

Inter-Sector Needs Assessment (ISNA) Gender in Humanitarian Action (GiHA WG)

ISNA 2024

Findings

A. Sector Priority Needs and Gaps

This analysis is based on an analysis of ISNA data from across various sectors and sub-sectors to highlight key emerging priority needs and gaps from a comprehensive gender perspective. The analysis is based on a “voice, choice, safety” approach:

- **voice** (women’s leadership and participation/representation),
- **choice** (women’s economic wellbeing and resilience, access to trainings and income generation), and
- **safety** (gendered protection and safety concerns)

VOICE

In terms of voice, the ISNA data does not comprehensively track women’s or women-led/women’s rights organizations’ meaningful participation in the Rohingya refugee response. Nonetheless, both the heads of male- and female-headed households polled for the ISNA research felt that their opinions on humanitarian assistance and services was being taken into account in the response, with no marked differences between the two categories (Note that there are 2840 male-headed households and 625 female-headed households in the dataset, but due to the data collection methodology, women may have answered for male-headed households as well).

	Not at all	Not often	Sometimes	Most of the time	Always
Male-headed	0.77% (n=22)	1.48% (n=42)	6.27% (n=178)	25.70% (n=730)	65.77% (n=1868)
Female-headed	0.32% (n=2)	1.60% (n=10)	5.76% (n=36)	23.36% (n=146)	68.96% (n=431)

A closer look at the ISNA data however showed gendered differences in women’s and men’s participation and ways of making their voices and concerns heard. In terms of accessing feedback and complaints mechanisms, differences between women and men were small but statistically significant. Among respondents *who reported*

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that they knew how to share feedback/complaints (n=2503 i.e. 72% of all survey respondents), 47.94% of male respondents had ever used formal channels and 42.52% female respondents had ever used formal channels. More significant, perhaps, is the implication that 28% of all survey respondents reported that they did not know how to use formal reporting channels. Similarly, men were statistically more likely than women to report using formal channels (37.60% vs. 28.08%); and women were statistically more likely than men to report using informal channels (20.62% vs. 17.59%)

According to accountability to affected people-mechanisms (AAP) WG ISNA data, 97 percent of beneficiaries stated that they had enough information about humanitarian efforts, 99 percent stated that they could understand this information and 72 percent reported being aware of how to lodge complaints through formal channels. However, when it came to sensitive issues regarding humanitarian worker misconduct, according the PSEA WG ISNA data, 41% of households do not know where to report, with only 26% of women knowing where to report complaints compared to 33% of men. According to PSEA ISNA data, those with knowledge on how to report any complaints, preferred CiCs (72%) followed by Women- Girl Safe Space (43%) and Majhi (38%).

A further area where the data showed a significant difference in whether respondents felt that they had opportunities to contribute to the community or take on leadership roles (questions A 17.11). Male respondents were more than twice as likely (38.8 percent) to reply yes compared to women (17.7 percent), and it is notable that in both cases the figure is well below fifty percent.

Count of A.17.11 Do you feel you have opportunities to contribute to your community or take on leadership roles?

Row Labels	No	Yes	Percentage of respondents saying yes	Grand Total of respondents
Female	149	32	17.7%	181
Male	115	73	38.8%	188
Grand Total	264	105		369

A similar trend emerged in terms of whether respondents had ever been involved in the implementation or monitoring of humanitarian activities, where only 6.1 % of women, compared to 26.6 % of men replied that they had ever (often, sometimes, rarely) been involved.

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Count of A.17.13 Have you been involved in the planning, implementation or monitoring of any humanitarian activities?					
Row Labels	No	Often	Rarely	Sometimes	Percentage of respondents who have ever (often, rarely) been involved Grand Total of respondents
Female	170		3	8	6.1 % 181
Male	138	3	21	26	26.6 % 188
Grand Total	308	3	24	34	369

As the ISNA data from the youth working group shows, the degree of voice is even more limited for younger people, likely leading to a double-marginalisation of younger women, though due to the data collection methodology, the youth data cannot be meaningfully sex-disaggregated.

CHOICE:

In terms of choice, two areas where the ISNA data showed gendered differences were in the access to training or education in life skills, as well as in terms of time used for domestic work. While most of all respondents had not had access to life-skills training or education (Question A 17.10), there was a statistically significant difference in 84 % of women never having had access compared to 75 % of male respondents.

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Count of A.17.10 Have you received training or education in life skills such as communication, problem-solving, or decision-making?						
Row Labels	Column Labels				Percentage saying never had access	
	No, never	Not applicable/I prefer not to answer	Yes, once or twice	Yes, regularly		Grand Total
Female	152	2	23	4	84 %	181
Male	141	3	42	2	75 %	188
(blank)						
Grand Total	293	5	65	6		369

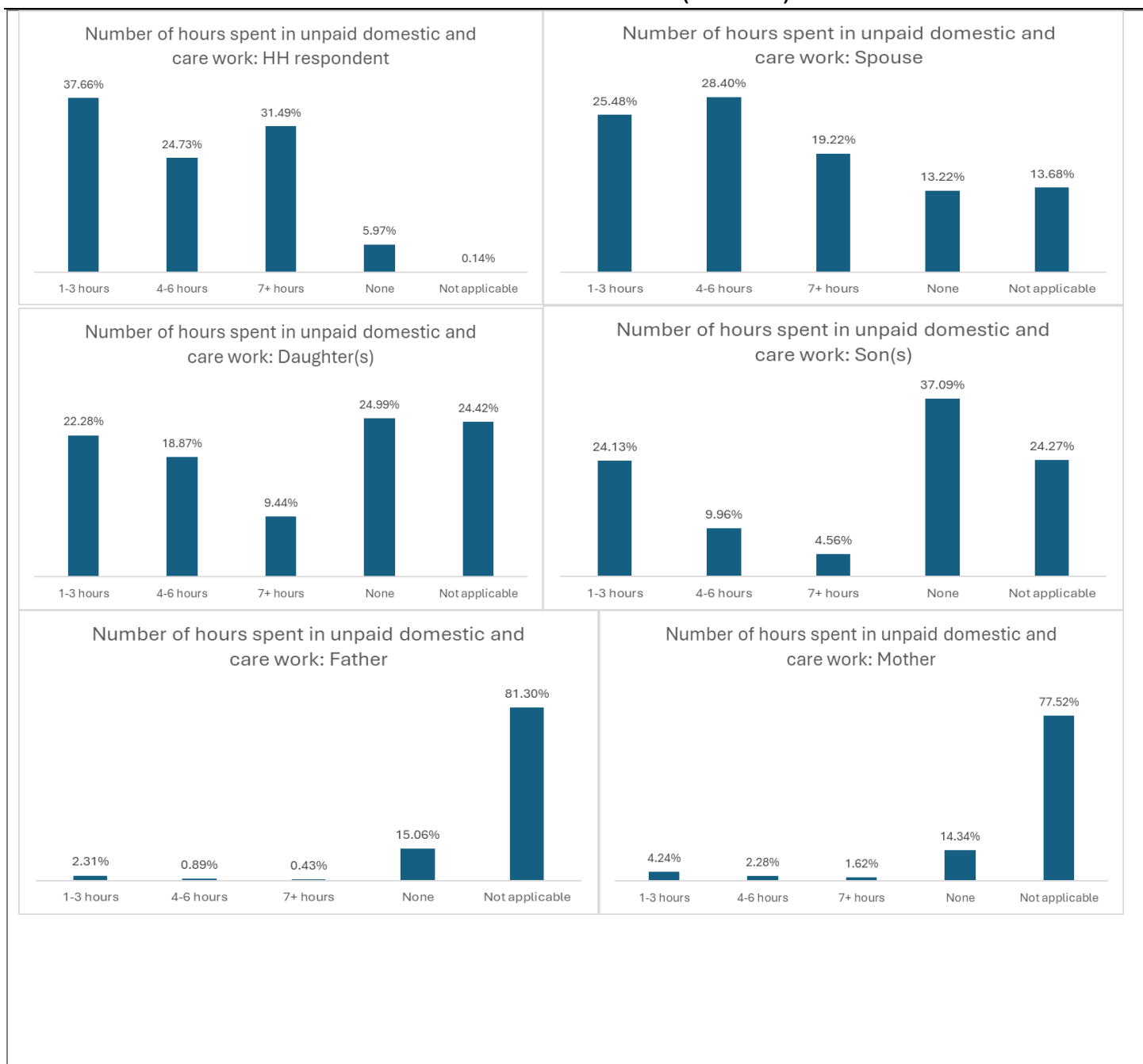
An analysis of reported time uses also showed the continued gendered division of labour in households:

The ISNA 2024 GiHA data represents the following interpretations:

Indicator: A.14.12 Now I am going to ask you about the unpaid domestic and care work activities for family members. How much time do you and the following family members spend on unpaid domestic and care work? Note: How long they spent cooking, cleaning, and caring for their child/children or the elderly in the last 24 hours

- Females – women and girls – spend significantly more time on unpaid domestic and care work activities than men.
- The proportion of women reporting 7 hours or more a day on domestic & care work is about 3.5 times more than that among men, whereas men are reportedly more than twice as likely to use only 1-3 hours per day.
- Girls are about twice as likely as boys to do 7 hours or more a day of domestic & care work, and boys are significantly more likely to do 'none'.

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SAFETY

Deteriorating safety and security have been and are one of the most pressing concerns for refugees living in the camps, with negative impacts on their physical and psychological well-being, as well as on mobility. As has been documented by numerous external reports and as reflected in the ISNA data (see also protection and GBVSS

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data analysis), gendered risks and vulnerabilities have dramatically increased over the course of 2024. Women and girls continue to remain disproportionately at risk from various forms of GBV and SEAH, including domestic and intimate partner violence, early and forced marriage, sexual harassment (including when accessing WASH facilities), and risks of human trafficking. Men and boys have, over the past year, been increasingly at risk of abductions, forced recruitment, and targets of direct violence, be it criminally or politically motivated. These differential threats and risks reflect dominant gender norms, reinforce these, and are exacerbated by them.

In terms of gendered perceptions of security risks, there were some statistically significant differences around a higher women's perception of GBV, child marriage and accessing sanitation as security risks, but it is also important to note the low overall numbers of respondents raising these as issues

	TOP 5 RISKS - Statistically significant results			
	Male (n)	Male (%)	Female (n)	Female (%)
Child marriage	10	5.3%	36	19.9%
Sanitation	5	2.7%	14	7.7%
Uncertainty about future	109	58.0%	67	37.0%
Trafficking	22	11.7%	9	5.0%
Economic uncertainty	47	25.0%	10	5.5%
Education	41	21.8%	9	5.0%
GBV	9	4.8%	30	16.6%
Statelessness	43	22.9%	18	9.9%
Psychological	39	20.7%	23	12.7%

Food insecurity, though improving slightly in 2024 compared to previous years, is a further human security risk, and one which can also indirectly contribute to GBV, especially in the household. In the ISNA data quoted by the GBVSS ISNA report, 73.22% of households (Female-headed HH 19.25% and male-headed HH 53.81%) reported that they buy food on credit or through borrowed money from relatives and friends. Additionally, 14.01% of households (Female Headed HH 3.30% and Male Headed HH 9.98%) stated that they are reducing their

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expenditure in health, female hygiene items, education and selling household properties to meet their expenses on basic needs.

B. Sector service or response gaps.

ISNA 2024 data points from different sectors:

1) Voice: leadership and participation – sex disaggregated data on HHs & awareness/access to information (only)

Proportion of female vs. male-headed HHs

(Note: Data on question 1.8 on gender of HH head is not included in Sheet 1).

Awareness – information on service organizations (Q 9.23)

Awareness – committees active within the site (Q 9.27)

Accessing/checking information (Q 11.2)

2) Choice: economic wellbeing and resilience

HH income & livelihood sources & access to livelihoods skills training (Q 7.1; Q 7.2; Q 7.6)

Extent of caregiving responsibility (Q 14.12)

3) Safety: protection and safety

Cross-cutting protection issues, e.g. WASH: safety accessing latrines at night (Q ??); AAP: knowledge of CFRMs (Q 15.1)

GBV, protection gender analyses

Analysis:

1) Voice: leadership & participation – ISMN data limited to HHs & awareness

Proportion of female-headed HHs (FHHs) is about one-fourth of the total; most common FHHs is one where women reside together with children

While analysis needed on different trajectories leading to HHs being female-led, generally speaking, with 52% of the refugees being female, the dominance of male-led HHs (MHHs) can be interpreted as reflecting gender norms (men as breadwinners; women's place as within the home).

3,196 (92.2%) refugee women and men out of the total 3,465 reported being aware of organizations providing humanitarian services. This proportion was 90.5% among women and 93.5% among men. (A.9.27) (Q 9.23).

2,930 (84.6 %) of the total 3,465 refugees reported knowing about committees active within the site. This proportion was 86.3% among women and 83% among men. (A.9.27)

2,143 (61.8 %) of the total 3,465 refugees reported accessing or checking information 'always'. This proportion was 61.5 % among women and 62.2% among men. (Q 11.2).

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Males reportedly slightly more aware of organizations providing services and having slightly better access to information, whereas females reportedly slightly more aware of committees. (ISMN does not ask questions about decision-making).

Leadership & participation – ISMN data limited to HHs & awareness

- *Levels of disadvantage faced by female-headed HHs (FHHs) (about one-fourth of the total) and social norms related to women's participation and voice within the family and community.*
- *With 52% of the refugees being female, the dominance of male-headed HHs (MHHs) can be interpreted as reflecting gender norms (men as breadwinners; women's place as within the home).*
- *Males reportedly slightly more aware of organizations providing services and having slightly better access to information, whereas females reportedly slightly more aware of committees. (ISNA does not ask questions about decision-making).*

2) Choice: economic wellbeing and resilience

Access to trainings & income generation:

68/3,465 (2%) identified gender related cultural, social constraints as reason for not attending livelihoods skills training.

17/3,465 (0.5%) identified gender related cultural, social barriers preventing access to income opportunities. 255 respondents identified various movement restrictions as prevented access to income generation, of which 83 females and 172 males; movement restrictions related to unsafety cited by a few (only) and more commonly by males than females.

8 (0.25%) identified lack of female staff at facility as reason for not attending livelihoods skills training.

37/3,465 (1%) identified lack of female staff at facility as barrier preventing access to income opportunities.

Lack of female staff presented as more significant factor preventing access to income opportunities (1%), than to training (0.25%).

Gender related constraints reported more commonly as presenting barrier to training (2%) than to income generation (0.5%).

Gender not reported as significant factor preventing access to income opportunities or training (2 % or less). More respondents cited gender constraints in access to training as a gap, than addressing gender constraints in access to income generation.

Identified gender related cultural, social constraints as reason for:

- preventing access to income opportunities.
- lack of female staff at facilities hampering women's participation
- HH income & livelihood sources & access to livelihoods skills training - Clearly women are lagging.

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	Female respondents, heads of HHs (463/1,731)	Male respondents, heads of HHs (1,537/1,734)	
HH has an income	214 out of 463 ≈ 46.2 %	1,152 out of 1,537 ≈ 75 %	Less than half of FHHs report having any source of income vs. the majority, three-fourths, of MHHs report having income.
HH earns 1-3,000 BDT monthly	68 out of 214 ≈ 31.8%	217 out of 1,152 ≈ 18.8%	FHHs are almost twice as likely to earn (only) 1-3,000 BDT monthly.
HH earns above 10,000 BDT monthly	14 out of 214 ≈ 6.5%	110 out of 1,152 ≈ 9.5%	MHHs are about 8 times more likely than FHHs to earn above 10,000 BDT monthly.
Q.7.6. HH barriers preventing access to income: caregiving	10 out of 463 ≈ 2.2%	2 out of 1,537 ≈ 0.1%	Caregiving is overall not reported as a major barrier to income generation. It is more likely to be reported as a barrier in female-headed HHs. (YET: cp. responses to Q 14.12).

Unpaid domestic and care work activities:

- 830 out of total 1,731 of females (48 %) vs. 263 out of total 1,734 of males (15.2 %) report 7 hours or more of domestic & care work per day
- 24 out of total 1,731 of females (1.4 %) vs. 185 out of total 1,734 of males (10.7 %) report 'none' domestic & care work per day
- 328 out of 3,465 (9.5 %) respondents report daughters as doing 7 hours or more of domestic & care work per day; 867 report 'none' (25 %)
- 159 out of 3,465 respondents (4.6 %) report sons as doing 7 hours or more of domestic & care work per day; 1,286 (38.1 %) report sons as doing 'none' per day.
- Females – women and girls – spend significantly more time on unpaid domestic and care work activities than men.
- Above, while levels of reporting on gender constraints in accessing trainings and income generation opportunities are low at 2% or less.
- The proportion of women reporting 7 hours or more a day on domestic & care work is about 3.5 times more than that among men, whereas men are reportedly more than twice as likely to use only 1-3 hours per day.
- Girls are about twice as likely as boys to do 7 hours or more a day of domestic & care work, and boys are significantly more likely to do 'none'.

Economic wellbeing and resilience: unpaid domestic and care work activities

- FHHs report having less source of income vs. MHHs
- Caregiving is overall to be reported as a barrier in FHHs.
- Females (women and girls) spend significantly more time on unpaid domestic and care work activities than men. (The proportion of women/girls reporting 7 hours or more a day on domestic & care work)

3) Safety: protection and safety

Cross-sectoral data, e.g.:

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Protection and safety

- GBV-SS analysis represents the risks and vulnerability of women and girls in comparison to men and boys; needs contextual gender analysis for identifying reasons and more targeted programs
- Cross-sectoral data (Some good examples for further gender analysis):
 - AAP: 72.24% household aware of how to provide feedback or make a complaint through a formal complaint and feedback mechanism- entry point to further analysis.
 - Education, Child Protection: further risks, needs and gaps analysis (though some are there i.e. sexual harassment of girls going to educational facilities).
 - Wash: females (31.77 %) not feeling safe using latrine at night; need attention for further analysis.

C. Prevailing risks and vulnerabilities

While gendered safety concerns (as outlined above), and to a degree issues around gendered choice (and lack thereof) are reflected in the ISNA data, there is relatively little engagement with “voice” in the overall data.

Some observation for consideration in the future:

1) VOICE:

ISMN is focused on needs, and hence there is less attention on so-called ‘strategic interests’ related to participation & leadership. This is something where triangulation of data is needed, and where we could consider an indicator in future – strategic interests are also ‘needs’ in the sense that voice at decision making tables is one of the best guarantors of one’s needs being addressed.

2) CHOICE:

There is a need to ensure a stronger focus on gender equality in income generation: Less than half of FHHs report having any source of income vs. three-fourths of MHHs. FHHs are almost twice as likely to earn (only) 1-3,000 BDT monthly. MHHs are about 8 times more likely than FHHs to earn above 10,000 BDT monthly. Unpaid domestic and care work cannot be overlooked: Females – women and girls – spend significantly more time on unpaid domestic and care work activities than men. This has both a direct and indirect impact on income generation, but also on many other issues: it diminishes the role of women and girls outside the home and increases their economic vulnerability.

D. Recommendations

Based on our analysis, we identified the following recommendations:

1) VOICE

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- More research needed on meaningful participation and leadership of women in the Rohingya response, including in the design and implementation of policy and programming
- Targeted approach to ensure women have household level decision making power and leadership in finance management, access to aid, and community leadership.

2) CHOICE

- Strengthen focus on addressing gender gaps in income generation:
- Strengthen interventions that aim to address gender norms related to unpaid domestic and care work, including within behaviour change programming as well as through initiatives reducing the burden of care among women.
- Find out ways to ensure female-headed households (FHHs) participate in different aid and service distribution discussions, planning, complaints and feedback mechanisms (sector specific targeted approach).
- Expand cash and voucher assistance tailored for women, especially for the FHH, elderly women, persons with disabilities to ensure financial literacy and independence.
- Implement home-based income generation (sewing, handicrafts, digital work) to accommodate caregiving responsibilities and reduce burden of work.
- Establish community-based childcare centres to reduce women's burden of unpaid care.
- Promote "cash-for-care" incentives where caregivers receive stipends for unpaid work.

3) SAFETY

- Implement GBV-responsive interventions across sectors, including to improve knowledge on CFRMs among refugees of all genders, and to improve safety among men and boys.
- Scale up Multi-Purpose Women's Centres (MPWCs) within camps as safe spaces for GBV survivors.
- Train male family members on positive masculinity and conflict resolution to reduce household violence.
- Community based discussion on how to cope with stigma for the GBV survivors.

4) GENERAL

- Review across sectors available sex, age and disability disaggregated ISNA data, to identify (intersectional) gender trends focusing on the 3 domains: 'voice', 'choice' and 'safety' – facilitate this by including these within the sector-specific ISNA sheets.
- Above in support of consistent gender mainstreaming (integrated & targeted approaches) by sector/SS/WGs. Engage Rohingya women's networks and groups in validating data & seek their inputs to recommendations.

5) Monitoring and evaluation

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- A number of existing data sources as well as existing and potential indicators both in the **ISNA data and in the GiHA Gender Tip Sheets** which can be used for capturing voice, choice, and safety.
- Furthermore, there is often sex- and age-disaggregated data which is **already being collected**, but the analysis of this data, with a view to better understanding gender dynamics is often not carried out consistently (e.g. in the ISNA data), so a small additional investment into additional analyses here can yield a much wider range of gender-responsive data
- Especially in terms of voice and choice – including the possibilities of Rohingya WROs and WLOs – there is a lot of space and need for improving the monitoring and evaluation of these
- As can be seen from Table 1 above, there is an abundance of potential quantitative data sources and indicators especially on safety, but voice and choice would require more **qualitative** data.

List of references/secondary data sources:

- ISNA 2024 data