

Rapid Care Analysis in a Rapid-Onset Emergency

Cox's Bazar, Bangladesh

Executive summary



Rohingya female group in Balukhali Camp 19. Photo credit: Rozina Akter/Oxfam

This analysis looks at unpaid care work patterns in both Rohingya and host communities in Cox's Bazar, Bangladesh. The aim is to recognize the care work done by women and find ways of reducing or redistributing this work. The analysis examines the level of acceptance for sharing care responsibilities, as well as the differences in care work between host and Rohingya communities. Overall, findings from the RCA show that the vast majority of care work is conducted by women across both groups. On average, women perform 70 hours of care work a week and men do 11 hours, with firewood and water collection being the most difficult tasks. Recommendations from the analysis include provision of water containers for water storage; opportunities for home-based income-generating activities for the Rohingya community; advocacy for improved water networks in the host community; and environmentally friendly firewood replacements, among others. This will ensure reduction and redistribution of care work and lead to improved programmes, with potential for women's empowerment.

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Executive summary

The Rapid Care Analysis (RCA) conducted during the ongoing Rohingya crisis response, a rapid-onset emergency situation, was organized by the Oxfam Cox's Bazar office with separate focus groups of women and men from both the Rohingya and host communities. Overall, findings show that for both the Rohingya and host-community groups the vast majority of care work is performed by women. This was mostly done as a primary activity and related to household work – cooking, childcare, washing clothes etc. – whereas the care work done by men was usually done as a secondary activity and related to water and firewood collection, child supervision, providing emotional support, or taking sick family members or neighbours to healthcare providers. In terms of hours spent on care work both as main and as secondary activity, the RCA found the following averages:

- Rohingya female group – 72 hours per week on care work as main activity, and 10 hours per week on care work as a secondary activity.
- Rohingya male group – 5 hours per week on care work as a main activity, and 17 hours per week on care work as a secondary activity.
- Host-community female group – 67 hours per week on care work as a main activity, and 33 hours per week on care work as a secondary activity.
- Host-community male group – 12 hours per week on care work as a main activity, and 6 hours per week on care work as a secondary activity.

Findings from all groups showed an increased awareness of care work at the end of the RCA facilitation day, as well as greater recognition of the value of the work that women do. While both women and men in the Rohingya and host-community groups thought that care work is a woman's job, and the men in both groups had strong opinions on whether men should take up more care work, there is now an entry point following the RCA in those communities to sensitize the men on the need for redistribution of care work, with a few men also mentioning the need to value the amount of care work women do within the household.

The main issues identified by the Rohingya community were as follows:

- Firewood collection is extremely challenging (in terms of time taken, physical burden, need to leave the camp, distance, risk of accidents and prohibitive market price). Water collection is also difficult (in terms of the number of trips needed to collect sufficient water, distance, route and risk of accidents, especially at night). Firewood and water collection are the most time-consuming activities and carry the most risks for both men and women.
- Women have limited mobility due to restrictive families and social norms, feelings of not being safe and risks of gender-based violence (GBV). As a result, men have taken on some care work since displacement (water and firewood collection, attending food and other distributions and market duties).
- Opportunities for income-generating activities are limited (in terms of options available and space) for women, as mentioned by both women and men. In addition, to take part in such activities women, especially female-headed households, would need to be provided with support in care work.
- Most women are at constant risk of domestic violence if they are perceived to have performed inadequate or insufficient care work but among the Rohingya women group there is a perception that domestic violence has decreased since displacement.
- Women-headed households are much more vulnerable, as they have no support system for any care work.
- Elderly people and children in large families are receiving the least amount of care – the latter is a result of women's high care workload, and is making women unhappy.
- These challenges are exacerbated for refugees in remote locations inside the camp and in hilly areas; with no water points nearby, they are at greater risk of accidents.
- Participants reiterated the need for solar torches to be able to walk safely at night.
- Rohingya women requested the provision of kitchen utensils for food storage, to reduce time spent on meal preparation.
- Rohingya men reported that there are insufficient healthcare facilities and workers inside the camps in comparison to the need.
- There is a lack of awareness on care work and the importance of women's contribution, especially among men and elderly people.

The main issues identified by the host community were as follows:

- Firewood and water collection were also found to be difficult by this group, though the former only for the men. A seasonal 'care calendar' showed that the most challenging months are March to May for water collection, and July and August for firewood collection.
- Overall, the most challenging period for care work is June to August.
- Washing clothes was the most difficult task for women (in terms of time taken and physical demands).

- Women's care workload left them with very little (if any) time to rest, even during periods of illness, affecting their health and potentially increasing their risk of experiencing domestic violence.
- Men mentioned the prohibitive cost of installing tube wells, and the need to have an electric pump to make water collection easier. The women suggested the provision of a water-supply line which could reduce the time they spend collecting water.
- Income-generating activities for women would be possible if they were provided with support in care work.
- Men added that they would like to receive support through income-generating activity trainings for both males and females, and low-cost gas facilities.
- There is a lack of awareness of the care work done by women and the importance of women's contribution, especially among men and elderly people.

Recommendations for Oxfam and other humanitarian organizations

Given the issues presented above – and also the solutions proposed by the communities themselves – the following recommendations for specific sectors could lead to the recognition, reduction and redistribution of care work. They could also improve programmes by increasing women's empowerment through appropriate income-generating activities and reducing the risk of GBV, including domestic violence.

Recommendations for the WASH sector

Rohingya community:

- Improve access to water sources, especially in remote, hard-to-reach and hilly areas.
- Consider the distribution of multiple water containers to enable families to store water within the household.
- Consider women's lack of mobility and find solutions to provide house-to-house non-food item (NFI) distributions.
- Organize hygiene-management awareness campaigns to prevent increases in hygiene-related diseases.

Host community:

- Consider the seasonal changes in care work. With March to May the most difficult in terms of accessing water, ensure an increase in the water supply in that period.
- Investigate the possibility of improving the water network or installing a greater number of deep tube wells and electric pumps, training women as mechanics for the electric pumps, and providing chlorination tablets for water purification.

Both communities:

- Advocate with the government, donors, peer agencies and the UN coordination system for wider campaigns in the district on care work and domestic violence.

Recommendations for the Emergency Food Security and Vulnerable Livelihoods (EFSVL) sector

Rohingya community:

- Find environmentally friendly alternatives to firewood and improve access to fuel-efficient stoves, whether at communal or household level.
- Include home-based opportunities for women in all future income-generating activities.
- Consider women's lack of access to markets or food/NFI distributions and find solutions to provide house-to-house assistance.
- Consider including kitchen utensils in NFI distributions to enable food storage and thereby reduce time spent on meal preparation.

Host community:

- Find environmentally friendly alternatives to firewood and improve access to fuel-efficient stoves, whether in consultation with the local government (e.g. for gas provision) or provided as humanitarian aid.
- Consider the seasonal fluctuations in employment and care work – with the monsoon season the most challenging – and engage in income-generation trainings or support for care work, especially in those months.
- Jointly with WASH teams, consider options for communal laundry facilities, including the potential for these to be cooperatives managed by women from the host communities but also by women in the Rohingya community.

Both communities:

- Consider providing cash for training for women, including training on servicing and repairing electrical pumps if installed.
- Consider providing childcare facilities, but also promote the need to increase men's engagement in childcare.
- Take into consideration the vulnerability of female-headed households and their inability to engage in income-generating activities without care-work support.

Recommendations for Protection teams, including GBV and Gender specialists

Rohingya community:

- Provide blanket solar torch distributions, or advocate for public lighting throughout the camps.

Both communities:

- Organize awareness-raising sessions on ending domestic violence, through community sessions run with mixed groups but also aimed at men and women separately.
- Organize awareness-raising sessions on gender equality and care work, across all ages and groups.

Recommendations for other sectors:

Rohingya community:

- Consider training and using community healthcare workers.
- Organize mass awareness campaigns on key preventable diseases.
- Improve childcare facilities throughout the camps, including at food and NFI distribution points.

In terms of ensuring that the above recommendations are widely taken into account and acted on, it is necessary to undertake advocacy at relevant sector working-group meetings and advocacy targeting government for improved services.

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This Rapid Care Analysis document was prepared by Iulia Toma (Gender Adviser, Humanitarian Support Personnel) using field reports from Tanzima Zaman (Senior Gender Officer) and Anis Uzzaman (MEAL Officer).

For more information, or to comment on this report, email Iulia Andreea Toma (iulia.toma@oxfam.org).

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Email policyandpractice@oxfam.org.uk.

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