Where there is no information: IDP vulnerability assessments in Sri Lanka’s borderlands

by Danesh Jayatilaka and Robert Muggah

A third of the estimated 600,000 IDPs in Sri Lanka live in areas controlled by the Liberation Tigers of Tamil Elam (LTTE). Displaced people within these so-called ‘un-cleared’ or ‘liberated areas’ (terms used by the Sri Lankan government and the LTTE respectively) are at especial risk. Their situation highlights the difficulties of assessing protection and assistance in the context of conflict.

This article introduces an innovative approach to measuring the protection and assistance needs of IDPs in data-scarce and conflict-prone environments. Drawing on the experience of a recent vulnerability assessment undertaken in ‘un-cleared’ areas of Sri Lanka, it outlines eight key variables that rank and prioritise risks and vulnerabilities amongst IDP populations. Highlighting opportunities and challenges facing future efforts, it potentially offers a model for other countries facing similar types of internal displacement crises.

The Guiding Principles on Internal Displacement identify the rights and guarantees relevant to the protection of persons from forced displacement and highlight their entitlement to protection from displacement and to a durable solution. The 30 principles reflect progressive thinking in international human rights law, humanitarian law and refugee law by analogy — and offer normative and prescriptive guidelines for intervention. Though debate continues over when displacement ends and the responsibilities associated with the provision of rights, there is general consensus that such populations experience a range of risks and vulnerabilities that demand attention. But what are these risks? How are they actually experienced?

Among the many challenges facing those responding to internal displacement is the question of information. Amidst loud calls to ensure the rights and entitlements of IDPs, little is actually known about the type and scale of their vulnerability. Monitoring capacities in areas affected by war-induced displacement are often limited, if they exist at all. National-level studies may be available on the Internet but district civil servants and NGO field workers in areas of displacement are rarely able to access them or to undertake data collection. In the rare cases where action research is undertaken, it is often sector-specific or once-off. Studies have rarely assessed the dimensions of the displacement continuum from a holistic perspective. There has been a significant number of attempts to appraise the risks and vulnerabilities facing Sri Lankan IDPs. Many have lacked rigour due to the logistical and resource constraints that invariably accompany research projects in the context of conflict. Few of these studies have paid adequate attention to the situation of IDPs in liberated/uncleared areas of the country.

Designing an IDP Vulnerability Assessment Tool

A critical question facing the humanitarian and development sector in Sri Lanka relates to the nature of the information that should be gathered. The Guiding Principles can be an unwieldy tool of analysis. Though efforts to operationalise the Guiding Principles as a toolkit for research have been partially successful, a danger is that by appraising 30 principles — particularly in an environment where resources are constrained — the level of detail is reduced. On the other hand, the application of too narrow a lens runs the risk of missing vital data. A related concern is the appropriateness of the data to be collected. Are the key indicators the right ones: do they capture data that is meaningful to IDPs themselves? The dangers associated with imposing top-down criteria are well known amongst proponents of participatory action research.

The Brookings Project on Internal Displacement commissioned the Consortium of Humanitarian Agencies (CHA) to undertake a focused assessment of risks and vulnerabilities facing IDPs in the LTTE-controlled Vanni region. Humanitarian access to this particular group, at the time composed of a quarter of the country’s total caseload, was comparatively limited. The assumption of the project was that the Vanni IDPs received less support and were therefore necessarily more vulnerable and unprotected than IDPs in other areas. Recent field research, however, has suggested a rather more complex picture.

This project had as its central goal the objective of expanding the analytical lens in relation to assessing and therefore improving inter-agency responses to IDP protection and
<table>
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<tr>
<th>Variable</th>
<th>Suggested Indicators</th>
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<tr>
<td>Health</td>
<td>mortality and morbidity rates; malnutrition rates; disease caseload; prevalence of training and immunisation; availability of external assistance</td>
<td>hospitals; NGOs; community surveys</td>
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<tr>
<td>Food and nutrition</td>
<td>presence and distribution of food assistance programmes; appropriate and equitable distribution; and ‘appropriateness’ of diet</td>
<td>NGOs; community surveys; key informants</td>
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<tr>
<td>Education</td>
<td>presence, distribution and access to education facilities; per capita teaching staff; teacher qualifications; enrolment and attendance rates (primary, secondary); and literacy rates</td>
<td>schools and libraries; NGOs; community mapping; community surveys; key informants</td>
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<tr>
<td>Water</td>
<td>type and source of water source (consumption/bathing); number, distribution and access of water points (Sphere standards); and water consumption ratios</td>
<td>NGOs; community mapping; community surveys; key informants</td>
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<tr>
<td>Sanitation</td>
<td>health and hygiene habits; ratio of toilets to population; management and maintenance of facilities (e.g. gender sensitive); location of toilets and waste disposal (Sphere standards)</td>
<td>government agents; NGOs; community mapping; community surveys; key informants</td>
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<tr>
<td>Psychosocial factors</td>
<td>rates of depression/mental illness; type and ranking of priority community issues; and presence/quality of social work/therapy/psychosocial-related programmes</td>
<td>hospitals and clinics; pharmacies; key informants; semi-structured interviews</td>
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<tr>
<td>Shelter</td>
<td>material construction of shelter (e.g. brick, thatch, tent); land size and fertility; household size (Sphere standards); repair and maintenance support; access to key infrastructure (e.g. roads, markets, public services)</td>
<td>local civil servants; NGOs; village leaders; community mapping; community surveys</td>
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<tr>
<td>Safe movement</td>
<td>distribution of mines and unexploded ordnance; access and presence of agricultural/subsistence land; injury rates, distribution and profile; presence of de-mining/awareness programmes</td>
<td>NGOs; local civil servants; army; village leaders; community mapping</td>
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The assessment tool was generated in consultation with over 16 representatives from the humanitarian and development sector. It departed from the Guiding Principles in one important respect: it articulated eight key variables (as opposed to 30 principles) that were felt by key stakeholders to be core elements of IDP protection and assistance. These variables were devised by an advisory group and were not drawn in a participatory manner from IDPs themselves. There is a strong case to be made, however, for encouraging the latter’s involvement in the future. It is important to emphasise, however, that these variables nevertheless reflect the central tenets of the Guiding Principles. Where these eight variables were judged to be relevant for a given IDP population, they also suggest that the strictures of the Guiding Principles were being similarly adhered to.

The eight variables in the vulnerability assessment tool are health, food, education, water, sanitation, psychosocial factors, shelter and safe movement. Each variable includes a number of quantitative and qualitative indicators seen to be important in the Sri Lankan context.

The descriptive indicators set out in the table above are not exhaustive but rather illustrative. For example, the variable ‘health’ can be determined by appraising mortality and morbidity rates within the designated population, the registered caseload of various diseases and illnesses, the prevalence of training and immunisation programmes and the availability of external development and public health-related assistance. Both primary and secondary data should be collected via a combination of methods.

Any vulnerability assessment also requires consideration of how the information will actually be collected. The project introduced a training and dissemination component to facilitate the transmission of data gathered in the field. This was seen as essential to facilitate the rapid circulation of operationally-relevant information to appropriate stakeholders. It also served to generate awareness among local stakeholders of the risks and vulnerabilities of IDP populations.

Over a 12-month period, more than 250 representatives of local NGOs and community-based organisations and civil servants were trained in research and data collection methods.
Conclusion

The project was extremely ambitious. It became apparent that:

- Many, but not all, humanitarian agencies and researchers were unable to invest adequate time and resources to carefully consider findings from the field; their inability to adequately appraise primary data is unlikely to change in the short term, given the increasing burdens placed on them.

- Prioritisation of delivery restricted scope for reflection and empirical analysis.

- Despite considerable investment of time and energy in training, locally-recruited participants lacked sufficient or appropriate skills.

- They were not always given either sufficient time or adequate remuneration to allow them to fully carry out their assessment tasks.

- The project’s advisory body encountered difficulties in meeting on a regular basis.

Despite these constraints, the project demonstrated a capacity for responsive and timely analysis and generated, over a short period, voluminous data in areas or Sri Lanka where little is known about IDP realities. The Guiding Principles offer a useful normative platform for understanding risks and vulnerabilities. By appraising protection and assistance needs in situ the project introduced a complementary and pragmatic strategy to generate detailed information on geographically-specific and heterogeneous populations.

Generation of information is a necessary, but insufficient, process for formulating policies to protect and assist IDPs. Analysis and dissemination are crucial but often overlooked. Information management requires more than a capacity to frame the issue. It also demands considerable attention to the ‘downstream’ activities of analysis and dissemination. Agencies need to devise creative mechanisms to appraise the realities of IDPs in conflict and post-conflict societies. This project offers a novel template to begin asking the right questions.

Danesh Jayatilaka is an independent consultant working on conflict and displacement related projects in Sri Lanka. Most recently, he has worked closely with GTZ and CARE USA. Email: idpguide@diamond.lanka.net

Robert Muggah is a Global Security Co-operation Fellow of the Social Science Research Council and a senior researcher of the Small Arms Survey, a project of the Graduate Institute of International Studies in Geneva. He is currently pursuing a doctorate in development and forced migration studies at the University of Oxford. Email: muggah@hei.unige.ch

Contact Danesh or Robert for extended report.

1. See www.unhchr.ch/html/menu2/7/h/principles.htm
4. See www.humanitarian-srilanka.org