RAPID ASSESSMENT OF COVID-19 IN INFORMAL SETTLEMENTS IN FIJI

Insights on socio-economic impacts on residents in 16 communities across Viti Levu
SUMMARY OF KEY FINDINGS

LIVELIHOOD SECURITY & HOUSEHOLD INCOME

- 84% of households in informal settlements reported a loss of income
- Over 40% of incomes fell by more than half
- 25% increase in households living on less than FJD200 a month

FOOD SECURITY

- Almost 2/3 of the respondents are worried about running out of food
- 75% of the respondents have not received any form of support

ACCESS TO HEALTHCARE

- 66% of the respondents report having access to a healthcare facility within 15 minutes
- 69% perceive access to healthcare facilities as relatively easy
- Lack of transportation & lack of financial resources to pay for services are the most common reasons for reporting difficulties with accessing care

KNOWLEDGE, ATTITUDES & PRACTICES RELATED TO COVID-19

- Only 4% named all three most common symptoms of COVID-19
- 20% respondents described following the recommended measures on handwashing ‘sometimes’ or ‘never’
- Radio, TV & Facebook are the most commonly used sources of information on COVID-19

CLIMATE-HAZARDS & COVID-19

- 82% of respondents were impacted by a tropical cyclone during the COVID-19 pandemic
- The multitude and severity of extreme climate events add to the existing vulnerabilities of informal settlements

LAND TENURE

- 22% of the respondents feel insecure about being evicted in the near future
- 76% of all respondents that feel insecure about evictions were female
- 7% responded that they had been threatened with eviction in the past 30 days
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Vunikavika settlement, Fiji
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1 INTRODUCTION
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BACKGROUND

The COVID-19 pandemic has hit at a time when sustainable urbanization is seen as an accelerator of the Sustainable Development Goals in the Pacific (Fifth Pacific Urban Forum, July 2019 (https://www.fukuoka.unhabitat.org/info/news/pdf/PUF_5_Final_Report_reduced_web_version.pdf). With unequal coping capacities and existing structural inequalities, not all citizens are equally affected by COVID-19. In fact, the pandemic has further highlighted many of the underlying flaws in the prevailing socio-economic model, bringing into stark relief the fragile nature of life in underserved informal settlements and slums. From this vantage point, the most vulnerable individuals are those most exposed to the ongoing effects of COVID-19, who possess the most limited capacity to cope, and ultimately suffer the most from the impact of the crisis. Indeed, the outbreak has the potential to push many into poverty and increase the vulnerability of those already there.

In Fiji, informal settlements account for an estimated 20 percent of the urban population. These areas are densely populated with inadequate household-level water and sanitation, little or no waste management, overcrowded public transport, and oftentimes limited access to essential services and information. This makes recommended measures to prevent COVID-19 transmission difficult to implement. In addition, up to 70 percent of households in informal settlements rely on unstable income sources for daily subsistence and maintain minimal or no savings. As such, these households are frequently unable to afford soap, food, or medical treatment when disruptions, such as movement restrictions or lockdowns, are in place.

While there are currently no active COVID-19 cases in Fiji (as of June 2020), it remains important to have a strong understanding of underlying community vulnerabilities in order to help prevent a future spread of COVID-19 in informal settlements should the pandemic re-emerge in Fiji.

UN-Habitat's rapid impact assessment study aims to provide insights into the conditions present in informal settlements. The information collected through household surveys is supported by semi-structured Focus Group Discussions (FGDs).

The study examines 6 key areas:
- Livelihood security and Household Income;
- Food security;
- (3) Access to health care;
- Knowledge, attitudes and practices related to COVID-19;
- Climate related hazards and COVID-19;
- Tenure security.

METHODOLOGY

Over a period of 2 weeks (25th May – 05th June 2020), the UN-Habitat team conducted face-to-face surveys with 115 households in 16 informal settlements across four municipalities on the island of Viti Levu. The respondents were randomly selected from informal settlements that are participating in the ongoing ‘Fiji Resilient Informal Settlements’ (FRIS) project, with 5 households coming from each of the smaller settlements (45 in total) and 10 households from each of the larger settlements (70 in total). The 115 households represent roughly 10 percent of the overall number of households in the 16 target areas (in total the FRIS project recorded 1546 households across the 16 settlements).

The survey team consisted of four established Resilience Officers (ROs), employed under the FRIS project and based within the four municipal councils. The ROs are all experienced surveyors and have well-maintained relationships within the target communities due to their ongoing engagement in the FRIS project.
In total, the questionnaire consisted of 45 questions with each interview lasting approximately 20 minutes. The study used the following definition for households: *household is usually a group of persons who normally live together and take their meals from a common kitchen.* Prior to the start of the interviews, the ROs assured the respondents that their participation in the study would have no negative consequences for them or their families and that their privacy and confidentiality would be maintained.

In addition to the survey, semi-structured Focus Group Discussions were conducted in 14 settlements across Lami (Wainivokai, Vuniivi, Kalekana and Quaia), Lautoka (Vunato, Taperia, Nasoata, Naqiroso, California, Veidogo), Nadi (Korociri, Nawajikuma), and Sigatoka (Kulukulu and Vunikavika) over the period of 1 month (14th May – 12th June 2020). Efforts were made to ensure the focus groups were balanced in terms of gender and included individuals from marginalized groups (youth, disabled, elderly, LGBTQ). Each Focus Group Discussion involved 10-15 participants and was moderated by an experienced RO. Detailed notes taken during each Focus Group Discussion were later analysed for recurring themes.

**STUDY LIMITATIONS**

The purpose of this study is to provide an entry point for dialogue amongst relevant stakeholders on the strengths and vulnerabilities of informal settlements in light of the COVID-19 pandemic.

The settlements covered in this study were selected based on UN-Habitat's ongoing engagement with them, not because they necessarily represent the wider diversity of Fijian informal settlements in general.

This rapid assessment study is by no means meant to be exhaustive and does not represent a comprehensive view of the current situation of all Fijian informal settlements.
2 DEMOGRAPHIC PROFILE

As mentioned, face-to-face surveys were conducted with 115 households from 16 informal settlements across four municipalities on the island of Viti Levu: Lami, Lautoka, Sigatoka, and Nadi.

Figure 1 Fiji map of target municipalities

The 115 participating households are distributed as follows by municipality and informal settlement:

Figure 2 List of target settlements and number of households covered

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<tr>
<th>MUNICIPALITY</th>
<th>SETTLEMENT NAME</th>
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<td></td>
<td>Vunivi</td>
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<td></td>
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<td>Total Sigatoka</td>
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<td>Veldogo</td>
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<td>Taiperia</td>
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<td>Total Nadi</td>
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Household survey respondents were fairly balanced in terms of gender (63 percent female, 36 percent male, 1 percent other). 13 percent of the households surveyed were female headed households.

80 respondents reported being married, while 14 are widowed, 13 are single, 3 are divorced, 3 reported living with their partner and 2 did not give any information. The average size of the households surveyed was 5.5 individuals. Only two of the households include one or more members with a disability (3 people in total).
3 KEY FINDINGS
In almost 40 percent of the households surveyed, one or more household members lost their job in the past 60 days, and many of those who are still employed have had their hours reduced.

Household incomes have dramatically declined. 84 percent of households reported a loss of income compared to their pre-COVID-19 outbreak income, with a magnitude of more than 50 percent reduction in income for almost half of the households.

Over 50 percent of households do not have an alternative source of income. Almost all of those respondents who accessed their FNPF (Fiji National Provident Fund) accounts did so to ensure access to food.

Many women experienced the additional burden of childcare due to the closure of schools, offering fewer opportunities to work outside their home.

Over 40% of HH in informal settlements reported a loss of income after the COVID-19 outbreak

84% of HH in informal settlements reported a loss of income after the COVID-19 outbreak

25% increase in households living on less than FJD200 a month

Over 40% of incomes fell by more than half
Across all municipalities, almost 40 percent of respondents reported that one (76 percent) or more (24 percent) members of their household had lost their job in the past 60 days (Figure 3). The reported job loss varied geographically, with the lowest rate in Lautoka (33 percent) and the highest in Sigatoka (53 percent).

While 75 percent of respondents reported that at least one person in their household was still working, almost all Focus Group Discussion participants mentioned that work hours had been significantly reduced.

Focus Group Discussions further revealed that movement restrictions during lockdowns and curfews had a major impact on the ability to work. In addition, many women reported that they had to focus on taking care of children due to school closures and thus had less time to work outside their home.

As a result of rising unemployment and reduced work hours, household incomes have drastically declined over the past 60 days (Figures 4 and 5). Comparing the reported household incomes from the month prior to the first confirmed COVID-19 case in Fiji to those over the past 60 days reveals a loss of income in 84 percent of the households surveyed.

Whereas prior to the COVID-19 pandemic 15 percent of the incomes were reported to be FJD 200/month or lower, currently 41 percent of surveyed households indicate income in this range.

Among the households which suffered a loss of income, the magnitude of income loss is striking: over 40 percent of such households reported a loss of income of more than 50 percent, while one third of households reported a declined income of between 25-50 percent (Figure 6).

This dramatic economic shift has resulted in a 25 percent increase in households surviving on the lowest income (less than FJD 200/month).
Furthermore, of the households that reported a decline in income, 44 percent have no alternative source by which to compensate the loss. Out of those who do, remittances, subsistence farming/fishing, and accessing Fiji National Provident Fund (FNPF)* funds are the most common.

**Figure 7 Which other sources of income does your household have access to? (multiple answers possible) disaggregated by gender**

The study found that female headed households reported having significantly more access to alternative sources of income, most notably to withdrawals from FNPF accounts, remittances and small businesses. Loans as well as rent payments however were only reported by male headed households. Out of the 37 percent of households of which a member accessed their FNPF funds, 74 percent used all or a portion of these funds for food purchases, highlighting the impact of income loss on food security.

Disaggregated by gender, female respondents indicated spending their additional FNPF income on food purchases and utilities, whereas male respondents more often reported spending it on house construction and other assets.

**Figure 8 What was the most important use of the FNPF withdrawal in the past 60 days? (multiple answers possible) disaggregated by gender**

In addition to the decline in income, participants in the Focus Group Discussions pointed out the additional burden of higher utility costs due to the higher number of family members spending time at home; several respondents reported an increase in their energy and water consumption.

*The FNPF is a defined contribution fund that provides retirement savings, as well as pre-retirement benefits such as housing, medical and education assistance. In March 2020, the Fijian Government announced economic stimulus measures, allowing Fijian workers in the hospitality sector who have lost their jobs or have had their hours cut since 1 February 2020 to access an initial $1,000 from their Fiji National Provident Fund (FNPF) accounts. Employees affected by the nationwide stipulated physical distancing requirements and lockdowns were allowed access to an initial $500 from their FNPF accounts. [https://www.fiji.gov.fj/Media-Centre/Speeches/2020-COVID-19-BUDGET-RESPONSE-ADDRESS-BY-THE-ATTOR](https://www.fiji.gov.fj/Media-Centre/Speeches/2020-COVID-19-BUDGET-RESPONSE-ADDRESS-BY-THE-ATTOR)*
The majority of households reported having access to basic food items at the time of the survey. However, skipping meals and decreasing the amount of food intake was reported by almost one quarter of the respondents.

Food security varies between communities, putting the urban settlements under more pressure than peri-urban/rural ones as access to land for farming and coastal marine resources help alleviate the impact of income loss.

Many respondents are worried about running out of food before they can afford to buy more, with women expressing concern more often than men.

Almost 2/3 of the respondents are worried about running out of food before being able to buy more.

57% of the respondents have not received any form of support.
At the time of the survey, over 80 percent of respondents reported having access to basic food items, with very little variation between the municipalities. However, 24 percent of respondents reported that members of their household had skipped meals. During the Focus Group Discussions, several participants mentioned that their households are consuming smaller portions at mealtime in an effort to make their food supplies last longer. It was also suggested that those informal settlements which are located in peri-urban areas with access to land for farming and/or coastal marine resources are experiencing less food insecurity than those settlements in urban centres.

While access to basic food items was relatively secure at the time of the survey, many respondents were concerned about the future. Over 60 percent of respondents reported being worried within the past 30 days about food running out before being able to afford more, with large variation present between municipalities further underlining differences between urban and peri-urban communities. Focus Group Discussions supported this finding, suggesting that access to farming or fishing resources directly impacts perceived and real food security. Figure 11 shows those respondents that are worried about running out of food disaggregated by gender with a significantly higher percentage of women being worried about food running out than men.

Almost 60 percent of survey respondents reported not having received any form of support (such as cash, food, non-food essential services & goods) from Government, NGOs/INGOs, or other types of organisations in relation to COVID-19 (this survey however did not ask whether the households had applied for assistance of any kind). Figure 12 shows the type of support respondents described receiving. In Sigatoka and Lautoka, households also reported NGO support in the form of food supplies, clothes, blankets and tarpaulins. However, this aid was likely targeted to households impacted by TC Harold, which made landfall in Fiji while the country was on lockdown due to COVID-19. Those households that reported having received assistance, the majority of support received was from the Government and NGOs/INGOs.

Figure 9 Does your household have basic food such as rice, cooking oil, salt, canned goods, etc. stored at home?

Figure 10 In the past 30 days, have you thought of this scenario: “I am worried that our food will run out before we get money to buy more”

Figure 11 Respondents who answered yes to “I am worried that our food will run out before we get money to buy more”, disaggregated by gender

Figure 12 Please indicate if you have received any of the items listed below (multiple answers possible)

Figure 13 Please indicate if you or your household received any support, such as cash, food, non-food essential services & goods, etc. in the last two months from the organizations listed below (multiple answers possible)
Accessing healthcare services is generally perceived to be relatively easy. However, there is great variation between municipalities in terms of distance to the nearest healthcare facility.

Those respondents that identified barriers to accessing healthcare mentioned a lack of transportation and a lack of financial resources to pay for services as major issues.

Almost two-thirds of the respondents reported they would first seek treatment in a public clinic rather than a COVID-19 specific fever clinic.

66% of respondents reported having access to a healthcare facility within 15 minutes.

69% perceive access to health care facilities as relatively easy.
The majority of respondents (66 percent) were aware of a healthcare facility within 15 minutes from their home, though significant variation exists between municipalities: whereas over 90 percent of the respondents in Sigatoka reported knowing of a facility that was less than 15 minutes' drive, respondents from Lautoka reported more challenging access (only 38 percent of respondents were aware of a health facility within 15 minutes' drive).

**Figure 14** How long does it take you to reach your nearest health facility?

![Figure 14: Bar chart showing the percentage of respondents taking different time frames to reach their nearest health facility by municipality.]

Respondents were asked where they would first seek treatment if they experienced symptoms of COVID-19. Almost two thirds of the respondents would first seek treatment in a public clinic (health center), while only 13 percent of respondents selected a fever clinic (an early identification health clinic specially designed for COVID-19). Again, substantial variation was noted across the municipalities surveyed. In Nadi and Sigatoka, for example, over 90 percent would first go to a public hospital. No respondents indicated seeking assistance in a fever clinic. In Lautoka, on the other hand, 35% of respondents would go to a fever clinic, with only 15 percent reporting they would visit a public clinic. This signifies a potential gap in awareness regarding where individuals should go to receive free of charge COVID-19 related health services.

**Figure 15** How would you describe your nearest health facility?

![Figure 15: Bar chart showing the percentage of respondents describing their nearest health facility by term.]

The survey shows that accessing healthcare services is perceived by the majority of respondents to be relatively easy (two thirds of respondents).

**Figure 16** How difficult or easy is it to obtain the healthcare services you need?

![Figure 16: Pie chart showing the percentage of respondents rating the difficulty of obtaining healthcare services.]

The survey shows that accessing healthcare services is perceived by the majority of respondents to be relatively easy (two thirds of respondents).
Out of the 34 percent of respondents who described ease of access to health care facilities as moderate or difficult, the most common reasons mentioned were lack of transport (42 percent) and lack of funds to pay for healthcare services (23 percent). Some respondents also described overcrowding and long waiting times as barriers to accessing healthcare.

**Figure 17** What made it difficult for your household to access the healthcare services that you needed? (multiple answers possible)

- Lack of transport: 42%
- No money to access healthcare: 23%
- Healthcare facility is too busy: 12%
- Other: 12%
- Healthcare operators have refused to attend to my needs: 5%
- I am afraid of going to the hospital due to stigma of fear of being perceived to have COVID-19: 2%

Overall, female respondents reported finding access to healthcare slightly more challenging than men, which is highlighted in Figure 18. Lack of transport was perceived as the main barrier to accessing healthcare for 48 percent of women compared to 36 percent of men. Also, more women than men mentioned lack of money as a main reason for not accessing healthcare.

**Figure 18** Respondents who reported difficulties in accessing healthcare, disaggregated by gender

- I cannot reach the facility due to lack of transport: 48% female, 36% male
- No money to access healthcare: 30% female, 27% male

Female respondent - Male respondent
The survey shows a rather limited awareness of the variety of clinical symptoms of COVID-19.

In terms of following recommended COVID-19 prevention measures, handwashing, physical distancing and isolation are the most common followed recommendations. However, a large percentage of respondents only follow the recommendations sometimes, and women are far more likely to always adhere to recommendations on handwashing than men.

The most commonly experienced barriers to following prevention measures include lack of money to purchase soap and/or a lack of access to a safe water supply, with shared sanitation facilities further impeding safe practices.

The most commonly used sources of information on COVID-19 include radio, television and Facebook.
Respondents were asked the main clinical symptoms of COVID-19 without being prompted to gauge the current awareness and knowledge within communities. Dry cough was mentioned most at 70 percent, followed by fever at 58 percent. Other symptoms described include: muscle/body pain, headache, sore throat and sneezing. 2 percent of respondents said they did not know any symptoms. Furthermore, when looking at the most common symptoms mentioned by the World Health Organisation (dry cough, fever and tiredness) only 4 percent of respondents named all three.

Figure 19 What are the main clinical symptoms of COVID-19? (multiple answers possible)

Figure 20 Number of most common WHO COVID-19 symptoms respondents named

Overall this hints at a rather limited awareness of the variety of clinical symptoms of COVID-19.

Regarding the use of recommended COVID-19 prevention measures, handwashing is most frequently carried out, with 74 percent of respondents reporting that they ‘always’ wash their hands. Physical distancing and self-isolation are followed by 58 percent and 52 percent respectively. Figure 22 highlights the differences in level of adherence by gender: out of those respondents who said that they ‘always’ follow handwashing recommendations for COVID-19 prevention, 67 percent were female and 32 percent were male.

Figure 21 How often do you follow the measures listed below to prevent contagion COVID19?

Figure 22 Respondents who reported to always follow handwashing, disaggregated by gender

There is quite a large percentage of respondents that are only following the recommendations ‘sometimes’ (18 percent for handwashing, 24 percent for physical distancing, 25 percent for isolation).

* Up until the period this survey was being conducted, the use of face masks was not officially recommended by the Fijian Government. It therefore comes as no surprise that 90 percent are never or only sometimes wearing them.
When asked about the barriers to using these measures at all times, 63 percent of the respondents said there were none. Out of those who did report facing barriers, 18 percent specified a lack of money to purchase soap while 7 percent named a lack of access to a safe water supply.

During Focus Group Discussions, shared facilities were mentioned as another reason for not following the recommendations on handwashing.

The most noted sources of information about COVID-19 includes radio (89 people), television (62 people) and Facebook (37 people).

The survey data shows that a majority of respondents use a combination of information sources to learn about COVID-19.

As coordinating body for the COVID-19 health response in Fiji, the Ministry of Health & Medical Services included a variety of informal settlements in their door-to-door health screening process. These screenings consisted of temperature checks and the collection of travel histories.

Participants in the Focus Group Discussions reported that no comprehensive large-scale awareness raising on COVID-19 had been provided in person.
Many communities regularly experience a range of climate-related hazards, further intensifying the economic pressure put on informal settlements during the COVID-19 pandemic.

TC Harold directly impacted the ability to practice physical distancing as one of the COVID-19 prevention measures in those communities that were affected most severely.

The multitude and severity of extreme climate events add to the existing vulnerabilities of informal settlements.
On April 7th and 8th 2020, Fiji experienced a Tropical Cyclone in the second most powerful category (TC Harold), bringing additional challenges to the already difficult environment. During TC Harold, Suva was on lockdown due to active cases of COVID-19, and various government restrictions were in place for the whole of Fiji, including curfew, limitations on gatherings (in terms of number of participants), and closure of all gyms, nightclubs, cinemas and swimming pools). However, the Government had to lift certain restrictions to allow the use of the evacuation centres. According to OCHA, on May 10th, more than a month after TC Harold made landfall in Fiji, 610 people remained in 79 evacuation centres. Damage to crops and livestock is an estimated FJD29 million (https://reliefweb.int/disaster/tc-2020-000049-vut). As described in previous sections, the economic impact of COVID-19 has resulted in an increasing dependence of households on farming, which creates even greater vulnerability to climate-related hazards.

Being located in fragile sites such as mangrove areas, river floodplains, etc., informal settlers are often impacted by multiple climate-related hazards, with a high level of variation between municipalities. The survey shows 82 percent of respondents were impacted by TC Harold. Additional climate-related hazards that respondents experienced in the past 60 days included, drought, flood, heavy rain and extreme heat.

The multitude and severity of extreme climate events add to the existing vulnerabilities of informal settlements. During Focus Group Discussions, participants described how TC Harold destroyed a large percentage of their natural resources (such as crops and livestock). In addition, overcrowding in evacuation centres makes following safe physical distancing practices almost impossible. Participants also reported that water supply gets disrupted frequently and for periods of up to several weeks during extreme floods.

The Focus Group Discussion also highlighted that with many homes destroyed or partially damaged, self-isolation for COVID-19 prevention would have been impossible.

Climate events however appear to have only produced a limited impact on the respondents’ perceived ability to follow COVID-19 prevention measures, with 16 percent of surveyed households reporting some impact and only 7 percent a substantial impact on their ability to wash hands.
Informal settlements do not have legally binding titles, thus no land security for the settlers is tenuous. In many cases residents obtain written letters for verbal arrangements in order to stay on their land.

Almost all of the respondents own the house they are living in.

Almost one quarter of respondents worry about being possibly evicted in the near future.

7% responded that they had been threatened with eviction in the past 30 days

22% of the respondents feel insecure about being evicted in the near future

76% of all respondents that feel insecure about evictions were female

7% responded that they had been threatened with eviction in the past 30 days
Land in Fiji is categorised into Native Land (83 percent), Freehold land (10 percent) and Crown Land (7 percent). Native Land and Crown Land cannot be sold, but is available on a leasehold basis. In the case of Native Land, ownership always remains with the Mataqali (customary landowner) and short and long-term leases (99 years) are available through the Native Land Trust Board. State Land is managed by the Ministry of Lands and Mineral Resources.

Informal settlements can be found on State Land, Native Land and Freehold Land. Often, residents in informal settlements may have informal arrangements with landowners in order to stay on their land. These arrangements range from written letters to verbal arrangements, and in some cases, informal settlers are relatives of the landowner. Even though permissions to settle on the land may be obtained from customary landowners, there is no legally binding title and so no land security for the settlers is tenuous (http://documents.worldbank.org/curated/en/163081509454340771/pdf/Climate-vulnerability-assessment-making-Fiji-climate-resilient.pdf).

The survey did not collect information on the formal land tenure status but rather focussed on perceived tenure security, asking about the fear of eviction (including both land and housing). Of the respondents, 92 percent indicated that they own the house they live in (rather than renting) and 7 percent responded that they had been threatened with eviction in the past 30 days.

22 percent of all respondents feel insecure about possibly being evicted in the near future. Disaggregated by gender, 76 percent of all respondents that feel insecure about evictions were female.

Focus Group Discussions revealed that in some cases households pay rent annually to the landowners. In those cases, it remains to be seen how COVID-19 will impact the ability to make these payments, whether alternative payment types can be made, and the impact on tenure security in the longer-term.

The survey also noted a geographical difference in responses: Respondents from settlements in Sigatoka reported feeling insecure from eviction more than twice as often as households in Lautoka and Nadi.