

Chin State IDPs

In late-August / early-September the MAU surveyed recently-displaced households in Chin State to better understand the challenges they face. Data are based on a probability sample representing 2300 households enrolled in cash assistance programs. MAU reports are available online at www.themimu.info/market-analysis-unit.

KEY FINDINGS

- **At least 41% of households surveyed remained displaced as of August 2022**, many for one year or more;
- **Two-thirds said their access to food, health care, and education was poor**, and nutrition was often poor for children under five and pregnant/breastfeeding women;
- **Most households could travel to a food market in the past month**, but just 42% lived within 30 minutes of one;
- **One-third said freedom of movement was poor**, and 17% could not travel to market due to safety/transport;
- **Three-in-five households said access to meat/fish was poor**, and nearly 50% said this of most other goods;
- **Seventy-six percent obtained food in the past thirty days with income from work**, although 81% said access to livelihood/work opportunities was poor;
- **One-in-seven respondents said someone in their household went a day without food in the past month**, and 23% ran out of food at least once.

BACKGROUND

Since 2021, Chin State has seen greater instability from armed conflict and a growing population of displaced persons. According to data from the Armed Conflict Location & Event Data Project (ACLED), the number of monthly conflict-related events in Chin State spiked periodically in 2021 and has remained high throughout 2022 (see **Figure 1**).¹ The United Nations estimates that Chin State has seen a six-fold increase in the number of internally displaced persons (IDPs) since February 2021, or a net increase of 32,800 IDPs.² Ongoing conflict has compounded existing challenges in Chin State, a region already beset by deep poverty. The 2017 Myanmar Living Conditions Survey (MLCS) found Chin State to be the poorest of Myanmar's states/regions, with dire access to education, health care, work and financial institutions.³ The combination of socioeconomic conditions and ongoing conflict has increased hardship for many, not least of all persons facing protracted displacement.

This study surveyed displaced households in Thantlang, Hakha and Kampetlet townships to understand their living conditions and access to markets/goods. The survey of roughly 350 households represents a population of roughly 2300 households enrolled in one or more cash programs. The study focused primarily on households displaced in the past 18 months in order to understand their basic needs and their ability to address those needs through access to markets and essential goods. Nearly all participants previously received cash assistance from one or more parties (albeit at various points in time), however the study is not intended as an evaluation of the effectiveness of cash programs; nor is the study intended to represent all IDPs in Chin State.

LOCATION AND SHELTER

Most households surveyed were displaced in 2021, yet many still remain in temporary shelters. Nearly

FIGURE 1. Conflict Events in Chin State, by Month

Conflict events in Chin State have spiked periodically.

Source: ACLED

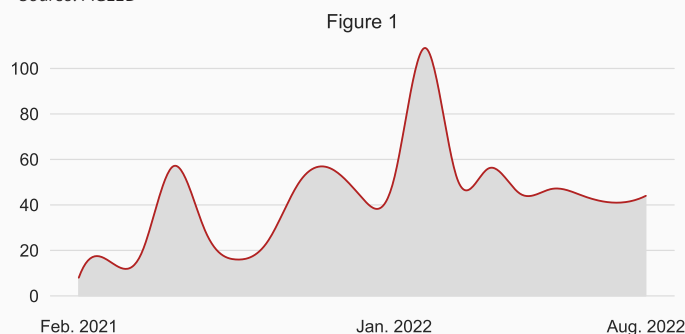
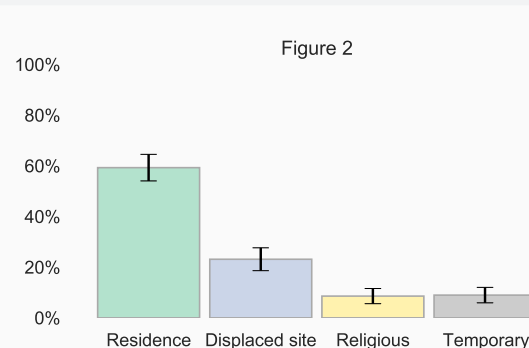


FIGURE 2. Type of Shelter

At least 41% of households were still displaced as of Aug. 2022.



¹ ACLED. September 2022. Armed Conflict Location and Event Data Project. www.acleddata.com.

² UN in Myanmar. September 2022. Myanmar Humanitarian Update No. 21.

³ 2017 Myanmar Living Conditions Survey (MLCS).

BOX 1. Living Conditions Measures Used in the Survey

This study asked respondents about conditions related to seven strategic response priorities in the 2022 Humanitarian Response Plan (HRP). The HRP represents the coordinated plan for humanitarian agencies to meet the acute needs of people affected by recent crises in Myanmar. The HRP was used as a guide only, and data do not reflect progress toward related objectives. The HRP-based measures in this study include:

Education - Access to education/materials;
Food - Access to food;
Health - Access to physical/mental health care;
Safety - Conditions for basic safety/security;

Nutrition - Nutritional status of children under age five and pregnant/ breastfeeding women;
Shelter - Access to basic shelter/materials;
Water - Access to water for cleaning/hygiene.

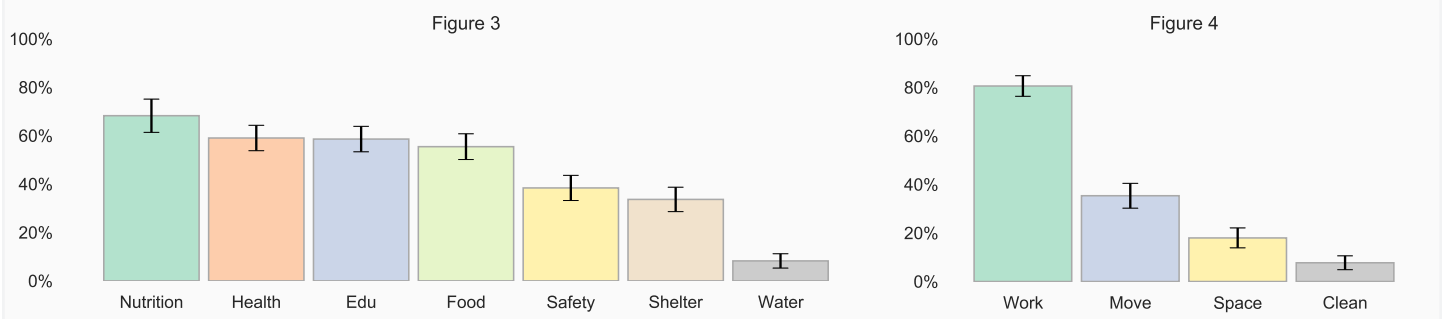
This study also asked about several other ancillary or crosscutting conditions:

Movement - Freedom of movement;
Work - Access to livelihood/work opportunities;

Space - Sufficient space (absence of overcrowding);
Cleanliness - Access to a clean/sanitary environment.

FIGURES 3 & 4. Portion of Households Describing Various Living Conditions as "Poor"

Access to health care, education and food, and nutrition for children and pregnant/breastfeeding women were often describe as "poor."



all respondents were displaced during a one-year period from March 2021 to March 2022. Forty percent of respondents were displaced in September 2021 (when fire displaced many in Thantlang town), while one-quarter were displaced in the six months before and one-quarter in the six months after.⁴ As of August 2022, nearly all respondents were in their township of origin, but just 18% had returned to their original town/village. Fifty-nine percent of households were living in a house—either their own house or that of a host family—while lived in a displaced sites (23%), religious building (9%), or other temporary shelters (9%) in forested area or on farmland (see **Figure 2**). At least 41% of households remained displaced. Households displaced in the past year accounted for the majority of those still living in temporary shelters.

BOX 2. Children and Pregnant/Breastfeeding Women

Nutrition for children under five and pregnant or breastfeeding women was widely described as poor.

Many households included children under age five (48%) or a woman who was pregnant or breastfeeding (23%). The study asked only these households about nutrition, and 68% described it as "poor" (see **Figure 3**). Poor nutrition was correlated with poor access to food (e.g., rice) and health care and poor freedom of movement.

LIVING CONDITIONS

More than half of all households described their access to health care, education and food as "poor."

More than half of all households said access to food, health care and education was "poor" (see **Figure 3**), although there was no statistical difference between each of these. A smaller but still notable portion of respondents also said basic safety (38%) and access to shelter (34%) were poor. Access to clean water for bathing and cleaning was relatively good: just 8% of households described access to water as "poor," and 27% described it as "good." Reports of poor conditions are likely driven in part by preexisting structural conditions in Chin State rather than by conflict/displacement (see **Background**); however, poor nutrition and health care access were also correlated with poor movement and safety, suggesting these conflict-related factors may also be important drivers (e.g., some may struggle to see acquire health care services because their movement is limited).⁵

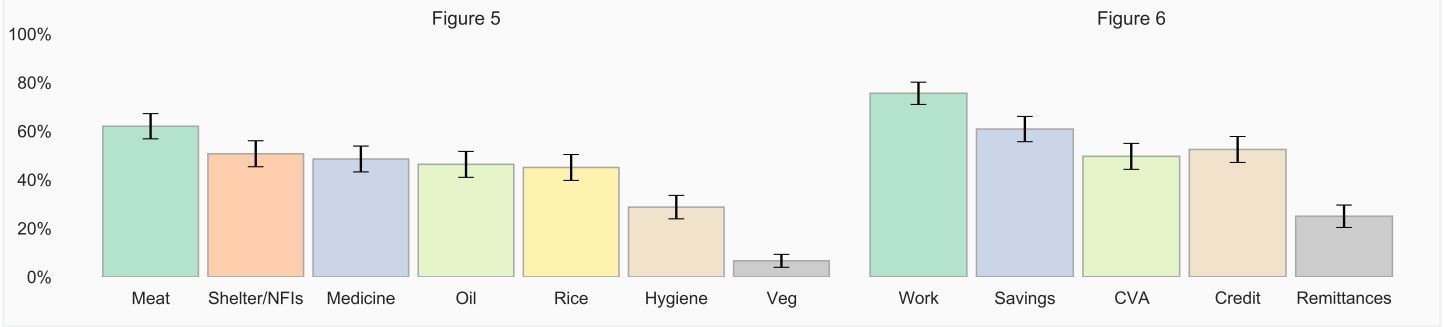
Most households described access to livelihood/work opportunities as "poor," and many said freedom of movement was poor as well. Eighty-one percent of households said access to livelihood/work opportunities was "poor," and 35% described freedom of movement as poor (see **Figure 4**). Access to livelihood/work opportu-

⁴ Estimates in this report assume 95% confidence intervals and a 5% margin of error (with the exception of nutrition and remittances).

⁵ Correlation is not causation.

FIGURES 5 & 6. Access to Products & Sources of Funds for Acquiring Food

Two-thirds described access to meat/fish as "poor," and half said the same of access to shelter/NFIs, medicine, cooking oil and rice.

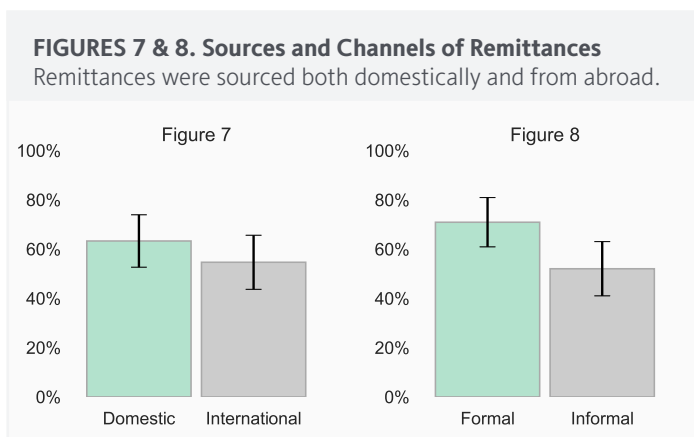


nities and freedom of movement were both positively correlated with safety/security, and freedom of movement was correlated with greater access to goods (see **Access to Markets and Goods**). Ninety-two percent of households described cleanliness as "moderate" or "good," and 82% said the same of space, or the absence of overcrowding.

ACCESS TO MARKETS AND GOODS

Most respondents said someone from their household could travel to a food market, but some were unable due to safety/security conditions or poor transportation. Eighty-three percent of respondents said someone from their household was able to travel to a food market in the past thirty days, suggesting market access is possible. Poor safety/security and lack of adequate transportation were common explanations provided by households unable to travel to a food market (35 percent of households described freedom of movement as "poor," as noted above). However, 42% said the nearest food market was at least thirty-minutes away by foot; in fact, many of those who said they were able to travel to a market in the past month did not have a market within thirty minutes, suggesting regular food purchases may involve significant travel.

Most households said access to meat/fish was poor, and half struggled to access other foods and NFIs.



FIGURES 7 & 8. Sources and Channels of Remittances

Remittances were sourced both domestically and from abroad.

Product-accessibility fell into four tiers, with access to meat/fish most often described as poor (62%). Shelter/NFIs, medicine, oil and rice fell into a second tier of goods, for which roughly half of all households described access as "poor." Twenty-nine percent of households also described access to hygiene-related products like soap and toothpaste) as "poor" (see **Figure 5**). Vegetables were often described as accessible: just 7% of households said their access to vegetables was "poor," and 22% described it as "good." Access to cooking oil, meat and medicine was positively correlated with greater freedom of movement, perhaps because these products—which are often sourced outside of Chin State—are less often available at the village-level and therefore access to them is more dependant on travel to other markets.

SOURCES OF FUNDS FOR FOOD

In the past thirty days, households relied on various sources of funds to acquire food, but most relied on farm work. In the past thirty days three-quarters of households bought food with cash or resources earned through work (see **Figure 6**), even though 81% of households described access to work as "poor" (see **Living Conditions**).⁶ Two-thirds of households mainly earned income in the agricultural sector, while others worked in services or trade. Roughly half of all households used savings, credit, or cash assistance to acquire food in the past thirty days, and many also used remittances (see below). Households which bought food with savings or recent income generally reported better access to food, possibly due to higher overall economic wellbeing.

One-quarter of households used remittances to buy food in the past thirty days. This is slightly below figures in the 2017 MLCS, which found that 29% of households in Chin State received remittances in a twelve-month period.⁷ Remittances originated from both domestic and international sources, and the channels through which they were received were both formal and informal (see **Figures 7 & 8**). Households in this study which recently used remittance were far more reliant on domestic sourc-

⁶ Farm work may not always be paid in cash. In some cases, workers may be compensated in-kind with rice or other edible goods.

⁷ 2017 Myanmar Living Conditions Survey (MLCS).

es than the general Chin population covered by the 2017 MLCS; more than half of recipients in this study received remittances from domestic sources, compared to fewer than one-quarter of households in the 2017 MLCS.

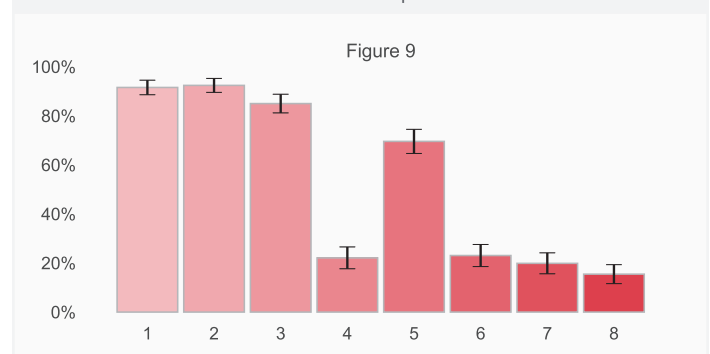
FOOD INSECURITY & COPING

Severe food insecurity appeared to be common for a minority of households while less-severe food insecurity was more common for the great majority. The average Reduced Coping Strategies Index (rCSI) score for households was 12.4, which is considerably better than measures of recently-displaced households for the same period in Sagaing Region.^{8,9} However, as noted above, 55% of households described their access to food as "poor" (see **Living Conditions**), suggesting food nonetheless remains a struggle for many. The poorest rCSI scores were also correlated with poor access to vegetables (which was relatively rare among this population), perhaps pointing to some diversity in the level of food insecurity among households. Food Insecurity Experience Score (FIES) indicators—which focus on behaviors during a longer period which covers the past thirty days—may help parse out some differences between households which are more- and less-food-insecure.

At least one-in-seven households adopted extreme

negative coping behaviors for dealing with food insecurity in the past thirty days. Extreme coping behaviors—such as going-hungry, going a whole day without food, skipping a meal, or running out of food at some point in the past thirty days—were reported by 15–23% of households (see **Figure 9**). However, less-severe coping behaviors were even more common. More than two-thirds of respondents said someone in their household "ate less than they thought they should" or "ate only a few kinds of foods" in the past thirty days. Moreover, roughly 90% of respondents said someone in their household was "unable to eat healthy or nutritious food" or "worried about not having enough food" in the past thirty days.

FIGURE 9. FIES Food Insecurity Indicators (Past 30 days)
At least one-in-seven households reported severe indicators.



BOX 3. Description of FIES Indicators

The MAU regularly collects data on eight Food Insecurity Experience Scale (FIES) indicators, which measure the following behaviors:

In the past thirty days, there was a time when someone in the household...

- FIES 1** - Worried about not having enough food to eat because of a lack of money or other resources.
- FIES 2** - Was unable to eat healthy and nutritious food because of a lack of money or other resources.
- FIES 3** - Ate only a few kinds of foods because of a lack of money or other resources.
- FIES 4** - Had to skip a meal because there was not enough money or other resources to get food.
- FIES 5** - Ate less than they thought they should because of a lack of money or other resources.
- FIES 6** - Ran out of food because of a lack of money or other resources.
- FIES 7** - Was hungry but did not eat because there was not enough money or other resources for food.
- FIES 8** - Went without eating for a whole day because of a lack of money or other resources.

IMPLICATIONS

- **Different households may benefit from different aid modalities.** Decent mobility and market access suggest that cash assistance may be widely beneficial. However, households with poor mobility may require alternative modes of assistance, especially if goods like meat/fish, medicines and cooking oil are not available at the village-level;
- **Nutrition for vulnerable populations may require additional assistance.** Among households with children under five or pregnant/breastfeeding women, two-thirds said nutrition was "poor;"
- **Food insecurity may be exacerbated by the price or quality of goods in market.** Although many households can access markets, half said access to various goods was poor, possibly due to the price or quality of goods in a state often reliant on the costly shipment of goods from central Myanmar;
- **Longstanding socioeconomic conditions and ongoing conflict may lead to protracted displacement.** Existing structural challenges in Chin State could make it particularly hard for households—many of which have been displaced for over one year now—to recover economically without more and different forms of assistance.

⁸ Market Analysis Unit. September 2022. Survey of IDPs in Sagaing Region.

⁹ The rCSI is designed for comparison across different contexts, although caution is warranted in making such comparisons.

Market Analysis Unit (MAU)

The Market Analysis Unit provides development practitioners, policymakers and private sector actors in Myanmar with data and analysis to better understand the impacts of Covid-19, conflict and other crises on:

- Household purchasing power, including coping mechanisms, safety nets and access to basic needs;
- Supply chains, including trade, cross-border dynamics and market functionality (particularly as it relates to food systems);
- Financial services, including financial services providers, household and business access to finance and remittances; and
- Labor markets (formal and informal), with a focus on agricultural labor and low-wage sectors (e.g., construction, food service).

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