

Sagaing Region IDPs

In late-November / early-December the MAU conducted a second-round survey of displaced households in Sagaing Region to understand challenges they face. The study is based on a probability sample representing 2700 households currently or previously enrolled in cash assistance programs. MAU reports are available online at www.themimu.info/market-analysis-unit.

KEY FINDINGS

- **Eighty-five percent of IDP households remained displaced as of early-December;**
- **One-in-five IDP households were redisplaced** since September;
- **The portion of households in temporary shelters grew from 56% to 76%,** due to redisplacement and households leaving host housing for temporary shelters;
- **Six percent of IDP households left Sagaing Region,** and 3% moved townships within the region;
- **Living conditions improved for some households since September,** but shelter was little improved;
- **More households relied on work and credit to buy food,** and fewer relied on cash assistance and savingst;
- **Slightly more households were unable to travel to market than in September,** but some of those who could said their freedom of movement improved;
- **One-in-five households ran out of food in the past month,** and food insecurity indicators were unchanged.

The number of displaced persons in Sagaing Region continued to grow in late-2022, despite a possible dip in conflict events. According to data from the Armed Conflict Location & Event Project (ACLED), the monthly count of conflict-related events in Sagaing Region dipped from August to December 2022 (see **Figure 1**).¹ During this period the rate of new IDPs nationwide also slowed for the first time in nearly one year.² New IDPs in Sagaing Region grew more slowly as well, yet they still rose from 528,300 to 616,500. Sagaing Region accounted for half of all new IDPs nationwide in this period. Most new displacement occurred in October, with smaller increases in November and December. IDPs struggled not only with

the continued threat of armed conflict but also poor access to shelter, food and financial resources to meet basic needs. As armed conflict continues to disrupt critical market systems, more data is needed on the condition of IDPs in Sagaing Region.

The MAU surveyed current/former IDP households from eight Sagaing Region townships about their living conditions and market access. The survey of roughly 400 households represents a population of more than 2700 currently- or previously-displaced households 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 Sagaing Region, nor is it intended as an evaluation of the effectiveness of cash programs. The study is a follow-up to a 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 eight Sagaing townships.

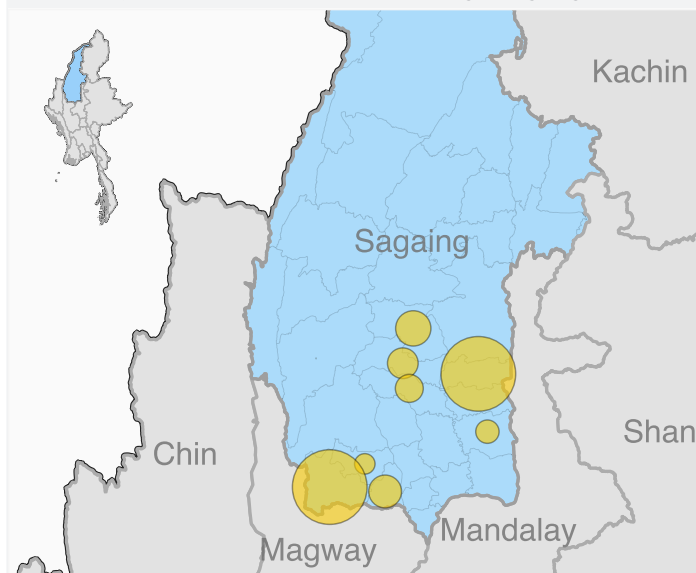
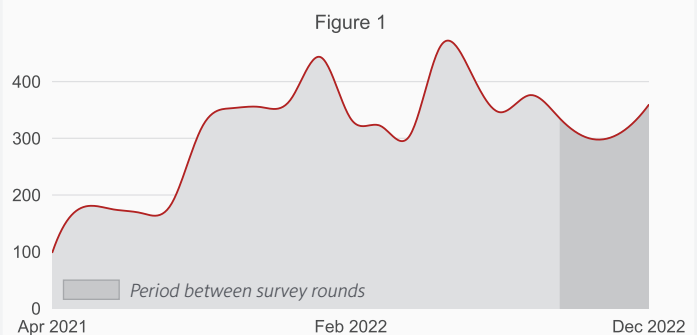


FIGURE 1. Conflict Events in Sagaing Region, by Month
Conflict events dipped from September to December.

Source: ACLED



¹ ACLED. January 2023. Armed Conflict Location and Event Data Project. www.acleddata.com.

² UN in Myanmar. January 2023. Myanmar Emergency Overview Map.

LOCATION AND SHELTER

Most households remained displaced and living in temporary shelters, and some had been redisplaced.

As previously reported, half of all households surveyed were displaced as recently as April 2022.³ Twenty-two percent of households were also redisplaced since September.⁴ As of early-December, 85% remained displaced while 14% had returned to their original homes. Six percent of households had left Sagaing Region—most moving to neighboring townships in Mandalay or Kachin State—while 3% had left their township but remained in the region. From September to December, the portion of households in temporary shelters grew from 56% to 76%, while those in residences fell from 39% to 22% (see **Figure 2**). This was due partly to redisplacement, but anecdotal reports suggest it was also due to IDPs leaving host houses to resettle in temporary shelters near their former homes. Housing in religious buildings or camps remained rare.

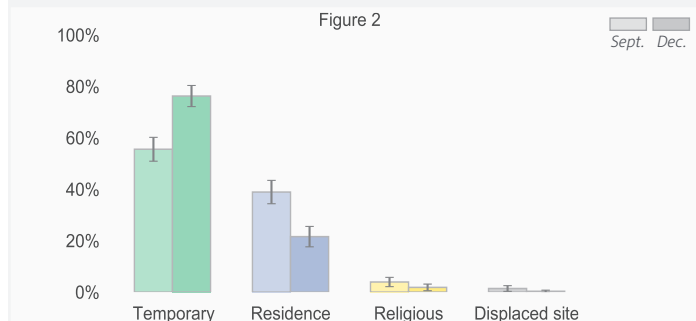
LIVING CONDITIONS

Basic safety and access to education, food and healthcare improved for some households, but there was little improvement in shelter.

Fewer households described some living conditions as "poor" in December than in September, with the biggest improvement in access to education (see **Figure 3**). Thirty percent described

FIGURE 2. Type of Shelter

Some households moved from residences to temporary shelters.



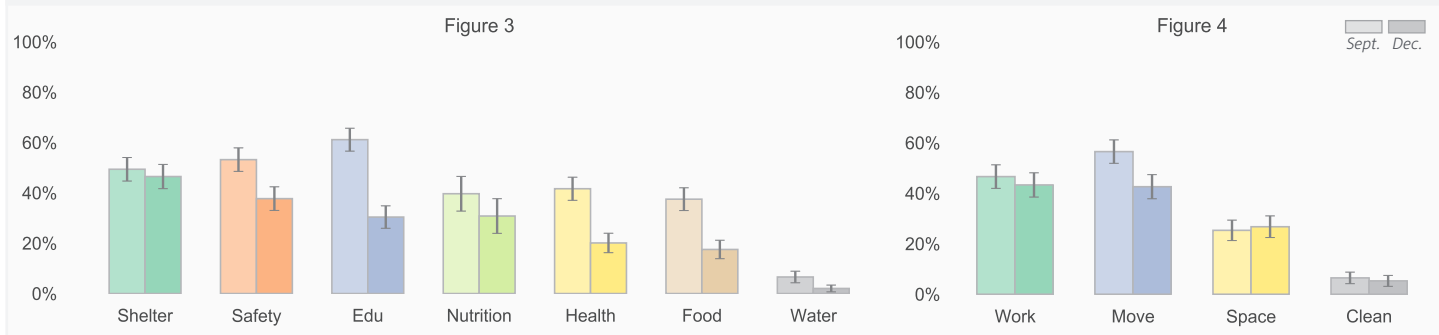
education as "poor"—half as many as previously—and 10% described it as "good." That said, roughly one-third of households still described safety and access to education as "poor," and few described any other conditions as "good." There was no improvement in access to shelter, as half of all households still described it as "poor."

Fewer households described movement as poor in December than in September, although both movement and access to work remained poor for many.

Forty-three percent of households said freedom of movement was poor, down slightly from three months ago (see **Figure 4**). There was no measurable change in the portion of households who said access to work (43%) or space (27%) was poor. Poor mobility was correlated with

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

Access to education, health, food and safety improved for some since September, but there was little change in shelter, mobility and 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);

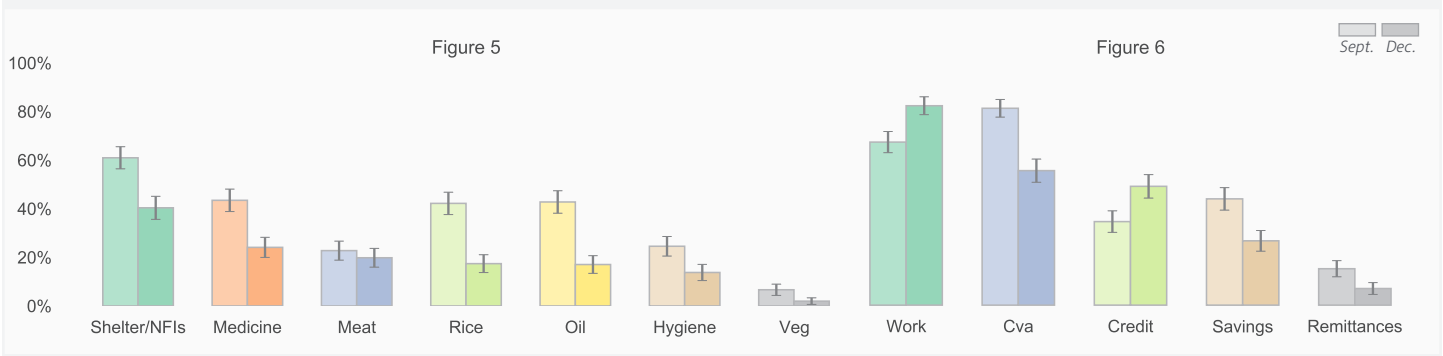
Cleanliness - Access to a clean/sanitary environment.

³ Market Analysis Unit, Sagaing Region IDPs, September 2022.

⁴ 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 goods improved, particularly for shelter, rice and oil. Use of savings and CVA fell, while use of credit and work-income rose.



poor reports for many living conditions. Households with poorer freedom of movement more often described various living conditions as poor as well.

ACCESS TO MARKETS AND GOODS

Fewer households were able to travel to market in December than three months ago. As noted in the previous study, two-thirds of households must travel at least thirty minutes to access a food market. Two-in-five households said no one from their household was able to travel to a food market in the preceding thirty days, up slightly from three months earlier.⁵ Among those who could not, there was some shift in the reasons cited: fears of safety and security remained the primary reason, but this was less common than before; by contrast, a growing number of households cited poor transportation as the primary barrier. Households which could not travel to market accessed goods through traders—both local traders from their village as well as non-local traders who visit their village from elsewhere; a smaller portion of households have others do shopping for them (reliance mainly on in-kind gifts was rare).

Access to shelter materials remained far more problematic than other products, but access to goods in general improved since September. Forty percent of households described access to shelter-related materials/NFIs (e.g., plastic tarps, blankets, towels) as "poor", down from 61% in September (see **Figure 5**). Less than one-quarter of households described access to other goods as "poor." The biggest improvement was in access to rice and cooking oil, with the portion describing ac-

BOX 3. Preferred Aid Modality

Many households preferred cash to in-kind support.

More households preferred cash to in-kind assistance as an aid modality, although many also had little preference between the two. Fifty percent of households preferred receiving cash assistance over in-kind support, while 39% held no preference for one over the other. Twelve percent preferred in-kind assistance to cash.

BOX 2. Children and Pregnant/Breastfeeding Women

There was little measureable change in nutrition quality.

There was no measureable change in nutrition for households with children under five and/or pregnant or breastfeeding women. Among households with children and/or pregnant or breastfeeding women, one-third still described nutrition as "poor" (see **Figure 3**). Poor nutrition was correlated with poor mobility and inability to travel to markets; these households also often struggled to access rice and meat.

cess to these as poor cut in half—this is likely due in part to the arrival of new seasonal supply. While there were small increases in the portion of households describing access to rice and oil as "good," most said it was "moderate." There was no measureable change in access to meat/fish.

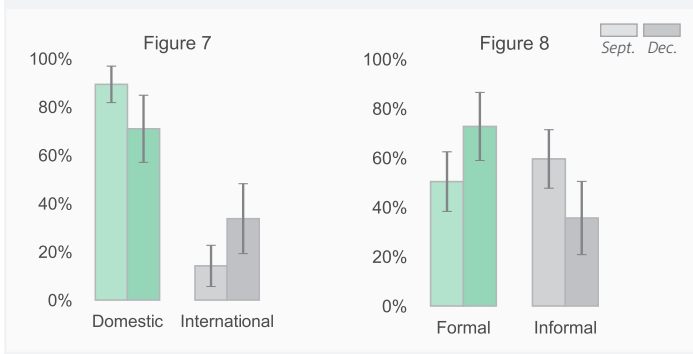
SOURCES OF FUNDS FOR FOOD

More households relied on credit and work income to buy food in December than in September, and fewer relied on cash assistance or savings. The use of new income from work (mainly agricultural) remained the most common source of funds for buying food, rising from 67% of households in September to 82% in December. Cash assistance and credit were each used by roughly half of all households, but they trended in opposite directions. Forty-nine percent of households purchased food with credit in the preceding thirty days, up from 35% three months ago; by contrast, the use of cash assistance fell from 81% to 56%. The use of savings also fell from 44% to 27% of households. On the one hand, the increased reliance on income may be due to more work opportunities like rice harvest; on the other hand, the absence of change in reports of access to work suggest it could be more due to lack of other available resources (see **Living Conditions**). The use of savings and credit appeared less common among more-recently-displaced households.

The use of remittances to buy food was less common in December than in September. Just 7% of households

⁵ Although freedom of movement improved for some (see Living Conditions), this was primarily among households that could already travel to market.

FIGURES 7 & 8. Sources and Channels of Remittances
Most remittances were formal and sourced domestically.



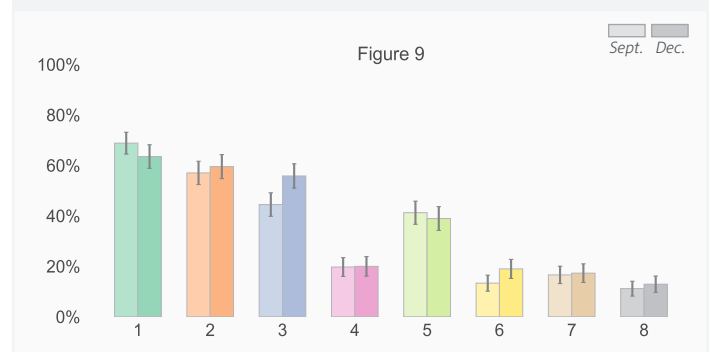
bought food with remittances in December, compared 15% in September. There was no measureable change in the source or channel of remittances in the past three months. Domestically-sourced remittances remained far more common than internationally-sourced remittances (see **Figure 7**). While there was no measureable difference in channels used in September, in December more households reported using formal remittance channels (73%)—mainly mobile banking platforms like Wave Money—than informal channels (36%) (see **Figure 8**).

FOOD INSECURITY & COPING

At least one-in-ten households reported several more severe negative coping strategies associated with food insecurity. Roughly 10-20% reported severe food insecurity indicators such as skipping a meal, exhausting food supply, going hungry or going at least one day without a meal (see **Figure 9**). Three-in-five households reported less-severe indicators, such as worrying about food, or eating unhealthy or limited varieties of food.

There was little change in food insecurity indicators in the past three months, despite improved access to food products for some households. The average Reduced Coping Strategies Index (rCSI) score—which focuses on behaviors in the past seven days—was largely unchanged. Moreover, there was no measureable change in six of seven Food Insecurity Experience Score (FIES) indicators, which measure behaviors in the past month (the portion of households who said they "ate only a few kinds of foods" in the past thirty days rose from 44% to 56%). This stands in contrast to improved access to food, wherein just 18% of households described their access to food as "poor," compared 38% three months ago (see **Living Conditions**). In fact, FIES indicators improved for respondents who reported improved access to food, but this was not enough to move the needle for the population as a whole. Another reason for the lack of change may be that the median rCSI score was already very low in September, with only a minority of households reporting the severest food insecurity indicators in either round.

FIGURE 9. FIES Food Insecurity Indicators (Past 30 days)
Food insecurity measures were similar in September and 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 assistance may be needed to help address critical needs, particularly with respect to shelter.** Quality of shelter remained poor for many households, as did access to shelter materials and NFIs. This can be due to high prices, poor supply or inability to reach markets, market features which in-kind assistance could help overcome;
- **Households which are turning to credit may need additional cash assistance more urgently.** Fewer households bought food with cash assistance and remittances, and more turned to credit; this could presage greater financial hardship if households access informal credit on bad terms. Borrowers may need more or different assistance;
- **Redisplaced households may need particular attention.** One-in-five households were redisplaced during a three-month period. Assistance to IDPs should take into account the prospect of future displacement. Moreover, households may have unique needs after displacement that distinguish them from other IDP households;
- **Facilitating local trade networks may help reach vulnerable groups.** Some households were still unable to travel to market; other households—even those for whom security improved—said transportation remained a barrier to doing so. Facilitation of local trade networks serving these groups may improve access to markets and goods;
- **Further research is needed to better understand specific conditions of IDP households.** A deeper look at multiple indicators for particular topics—e.g., shelter, nutrition, finance—is needed to more fully understand household conditions which could only be touched on in this study.

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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