BANGLADESH

Rohingya refugee response: Information and analysis ecosystem

ACAPS - NPM ANALYSIS HUB
COX'S BAZAR - BANGLADESH

Thematic report
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OVERVIEW

Despite an abundance of information and the large presence of assessment actors in Cox's Bazar, it remains challenging to develop a strong overall understanding of Rohingya refugee needs, as well as how those needs interact with each other and within the complex context of the Rohingya refugee response. Since the 2017 influx, many actors have contributed to the hundreds of assessments done and have generated analysis to inform their programming decisions, increase coordination, and influence decision makers. Except during the imposition of COVID-19 restrictions, the Rohingya refugee camps are highly accessible compared with other large and protracted emergencies, making it a conducive environment for primary data collection exercises and resulting in an overassessed population.

The Rohingya refugee response relies mainly on quantitative data collection to track the number of facilities and incidents reported and to measure programme achievements. Still, quantitative data alone cannot tell the whole story because it does not fully capture the quality of experience. Although baseline needs and access to services are known to humanitarian responders, the drivers and severity of needs, the extent to which people rely on coping mechanisms (including negative ones), the degree to which people have adapted, and their overall vulnerability are not well understood. Perceptions, behaviours, social dynamics, and Rohingya culture are also poorly understood, affecting the ability of the response to identify effective and appropriate solutions to problems and to design programming approaches centred on community engagement and empowerment.

The sudden loss of access to the camps due to COVID-19 containment and risk mitigation measures shed light on major gaps in the information and analysis landscape while reinforcing the pressing need to fill these gaps. Innovations in data collection at the height of the pandemic have shown new ways in which these gaps can be filled to accurately provide an overall picture of the complex reality in the Rohingya refugee response.

About this report

Aim: This report attempts a comprehensive analysis and understanding of the current information and analysis ecosystem in the Rohingya response. It outlines ways forward, recommendations in building upon lessons learnt, and good practices during the pandemic. It also highlights critical information needs and gaps in the response and explores the impacts of the pandemic on data collection.

Method: ACAPS reviewed and collated over 300 products published between August 2017 and October 2021. The metadata base includes assessments, academic research, situation reports, humanitarian research, and other information sources. ACAPS also conducted an online survey targeted at humanitarian responders to the Rohingya refugee situation. The survey was conducted in three rounds of interviews with humanitarian stakeholders based in Cox's Bazar between December 2019 and January 2021 and received 46 responses. (Details about the interviews are available in the full methodology on page 12)

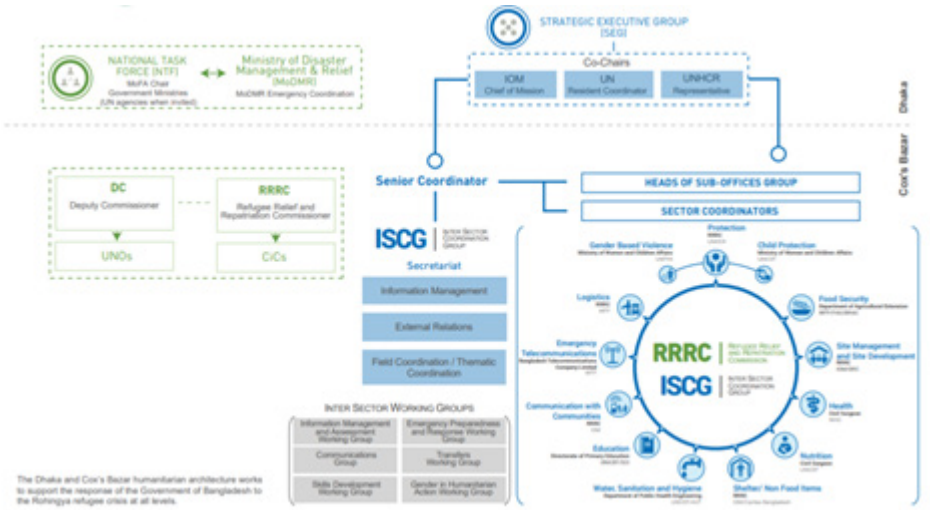
At the time of writing, ISCG had already hired an independent consultant to look at streamlining coordination mechanisms within the response, including IM. This report has been shared with ISCG and its findings will be taken into consideration.

TABLE OF CONTENTS

COORDINATION BODIES AND INFORMATION PRODUCERS

Understanding the information and analysis ecosystem in the Rohingya refugee response entails understanding the response architecture and how information is set up around it.

Figure 1. Coordination mechanisms in Bangladesh for the Rohingya humanitarian response.



Source: ISCG 11/05/2021, see full image on page 13.

Coordination bodies, such as the Inter Sector Coordination Group (ISCG), sectors, and working groups, are key facilitators of joint assessment and analysis exercises. The ISCG is the central coordination body of the response; its mandate includes response-wide information management (IM) and analysis, external relations, sector coordination/ thematic coordination, the prevention of sexual exploitation and abuse, and host community engagement. The home page of HumanitarianResponse.info is available here.

The ISCG leads the **Information Management and Assessments Working Group (IMAWG)**. All IM, assessment, and analysis results are coordinated and disseminated through the IMAWG. The group works predominantly with IM leads from each sector to develop and maintain response-wide 4Ws and standardise and disseminate baseline infrastructure and spatial data, demographic and population data, and datasets with the contact details of camp authorities. It also registers assessments and collects data about the development and adherence to the annual Joint Response Plan (JRP), including monitoring indicators and top-level financial information. This information is shared through coordination meetings, their mailing list, and the Humanitarian Data Exchange.

The IMAWG also coordinates the annual interagency Joint Multi-Sector Needs Assessment (J-MSNA) through the **J-MSNA technical working group**, which comprises the IMAWG Coordinator and technical representatives from UNHCR, REACH, WFP's Vulnerability and Analysis Mapping (VAM) unit, IOM's Needs and Population Monitoring (NPM) unit, and the ACAPS-NPM Analysis Hub. The working group aims to ensure that the J-MSNA provides a comprehensive analysis of the needs, gaps, impacts, and outcomes of the response to inform strategic and operational decision-making. The J-MSNA is one of the primary sources of information to feed into the annual JRP.

There are ten active country-level sectors and eight official subsectors and working groups. These coordination bodies come under the leadership of the ISCG, heads of suboffices, and the **Strategic Executive Group**. Their purpose is to support service delivery by providing a platform for cooperation and the sharing of technical and operational support between agencies, mitigating the risk of duplication, and ensuring adherence to common standards. The sectors also coordinate the development of sectoral plans, report funding needs to ISCG, monitor and report on sector strategies, and advocate on behalf of sector partners and the affected population.

Most of these coordination bodies have a full-time IM officer who facilitates joint assessments, collects 4Ws and other response-wide operation information, and develops strategy and guidance documents. **The Gender in Humanitarian Action (GiHA) working group** provides technical support for agencies and sectors to collect gender-disaggregated data and coordinates large gender analysis.

Information is shared by these coordination bodies online and through coordination meetings; it is disseminated through mailing lists and stored in shared folders accessible to partners operating in the Rohingya refugee response.

UN agencies: there is a large UN presence in Cox's Bazar, and all sectors are co-led by a UN agency. According to ACAPS' meta-dataset, IOM and UNHCR have produced almost half of the publicly available information on the response. Most of these are joint products with various partners and are often published on behalf of the sectors. WFP, IOM, and UNHCR all have large, permanent research and data collection teams.

- UNHCR's registration data unit is responsible for conducting joint family counting exercises with the Government of Bangladesh and releases monthly updates on the refugee population. These figures are used across the response.
- IOM's NPM unit tracks daily incidents in the camps, supports the mapping of infrastructure, and uses spatial data collection through drone imagery. NPM regularly and systematically captures, processes, and disseminates information on the needs and vulnerabilities of Rohingya refugees and the host community. It partners and cooperates with various sectors and the ISCG. NPM offers capacities for both quantitative and qualitative data collection, analysis, and reporting and has an extensive team of female and male Rohingya and Bangladeshi enumerators collecting data both in the camps and the host community. Its services can be sought by any humanitarian responder who wants to conduct a large data collection exercise. NPM also hosts the ACAPS-NPM Analysis Hub.
- **The VAM unit** within WFP provides temporary and long-term technical assistance in food security analysis. In Cox's Bazar, VAM produces the annual Refugee Influx Emergency Vulnerability Assessment and other assessments, such as market monitoring, to support the response's understanding of food security. All reports from VAM can be found here, and training and guidance documents on food security assessments can be found here.

International, national, and local NGOs commonly conduct their own assessments and produce analysis using their monitoring and evaluation units, either in line with their programmes or for more advocacy pieces. They also conduct joint assessments and thematic research with other NGOs and within the coordination bodies that they are a part of. The NGO platform coordinates information-sharing and joint advocacy between NGOs. The Cox's Bazar CSO-NGO Forum focuses on supporting and coordinating civil society organisations, as well as local and national NGOs working on the Rohingya response, with a focus on host community and localisation.

Local and national NGOs are very active in the response and often partner with UN agencies to collect primary data as they have a broader reach inside the camps. However, when it comes to leading assessments, conducting research, and producing analysis, they are often underrepresented in the publicly available humanitarian information fora written in English.

The **Bangladesh Red Crescent Society (BDRCS) and the International Federation of the Red Cross and Red Crescent Societies (IFRC)** have an active IM team. Operational IM provides situational awareness of the environment and needs analysis and supports coordination. The processes include setting up IM workflows and systems in support of each sector. The IFRC/BDRCS IM team comprises two members, one from IFRC and one from BDRCS and RCRC volunteers in the camps. Publicly available information about the RCRC programmes can be found on the IFRC Go platform.

External actors (think tanks, universities, independent activist groups, and research centres): because the Rohingya refugee response is a protracted and complex emergency with the world's largest refugee camp and has a relatively accessible refugee population, it has attracted a lot of international interest that was heightened during the COVID-19 pandemic. External actors often partner with operational humanitarian and development actors to carry out research and bring different methodologies and perspectives. This meeting of humanitarian and non-humanitarian actors contributes to the overall understanding of the regional and global context to which this response is a part of, including historic, political, social, and geographical contexts. These reports are commonly released as academic articles, policy briefs, and independent human rights and advocacy reports.

Non-UN IM, assessment, and analysis agencies: within the Rohingya refugee response, many agencies specialise in IM, assessments, research, and analysis. These include Brac University's Centre for Peace and Justice (CPJ), the REACH Initiative, ACAPS, iMMAP, and Ground Truth Solutions (GTS). These actors primarily conduct assessments, research, and/or analysis that support the response by generating evidence-based information that can be used in decision-making across the response. These organisations have different objectives and levels of independence, and they receive funding through different avenues. Some are contracted to support specific sectors, organisations, or activities, while others are funded to support the overall Rohingya refugee response.

- **Brac University's Center for Peace and Justice** is a multidisciplinary academic institution committed to promoting sustainable and inclusive solutions to a wide range of concerns and issues through quality education, research, training, and advocacy. CPJ aims to conduct rigorous research by establishing an extensive network of academics and researchers. In 2019, CPJ established the Refugee Studies Unit in Cox's Bazar to generate knowledge and undertake research to understand statelessness, displacement, and forced migration affecting Bangladesh and related to Rohingya refugees and the host communities.
- **The REACH Initiative** (an interagency initiative of IMPACT Initiatives and UNOSAT) operates under the umbrella of HELVETAS Swiss Intercooperation as a technical implementing partner. REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery, and development contexts. Activities in Bangladesh focus on infrastructure mapping and monitoring, sector-specific and multisectoral assessments, and disaster preparedness through quantitative and qualitative primary data collection exercises and analysis. REACH leads the J-MSNA and can be contracted to conduct large representative assessments across camps and host communities.

- **ACAPS** is an independent analysis actor hosted by IOM's NPM. It provides the staff and expertise of the ACAPS-NPM Analysis Hub, which has been based in Cox's Bazar since 2017. ACAPS uses secondary data to compare and triangulate information and provide an overview of the situation through in-depth thematic products. ACAPS also provides technical support to responders on research methodologies and analysis, and provides technical support to the J-MSNA and the rapid gender assessment led by the GiHA. The ACAPS-NPM Analysis Hub also supports qualitative primary data collection and research to fill information gaps.
- **IMMAP** provides operational IM services, including online IM platforms and mapping. In Bangladesh, they collaborate with Data Friendly Space to collect and analyse secondary data provided by humanitarian stakeholders and other relevant actors. They produce monthly situational analysis and periodic thematic analysis reports to facilitate a better understanding of the humanitarian impact of COVID-19, which supports the humanitarian response using the DEEP platform. They also conduct primary data collection and analysis on COVID-19's impact on humanitarian service delivery, as well as a nationwide online survey to understand the COVID-19 lockdown's impact on livelihoods and access to healthcare.
- **GTS** has been gathering feedback from Rohingya refugees and host communities in Cox's Bazar since 2018 to gauge their perspectives on the aid they receive. Their objective is to use the views of affected people to inform the humanitarian response and provide a metric for monitoring progress towards the strategic objectives in the JRP. Quantitative perception surveys are conducted in partnership with NPM and IOM's Communication with Communities (CwC) unit. GTS also collaborates with the BDRCS, IFRC, and other partners to strengthen capacities around the collection, use, and analysis of feedback data.

The Common Service for Community Engagement, run by the BBC Media Action and Translators without Borders (TWB), has been publishing the monthly 'What Matters?' bulletin since 2018, providing a snapshot of the feedback received from Rohingya refugees and the host communities on different issues. Both organisations also conduct their own research using quantitative and qualitative methods on a range of thematic issues across the Rohingya and host communities. Regular in-depth research on community engagement and understanding social and cultural dynamics among the Rohingya is also conducted by **IOM's CwC's Rohingya-led qualitative research unit** (as in this study). This information is shared with humanitarian actors to support them in making decisions for improved programming across the response. These units commonly use their data collection capacity to support others in the response to conduct assessments.

Even before the 2017 influx, there were already pre-existing development programmes with Bangladeshis in Cox's Bazar. **There are thus many development actors also operating within the humanitarian response who have a wealth of historical, political, social, cultural, and geographical information.** The main development actors for assessments and analysis are UNDP, FAO, the World Bank, Innovation for Poverty Action (IPA), and NGOs with both development and emergency response programmes. Although the JRP acknowledges development actors as a source of contextual information, their knowledge and assessment and analysis capacities are underused. Large needs assessments still do not routinely consult development actors to support a deeper understanding of the results and the drivers of needs.

The Cox's Bazar Analysis and Research Unit is part of the UNDP Partnerships for a Tolerant and Inclusive Bangladesh Project. The unit focuses on political and security analysis in support of the Rohingya response. It monitors violent incidents in areas affected by the Rohingya crisis and produces weekly and monthly updates for international and Bangladeshi partners. Given the sensitive nature of the information, most of their reports are released internally to those operating in the Rohingya refugee response.

PUTTING THE PIECES OF THE INFORMATION PUZZLE TOGETHER

Aside from the IM, assessment, and analysis units mentioned above, some of the larger UN agencies and some NGOs have their own IM and/or research units, and most organisations have monitoring and evaluation teams that sometimes conduct assessments. It is at times unclear how specialised assessment and analysis actors interact with IM and research units within organisations and whom implementing agencies and decision makers should contact for their different information needs. Although the IMAWG was set up to coordinate IM across the sectors, and the J-MSNA technical working group is mandated to support the J-MSNA, **gaps in the coordination of assessments and analysis remain:**

- Assessments, research, and/or analysis may be conducted outside the coordination system. As a result, they are often carried out in silos, increasing the risk of duplication and reducing opportunities for joint analysis.
- Data-sharing agreements, while necessary, may contribute to issues related to accessing data that others have already collected. This makes it harder to maximise the use of the information collected, given the difficulties in knowing what information has already been collected, how to access the analysis, and which organisations are best suited to fill which information gaps.
- There are no minimum data collection or analysis standards and little to no understanding of how all the data and information fit together.
- There is a lack of transparency on how information is being produced, and inconsistent methodologies make it difficult to interpret and compare data and triangulate information.

Fast facts from the ACAPS meta-dataset:

The ACAPS-NPM Analysis Hub meta-dataset is a collection of information products from the Rohingya response that have been logged into a spreadsheet to support the Hub's secondary data analysis. The dataset is updated fortnightly.

- **About 400 public reports** were reviewed and logged between August 2017 and October 2021.
- **An average of seven reports** have been published per month since August 2017, with an average of 25 pages per report.
- **Most reports are published by UN agencies or through sectors** and commonly involve support from implementing agencies and assessment and analysis actors. Assessment and analysis actors and implementing partners produce the second- and third-highest number of reports respectively.
- **Most reports have relied on tprimary data**, with almost half using a combination of secondary data and primary quantitative or qualitative data. One-quarter used only quantitative data collected through household surveys or key informant interviews (KIIs), and one-quarter used only qualitative data collected through focus group discussions, community group discussions, and KIIs.
- **Most reports have been multisectoral, whether pre-COVID-19 or during the pandemic.** Pre-COVID-19, they often addressed themes such as protection and community engagement, while **during the COVID-19 response**, there has been an increase in health-related reports and a decrease in reports on other themes.

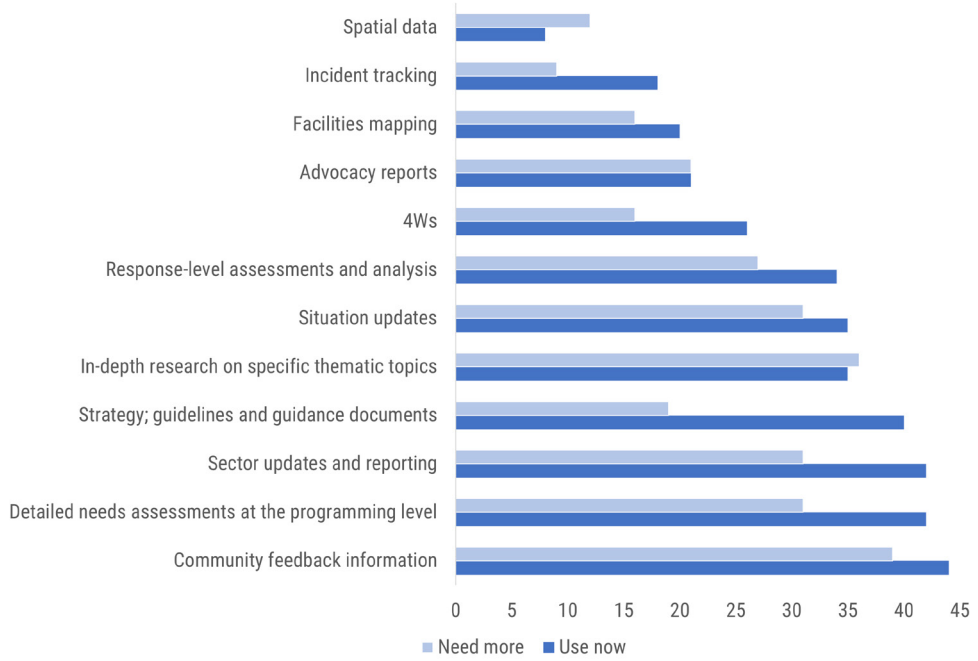
THE INFORMATION USED AND NEEDED BY RESPONDERS

As part of ACAPS' pilot project adapting written reports into audio content, a feasibility study was carried out using KIIs. An online survey was also conducted by a third party in January 2020. Although the focus was on understanding whether audio content would be appropriate and useful, the online survey contained five broader questions to help explain the information landscape in the Rohingya response. These questions focused on how humanitarian responders receive information, what they use the information for, and the type of format they prefer.

The survey was answered by 63 respondents (14 from UN agencies, 24 from INGOs, and 25 from local and national NGOs). Most of them were based in Cox's Bazar and travelled regularly (at least once a week) to the camps. Over half said that their main role was either direct programme implementation or programme management. The methodology section at the end of this report provides more information on the respondents.

When asked what type of information they rely on the most to make decisions (respondents were allowed to select more multiple options), the most cited responses were: community feedback information, detailed needs assessments at the programming level, sector updates, strategy and guidance documents, and in-depth research on specific thematic topics. When asked what information they would like to see more of (respondents were allowed to select more multiple options), they said: community feedback information, in-depth research, situation updates, detailed needs assessments, and sectors updates (see figure 2).

Figure 2. What kind of information do you currently use and what do you want to see more of to make decisions?



Source: ACAPS

These findings are in line with what operational and coordination actors reported their major information needs were in the 2020 case study report produced by Publish What You Fund. To implement programmes, field-level operators said they needed programme information, such as 4W data and access and security data, combined with needs assessments and beneficiary data. Coordinators said they needed information found in needs assessment registers, project databases, or multisector reports to help them understand the scale of needs and coverage. Overall, there is a need for better quality qualitative data, not more data collection (PWYF 10/09/2020).[1]

1 The PWYF data collected in 2019 revealed that the main types of data used and needed were pertaining to needs assessments, mapping and location data, population and demographic data, natural hazard data, and monitoring data. Many of these surveys are not directly comparable given the different categorisation of information types.

UNDERSTANDING INFORMATION AND ANALYSIS GAPS AND CHALLENGES

Data collection and usage

A better understanding of the different components of data collection

To identify some of the main components of data collection and analysis that can affect data accuracy and result in information gaps, ACAPS has built on its knowledge gained by supporting the response on primary data collection by also reviewing and comparing results from primary data collection exercises and speaking with key informants. Among the most common issues found that affect accuracy and relevance are response bias, coaching, language, and the ethnicity of the interviewer.

Response bias significantly affects data accuracy and the degree to which the data collected reflects reality. Culture, age, and gender greatly affect response bias, which is commonly included in the limitations of many studies. This may result in the underreporting or overreporting of some results because of subjectivity, perception, and the level of comfort of the participants. For example, some studies found that Rohingya women may be more likely to respond positively to satisfaction questions, despite explaining that major basic needs remain unmet in previous questions. Two common types of response bias among the Rohingya are courtesy bias and social desirability bias.

- **Social desirability bias** occurs when the interviewee wants to appear to be following the rules or abiding by social norms (SAGE 2008). Their answers may reflect what they think the correct answer is rather than the reality. For example, many quantitative data collection exercises conducted during the height of the COVID-19 pandemic indicated that 80–90% of Rohingya refugees wore masks. However, humanitarians operating in the camps observed very low mask-wearing.
- **Courtesy bias** occurs when a respondent understates dissatisfaction or challenges because they do not want to offend those who are implementing the programmes or are afraid that, if they speak negatively, they may no longer receive assistance (Feedback Labs 23/10/2013). Given the uneven power dynamics between those delivering assistance and those receiving it, courtesy bias is pervasive in the Rohingya response and greatly affects the response's ability to assess levels of satisfaction. For example, a quantitative study on menstrual hygiene found that 30% of Rohingya women said they face problems accessing menstrual hygiene materials. Despite these access problems, 94% of women claimed to be satisfied or very satisfied with their access to menstrual hygiene materials (ACAPS 11/03/2019).[2]

These challenges occur in both qualitative and quantitative data collection. Research design, questionnaire structure, and the ethnicity and language of the data collectors can amplify response bias. For example, closed-ended questions on topics such as satisfaction or when the respondent is likely to know the socially acceptable answer are more likely to elicit a higher response bias.

Despite the acknowledgement of response bias within the response, there is little understanding about how to mitigate these biases and how much they affect results. Methods that elicit a high response bias continue to be used, affecting the overall quality of and utility of the data. Response bias is difficult to avoid completely and will occur regardless. However, it needs to be considered during the design phase of assessments to identify where it may appear and why, as well as ways to mitigate it.

Using open-ended questions and asking follow-up questions where the respondent provides examples or expands on their answer would help detect response bias and better understand the respondent's point of view. During the analysis phase, analysts must seek to identify its potential impact on the data. Triangulating similar answers from different assessments could help identify where bias has played a role in influencing responses. A more in-depth understanding of the population being assessed, the context, the strengths and weaknesses of different data collection methods, and the proper piloting of data collection methods before a large assessment is carried out will also help mitigate these biases.

Coaching:[3] incidents of coaching have been identified throughout the response. This is a common challenge, especially when programming staff are used to conduct interviews, because they may view respondent satisfaction as a direct reflection of their own performance and may prompt the respondent to answer questions more positively. To mitigate this issue, the response should avoid using data collectors directly linked to the programmes being discussed, and programming staff should not be present during data collection.[4] Data collectors also need to understand the purpose of the assessment and how the results will be used to ensure they know they are not being evaluated against the results.

Language and enumerator background: studies have found that both the language a study is conducted in and the ethnic background of the enumerator affect Rohingya responses. Although Rohingya and Chittagonian are similar languages, TWB found that 36% of refugees have difficulty understanding basic Chittagonian.[5] For women, the language barrier is greater as they have lower levels of education compared to men and are less likely to speak languages other than Rohingya (TWB 04/12/2018). As most interviews are conducted by Bangladeshi enumerators in Chittagonian, misunderstandings and misinterpretations are likely to occur during data collection.

2 There could be additional elements that affected this contradictory result as menstrual hygiene is a culturally taboo topic. This survey was conducted in Chittagonian, not in Rohingya, so language may have also had an impact.
3 For the purpose of this report, 'coaching' refers to enumerators prompting respondents to answer in a way that affects the accuracy of the answers provided.
4 Sometimes, programming staff may be required to support by organising interview spaces and ensuring that the questionnaire includes the right technical questions. During the interviews, however, it is important that participants feel comfortable and can respond honestly and openly.
5 More information and discussion around this challenge is covered in "Lessons Learned: Needs Assessments in Cox's Bazar" by ACAPS.

For perception-based questions and sensitive issues, data collection teams have noted differences in responses depending on whether the enumerator is Bangladeshi or Rohingya. For example, REACH found that when they used both Rohingya and Bangladeshi enumerators for the same data collection exercise, a much higher proportion of households reported negative safety conditions to the Rohingya enumerators than to the Bangladeshi enumerators. The study found less variation for nonsensitive questions or objectively verifiable indicators (REACH 04/2019). The study also suggests that respondents were more willing to participate when interviewed by Rohingya enumerators.

A recent study from GTS confirmed the impact of the ethnicity of the interviewer, with respondents interviewed by Rohingyas expressing much lower levels of satisfaction with aid services than those interviewed by Bangladeshis. Differences were also significant on topics around safety, respect, and information provided by aid agencies (GTS 27/05/2021).

One possible contributing factor to this difference is that Rohingya respondents might trust and feel more comfortable with enumerators who are also Rohingya.

Better use of qualitative data

During KIIs conducted by ACAPS between October–December 2019 and in more recent informal discussions, responders commonly agreed on the lack of understanding within the response of perceptions and behaviours of the Rohingya and host community, as well as their social dynamics and culture. The most commonly suggested solution was an increase in qualitative data collection and more in-depth analysis. The ACAPS meta-dataset shows that qualitative data has been collected at a similar rate as quantitative data since 2017. Most of the reports in the ACAPS meta-dataset include both quantitative and qualitative data collection methods, predominantly using KIIs and focus group discussions to confirm their quantitative findings, which form the centre of their report and analysis. The process often involves asking similar questions in both qualitative and quantitative data collection instead of capitalising on the nuances and contextual information collected using qualitative methods.

What seems to be needed is not more qualitative data collection but a deeper focus on understanding what information is missing and designing the right approach to obtaining that information. Qualitative elements of research design should focus on allowing participants to explain their point of view and their experiences and to uncover the issues they face and the solutions they propose. This needs to be combined with more rigorous qualitative methodologies that use trained staff; address the issues around language, the ethnicity of the interviewer, and response bias; and emphasise participatory design and tool testing.

Conducting qualitative data collection before designing and implementing a quantitative survey could help ensure the appropriateness of the quantitative questionnaire and would allow qualitative findings to be tested at scale to see levels of consensus.

Standardised approaches to promoting secondary data usage

There is a lack of standardised approaches across key elements of information management, assessment, and analysis. These differences include the interpretation and use of key terminology, approaches to collecting demographic data and information regarding basic needs and access to services, and the understanding of administrative boundaries. These differences result in information gaps and influence the effective use of secondary data, including for intersectoral and comparative analysis. Such differences also mean that the response continues to collect primary data instead of expanding and building upon pre-existing data and information, with agencies and coordination bodies continuously conducting their own data collection to inform programming and accompany funding proposals. Poor research design and a tendency to privilege new data collection exercises also mean that far more primary data is collected than is needed.

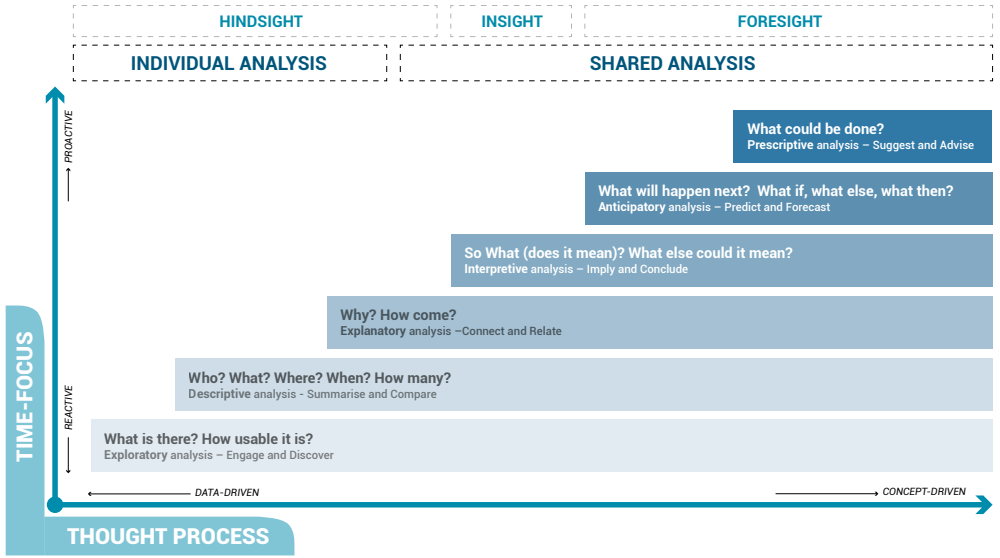
What happens when there are no standardised approaches – some context-specific examples:

- There is a **large variation in the prevalence of people with disabilities.** Estimates of household-level prevalence range from 3–14% depending on the assessment (REACH 30/12/2019; ACAPS 08/02/2021). The large range is because of the different methods used to collect this data. Some assessments ask whether anyone in the household has a disability, while others use the Washington Group Short Set of questions on functioning. Even among those who use this set, some ask the questions once for the household as a whole ('Is there anyone in your household who…?'), while others ask the household representative about each household member. A recent joint assessment investigating disability prevalence used the Washington Group Extended Set on functioning for adults and the Washington Group/UNICEF Child Functioning Modules for children ages 2–4 and 5–17. The assessment also avoided using proxies where possible, asking each individual the set of questions. This is thought to be the most accurate estimation of disability prevalence, with 35% of households containing at least one person with a disability and 12% of all individuals having a disability (REACH 20/05/2021).
- **Differences in the definition of 'female-headed household' (FHH).** Some assessments consider a household run by a single female with no husband to be a FHH, determining this either by directly asking the question or by using the household composition on registration or assistance cards. Other assessments consider a FHH as a household in which a female respondent reports making decisions on behalf of the entire household, regardless of household composition. This difference in definition and approach means that different assessments identify varying prevalence of FHHs. This also affects the findings when trying to understand the differences in experience and the barriers faced by different household compositions, as well as the impacts of these differences and barriers.
- **Different sectors and agencies collect, analyse, and present information on children and youth using different age ranges.** For example, the Education Sector uses the age brackets used by the Bangladeshi education system (4, 5–11, 12–17, and 18–24) for their analysis on the host communities, but for refugee children, they use the age brackets used in the learning centres (3, 4–5, 6–11, 12–14, 15–18, and 19–24). When programmes report beneficiary numbers, they also aggregate them using different age brackets. For example, the age of the children that received distributed school materials were documented in the JRP as 6–14 (JRP 15/02/2019).
- **There are different terms and reference numbers used for administrative boundaries smaller than the camp level.** When different agencies use the term 'block', it is not always clear what they mean (it can be block, sub-block, or Mahji block). When they refer to an agency-specific reference code, the administrative level they are referring to is unclear. It is also not clear whether the difference is only in the terminologies used or if there is a geographic difference between the various administrative boundary terms used by several agencies. These uncertainties cause confusion when conducting large data collection exercises across all camps.

Analysis

To structure the different steps of the analysis process, ACAPS uses an analysis spectrum. The spectrum describes six stages of analysis that analysts can undertake to provide the best possible answers to preidentified research questions.

Figure 3. The analysis spectrum (adapted from Pherson, 2010)



Source: ACAPS, see full image on page 14.

Explanatory, descriptive, interpretive, and anticipatory analysis

Most reports and assessments contain largely descriptive analysis of quantitative data focusing on the needs of the Rohingya refugees and the host community. This allows the response to understand the needs of the 'here and now'. Granular needs assessments, facilities mapping, 4Ws, population and demographic data, and spatial data are all essential in informing the implementation of specific programmes. In times of major change, such information can be used to quickly mobilise funds. However, this data alone is not enough to accurately inform response-wide decisions to improve the way aid is delivered over time.

There is a lack of investigation in understanding sociopolitical and cultural dynamics and norms and the impact of different experiences on people's access to and use of aid. 'Here and now' data does not allow for monitoring changes over space and time unless specifically designed to do both. It also does not, on its own, provide an in-depth understanding of the

affected population and their experiences. Research in the aforementioned areas would allow for more complex analysis, including more explanatory, interpretive, and anticipatory analysis which would enable decision makers to develop culturally appropriate and community-driven solutions, better anticipate how shocks may be responded to by the affected community, and adapt aid delivery accordingly (see the ACAPS analysis spectrum diagram for more details).

Comparative analysis

Despite the high number of regular primary data collection exercises using the same or similar indicators and methodologies, there are limited comparative or trends analyses. For example, each year, regular needs assessments are conducted, but there is no consistent effort during the research design phase to ensure that the results can be compared over time to see if needs are increasing, stabilising, or decreasing. This lack of comparative and trends analysis hinders the response's ability to monitor progress, identify patterns, and understand progress or regression within aid provision. This impedes the response's ability to adapt and improve programming based on a change in needs. This issue is even more pronounced in the host community because programme coverage is limited, and often, only specific parts of the host community are assessed, making results incomparable. There are also limited data and analysis providing an overall representative understanding of the situation in the host community, with very little precrisis data that can be used to understand the overall impact of the Rohingya refugee crisis on the host community.

Intersectoral analysis

Most needs assessments are conducted and analysed by the sectors about their specific subjects of intervention. This inhibits the development of a deeper understanding of the intersection between different needs, vulnerabilities, behaviours, and coping mechanisms. There is insufficient understanding of how issues interact, the severity of unmet needs, and the differences in experience between demographic groups. This can lead to assessments coming to contradictory conclusions when attempting to explain the hows and whys of the situation despite collecting similar data.

Different research methods required for the Bangladeshi host community

Given the protracted nature of the response, and considering that the affected population includes members from the Bangladeshi host community who live below the poverty line, there is a need for greater cooperation between humanitarian and development actors in doing research. A review of the available information in the ACAPS meta-dataset revealed that although most reports (119 of 337) include both the Bangladeshi host community and Rohingya refugees, the number of reports focusing solely on the host community (24) is significantly lower than those focused solely on Rohingya refugees (207). This is because the response is focused predominantly on the Rohingya, who are almost entirely dependent on humanitarian assistance to meet their basic needs, and because of sensitivity around data collection in the host community. Data collection teams have previously been denied entry into communities because of the number of assessments already conducted and because of the communities' discontent with the implementation of aid (or perceived lack of aid).

Many reports that include both population groups focused more on Rohingya refugees. While this made sense at the beginning of the response, it affects the understanding of the impact of the crisis on the Bangladeshi host community. The data collection methods used by humanitarians are generally not designed to investigate the impacts of multigenerational poverty, sociocultural norms, and other issues. Closer coordination with development agencies and academic institutions is necessary to fill this gap, as well as combining different existing data sources to have a more comprehensive analysis and a better understanding of the similarities and differences in the needs and challenges faced by both communities.

HOW HAS THE INFORMATION LANDSCAPE CHANGED SINCE COVID-19?

At the beginning of the COVID-19 response in Cox's Bazar, towards the end of March 2020, all regular primary data collection in the camps using external staff stopped. The Government of Bangladesh suspended all non-essential humanitarian activities and reduced the number of humanitarians allowed into the camps by 80% (RRRC 05/04/2020). The sudden change in the situation, coupled with the decrease in humanitarian access, created an overwhelming need for updated information for decision-making and magnified the shortcomings of existing assessment methods. It also highlighted information gaps that were previously difficult to see.

Large data collection units quickly turned to remote mobile data collection (mainly by phone), while NGOs and INGOs relied heavily on essential programming staff, adding data collection to their roles as the regular data collection teams no longer had access to the camps. A small number of existing research and enumeration teams that included Rohingya volunteers were able to continue with face-to-face data collection and scaled up their efforts to meet the demand for information.[6]

Despite the changes in accessibility, many essential information needs across the response continued to be met. COVID-19 also allowed responders to compare different research methods and develop a more comprehensive understanding of what works and what does not in the Rohingya context. Lessons learned emphasised that while data can continue to be collected, the data may not always be appropriate, accurate, or fill information gaps; using programming staff to collect data influences the responses and can result in conflicting information; qualitative data is highly appreciated by the Rohingya refugees and can fill many information gaps; and the use of Rohingya refugees as researchers and data collectors often resolves both access and trust issues.

6 More information is available in ACAPS' "Data collection: lessons learned from the Covid-19 pandemic in Rohingya refugee camps, Cox's Bazar, Bangladesh".

Selecting an appropriate data collection approach

One of the major lessons learnt was that challenges do not necessarily lie in the ability to collect data but in selecting a data collection approach appropriate for the type of information gap being filled.

Although agencies could not conduct large-scale representative data collection exercises during the pandemic, quantitative data methods continued to be preferred, whether over the phone or using programming staff to conduct KIIs or household surveys. However, the use of quantitative methods to explore complex and sensitive issues, such as behaviour, perceptions, satisfaction, and protection, produced conflicting and inaccurate results that did not match what was being observed. For example, many actors asked closed questions to understand health-seeking behaviour and the uptake of public health messaging. When asked by programming staff, the vast majority of respondents (upwards of 80–90%) said they would visit the clinics, but the central health reporting system[7] showed that the total number of consultations dropped by over 50% during the height of the pandemic. By mid-June, the total number of cases of acute respiratory infections for 2020 was under 5,000, compared to 17,000 during the same period in 2019. According to WHO, this discrepancy signalled significant changes in health-seeking behaviour by the Rohingya refugees and affected the response's ability to effectively respond to and contain the outbreak.

Small-scale data collection through essential programming staff

Conflicting results were also identified when satisfaction data was collected through quantitative surveys by programming staff. Both pre-COVID-19 and during the response, these surveys depicted high levels of satisfaction with the way aid was being provided. Other response-wide representative needs assessments consistently detected contrary behaviours, such as selling assistance for access to more preferred items or other private services. Qualitative findings also highlighted major challenges in listening to and supporting the requests of the Rohingya.

For specific types of information, quantitative data collected by programming staff elicits high levels of positive response bias and does not accurately reflect the experiences of the Rohingya. Using programming staff for some types of data collection fails to consider many variables, from historical experience to the current context and the daily interactions that shape people's decisions, as well as the power dynamics between humanitarian responders and recipients of aid. People also do not live their lives within sector silos. Assessing complex issues requires different approaches and needs to include the use of secondary data to unpack issues accurately.

Rohingya refugees as researchers

Face-to-face, small-scale, qualitative data collection using Rohingya researchers helped explain some of the Rohingya's perceptions and behaviours during the pandemic. Rohingya refugees said they were more comfortable discussing their issues and thoughts with other Rohingya who shared similar experiences and who conducted interviews in their own language and in a culturally appropriate way, fostering trust and openness.

This kind of data collection helped provide a better understanding of the situation from the perspective of the Rohingya and revealed the extent to which Rohingya refugees' distrust in authorities and fear of family separation hindered the COVID-19 response and public health engagement. These findings helped explain different behaviours during the pandemic response and the conflicting data reported pre-COVID-19, such as why people were going into debt and selling assistance to seek medical support despite being provided free healthcare in the camps.

RECOMMENDATIONS AND WAYS FORWARD TO IMPROVE THE INFORMATION AND ANALYSIS LANDSCAPE

Coordination

- A response-wide push led by the ISCG with other coordination bodies and donors is required to discourage ad hoc and disjointed data collection and to encourage only necessary, good-quality assessments and analysis.
- The IMAWG should create a coordination space where research, assessment, and analysis actors can collaborate and coordinate with those using the products to identify information gaps, support the implementation of standards, and share lessons learnt and best practices.
- Data-sharing agreements should be simplified to encourage and facilitate joint analysis exercises and, where possible, make data collection tools and anonymised datasets available to other humanitarian/analysis actors.
- The IMAWG should maintain an up-to-date and accessible repository of all assessment and analysis reports to ensure the broader use of pre-existing data. This repository should also include methodologies, limitations, and lessons learnt from data collection and analysis.
- The IMAWG should develop a contact list including the details of the different assessment and analysis responders to be made available to the response so that relevant people know who they can contact for support to fill different information needs.

7 WHO's Early Warning, Alert and Response System

Ethics and data collection standards

- The IMAWG should develop response-wide guidelines on ethical data collection tailored to the Rohingya response. These guidelines will support agencies in assessing and adjusting their data collection practices, help reduce assessment fatigue, and apply the principle of 'do no harm' to data collection and analysis.
- The IMAWG should establish response-wide standards to ensure that those collecting data are actively closing the community feedback loop and promoting accountability to the affected population, in line with current standards for ethical data collection.
- The IMAWG should create common guidelines and training on data protection and the sharing of sensitive data specific to the Rohingya refugee response to foster greater and safer data sharing.
- The IMAWG should develop guidelines for minimum standards for data collection specific to the different types of data collection methods used in the response. These guidelines should be accompanied by training to ensure uptake by responders. The focus should be on supporting smaller organisations as limitations in funding and overstretched resources make it harder for them to implement additional processes or adjust current ones.

Content and approach

- Joint lessons learnt exercises should be carried out, with a focus on identifying the most appropriate and effective research methods to address different information gaps. Factors such as response bias, trust, the ethnicity of the interviewer, language, Rohingya preferences on how they want to be engaged, the sensitivity of information, assessment fatigue, existing secondary data, gender norms, and the scale at which the data is needed must be considered when designing research. Training and joint guidance notes can be developed from these exercises to improve the quality of the data collection and analysis produced.
- The use of secondary data to create a more comprehensive picture of the response and reduce duplication should be increased and improved.
- Methodology sections in all reports based on primary data, explaining what was done and how, should be strengthened. This will allow readers to evaluate the reliability and validity of the data. To do this, reports should include research questions, sampling strategy, details on the data collection team, approach, limitations, and the rationale for the research design. This will ensure trust in the results and allow accurate re-analysis.
- Lessons learnt to develop capacity and collect data remotely through mobile access should be built upon. Although this is not the preferred data collection method, further investment in and understanding of the appropriate use of remote data collection methods will prove invaluable when access is hampered, such as when responding rapidly to a disaster.

Localise research and data collection

- Invest in and recognise the capacities of the affected population (Rohingya and Bangladeshi) to work as researchers and enumerators. Create more opportunities for the affected population to take the lead in the research design. Ensure continuous investment in their training and skills development to elevate the voices of the affected communities, ensure appropriate data collection, and help overcome issues of distrust and response bias. This will also help address the uneven power dynamics that exist when providers seek feedback on their operations and will guarantee access when external entry is restricted. The amount of investment needed should not be underestimated, but given the potential impact of such teams to fill essential information gaps and empower the affected community, it is worth the investment.
- Data collection must accommodate the preferences of the affected population and consider what information they want to communicate back to the response, as well as their priorities.

Remote data collection

- Invest in and improve capacities for remote data collection. Although this is not a preferred method in the Rohingya refugee context (nor is it the most appropriate), it is an essential capability in case access is cut off again. Teams need to receive training in remote data collection and remote research design and test the necessary skills and tools in advance to ensure proper execution when needed.
- Considering the limitations in accessing phones for the refugees and the frequency in changing phone numbers, establish a robust and representative phone database in advance while considering ways to reach vulnerable groups safely and consistently.
- Sensitise Rohingya and host community populations on remote data collection to build trust and understanding in advance.

Dissemination

- Make reports more accessible to a wider and more diverse target audience. Operational strategy documents are often produced in both Bangla and English, and community messages are produced in Chittagonian and Rohingya. Large assessments and research products, however, are predominantly published in English only, and in text-heavy PDF documents. Results should be communicated in the relevant languages and in a format that best suits the different target audiences. These formats could include presentations, short summaries with a combination of images and text, infographics, short videos, and audio summaries.

METHODOLOGY

For this report, ACAPS reviewed and collated all the major IM products published on the Rohingya refugee crisis between August 2017 and October 2021. The researchers created a meta-dataset containing over 300 reports on the Rohingya response in Bangladesh. Information was mainly sourced from ReliefWeb, the Humanitarian Response Platform, the ISCG IM Working Group Assessment Registry, the NPM portal, Shongjog, REACH Resource Centre, UN agency information portals, and INGO resource centres. ACAPS conducted open-ended searches using Google to locate reports outside the main humanitarian websites.

Three rounds of interviews with a variety of humanitarian stakeholders based in Cox's Bazar were conducted for various reasons and are used in this report:

Round 1: in December 2019, included representatives from different donors, agencies, sectors, and NGOs: Foreign, Commonwealth & Development Office; Global Affairs Canada; IOM; the ISCG IM Unit; REACH; UNHCR; Shelter Sector; CwC; Food Security and Livelihoods Sector; WASH Sector; Save the Children; Concern Worldwide; and NPM. These interviews were conducted to support the development of ACAPS' strategy.

Round 2: in September–October 2020, included interviews with researchers from Harvard University, IOM's CwC, BBC Media Action, CARE Bangladesh, NPM, and REACH to inform the ACAPS paper published in November 2020 in Humanitarian Alternatives.

Round 3: comprised an online survey, conducted in January 2021 by Arete on behalf of ACAPS, involving 63 respondents (14 from UN agencies, 24 from INGOs, and 25 from local and national NGOs). The survey was conducted in Bangla and English and disseminated through sector coordinators currently active in Cox's Bazar. The survey consisted of predominantly closed multiple-choice questions primarily focused on assessing the feasibility of audio content. Five broader questions on information usage and needs were included in the survey for the purpose of this report.

The initial findings of this report were reviewed by NPM, REACH, and ISCG in October and November 2021.

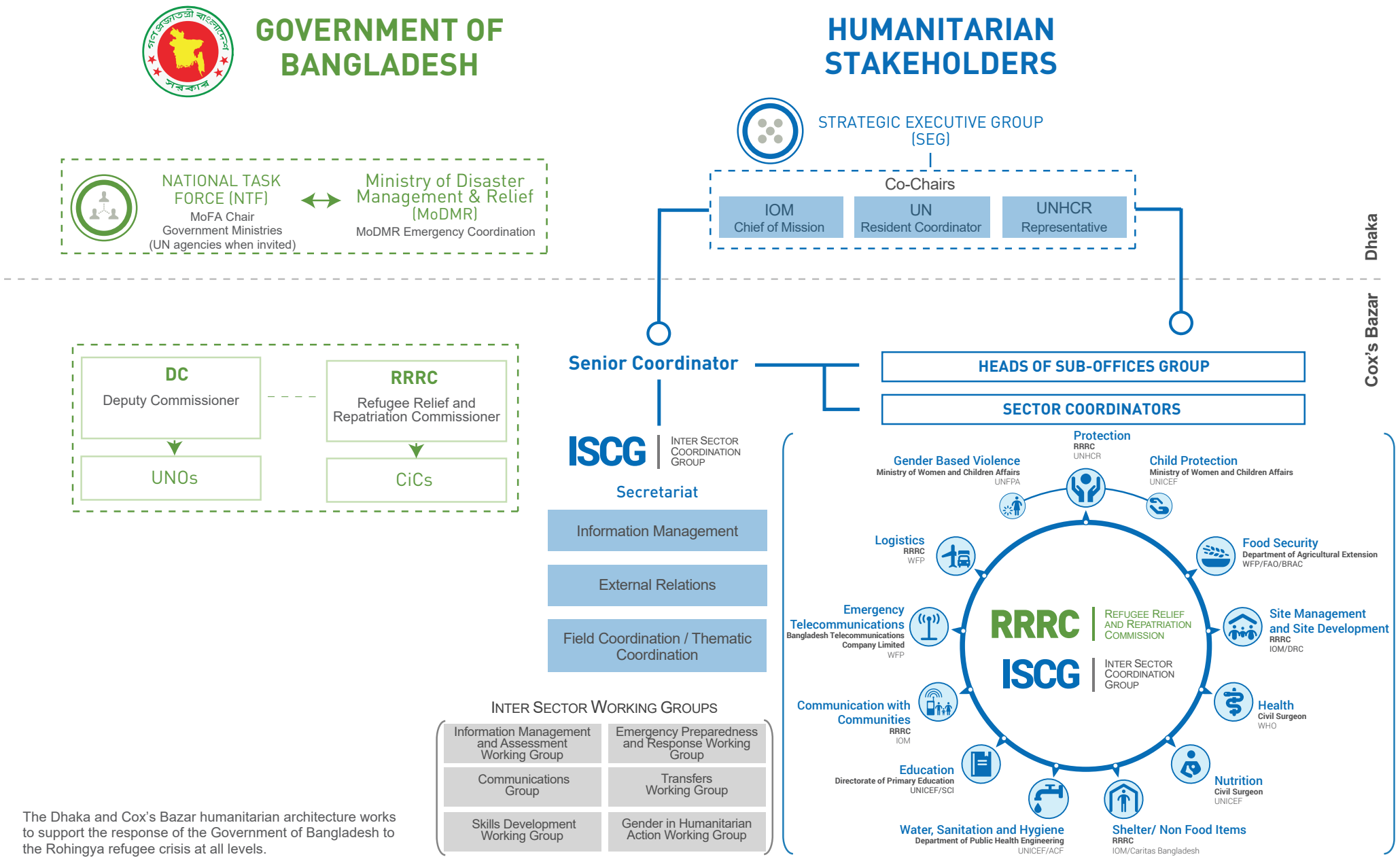
Limitations

The three rounds of interviews included in this report were not conducted for the sole purpose of this report.

As ACAPS is an assessment and analysis actor operating in the Rohingya refugee response, this review may include slight biases towards areas in which ACAPS has more expertise and experience. This bias was mitigated through a review by REACH, NPM, and ISCG.

The meta-dataset does not include everything ever published on the Rohingya crisis. It is centred around published reports since 2017 and does not include situation reports, spatial data, 4W dashboards, media reporting, and NGO advocacy articles or products. It is understood that a lot of assessments and reports are not published, and there is likely a lot more information available than what has been included in the meta-dataset or analysed in this report. Because the documents included in the meta-dataset were predominantly sourced through websites that focus on humanitarian responses, not all development reports will have been located. Additional efforts to seek out development reports were made, particularly for documents focused on the host community. Lastly, this review was conducted by non-Bangla speakers, so products published only in Bangla were not included.

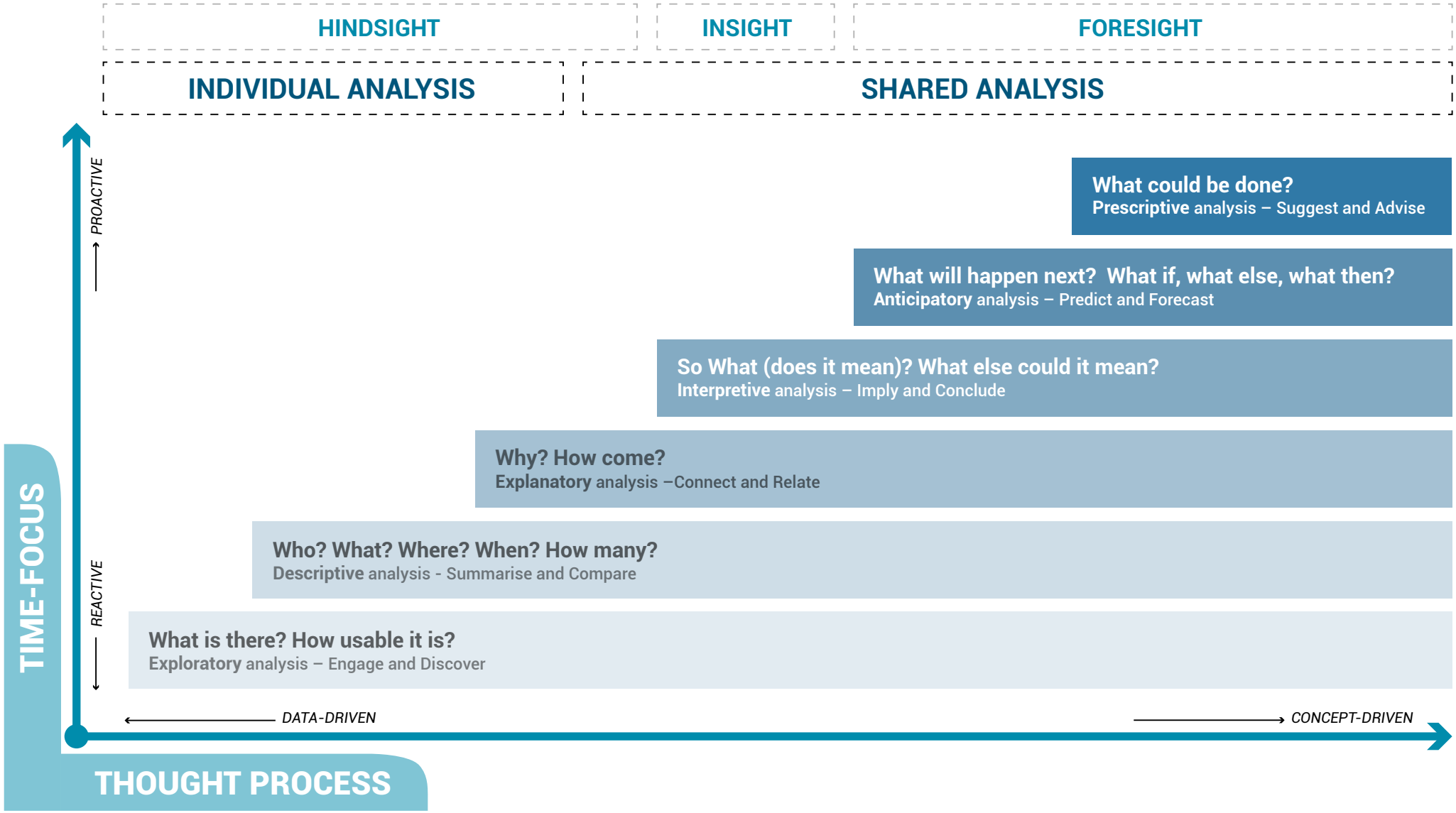
Figure 1. Coordination mechanisms in Bangladesh for the Rohingya humanitarian response.



The Dhaka and Cox's Bazar humanitarian architecture works to support the response of the Government of Bangladesh to the Rohingya refugee crisis at all levels.

Source: ISCG 11/05/2021

Figure 3. The analysis spectrum (adapted from Pherson, 2010)



Source: ACAPS