

# Chin State IDPs

In late-November / early-December the MAU conducted a second-round survey of displaced households in Chin State to understand challenges they face. The study is based on a probability sample representing 1900 households currently or previously enrolled in cash assistance programs. MAU reports are available online at [www.themimu.info/market-analysis-unit](http://www.themimu.info/market-analysis-unit).

## KEY FINDINGS

- **Seventy-nine percent of IDP households were still displaced in early-December**, and 15% were returnees;
- **The portion of IDPs living in temporary shelters rose and the portion in displaced sites fell**, while three-in-five IDP households continued to live in host homes;
- **Ten percent of IDP households were living outside their original township**, and 3% had left Chin State;
- **Security and food access improved since September**, but health care and nutrition remained poor for many;
- **Access to medicines worsened in December** and health care remained poor for more than half;
- **Fewer households described their freedom of movement as poor**, but one-quarter were still unable to travel to a food market in the past thirty days;
- **More households used cash assistance to buy food** compared to three months earlier, and fewer used credit;
- **Food insecurity measures improved**, likely due to changes in security, mobility and seasonal supply.

## The number of displaced persons in Chin State grew in late-2022, despite reports of fewer conflict events.

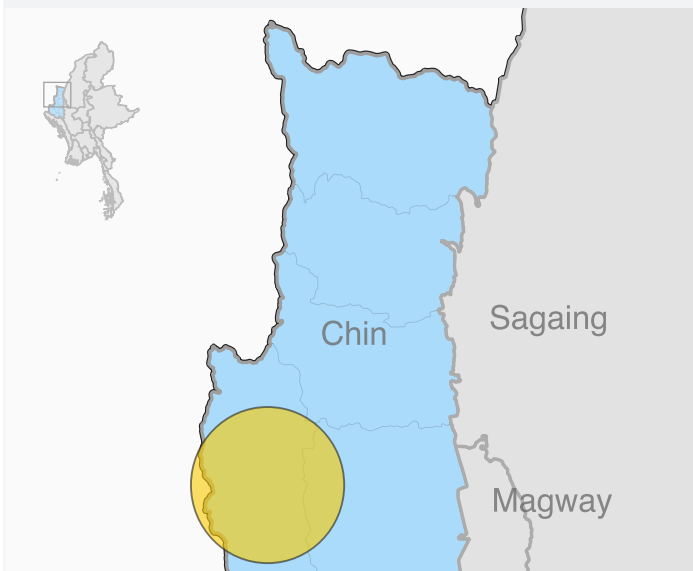
According to data from the Armed Conflict Location & Event Project (ACLED), the number of conflict-related events in Chin State declined from September to December 2022, reaching their lowest point in more than one year (see **Figure 1**).<sup>1</sup> UN estimates also suggest slower growth in the number of IDP in Chin State during part of this period. IDP counts in Chin State were unchanged in September and October, although in November they increased from 45,800 to 53,700.<sup>2</sup> Indeed, Chin State continued to experience clashes in late-2022, and many IDPs struggled not only with the continued threat of armed

conflict but also poor access to nutritious food, health care, education and adequate livelihood opportunities to meet their basic needs. As armed conflict continues to disrupt critical market systems, more data is needed on the conditions of IDPs in Chin State.

**The MAU surveyed current and former IDP households primarily from Thantlang township about their living conditions and market access.** The survey of roughly 380 households represents a population of more than 1900 currently- or previously-displaced households which enrolled in one or more cash assistance programs. The study focussed on displacement status, household living conditions, financial resources, access to markets/ goods and food security. The study is not intended to represent all IDPs in Chin State, nor is it intended as an evaluation of the effectiveness of cash programs there. The study includes the results of an earlier survey of the same population in late-August / early-September 2022.

**MAP 1. Distribution of study population, by Township**

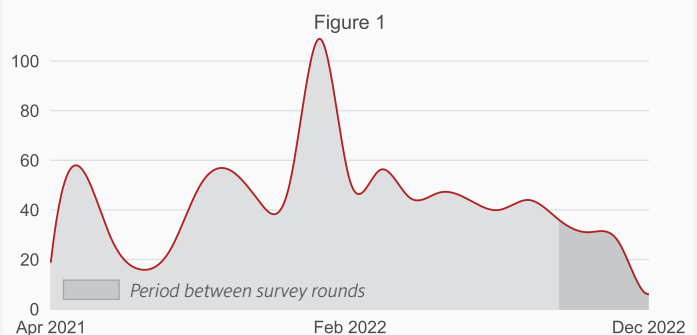
The study population includes IDPs from two Chin townships.



**FIGURE 1. Conflict Events in Chin State, by Month**

Conflict events declined from September to December.

Source: ACLED



<sup>1</sup> ACLED. January 2023. Armed Conflict Location and Event Data Project. [www.acleddata.com](http://www.acleddata.com).

<sup>2</sup> UN in Myanmar. January 2023. Myanmar Emergency Overview Map.

## LOCATION AND SHELTER

**In early-December most IDP households still lived in host homes, but fewer were living in displaced sites than three months earlier.** As previously reported, most households in the population were displaced during or after September 2021 (just 1% were redispaced in the three months between survey rounds).<sup>3</sup> As of early-December, 79% remained displaced while 15% had returned to their original homes and 6% had been resettled.<sup>4</sup> Just 3% of households had left Chin State, although 7% had left their township for another township in the state (typically Hakha or Kampetlet). From September to December, the portion of households in residences remained around two-thirds, but the portion in temporary shelters grew from 9% to 20%, and those in displaced sites fell from 23% to 5% (see **Figure 2**). Housing in religious buildings remained rare.

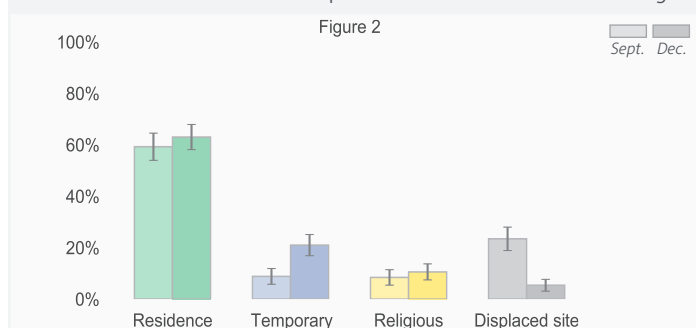
Other living conditions were unchanged, with more than half of all households continuing to describe healthcare, nutrition and education as "poor." Shelter and access to water worsened slightly, as the portion describing shelter as "good" fell from 11% to just 1% and the portion describing access to water as "Poor" rose from 8% to 14%.

## LIVING CONDITIONS

**Basic safety and access to food improved, while many said health care, nutrition and education remained poor.** Fewer households described their safety/security and access to food as "poor" in December than in September (see **Figure 3**). These improvements may be due to reduced conflict as well as a seasonal increase in rice supply—which might lower prices for some products by early-December—as well improved mobility (see below).

**FIGURE 2. Type of Shelter**

Fewer households lived in displaced sites than three months ago.

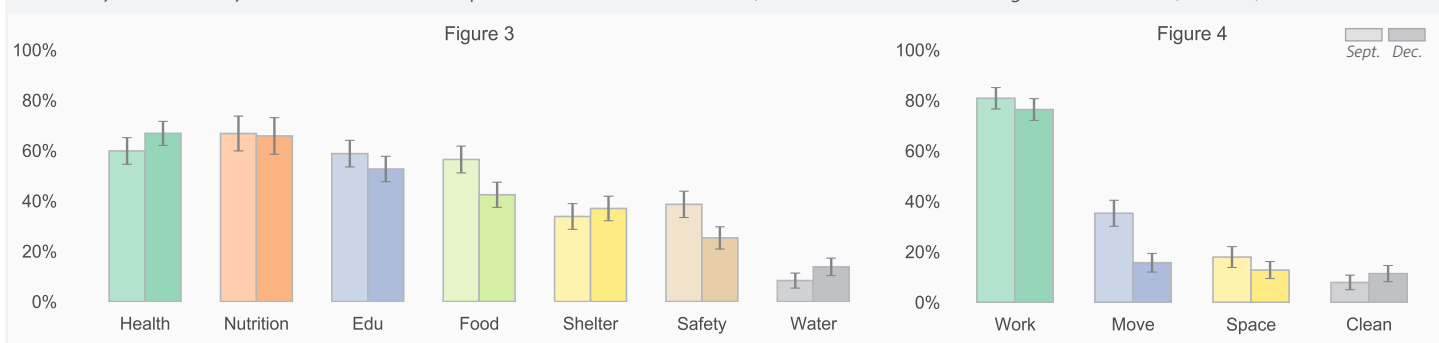


Fewer households described freedom of movement as poor, but access to work remained poor for three-in-four households. Sixteen percent of households said freedom of movement was poor, down significantly from 35% three months earlier (see **Figure 4**). Better freedom of movement was correlated with better food security measures (which also improved for some households; see **Food Insecurity and Coping**). Access to work was

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

Security and mobility and access to food improved for some households, but there was little change in health care, shelter, or work.



### BOX 1. Living Conditions Measures Used in the Survey

This study focussed on conditions related to seven strategic response priorities in the 2022 Humanitarian Response Plan (HRP) and asked households to rate their own conditions as "Poor," "Moderate," or "Good." The HRP is the coordinated plan for humanitarian agencies to meet the acute needs of people affected by recent crises in Myanmar. The study used the HRP as a guide only, and data do not reflect progress toward related objectives. 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;

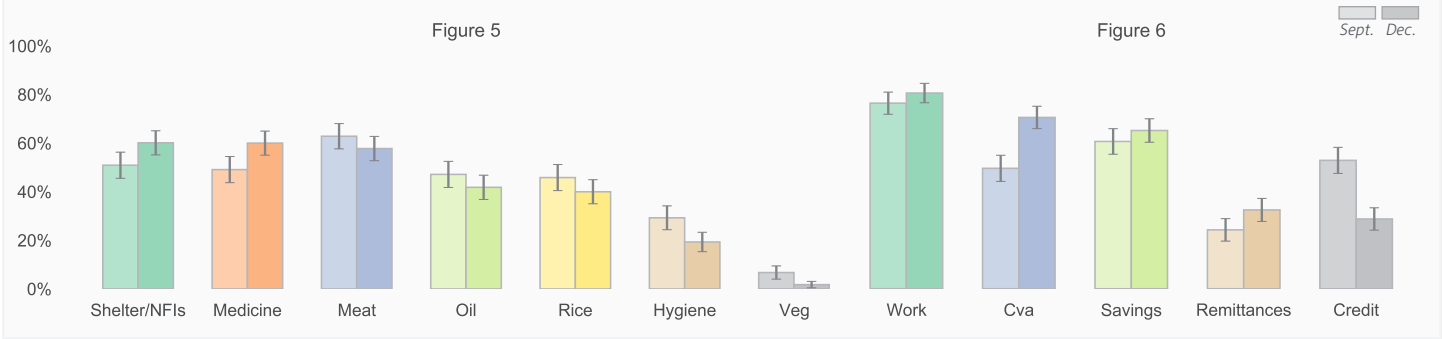
- Space** - Sufficient space (absence of overcrowding);
- Cleanliness** - Access to a clean/sanitary environment.

<sup>3</sup> Market Analysis Unit, Chin State IDPs, September 2022.

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

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

Access to medicine worsened slightly, but for most products access was unchanged. Use of savings and CVA fell, while use of credit rose.



unchanged, with more than three-quarters of IDP households still describing work opportunities as "poor." Space and cleanliness worsened slightly, as the slim portion of households who described each of these as "good" fell at least ten percentage points to 4-5% in December (this may be tied to the decline in households describing shelter in general as "good", as mentioned above).

### ACCESS TO MARKETS AND GOODS

**The portion of households unable to travel to a food market increased slightly, although safety concerns were superseded by other barriers like poor transportation.** The portion of households able to travel to a food market in the past thirty days declined slightly from 82% in September to 73% in December. In line with reports of improved safety/security (see **Living Conditions**), the portion of households citing safety/security as the primary barrier to traveling to market fell from 58% in September to just 13% in December. Instead, a fairly-large 47% of households who could not travel to a market cited "other" factors as their primary barrier (this may refer to sickness or health problems, particularly given colder weather during November-February and poor access to medicine; see below). Roughly one-third of households also continued to cite transportation as their primary barrier to accessing markets. Interestingly, the portion of households with a market within thirty minutes inched up slightly in December—this may be related to anecdotal reports of some village markets reopening and/or households moving nearer to markets. Households unable to travel to markets accessed goods primarily through traders—both mobile traders and local traders based in their

#### BOX 3. Preferred Aid Modality

More-recently-displaced households preferred in-kind support.

**Most households preferred cash to in-kind assistance, but recently-displaced and more-food-insecure households preferred in-kind support.** Seventy-one percent of households preferred cash assistance to in-kind support, while 22% preferred in-kind assistance to cash. Seven percent held no preference for one over the other.

#### BOX 2. Children and Pregnant/Breastfeeding Women (PBW)

Nutrition was still poor for households with children and/or PBW.

**The portion of IDP households with children and/or PBW who said nutrition was "poor" held steady, and it was similar to the portion of households in general.** One-in-three households with children under five and/or PBW said nutrition in their household was "poor" (see **Figure 3**). Moreover, there was no measureable difference in nutrition between IDP households with children and/or PBW and IDP households in general.

village. Few households relied mainly on in-kind gifts or had others shop for them.

**Access to medicine worsened in December, and access to meat/fish and shelter materials remained poor for half or more of all households.** The portion of households describing access to medicine as "poor" inched upward and the portion describing it as "good" fell (see **Figure 5**); poor supply may be related to anecdotal reports of itemized permissions being required to bring medicines into Chin State. There was little measureable change in access to other goods, although the slim portion of households who described access to various products as "good" fell in December. The sole improvement was a small decline in the portion of households describing access to hygiene products as "poor" (down to 19% from 29%). Despite reports of improved access to food, there was no measureable change in access to meat, rice, vegetables or cooking oil (see **Living Conditions**).

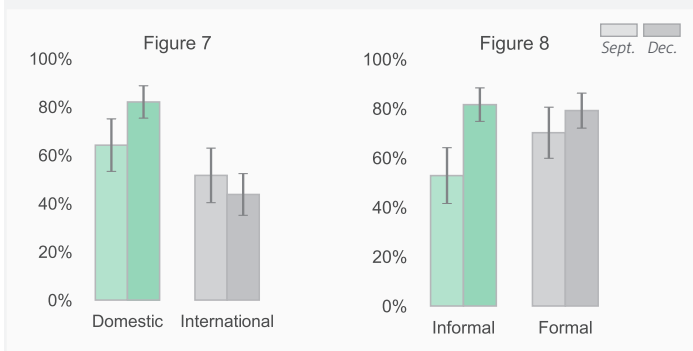
### SOURCES OF FUNDS FOR FOOD

**More households relied on cash assistance to buy food in December than in September, and fewer relied on credit.** There was no change in the portion of households buying food with work income, savings and/or remittances in December, but use of credit use shrank and use of cash assistance grew. The use of credit to buy food in the past thirty days fell from from 53% of households in September to 29% in December; the use of cash assistance meanwhile rose from 50% to 71%.<sup>6</sup> More than

<sup>6</sup> In Sagaing Region during this period, use of cash assistance fell while credit rose. That said, it is impossible to establish a relationship between the two from these studies.

## FIGURES 7 & 8. Sources and Channels of Remittances

The portion of households using informal remittances increased.



three-in-four households continued to use new income from work (mainly farmwork) to buy food. The use of savings and remittances to buy food was more common among more-recently-displaced households and those with higher food insecurity measures.

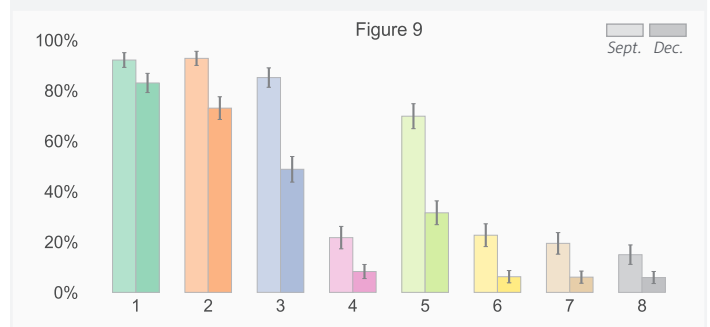
**The portion of households buying food with remittances was unchanged from September to December, but more recipients reported informal and domestically-sourced remittances.** There was no measurable change in the portion of households using remittances to buy food, but the nature of remittances shifted slightly. More recipients used informal channels in December than in September (see **Figure 7**). There was no evidence of recipients abandoning formal channels, and it is possible that households who already used formal channels adopted informal channels as well. The portion of recipients receiving remittances from domestic sources also edged upward to 82%, or nearly twice as many as those reporting international sources (see **Figure 8**).

## FOOD INSECURITY & COPING

**Food insecurity indicators improved in December, mirroring improved access to food.** The average Reduced Coping Strategies Index (rCSI) score—which focuses on negative coping behaviors in the preceding seven days—fell from 12.4 in September to 4.3 in December, reflecting improved access to food in general (see **Living Conditions**). Not surprisingly, households which were more-recently displaced registered higher rCSI scores. Food Insecurity Experience Score (FIES) indicators—which measure behaviors in the preceding month—also improved, particularly for the more-severe indicators. The portion of households reporting more-severe indicators (e.g., skipping a meal, running out of food, going hungry, or going a day without food) fell from 15–23% in September to 6–8% in December. The portion reporting less-severe measures (e.g., worrying about food, eating unhealthily) fell from 92–93% to 73–83%. Improved food insecurity indicators may be related to seasonal changes in supply and/or improved security and mobility (see **Living Conditions**).

### FIGURE 9. FIES Food Insecurity Indicators (Past 30 days)

Food insecurity measures improved in December.



### BOX 4. 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

- **In-kind support remains an important aid modality for supporting more-vulnerable IDP households.** Most households preferred cash to in-kind assistance, but households that were recently-displaced, struggled to travel, or which were more food-insecure often preferred in-kind assistance;
- **Health care services and medicine may be particularly needful during Chin State's cold months.** Access to medicines worsened, and health care—described by two-thirds of households as "poor"—remained more problematic than any other condition measured in the study. COVID-19, flu and other illnesses remain serious threats to the safety of IDPs, particularly in winter;
- **Demand for shelter materials—to which many IDPs already have poor access—could grow further.** More IDP households were living in temporary shelters in December (and fewer in displaced sites), and there was little sign of improved access to shelter materials.
- **Cash assistance may help prevent households from turning to unsustainable credit.** More households bought food with cash assistance as fewer did so with credit (while the use of other sources of funds held steady). While farm from conclusive, it is possible that cash assistance could help reduce reliance on creditor that may be unsustainable;
- **Food insecurity may worsen in the months ahead, even absent deterioration in the local security environment.** Food insecurity measures improved in December, likely due to improved security/mobility and local seasonal supply. However, as the winter season passes, new supply of vegetables, oilseed and rice will likely give way to higher seasonal prices and further strain household budgets.

## Market Analysis Unit (MAU)

The Market Analysis Unit is an independent project that provides donors, humanitarian responders, development practitioners and private sector actors in Myanmar with data and analysis to better understand the impacts of market developments, 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 services).

### CONTACT

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