 percent mainly driven by reduced frequency in consumption of more nutritious foods (pulses, vegetables, animal proteins like fish, meat, eggs) due to lower purchasing power.

Household dietary diversity scores among Rohingya refugees remain comparable to 2019 levels (at 5.1 food groups) but decreased in the host community from 5.4 to 5.1. Consumption frequency⁵ fell for both population groups, especially for pulses, sugar and vegetables. Animal protein consumption also decreased in the host community who experienced a greater general drop in consumption frequency compared to the Rohingya

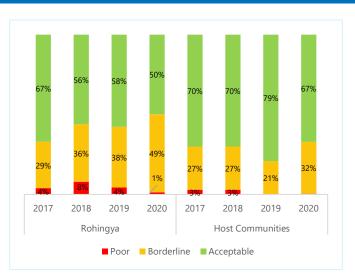


Figure 2: Food consumption score trends (2017-2020)

population. Nevertheless, the dietary patterns exhibited by the two communities were similar to 2019 findings, with higher consumption frequency of pulses among Rohingya households and more frequent consumption of vegetables, animal protein (meat/fish/eggs), and fruits in the host community. Women and male-led households in the Rohingya community had no significant differences in terms of consumption, since they all received the same assistance. In the host community, men headed households had better consumption outcomes than the female headed households, possibly drawn from differences in their access to economic opportunities.



⁵ Consumption frequency is defined as the average number of days each food group is consumed at the household level in the seven days preceding the survey. Food groups considered: staples, pulses, meat/fish/eggs, dairy, vegetables, fruits, oil and sugar.

Coping mechanisms

Consumption-based coping: Trends in adoption of consumption-based coping strategies remained similar to 2019: eight out of ten Rohingya households and four out of ten host community households were adopting consumption based coping strategies. Relying on less preferred food was reported to have increased in camps, possibly due to perceptions around shift to the commodity voucher modality in 2020⁶. For host community, consumption-based coping continued its steady trend of reduction across all strategies.

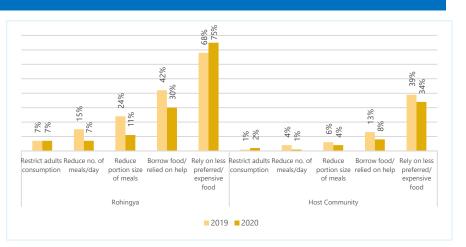


Figure 3: Adopted consumption based coping strategies

10%

17%

67%

2019

Livelihoods-based coping: The pattern of adoption of livelihoodsbased coping strategies was comparable to 2019: most refugee households applied crisis coping strategies, though at a lower rate than in 2019 (Figure 4), driven by reductions in sale of assistance and reliance on friends or relatives. Reduction in sale of food assistance is attributed to transition to the e-voucher modality from in-kind assistance in 2020⁷.

Livelihood coping strategies were mainly adopted to support food access -98 and 84 percent among Rohingya and host community households respectively. Health care access was the second most reported reason, relatively more important in the host community (8 percent) than in refugee camps.

Coping with a future emergency⁸: More than a third (36 percent) of Rohingya households reported not having any means of coping with an emergency expense while only 8 percent of host community

Figure 4: Scale of adoption of livelihoods coping strategies

Emergency Crisis Stress No coping

39%

25%

32%

2019

30%

22%

2020

Host Communities

14%

24%

58%

2020

Rohingya

households reported the same. Host community households also demonstrated higher self-sufficiency in being able to draw from current earnings (34 percent) and own savings (23 percent) among the top five methods reported for coping with unforeseen emergencies.

Credit-dependency: Credit dependency⁹ among Rohingya households persisted at previously high levels (63 percent), while among host community households the rate of debt contraction increased from 41 percent to 53 percent, driven by the strain on incomes during the lockdowns. Food was the main reason for incurring debts (55 percent) among refugees, followed by health (36 percent). In host community, it was mainly for health expenses (38 percent) and food (31 percent). Compared to 2019, credit taken to cover food expenses decreased while debts to cover health expenditure increased 8 percent points among Rohingya households and 17 percent among host community households.

⁶ The REVA 4 data collection was conducted from 7 November to 3 December 2020. Camps had begun to transition back to value voucher modality starting in December. At the time of survey almost all households were still receiving the fixed food baskets under commodity vouchers.

⁷ REVA 3 reported that e-voucher allowed refugees more flexibility in purchase of preferred item types and volumes, thus reducing the need to sell. Households under e-voucher food assistance modality increased from about 70 percent in December 2019 to 97 percent in November 2020.

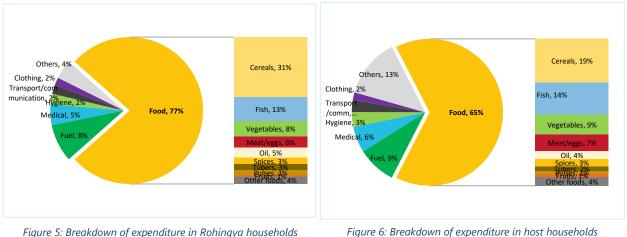
⁸ The emergency expense thresholds set for refugees and hosts were BDT 10,000 and BDT 25,000 respectively in order to contextualize the question to income levels and poverty lines for the two populations.

⁹ Credit dependency was measured based on whether households had borrowed money in the 3 months prior to the survey.

Expenditure patterns and economic vulnerability

Average expenditure levels: Considering only actual cash purchases, Rohingya households spent significantly less per month (BDT 735) per capita or (USD 9) compared to host community households (BDT 2,378) per capita or (USD 28). Including the imputed value of food assistance, aggregate expenditures for Rohingya households rise to about BDT 1,908 per capita per month (USD 23), underscoring the criticality of humanitarian assistance in supporting their consumption needs.

Expenditure patterns: Expenditure patterns across both populations remained comparable to previous years, with food disproportionately taking a larger share of the monthly expenditure. Including the value of assistance, the share of monthly budget on food among Rohingya households rose from 72 percent in 2019 to 77 percent in 2020, which is higher than the severe economic vulnerability threshold of 75 percent¹⁰. Cereals, mainly rice, continued to dominate diets of both Rohingya and host community households (Figure 5 and 6).



(including assistance)

Figure 6: Breakdown of expenditure in host households

Economic Vulnerability: Economic vulnerability¹¹ remains high in the camps despite the current levels of humanitarian assistance: 49 percent of Rohingya households still have consumption below the minimum expenditure basket (MEB), a 3 percent point increase from 2019. Unregistered refugees remain the most economically vulnerable population, likely due to their limited access to economic opportunities in the camps. When the value of assistance is discounted, economic vulnerability increases significantly, resulting in 96 percent of Rohingya households consuming below the MEB (simulated scenario). Humanitarian aid is the pillar of this economy,

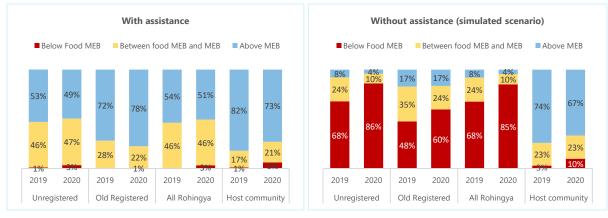


Figure 7: Economic vulnerability levels with and without assistance

¹⁰ Consolidated Approach to Reporting Indicators of Food Security (CARI)- 2015. Technical Guidance Note. WFP

¹¹ Households economic capacity to meet essential needs (ECMEN) was determined by estimating the proportion of households having consumption above and below the minimum expenditure basket (MEB). MEB is what a household requires in order to meet their essential needs, on a regular or seasonal basis, and its average cost

without it, almost all households would not be able to meet their basic consumption needs. Increased economic vulnerability was also evident in the host community, where 33 percent of households had consumption below the MEB compared to 26 percent in 2019. The increase may have been driven by temporary employment or income losses experienced during the lockdown, the effects of which continue to be felt during the economic recovery phase.

Livelihoods and self-reliance

Labor force participation¹² in the camps increased, though characterized by significantly higher unemployment compared to 2019 rates¹³. One in every five people in the camps were engaged in some form of income earning activity at the time of the survey¹⁴. Forty-two percent of the Rohingya labor force aged 15-65 years were not engaged in any income earning activity, while for the host

| | | Rohingya | Hosts |
|----------------------------|--------------|----------|-------|
| Labour force participation | | 38% | 42% |
| % of labour | Employment | 58% | 86% |
| force | Unemployment | 42% | 14% |
| % of overall | Employment | 22% | 36% |
| population | Unemployment | 16% | 6% |

Table 2: Labour force indicators in 2020

community, this was 14 percent (Table 2). However, compared to 2019, unemployment in both Rohingya and host communities had increased.

Main income generating activities: One third of income sources in camps came from negative coping activities such as selling assistance or help from friends and family. For the non-negative coping income sources (work-based), the bulk of it came from wage income/salaries followed by non-agriculture trade and services (Figure 8). In contrast, 88 percent of income sources in the host community were work-based with wage or salaried income accounting for half of this, farming, livestock rearing and fishing for one fifth and trade another fifth.

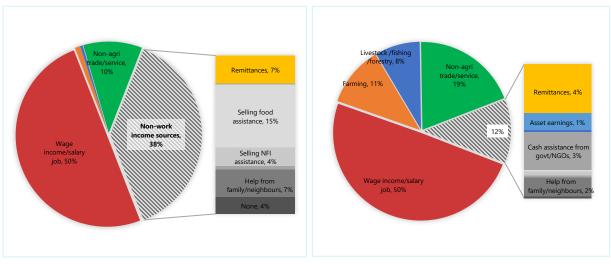


Figure 8: Types of income sources reported in Rohingya and host communities

Rohingya households reported earning BDT 3,404 per month on average. Within camps, registered refugees reported twice the income levels at BDT 6,959 per month. Host community households reported more than three times higher average household income at BDT 13,662 per month. Rohingya communities earned less than host communities due to the combined effect of lower days of work available and lower wage rates (Table 3).

¹² Labour force participation is defined as the share of the population aged 15 years or older that is working (employed) or actively looking for work (unemployed).
¹³ World Bank 2019. Insights from the labor module on work and wages in Cox's Bazar. Overall labour force participation in camps was 33 percent and in hosts in the Ukhia-Teknaf region was 42 percent.

¹⁴ Labor force indicators were collected based on status of engagement in the 7 days prior to the survey. It is important to note that activities in camps are assigned on a rotational basis. The statistics present the maximum level of active participation that the camp economy and regulations allow at any given point in time.

| | Rohingya | | | Host Communities | | |
|--|-----------------------|---------------------|---------------------------|--------------------------|---------------------|------------------------------|
| | Days worked/ month | Daily rate (BDT) | Monthly earnings (BDT) | Days worked/ month | Daily rate (BDT) | Monthly earnings (BDT) |
| Daily labour | 9 | 350 | 2,770 | 19 | 450 | 8,610 |
| Monthly salaried work | 26 | - | 5,610 | 26 | - | 14,611 |
| Self-employed traders & service workers | 19 | - | 3,000 | 24 | - | 12,000 |

Table 3: Days worked, wage rates and monthly earnings for different types of main income generating activities

Livelihoods and vulnerability levels: Overall household vulnerability was significantly correlated with household income and the nature of the main income activity. Eighty-six percent of Rohingya households who were highly vulnerable had the lowest average household income levels (BDT 2,736), while the same for highly vulnerable host community households (11 percent) is BDT 6,822. The patterns based on types of income activity highlight the important differences between the two groups: high vulnerability is associated with higher share of daily laborers in both economies, but income activities associated with low vulnerability are different. Low vulnerability is associated with monthly salaried jobs in camps, whereas in host communities, it is associated with self-employed work.

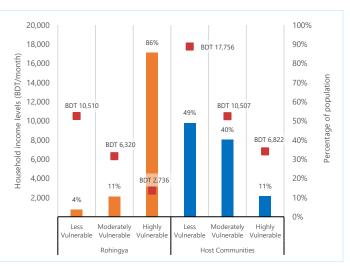


Figure 9: Household incomes levels for different vulnerability categories

Protection

Protection concerns increased in the refugee camps. About 33 percent of refugees reported experiencing insecurity incidents in 2020, compared to 15 percent in 2019. In the host community, episodes of insecurity appeared to have reduced: only 13 percent of households reporting having directly or indirectly faced insecurities, compared to 29 percent the previous year. This could be due to less movement during the lockdowns.

Rohingya households reported high levels of insecurity related to limitations on movement, discrimination, harassment, and physical violence pervading in camps. Theft, robbery, killing/murders continued to be major concerns across the entire locality. Even though these major concerns reported by Rohingya and host communities were similar, the extent of insecurity faced by groups were highly localized: more severe reports of killings and abductions were reported in Teknaf-based camps and host communities, which have been previously flagged for security threats.

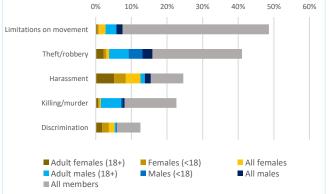


Figure 10: Major insecurities reported in camps and victims

There were persistent gender dimensions observable in the

most common insecurities reported. Harassment and discrimination were mainly faced by women while men were reported as being relatively more exposed to killings, murder, theft and robbery (Figure 10).

Multi-dimensional deprivation (MDDI)

The MDDI is a measure of poverty, at household or individual level, that complement monetary poverty measures by weighing levels of deprivations on essential human development outcomes. For REVA purposes, key dimensions that have been profiled as critical include education, health, food access, income and living standards¹⁵. Findings indicated that about 60 percent of Rohingya households were multi-dimensionally poor, an increase from 2019 (47 percent). For the host community, multidimensional poverty increased from 23 percent in 2019 to 33 percent.

The main drivers of growing multi-dimensional deprivation were constraints in education, health, food access and income opportunities: all dimensions that were substantially affected by the Covid-19 pandemic and containment measures put in place by the Government.

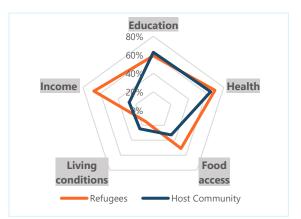


Figure 11: Multidimensional deprivation (% of households

Income deprivation is highest in the Rohingya population, with close to 68 percent of households deprived, largely due to the scarcity of income-earning opportunities and restrictions that continue to impede free participation in the labour market. Women-led households in the Rohingya camps show the highest deprivation in the income dimension, at 79 percent, reflecting the challenges they face in participating in self-reliance activities.

Food access deprivation was faced by about 51 percent of the refugee community, mainly related to desire for other food items not provided as part of the assistance package, coupled with their limited purchasing power.

Health remained the dimension of relatively highest deprivation in the host community and in the camps. This finding is corroborated by the increased indebtedness primarily to finance healthcare expenses, and more so for the host community.

Educational deprivation was highest in host community (63 percent), while being 59 percent in the Rohingya community. In addition to the school closure due to the pandemic, 28 percent of school-age children in the camps and 18 percent in the host community did not attend school due to non-COVID 19 related reasons. These reasons include family and social restrictions especially for Rohingya girls, and the need for them to work in the case of the boys.

Assistance

In the host community, scale-up of humanitarian assistance was observed in 2020, in response to livelihood disruptions from the pandemic induced lockdowns. Three out of four host community households reported receiving some form of assistance in 2020, with a notable increase in the humanitarian actors' footprints. Sixty-one percent of households reported receiving assistance from non-government programmes and a quarter received assistance from vulnerable group development and general relief for Covid-19 programmes by government.

In the refugee camps, assistance delivery had to be significantly altered and scaled down to minimize threats of Covid-19 transmissions, with only services deemed essential allowed to continue in the camps.

Assistance sale: The proportion of Rohingya households selling a part of their assistance reduced from 53 percent in 2019 to 32 percent in 2020. Programmatic interventions introduced by WFP such as rice capping, introduction of Fresh Food Corners in retail outlets, sensitization efforts and transition of more beneficiaries to e-voucher modality all played a critical role in reducing humanitarian assistance sale. Beneficiaries of fresh food corners¹⁶ demonstrated significantly better food consumption outcomes. Most households that sold part of their food assistance did it to buy other food items of their preference not included as part of the

¹⁵ A set of 14 indicators were used to examine interaction of these dimensions on household wellbeing.

¹⁶ Households headed by elders, children or females, single headed households with children and households with members with disabilities are

entitled to an additional e-voucher value of USD 3 redeemable in the Fresh Food Corners (FFC). By November 2020, the programme was scaling up FFC coverage. In REVA 4, 14 percent of households were FFC beneficiaries.

assistance package. Other reasons for selling food assistance included the need to carter for transport back home, to buy non-food items (clothes, shoes, mosquito net, light bulbs, children toys and cooking utensils) or to cover health expenses. Around half of all households selling assistance sold it to unknown middlemen they met near the outlet or locality; one third sold it to neighbours or relatives and 17 percent sold it to traders in camp markets. Less than 1 percent sold the assistance in markets outside the camps. The food item most frequently sold was oil, followed by rice, pulses and dried fish (Figure 12). Rice capping has reduced the sale of rice both in terms of the number of households selling rice and the proportion of the ration being sold. Vegetables and fish of their

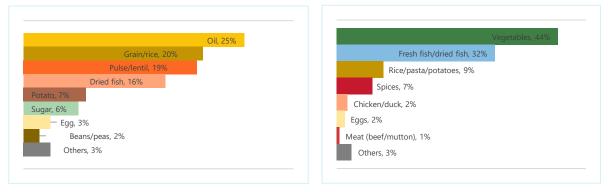


Figure 12: Proportion of food entitlement sold

Figure 13: Items bought after selling food entitlements

preference are the food items most frequently bought by households who reported selling assistance (Figure 13).

Preference of assistance modality: About 5 out of 10 refugee households indicated preference for a hybrid of e-vouchers and cash assistance, while a further 4 out of 10 households preferred e-vouchers assistance only. Households with higher income levels were significantly more likely to prefer e-vouchers, whereas those with lower income preferred e-vouchers and cash. The preference for the hybrid modality significantly correlates with the absence of active working members in households and lack of enrolment in self-reliance programmes in the preceding 30 days, indicating that those unable to access entitlements through work prefer receiving cash as part of their assistance.

Satisfaction and self-reported priority needs

Satisfaction with services: Trends in satisfaction levels highlighted successes in cooking fuel provision (63 percent of households highly satisfied) and information dissemination initiatives in aid delivery (52 percent highly satisfied). Increased dissatisfaction in food assistance (25 percent highly satisfied compared to 39 percent in 2019) was possibly driven by the shift to commodity voucher on account of COVID-19. For livelihoods, higher levels of dissatisfaction reported (55 percent highly dissatisfied) among refugees highlight the effects of restriction on income earning opportunities, which continue to limit their free participation in the labour market.

Priority needs: Reports of priority needs reflected the deprivations observed in both populations. Food was the most cited priority (by 88 percent of refugees and 57 percent of host community). This was followed by need for livelihood opportunities (66 percent of refugees and 48 percent of host community). Needs expressed for food and livelihoods in camps were easily explained by the limitations on income-generating activities and desire to have more purchasing power.

Compared to Rohingya households, the priority needs in host community households, by virtue of having access to markets, were understandably less skewed towards livelihoods and food, but more distributed across needs for other basic services which were available through humanitarian assistance in camps but not as easily affordable or accessible in the host community economy, like water, health, sanitation and hygiene, shelter among others.

Recommendations

Food assistance (camps and host community)

- The level of and growing trend in overall vulnerability despite the food and basic needs coverage provided by the humanitarian response confirms the criticality of continuing the provision of blanket food assistance and consider adjusting them to evolving needs.
- The increase in overall vulnerability is a result of the double crisis: refugee crisis and the Covid-19 induced shock. This had significant impact on both refugees and host communities' lives and livelihoods, through contraction of aid activities in camps and livelihood activities in the host community. To minimize such effects in future, especially in camps, it's important to make the food assistance system shock responsive, by allowing flexibility in varying the transfer amounts and type of assistance in the event of shocks. Such a modality would cushion populations from experiencing severe food insecurity outcomes and vulnerability. For the host community, there is need to strengthen government or humanitarian capacity to scale up assistance provision especially for the most vulnerable households.
- Almost half of the Rohingya refugee caseload and a third of the host community reported unacceptable food consumption outcomes. Food is the main reason why Rohingya households sell assistance and contract debts, and remains the main priority need for Rohingya and host communities. For refugees, the fact that even with current level of assistance, nearly half of them still consume below the MEB underscores the need to revisit the current value of assistance, to ensure MEB of the beneficiaries are met.
- Efforts to optimize the food assistance provided should continue by considering household food preferences in the food basket and available fresh food items in e-voucher outlets, facilitate the e-voucher redemption in different shops and at multiple times and strengthen awareness and sensitization of adequate feeding practices. Support households to cover non-food needs is essential to avoid the sale of assistance to cover these non-food needs.
- There is need to step up social behaviour change communication (SBCC) and counselling efforts to promote consumption of more animal protein source, fruits and other iron rich foods which are key to improving household diet diversity and nutrition outcomes.
- Fresh food corners have proven to be successful in improving food consumption outcomes, particularly in increased intake of micronutrients. Scale up of this initiative will:
 - ensure proper food consumption from assistance;
 - negate the need for selling assistance, which is currently largely done to obtain fresh foods from local markets; and
 - systematically integrate a larger share of local smallholder farmers into the aid ecosystem, creating livelihoods for host communities.
- Explore the feasibility of hybrid modality of assistance, combining e-voucher and cash, in line with Rohingya preferences, especially by vulnerable households with no active working members. The cash would allow households to cover needs without engaging in negative coping strategies, such as selling assistance.

Self-reliance and livelihood activities

- The impacts of lockdowns, particularly on day laborers, constituting most of the labor force, highlights the instability and informality of the local economies. It is important to scale up self-reliance (camp) and livelihoods (host) activities with a focus on resilience and skill building for participants. More so, scale up of more female-friendly self-reliance activities in addition to sensitization on opportunities available for women can help bridge pronounced gender gaps in labour market participation, which is more skewed in favour of men.
- Current support for self-reliance and livelihood activities ought to have better targeting criteria and consider the diversity of the camp and host community populations in terms of their different capabilities. Such programmes should have a lens on childcare needs of single parents, disabled persons- who incur higher opportunity cost to participate in such programs relative to non-disabled, and effects of trauma experienced by most people. All these are exogenous factors that could impede effective participation in self-reliance and livelihood programmes.

School feeding

 Promote school attendance through awareness, sensitization and school feeding programmes. Special attention should be given to Rohingya girls.

Community involvement

Efforts at involving the voices of community members in certain decision-making processes ought to also continue or stepped up. The model rolled out by WFP of 'Communication with Communities (CwCs)' has proved effective in shaping community's perception around humanitarian services. Engaging community members has been reported as a powerful point of leverage within a community system, changing the "structure of information flows," resulting in new direct feedback mechanisms created between residents and humanitarian actors and government.

Protection and social cohesion

Insecurity related incidents appear to have gone up in camps in 2020 compared to 2019. This calls for stepping up of protection measures to ensure the camp environment remains safe for everyone. Alongside this is the need to foster more community inclusive programs that drives towards attaining social harmony and cohesion among communities.

Monitoring

- Monitoring the situation in camps and host community continues to be crucial to ensure the assistance provided cover the essential needs of these populations. As COVID-19 and lockdown impact fade away and humanitarian operations progressively resume, a certain improvement is expected in camps and host community. However, with their coping capacity diminished and high dependency on assistance or casual labor, the vulnerability of these communities to future shocks will continue to remain high, more so as the monsoon season approaches. While restrictions on livelihoods persist for Rohingya community, close monitoring of how their food security conditions unfold in the coming months is of necessity.
- As relocations to Bhasan Char island also take shape, it's important to closely monitor any potential disruptions on refugees' livelihoods and continued access to essential humanitarian access, both in the camps in Cox's Bazar and in the Island.

Other sectors

- Improve access to water and sanitation by increasing the number of water points and improved sanitation facilities while ensuring their maintenance in function and conditions as well as population awareness of best hygiene practices.
- Promote health prevention and strengthen health treatment public capacity and coverage.
- Complementary interventions: while it's beyond the scope of this study to undertake causal relationship between food security, water, sanitation and health services provision, there is need to understand if the challenges in water, sanitation and health services represent critical barriers to improving food security.



For more information, please contact:

WFP Representative & Country Director: Richard Ragan
WFP Senior Emergency Coordinator: Sheila Grudem
WFP Deputy Emergency Coordinator (Programme): Kojiro Nakai
WFP VAM Officer, Cox's Bazar: Geophrey Sikei
Food Security Sector, Cox's Bazar, Coordinator: Martina Iannizzotto

<u>Analysis Team:</u> Afsana Iffat Khan, Mahathir Sarker, Geophrey Sikei and Susana Moreno (WFP VAM Cox's Bazar<u>)</u>

