

NRC Sudan | Um Rakuba Refugee Camp Vulnerability Analysis | September, 2021

Introduction Vulnerability and Essential Needs

As part of an exercise to improve the Multipurpose Cash distributions for camp residents in Um Rakuba camp, NRC conducted a vulnerable and essential needs assessment using both quantitative and qualitative analytical tools. NRC staff conducted 453 household surveys measuring food security, coping strategies, perceived concerns, and preferred assistance. In addition, NRC held 5 Focus Groups discussions inquiring about Household Priorities, definition of Essential Needs, and their view of the current assistance being provided. The objective of this data collection is to improve the understanding of the vulnerability levels of the population, and create a localized expenditure basket driven by community engagement.

Ethiopia



Key Statistics

89% stated they had a serious problem with

Food, such as enough food, good enough food, or

they are not able to cook food.

Sudan
Image: Comparison of the compari

Refugees

5.338 Shelters

August Figures, NRC

below represent NRC in September 96% stated they had a serous concern with earning an income 95% Households had to sell household

11.437 Households

August Figures, UNHCR

95% Households had to sell household assets or other items to buy food in the last 30 days.

83% are dependent on Humanitarian Assistance for their primary source of income



Analysis | Food Security

NRC's vulnerability survey concentrated on the fundamental food security metrics FCS and rCSI. These results were also compared with the focus group discussions to better understand and add context to the statistical findings. *Graph 1* and *Graph 2* highlight that the majority of the surveyed population maintain *Acceptable* food security scores. However, Dietary Diversity is an underlying issue, with HHs relying on less preferred food or basic in-kind food assistance. Interestingly, this level of food security comes at a cost with 95% of those surveyed reported they had to sell HH assets or humanitarian aid to purchase food. Even with high levels of FCS found in the quantitative metrics, all FGDs highlighted the inconsistent and insufficient access to food in meeting their needs, Access to food is also highlighted in the perception of concern questions (HESPER) and is noted as the biggest concern and a priority for the majority of the population. Additional metrics, such as expenditure and coping strategies, explain how camp residents are meeting their food needs through a portfolio of methods including in-kind, cash, borrowing, selling, and community support. The question is how long can camp residents absorb the costs to maintain the current state of food security and how can humanitarian actors adjust to ensure the assistance is appropriate and efficient?



Graph 1: Food Consumption Score

As part of NRC's baseline assessment , Food Consumption was assessed and scored according to WFP guidance. *Food Consumption Scoring* (FCS) measures dietary diversity and food frequency through a 7 day recall and in many contexts can be used as a proxy vulnerability indicator. There are 3 categories for FCS including Poor (<28); Borderline (28-57); and acceptable (>54). As *Graph 1* indicates **94%** of those surveyed have **Acceptable** food consumption scores.

The *Coping Strategies Index* serves as an additional metric which examines how households cope with their current situation. The Reduced CSI scores ask interviewees to recall how many times in the last 7 days they had to resort to certain strategies. The metric is most useful in relative terms and used to track progress or declining levels of resilience. *Graph 2* highlights the average days the surveyed population had to resort to coping strategies related to eating less preferred food; limiting portions; reducing meals; restricting meals for adults so small children can eat; and borrowing food/money.

Easting Less Preferred Food Restrict Adult Consumption Borrow Image: Second Second

Graph 2: Reduced Coping Strategies (Average Days)

99% of Surveyed Households indicated that the Primary Household Expenditure is **Food.**

40% of Surveyed Households indicated that they had to borrow money for FOOD at least 1 day in the last 7 days.



Households had to sell household assets or other items to buy **FOOD** in the last 30 days.



Analysis | HESPER

Perceived needs is a perception-based indicator used to understand and analyse how a population perceives and prioritizes unmet needs. The indicator measures whether households believe that they have a "serious problem" with respect to a variety of needs. Perceived needs are understood as needs that are felt or expressed by people themselves and indicate gaps that they are experiencing. Mostly used in emergency settings, the indicator used here is based on the Humanitarian Emergency Settings Perceived Needs Scale (HESPER). NRC asked 20 separate questions regarding perceived needs for specific sectors. Respondents answered either *Yes, No, or I do not Know* to these questions. The sectors where some respondents responded "I do not Know" are related to Unaccompanied Persons (7%) and Education (7%). A full description of HESPER Questions and the Breakdown by Zone can be found in *Appendix 1: HESPER Complete*.

Graph 4 represents the percentage of the surveyed population's perceived concerns. The graphing highlights that Um Rakuba residents are still experiencing significant gaps in meeting basic needs. Even as food security metrics such as rCSI and FCS are acceptable the majority (89%) of those surveyed felt that access to food was a *serious concern*. This has been verified during FGDs and Key Informant Interviews. Interestingly access to *Clothes and Bedding* was also seen as serous concern for many as the majority of expenditure is focused on food and clothing is not significantly distributed in-kind. In addition, access to toilets were also noted (73%) as a serious concern and highlights the state of the camp's infrastructure.



Graph 5: HESPER Priority Concern

63% stated that out of their perceived serious concerns, Access to Food is the highest priority.



Yes No I Do Not Know

89% stated they had a serious problem with Food, such as

enough food, good enough food, or they are not able to cook food.

The HESPER also measures categories such as protection metrics such as *Security, Drug Abuse and GBV*. Less than 1% of the surveyed population indicated these were serious concerns. This of course does not mean that these issues are not present or an issue to address in Um Rakuba camp, but it does reflect the perceived priorities and can be used as a start for evidence-based conversations and how to collect information on these sensitive topics.

Again, *Graph 3* and *Graph 4* simply highlight *perceived* priorities and gaps in assistance and should be used as a guide in prioritizing activities. Agencies should also take note of the further breakdown of data with regards to Gender and Camp location. Specific cross analysis is presented in the following slides.



15% stated that their priority serious concern is earning an income.

73% of the surveyed population sited that they have a serious concern with safely and easily accessing a clean toilet



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Analysis | HESPER by Zones

Graph 6 showcases both consistencies and disparities for HESPER findings by Zones. The bar graph presents percentage of *yes* answers to the HESPER question for the specific category. It is important to note that Um Rakuba camp is geographically delineated into 4 Zones that have been organized and developed over time. These zones are unique in their organization and their levels of support which is highlighted in the HESPER findings. For example, the ability to earn a income and access to food is a seen by the vast majority of the camp as a serious concern. However, issues such as Shelter, Aid, and WASH vary between zones.

HESPER does not go into the causes of these serious concerns, but it does put a spotlight on certain issues that camp management and relevant agencies can start exploring. For example: Why do 60% of Zone 1 residents find humanitarian assistance a serious a concern, compared to 2% in Zone 2? Why do 96% of the population in Zone 2 have a serious concern with WASH compared to 60% in Zone 4? Regarding Shelter, it seems this is greater area of concern for Zone 2 and 4. Does this mean there are coverage gaps? For Education, why is there more of concern in Zone 2, is this simply a reflection of HH demographics such as more children, or are there simply less education services in that zone. And for Protection agencies, questions should be around why are unaccompanied persons more of a serious concern in Zone 4 (29%).

HESPER metrics point to issues, but again, does not offer insight into causality. The metric can assist in refining future assessments and guide agencies in the decisions on geographical targeting and prioritization.



Zone 1 Zone 2 Zone 3 Zone 4

Analysis | Gender

When examining the key food security indicator rCSI and FCS there was minimal contrast between male/female headed households and also male/female respondents. In addition, the HESPER scoring also showcased minimal variance between male and female respondents.

However, within the HESPER survey, there are 2 themes that specifically segment gender: *Hygiene* and *Health Care*. This segmentation led to interesting results. As *Graph 7* highlights, men identified greater concerns for their health care than women. Women, on the other hand, expressed significantly more concerns around hygiene facilities.



Graph 7: HESPER Gendered Categories



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Analysis | Focus Group Discussions

Even as certain vulnerability indicators within the HH survey showcase appropriate levels, gaps in humanitarian aid delivery is highlighted in both the complimentary indicators in household level surveys and the main findings from FGDs.

As part of identifying the essential needs of camp residents, NRC conducted 5 focus group discussions included youth, female and male groups. The priority of these groups was to define specific essential needs items and to understand the gaps and concerns with current humanitarian assistance programming. Regarding the questions on humanitarian aid, the majority consensus was that camp residents are unsatisfied with the humanitarian assistance provided. The discussion was specifically around food and NFI distributions. Participants stated that the in-kind food support provided was inconsistent and insufficient and the NFI provision was missing key items such as cooking fuel and communication costs. Moreover, according to the FGDs, the cash programming being carried out at the time of the FGD was not providing a sufficient cash transfer value to buy basic items and not sensitive to inflation rates. The majority of the FGDs mentioned that agencies were not taking into account high market prices when determining cash transfer values. In addition, many groups stated that many in the community were selling in-kind humanitarian assistance in order to buy food despite there being multiple partners providing food assistance. This feedback supports the quantitative data presented earlier from the HH surveys highlighting that 85% had sold in-kind assistance or household items to buy food. Food was the primary concern in both analytical activities as 87% stated that food was the primary expenditure and 98% stated that the current MPCA being distributed was not sufficient for HHs to meet basic needs.

It is also important to note that both Shelter and Health care were identified as priorities in the FGDs. These support categories were not highly prioritized in comparison to Food, Income and WASH in the HH surveys; however, there are certainly gaps in the coverage and quality of programming that should be discussed.

Analysis | Conversation

When analysing both the HH survey and FGDs, the clear theme that emerges is that the current humanitarian response needs to adjust and improve as camp residents are not being provided with the appropriate support needed to meet basic needs. Core vulnerability indicators are positive, however, complimentary data points to concerning themes. Camp residents have had to sell HH assets and humanitarian assistance to meet their food and shelter needs. This points to an ineffective mechanism of assistance delivery that needs to be reviewed holistically. Although Shelter, WASH and Health Care all were present in the discussions, food security was the clear primary concern for the vast majority of the population. The analysis presented should be a starting point to more sector-focused conversations on improving service delivery and coordination.



Camp Residents are clearly unsatisfied with the quality of humanitarian assistance being provided. FGDs and HH surveys point to serious concerns in accessing basic goods such as Food and basic services such as Latrines. When asked how they would prefer to receive humanitarian assistance, 94% of the surveyed population stated they prefer mixed mechanisms (i.e.,cash and in-kind) of support to mitigate dynamic inflation and support in meeting localized needs.

Methodology

The analysis reflects data collected from 453 household surveys covering residents in Um Rakuba camp and 5 Focus Group Discussions held within the camp with camp residents. The HH survey maintains a 95% confidence level and used a proportional targeting method that took into account populations by zone. The data collection took place from August 17th -September 1st, 2021. With Focus Group Discussions taking place throughout August . The Zonal Population Sampled was: Zone 1 (169); Zone 2 (47); Zone 3 (89); Zone 4 (148). It is important to note that the majority of the population practice religious fasting, so this must be taken into account when asking FCS and rCSI recall questions.

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ANNEX 1 | HESPER Complete Analysis | September 2021

Table 1 identifies the entire set of HESPER questions used in the recent Vulnerability assessment in Um Rakuba camp. The percentage represents "**yes**" responses to the questions regarding perceived serious concerns. For more details and analysis, please refer to the Um Rakuba Vulnerability Analysis associated with this annex. It is important to note that this metric indicates *perceived* serous concerns and is limited in its utility when agencies are exploring causality and underlying issues. This analysis should serve as a starting point for more effective, evidence based conversations and coordination.

Table 1

Table 1						
Category	Question	Zone 1	Zone 2	Zone 3	Zone 4	Total
Food	Do you have a serious problem with food? For example, because you do not have enough food, or good enough food, or because you are not able to cook food.	92%	91%	75%	94%	89%
Livelihoods	Do you have a serious problem because you do not have enough income, money or resources to live?	99%	94%	93%	96%	96%
WASH-Water	Do you have serious problems because you do not have enough water that is safe for drinking or cooking?	34%	60%	62%	28%	40%
WASH-Toilets	Do you have a serious problem because you do not have easy and safe access to a clean toilet?	71%	96%	84%	60%	73%
Humanitarian Assistance	Do you have a serious problem because of inadequate aid? This means sufficient amount of aid or that aid delivery and communication is dysfunctional. For example, because you do not have fair access to the aid that is available, or because aid agencies are working on their own without involvement from people in your community.	62%	9%	2%	36%	36%
Education	Do you have a serious problem because your children are not in school, or are not getting a good enough education?	12%	28%	0%	9%	10%
Shelter	Do you have a serious problem because you do not have a suitable place to live in?	9%	38%	3%	46%	23%
NFI - Clothing	Do you have a serious problem because you do not have enough, or good enough, clothes, shoes, bedding or blankets	93%	91%	43%	78%	78%
Information	Do you have a serious problem because you do not have enough information? For example, because you do not have enough information about the aid that is available; or because you do not have enough information about what is happening in your home country or home town.	10%	45%	22%	2%	13%
Care	Do you have a serious problem because in your situation it is difficult to care for family members who live with you? For example, young children in your family, or family members who are elderly, physically or mentally ill, or disabled.	6%	4%	6%	6%	6%
Heatlh	Do you have a serious problem with your physical health? For example, because you have a physical illness, injury or disability.	11%	13%	0%	14%	10%
Health - Men	For men: Do you have a serious problem because you are not able to get adequate health care for yourself? For example, treatment or medicines.	21%	40%	20%	40%	55%
Health - Women	For women : Do you have a serious problem because you are not able to get adequate health care for yourself? For example, treatment or medicines, or health care during pregnancy or childbirth	18%	15%	12%	26%	41%
WASH - Men	For men: Do you have a serious problem because in your situation it is difficult to keep clean? For example, because you do not have enough soap, water or a suitable place to wash.	16%	28%	27%	36%	49%
WASH -Women	For women: Do you have a serious problem because in your situation it is difficult to keep clean? For example, because you do not have enough soap, sanitary materials, water or a suitable place to wash.	18%	28%	29%	33%	56%
Security	Do you have a serious problem because you or your family are not safe or protected where you live now? For example, because of conflict, violence or crime in your community, city or village.	0%	0%	0%	1%	0%
GBV	Is there a serious problem for women in your community because of physical or sexual violence towards them, either in the community or in their homes?	0%	0%	0%	1%	0%
Security - Drugs	Is there a serious problem in your community because people drink a lot of alcohol, or use harmful drugs?	0%	0%	0%	1%	0%
Care - Unaccompanied	Is there a serious problem in your community because there is not enough care for people who are on their own? For example, care for unaccompanied children, widows or elderly people, or unaccompanied people who have a physical or mental illness, or disability.	17%	0%	3%	29%	17%