Assessment Capacities Project (ACAPS) and International Organization for Migration (IOM) in Bangladesh

Operational contexts

The Assessment Capacities Project (ACAPS) was established in 2009 as a non-profit, non-governmental project with the aim of providing independent, ground-breaking humanitarian analysis to help humanitarian workers, influencers, fundraisers, and donors make better decisions.

In Bangladesh, the ACAPS analysis hub is an independent analysis unit hosted by IOM's **Needs and Population Monitoring (NPM)** and has been based in Cox's Bazar since December 2017. Their mandate is to support the response make evidence-based decisions and improve the understanding of the overall situation.

International Organization for Migration (IOM) is the leading inter-governmental organization in the field of migration and works closely with governmental, intergovernmental and non-governmental partners.

In Bangladesh, IOM provides life-saving and sustaining assistance that meets the needs of Rohingya refugees in Cox's Bazar, while strengthening early recovery and preparedness initiatives to prevent further crises. **The Communications with communities (CwC) unit**, provides coordination and technical support to sectors and organizations working on communications and community engagement as part of the response to the Rohingya Refugee Crisis.

The **Rohingya refugee population** in Cox's Bazar have shown mistrust and reluctance towards health care facilities and humanitarian actors. During the COVID-19 pandemic, reporting symptoms was synonymous with community risk – they viewed it as informing authorities of something that could negatively impact the community's protection and safety. The Rohingya overwhelmingly decided not to seek treatment, not to test, and chose to manage COVID-19 themselves. This mistrust and reluctance was also reflected in data collection during this period of time.

Case study

On 25 March 2020, the Refugee Relief and Repatriation Commissioner (RRRC) suspended all non-essential humanitarian activities in the Rohingya refugee camps in Cox's Bazar and reduced the number of humanitarians allowed in by 80%. All regular primary data collection, in particular face-to-face data collection, stopped. However, for the response to make evidence-based decisions and meet the needs of the affected population, primary data collection needed to continue. Three different techniques were available to humanitarian actors in Bangladesh in place of regular in-person data collection:

1- Remote quantitative mobile data collection (call-based surveys). In contrast with other contexts, call-based surveys were not the most appropriate and efficient technique to Cox's Bazar context due to the presence of mistrust from the affected population, the patchy and unreliable network access, and the low and unequal mobile phone ownership and literacy, resulting in numerous challenges and biases in the collected data.

2- Small scale data collection through essential programming staff, conducted mostly by implementing agencies needing granular information. M&E activities were put on hold because of COVID-19 and critical programming staff and Rohingya volunteers conducted qualitative small-scale Key Informant Interviews (KIIs) instead. A rumour tracking system was set up this way.

3- Rohingya refugees as researchers: IOM's CWC unit continued face-to-face data collection using Rohingya field researchers trained in qualitative data collection methods (participatory, participant observation, thick description, and open- and semi-structured interviews) and transcription before the pandemic. When external access to the camps was blocked, this Rohingya team continued consultations on community perceptions.

This case study reflects on the experience of data collection during the COVID-19 pandemic in a context such as the one in Cox's Bazar, with a particular focus on the third data collection technique employed by IOM's CWC & ACAPS i.e. **Rohingya refugees as researchers.**

Cox's Bazar, Bangladesh

In my opinion, the field researchers and humanitarian actors should improve trust building and have a respectful communication with the affected population (consent, confidentiality, safe space creation, active listening), but also improve community engagement and provide feedback back to the community. They should not expect gaining acceptance from the affected population by just doing data collection.

Rohingya Researcher, CWC

Opportunities

- In the absence of a large-scale representative data collection, a **combination** of smaller primary data collections (both **qualitative and quantitative**) can provide an **overall picture of a complex reality.**
- Recruiting researchers among the affected population helps **overcome** some **pervasive trust and communication challenges**, allowing the Rohingya to communicate in their native language and through open ended discussions without the presence of external humanitarian responders.
- The **researchers** were able to **reach specific vulnerable groups** (no access to phones and limited access to public spaces - often women and people with disabilities).
- Introduction of more rigorous **quality control methods** - recording and multiple checks of interviews conducted in Rohingya.
- Use of **quotes of affected population** allows an accurate representation of the affected population and ensures its voice is being communicated directly to the different levels of decision making.

Hurdles

- **Theoretical saturation and coverage** of different demographic groups across the camps remained **challenging** - to comply with COVID-19 prevention measures, a combination of purposive and convenience sampling was used and the number and frequency of data collection rounds was reduced.
- Due to **movement restrictions** in the camps, the researchers have faced difficulties visiting some of the targeted areas (different sub-blocks/camps).
- Developing a team of trained Rohingya researchers takes **more time and investment** than building an external data collection team, and restrictive gender norms and security risks makes **recruiting female researchers** and ensuring their safety while working difficult.
- **Process and analysis** of the data collected by the Rohingya refugees as researchers is **particularly time consuming and resource intensive** – translating, and manually coding and analysing over a hundred pages of transcripts each week takes **a lot of time, capacity and resources**.

Recommendations

- o **Localise research and data collection:** response actors should invest in and recognise the capacities of members of the affected population to work as researchers and enumerators. Ongoing investment in training can guarantee access to camps and sites when entry is restricted and should result in researchers taking the lead in research design.
- o **Prepare ahead for a data collection with Rohingya refugees as researchers:** prepare ahead of time to have a team in place that can implement this type of research method – from training the affected population, hiring and training the translators and data analysts, to acquiring knowledge on how this type of information can be used to support humanitarian programming and to inform decision making.
- o **Adapt data collection methodologies:** data collection methodologies must accommodate the preferences of the affected population on how they would like to tell their stories and report their needs.
- o **Strengthen accountability, inclusion and representation of affected population:** developing an in-depth understanding of the population, increasing community engagement and participation in data collection processes, and investing in assessment preparedness to ensure that qualitative and quantitative data collection exercises include the most vulnerable and hard-to-reach populations.
- o **Provide feedback and responses to affected population:** a data collection solution that does not have the affected population at the centre isn't complete. The ability to feed the results of data collection back to the community in what the sector has called 'closing the community feedback loop' is a gaping hole in Cox's Bazar and induces distrust.
- o **Strengthen coordination and data sharing:** coordination between data collection actors must be strengthened and data sharing practices improved to reduce duplication, ensure data is used to its fullest, and improve overall data collection quality and standards.