

Review

Rohingya influx since 1978

Overview

In the 20th century, there have been multiple waves of movement of Rohingya population from Rakhine State in Myanmar to Cox's Bazar in Bangladesh and back. The 2017 exodus is by far the largest. Following each previous displacement to Bangladesh, some of the Rohingya population have returned to Myanmar, driven by both initiatives from the Government of Bangladesh to repatriate the Rohingya population, and the Rohingya population's own initiative in returning home. Difficult humanitarian conditions, lack of legal status and inability to work in Bangladesh have contributed as pull factors to return home.

A review of documentation on the situation for those residing inside and outside camps in Bangladesh reveals patterns of persistent needs and constraints since 1978. These constraints include congestion, restrictions on freedom of movement and continued statelessness and denial of rights – which, in turn, reduce the possibility of generating income, and drive high rates of malnutrition, low access or quality of WASH facilities, low availability of educational facilities, significant protection concerns, the risk of epidemics, and high prevalence of negative coping mechanisms.

This report is a review of available literature on the Rohingya influxes into Bangladesh since 1978. The review seeks to provide a historical context to the current influx, in terms of population movement, status and sector responses. This report aims to help inform current and future humanitarian response.

Note: as this report focuses on influxes since 1978, most observations address the two refugee camps, Kutupalong and Nayapara, which were established in the 90s and have existed since then. Previous assessments on the Rohingya population in Cox's Bazar also tended to focus on registered refugees in official camps, who were receiving humanitarian assistance. Unregistered refugees have only received attention more recently.

Background on the context in Bangladesh

Though the Rohingya refugee influx that began on 25 August 2017 is by far the largest Bangladesh has seen, it is not the first. Repression, restrictions on freedom of movement, statelessness, and waves of violence have led Rohingya to flee their homes in Rakhine state in Myanmar, and seek refuge in Cox's Bazar, Bangladesh. The earliest record of significant displacement from Myanmar in the 20th century was in 1942 when over 20,000 Rohingya fled to Bengal in the then pre-partition India. The largest population movements to Bangladesh before 2017 were in 1978 and 1991-1992, when over 200,000 Rohingya entered Bangladesh each time. This report does not go further back in.

The absence of an institutional or legal framework for refugee protection in Bangladesh limits the protection that the Rohingya population should receive under international law. The Government of Bangladesh (GoB) is not a signatory to the 1951 refugee convention, nor to the 1967 Protocol or any regional instrument relating to refugees. In Bangladesh, the regulation governing refugees is the 1946 Foreigners Act (UNHCR 10/12). Up until 1992, the Rohingya population arriving in Bangladesh were officially registered as refugees by the GoB. These registered refugees live in two official refugee camps, Kutupalong and Nayapara, in Cox's Bazar (UNHCR & WFP 2012, Milton et al. 21/08/2017).

Since 1992, the GoB stopped registering Rohingya population as refugees (UNHCR & WFP 2012). Rohingya who have arrived since are labelled "undocumented Myanmar nationals" or "unregistered refugees", they live in makeshift camps or with host communities and are considered to be illegally residing in Bangladesh (ECHO 10/2017, UNHCR 2007).

Prior to 25 August 2017, 33,000 Rohingya refugees were officially registered in Bangladesh and resided in UNHCR managed camps, but an estimated additional 200,000-500,000 Rohingya individuals were living in informal settlements (makeshift camps) and with host communities (UNHCR 10/06/2014, UNHCR 20/09/17).

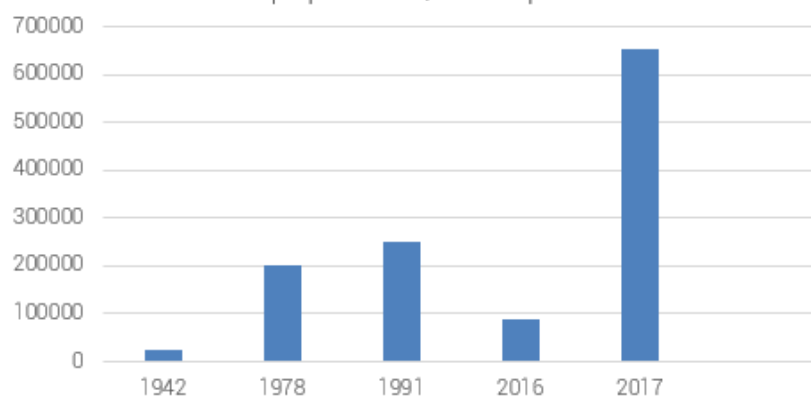
History of Rohingya in Bangladesh

In the 20th century, several waves of arrivals of Rohingya people to Bangladesh, and repatriation from Bangladesh to Myanmar, occurred. This report does not go further back in history. The Rohingya population has settled in refugee camps, makeshift camps and within the host communities. In 1992, two official refugee camps were built and still exist today, Kutupalong and Nayapara refugee camps. Registered refugees are generally hosted in these camps. Unregistered refugees live in makeshift settlements created around these two refugee camps throughout the years to accommodate more arrivals, and with host communities (Reuters 04/12/2017).

Repatriation of the Rohingya population to Myanmar after their displacement has been enabled by the signing of memoranda of understanding (MoU) between the Government of Myanmar (GoM) and the GoB. UNHCR generally facilitates voluntary repatriation processes (HRW 2000). Returns to Myanmar outside these formalised processes have also been reported, generally driven by poor conditions in camps in Bangladesh. Upon their return to Myanmar, there have been concerns that the Rohingya population continues to face significant protection challenges and humanitarian needs (First Post 24/11/2017).

It is difficult to keep track of the exact number of registered and unregistered refugees who remained in Bangladesh year after year, due to incomplete tracking of arriving and departing flows between Bangladesh and Myanmar.

Major influxes to Bangladesh of the Rohingya population, 1942-present



This table does not show cumulative figures. Figures are estimates. Yearly arrivals under 10,000 people are not presented.

1942 influx

Communal riots between Rakhine and Rohingya villagers in Rakhine state resulted in an estimated 22,000 of the Rohingya population to cross into what was then pre-partition India, Bengal (HRW 2000). These riots erupted following the advance of the Japanese army on Burma in 1942, which resulted in the evacuation of the British from Rakhine and left a power vacuum. The advance of the Japanese army also prompted the fleeing of Muslims from Burma (MSF 03/2002).

1978 influx

Over 200,000 people fled to Cox's Bazar between 1977 and May 1978, following reported evictions from their homes in Rakhine state by the Myanmar military. These evictions took place during efforts to register citizens and screen out foreigners for a national census. Alleged widespread human rights violations against the Rohingya population during this period led them to flee to Bangladesh (HRW 2000). The Rohingya population who fled to Bangladesh settled in 13 camps established with UN assistance on the border in Cox's Bazar, as well as one additional camp in Bandarban in the Chittagong Hill Tracts (HRW 2000).

Negotiations between the GoB and the then junta government of Myanmar led to the start of a repatriation program in July 1978, only a few months after the arrivals. While few refugees wanted to return in the early stages of repatriation, the proportion wishing to return increased as camp conditions in Bangladesh began to decline and food rations were restricted (HRW 2000). The situation in the settlements is reported to have motivated the return of the Rohingya population: around 107,300 of the Rohingya population had returned to Myanmar by March 1979. In total, 180,000 people returned between 1978-1979 (MSF 03/2002).

1991-92 influx

An increase in the presence of the Myanmar military in Rakhine state in 1990 prompted the exodus of an estimated 250,000 of the Rohingya people to Bangladesh (MSF 03/2002, UNHCR 2007). Following political turmoil surrounding the failed democratic election of

1990, the GoM increased its military presence in northern Rakhine state on the grounds that Islamist insurgent groups in Rakhine state had growing military capacity. The military build-up was accompanied by reports of forced labour, forced relocation and human rights abuses toward the Rohingya population (MSF 03/2002). 250,000 of the Rohingya population were received in 19 camps in Cox's Bazar. Restricting movement and settling people in camps limited integration with the host population and ensured that return not long-term settling, remained the aim. Repatriation began in April 1992. In May 1993, a memorandum of understanding (MoU) was signed between the GoB and UNHCR to facilitate further repatriation. Between 1993–1997 over 230,000 Rohingya returned to Myanmar (HRW 2000; UNHCR).

1997 smaller influx

Thousands of the Rohingya population arrived in Cox's Bazar in 1997 driven by high food prices in Myanmar and intensified forced labour imposed by Burmese security forces on the Rohingya population in December 1996 and in the first half of 1997 (Amnesty international 09/1997). Most of the arrivals settled in local villages in Bangladesh rather than in camps, likely due to civil unrest and restrictions of movement to enter and leave the camps during a repatriation process that turned violent in 1997. This made counting new arrivals difficult as the Rohingya population mixed with local communities. Repatriation exercises briefly resumed in 1998, with only around 800 Rohingya repatriated from the camps between November 1998 and October 1999 (MSF 03/2002, HRW 29/05/2000).

2016 onwards

In October 2016, a resurgence in insurgent activity along the border and consequent military operations resulted in over 87,000 of the Rohingya people crossing into Bangladesh. Most of the new arrivals settled in Ukhia upazila, forming the new Balukhali makeshift settlement. Attacks by insurgents on police posts in Myanmar in August 2017 prompted a security crackdown by the GoM. Violence resulted in mass movements across the border from August 25, 2017. Between 25 August and early December, over 600,000 of the Rohingya population arrived in Cox's Bazar (ISCG 03/12/2017).

The GoB and GoM reached an agreement on repatriation on 23 November 2017. The agreement is based on the earlier agreement of 1993. It states that Rohingya individuals must voluntarily wish to return and provide a proof of residency in Myanmar, that the GoM can decide to refuse to accept the repatriation of any individual, and that the repatriated will be settled in temporary camps in Rakhine state in Myanmar, with

movement restrictions, until they can be accommodated in model villages built near their former homes (Reuters 25/11/2017). Only those who entered Bangladesh after October 2016 are eligible for repatriation. IOM and UNHCR have not yet been contacted on the agreement. The process is to be set in motion by 23 January, 2018 (Dhaka Tribune 26/11/2017).

Working with the Rohingya population in Bangladesh

The section below describes and summarises observations or situational analyses from humanitarian and government responses prior to August 2017. These are a mix of historical facts and good past practices adopted by the government and humanitarian organisations to respond to the Rohingya population's needs in Bangladesh, and findings from previous assessments that may inform the response.

Access

Overview

Humanitarian operations currently benefit from unprecedented access to the Rohingya population in Cox's Bazar. However, operating in Cox's Bazar has always been challenging due to lack of registration of refugees and restrictions on humanitarian operations.

With formal government registration processes of refugees ceasing in 1992, aid delivery has been restricted to registered refugees. Access to aid has been particularly challenging for unregistered refugees living in makeshift settlements or with host communities (IRIN 19/11/2013). Integration with host communities has also been limited to ensure that the return of the Rohingya population to Myanmar remains the goal (HRW 22/08/2015).

Further, restrictions of movement of registered refugees exiting camps have been tightened, most notably during times of unrest in and around camps (IRIN 12/12/2012, Al Jazeera 17/09/2017). Aid delivery in camps and humanitarian assistance in Cox's Bazar more broadly have been temporarily halted at times as the GoB is conscious of creating pull-factors through improving living conditions in camps (HRW 22/08/2012).

Humanitarian operations have also been interrupted by unrest in camps. In 1997, civil unrest in the two camps of Nayapara and Kutupalong emerged during a repatriation process that turned violent, and prompted refugees to seize control of the camps and to impose restrictions of movement entering and leaving the camp for over a year. Only a few select UNHCR and NGO officials were permitted to enter the two camps (HRW 2000).

These operational difficulties to provide consistent and sufficient humanitarian assistance throughout the years has perpetuated the poor living conditions of the Rohingya population in Cox's Bazar who rely heavily on aid for survival (IRIN 19/11/2013, IRIN 17/12/12).

Women have had limited movement in camps

Women's movement in camps is restricted due to cultural and religious imperatives (UNHCR 14/01/2010, MSF 03/2002). Their movement within the camp has been limited by the upholding of *purdah*, or the practice of keeping women separate from and preventing contact or communication with men they are not related to. Women must be accompanied by a male family member to move beyond specific boundaries near their home or to engage in certain activities. Further to this, women reported that even if they could uphold *purdah*, they would not move much in the camps as they fear getting lost and leaving their children alone (OXFAM 22/11/17). As a result of limited movements, women are less likely to report their needs and to access humanitarian assistance.

Food security

Overview

Registered refugees have been highly reliant on food aid. Food shortages have been a recurrent issue in camps and have been exacerbated by limited humanitarian operations as well as food being used as a tool to further repatriation. Following the 1978 influx, humanitarian assistance in camps was provided in the form of food distributions, health and nutritional facilities, tube-wells and latrines. Food distributions were estimated to be 1,910 kcals, and included rice, wheat flour, fish protein concentrate, vegetable oil, sugar, salt, and tea. Children below 12 years old received half rations.

Despite this, around 10,000-12,000 Rohingya died in the settlements between July 1978–March 1979 (MSF 03/2002). Manipulation of food distributions is reported to have been a major contributor to the fatality rate. Food supplies were sometimes cut, and rations were in reality less nutritious than calculated. For vulnerable groups however, who may have also had more difficulty obtaining food on the ground, these rates were not sufficient (Lindquist 06/1979).

In addition to low food rations since 1992, there have been reports of illicit practices in aid distribution and lack of formal complaint mechanisms (UNHCR & WFP 2012). However, changes in food distribution practices in early 2000s, such as replacing locally hired workers with refugees to dispense food rations, have contributed to fairer food rations.

Coping strategies of trading food rations have nevertheless contributed to chronic food shortages and driven high food insecurity and nutrition rates in camps (MSF 03/2002).

In addition to food needs amongst the Rohingya population, food security has been an issue for host communities. Food needs of host communities are high. As of late 2015, 27% of people faced Crisis (IPC Phase 3), and 7% faced Emergency (IPC Phase 4) food security outcomes (IPC 12/2015). Food needs of host communities have tended to be overlooked to focus on the Rohingya population's immediate food needs (UNHCR & WFP 2012).

Food coping mechanisms have led to cycle of chronic food shortages

People dependent on food assistance frequently resort to coping strategies including selling, borrowing, and trading food distributions, but these strategies perpetuate food insecurity. In the face of restricted livelihood opportunities, the Rohingya population has used these coping mechanisms to obtain money to meet other needs. An estimated 80–90% of the camp population relies on some form of borrowing or informal assistance. To pay off debts, Rohingya must again sell or trade food rations. All these coping mechanisms coupled with a lack of access to income generating opportunities lock Rohingya further into a cycle of chronic food shortage, contribution to high levels of malnutrition (MSF 03/2002; OXFAM 22/11/17; Social Science in Humanitarian Action 10/2017).

Food assistance has only addressed short-term needs

Food assistance has prioritised addressing short-term needs. In spite of the repatriation MoU, the protracted nature of the crisis is likely to require longer term food assistance, or a more long-term strategy that can ensure sustainable food security and livelihoods (UNHCR & WFP 2012).

E-Voucher system has enabled more food diversity

The use of biometric registration with e-voucher cards has allowed the Rohingya population to exercise more choice regarding their food diversity (WFP 02/2017). WFP has used this type of food distribution since August 2014 for all refugees in camps. Registered refugees receive a monthly e-voucher which they use to purchase a diverse range of food items (VAM 03/2017). Prior to this system, food distributions were recorded in 'family books'. In these books, refugees' details were recorded manually and this system was prone to corruption (WFP & UNHCR JAM 2016). More food diversity is likely to improve both food security and nutrition in the long term. Though people reportedly diversify their diets, it should be kept in mind that the Rohingya population continues to sell off food rations to obtain different types of food.

Livelihoods

Overview

Registered refugees living in camps have had limited livelihood opportunities due to no formal right to work and restriction of movement which limits them from seeking work outside the camps. However, in the early 2000s, engaging in income-earning activities outside camps became increasingly tolerated, though there remained severe risks of penalisation or arrest by local authorities (MSF 03/2002). Unregistered refugees have been much more economically active than registered refugees, due to fact that they could not receive assistance, pushing them to engage in livelihood activities for survival. Restrictions of legal right to work and of movement has resulted in the Rohingya population resorting to cheap daily labour in riskier employments with lower workers' rights (UNHCR & WFP 2012).

Rohingya who pursue livelihood activities outside of settlements must pay a number of bribes. To leave the settlement, registered refugees have often paid the army or camp officials, and forestry officials in order to enter forests to collect firewood. While enabling employment or gathering of fuel for cooking, turning a blind eye often gives way to extortion and exploitation of the workers. At the same time, authorities are also cognisant of the fact that the cheap labour force helps economic activities. For example, Rohingya men have long been employed in the ports. In 2011, the local MP decided that Rohingya without national ID cards could no longer be hired, but this was later reversed due to a labour shortage at the docks (Oxford Handbook of Refugee and Forced Migration Studies 2014; MSF 03/2002).

Limited livelihood opportunities have perpetuated poor living conditions and have resulted in the Rohingya population adopting negative coping strategies such as precarious employment that raises protection concerns.

Vocational training has increased employability of registered refugees

For many Rohingya individuals, educational opportunities are nearly non-existent after high school in Bangladesh. Vocational training, mostly in the form of carpentry, woodwork, repair of electrical goods, and household wiring, was approved by the GoB in 2008 in the official refugee camps. Net-weaving, and sewing/tailoring have been amongst activities proposed to women (MSF 03/2002). The trainings increased the employability of registered refugees in Bangladesh: around 60% of graduates of these trainings in 2015 indicated that they were working in factories and shops. Vocational trainings enabled registered refugees to secure jobs in regular work places inside and outside camps, rather than reverting to casual day labour activities. It was easier for Rohingya from Kutupalong refugee camp to find employment, presumably because they are closer to urban areas and markets than those in Nayapara refugee camp (WFP &

UNHCR JAM 05/2016). Training has sought to improve livelihood opportunities amongst registered refugees, opportunities which are highly limited in the unregistered Rohingya population due to their lack of legal immigration status.

Women have had to engage in income-earning activities

Economic difficulties in camps have pushed women, who traditionally conduct domestic work, to take part in income-earning activities. They have been engaged in fetching firewood and domestic help but also in cooking in restaurants, soap making, and weaving and tailoring (Social Science in Humanitarian Action 2014). Negative coping mechanisms have included engagement in survival sex (Reuters 24/10/2017, Action Aid 26/10/2017). However, women reportedly prefer to work within their homes as this conforms with cultural practices and beliefs. To increase the skills of women, training in tailoring, weaving, and soap making can be provided – which can all be home-based activities.

Health

Overview

The health situation of the refugee population in camps has been generally stable throughout the years, however, overcrowding in camps has enabled communicable diseases to spread quickly (MSF 03/2002).

Respiratory infections have long been in the top causes of overall morbidity for children under five (MSF 03/2002). In Kutupalong in 2016, upper and lower respiratory tract infections represented 37.1% and 11.6% of all consultations. In Nayapara, this was 17% for both infections. This was significantly higher than the national average of 5.4% for children in Bangladesh (UNHCR & WFP JAM 05/2016). The high number of respiratory infections are likely to be related to overcrowding and cooking inside shelters (UNHCR & WFP JAM 05/2016).

In 2014, diarrhoea rates were high in Kutupalong (23.1%) and Nayapara (27.1%) refugee camps. These rates were similarly high in 2015, at 18% and 19%, compared to 6.7% for the rest of Cox's Bazar. The high rates are likely directly related to the lack of adequate WASH facilities and overcrowding. Water scarcity in Nayapara may have contributed to higher rates of diarrhoea compared to Kutupalong (UNHCR & WFP JAM 05/2016).

Daily stressors have been an important factor in depression symptoms

Though stories of extreme trauma such as rape, abuse, torture, and other human rights violations in Myanmar are common, depression symptoms in the settlements are also often caused by daily stressors. These include overcrowding, unsanitary conditions, and

limited freedom of movement (Riley et. al 2017). Lack of food is also psychological stressor for people. Chronic food insecurity and the lack of a diversified diet have been found to be main concerns with past influxes. With limited freedom of movement and opportunities to obtain a livelihood, many feel bored and restless (MSF 03/2002).

Spiritual and religious beliefs inform health understanding and treatment

Understanding of disease and health has sometimes been linked to spirituality and religion. Difficulties such as economic problems and mental health issues have sometimes been attributed to the *jinn* (spirit possession), Mental health issues are sometimes explained by a *jinn* possession. Adapting language and treatment to take this spiritual dimension into account is likely to improve healthcare delivery (Social Science in Humanitarian Action 10/2017).

Access to public health facilities has been challenging

Many Rohingya have felt that they were discriminated against at public health facilities in Bangladesh (IOM 2015). Female Rohingya living in host communities reported that pharmacies were the most accessible place to seek healthcare.

Nutrition

Overview

Since 1992, assessments of malnutrition in settlements have consistently found high malnutrition rates in adult and children refugees, above the average in Bangladesh. In 2015, stunting rates were estimated at 52.1% in Kutupalong and 57.3% in Nayapara, significantly above the 40% WHO “very high” threshold for stunting and the 32.6% national prevalence rate in Bangladesh. Stunting rates reported in 2015 are considered high, though to a lesser extent compared to the rates before. High levels of wasting were also consistently recorded in camps and amongst the surrounding host communities (UNHCR & WFP JAM 05/2016).

Chronic malnutrition had affected a large proportion of the camp population. In 1999, in Bangladesh, 63% of children under five and 56% of women were chronically malnourished. As of 2002, 53% of adults were still chronically malnourished and 58% of the children. In 2000, 62% of the population in Nayapara refugee camp were found to be suffering from chronic malnutrition (MSF 03/2002).

Levels of acute malnutrition have remained high. In 1992, nutrition surveys found 20-49% Global Acute Malnutrition (GAM) rates among Rohingya refugee children under five, significantly above the 15% WHO emergency threshold. (MSF 03/2002). A Nutrition Survey conducted by ACF in 2011 continued to find malnutrition rates above the WHO

emergency thresholds with GAM prevalence estimated at 16% and SAM at 2.1% in Kutupalong and Nayapara camps (ACF 12/2011).

There have been many potential drivers of high malnutrition rates

There have been many and complex drivers of consistently high malnutrition rates. Observed and reported coping mechanisms among the Rohingya population have included limiting meals a day, reducing meal size, and reducing food intake. Adults use these mechanisms to provide food for their children. Culturally, women are usually the last to eat, which may mean less food or less nutritious food is available for them (MSF 03/2002). Reduced food intake and lack of diversified diets have contributed to high malnutrition rates.

In the past, food supply has been cut, and supplements to the food basket were not provided. Food rations were not wholly distributed. Newborns who were not registered were not included in ration calculations. Lack of adequate WASH facilities and poor hygiene practices have also enabled quicker transmission of diseases and contributed to malnutrition. All these factors drove particularly high levels of malnutrition (MSF 03/2002).

Sharing of food rations and supplementary feeding has exacerbated nutrition issues

Another important driver of malnutrition has been the sharing of both food rations and supplementary feeding. As the make-up of the residents in the settlements is a complex mix of registered refugees, unregistered refugees, host community in-laws, or other extended family members, not everyone is entitled to food distributions. Extensive sharing among Rohingya individuals and extended families has diluted the effect of nutritional supplements. Blanket supplementary feeding in makeshift settlements and targeted supplementary feeding in host communities may reduce the need to share (UNHCR & WFP JAM 05/2016; UNHCR 12/2011, MSF 03/2002).

Use of micro nutrient powders has been challenging

In 2016, micro nutrient powders (also referred to as ‘sprinkles’) were distributed for children aged 6–23 months. Rohingya have however indicated that they do not like the taste and found the colour unappealing when mixing it with other foods. Reports have also indicated that the powders have therefore at times been used as chicken feed, rather than consumed as intended (UNHCR & WFP JAM 05/2016).

WASH

Overview

Water has always been lacking in Nayapara camp due to shortage of groundwater. Water rationing has regularly been imposed and there are shortages particularly in the dry season. For example, in 2011, UNHCR reported that refugees received 19L of water per person per day but during focus group discussions women said that during periods of water shortages they were more likely to receive 6L per person per day (UNHCR 2011; MSF 03/2002). Poor water infrastructure, taps opened only two hours a day, and underestimation of the number of people relying on this water (refugees, aid workers and villages) have long contributed to Nayapara's water shortages (MSF 03/2002). This is likely to exacerbate health and nutrition needs amongst the Rohingya population in camps.

Hygiene practices are important to the Rohingya population, partly due to the practice of ablution before prayers. However, sanitation and hygiene facilities in camps have suffered from hostile terrain and lack of space. Many facilities have been non-functioning and the complex plumbing system suffers from frequent blockages (MSF 03/2002). Prohibition of building semi-permanent structures in camps has also impacted the sanitation system. Latrine systems set up in 1992 did not account for cultural sensitivities and resulted in protection concerns for vulnerable population as adaptations from the original camp layout were prohibited (MSF 03/2002).

Unsafe conditions have limited women's access to latrines

Women do not feel safe around current latrines in camps and makeshift camps, as there is limited lighting and men are said to hang around (IOM KAP 06/2016). To avoid having to use latrines, women have been found to restrict their daily food and water intake. In addition, women have reported feeling ashamed to walk in front of men to take a shower (UNHCR 25/10/2017; OXFAM 22/11/17; WASH Cluster Myanmar 10/2017). Limited access to latrines and showers and coping mechanism contribute to driving WASH needs in the women Rohingya population.

Handwashing promotion on a micro-level has worked among the Rohingya population

Promotion of handwashing at a household level was found to work best among Rohingya population in the settlements in Myanmar. Micro-level approaches were more viable than community level approaches in sensitisation on handwashing. Though handwashing stations were installed in some settlements, this did not work well in the long-term as they were not maintained properly. In the past, Rohingya have been observed washing one hand after using latrines (WASH Cluster Myanmar 10/2017; IOM KAP 06/2016).

Cultural issues are important factor in designing WASH facilities

Cultural issues, such as ensuring latrines do not face towards Mecca, are important. Sufficient water points should be available at mosques as Rohingya perform ablutions (*wudu*) before entering. Women sometimes pray at home and therefore may need water points close by to facilitate this (WASH Cluster Myanmar 10/2017; Social Science in Humanitarian Action 10/2017). Consideration of these long-standing cultural practices are likely to increase use and access to WASH facilities.

Education

Overview

Until 1996, registered refugee children were not allowed to access basic education in Bangladesh. In 1996, formal schooling in camps was approved and in 2000 for Nayapara camp. Formal provision of primary education to registered refugee children only started in 2006 (UNHCR 2011). Children were able to access education from kindergarten to class five (MSF 03/2002). Although informal learning courses have been set up for those who wish to pursue their education, notably by unrecognised madrassas, lack of motivation over the absence of prospects or education certificate results in low enrolment rates (MSF 03/2002, UNHCR 2011). As Rohingya children cannot sit the national Bangladesh certification exams, camp schools have seen little success in keeping children in school (UNHCR & WFP JAM 05/2016). Non-registered Rohingya children continue to lack access to education.

Single-sex classrooms may increase girls' attendance rates

Girls are less likely to attend school after they are past the age of menstruation. A CARE assessment found that girls who attend school are typically from higher income families. Those who do attend school are still often pulled out after grade 5. Parents are more likely to send their girls to school if there are female teachers and sex-separated classrooms (Translators Without Borders 11/2017; CARE 18/10/2017).

Shelter/NFI

Overview

Shelters constructed to accommodate arrivals in 1992 in the camps did not see major improvements until 2006. Built in an emergency phase for temporary accommodation, shelters were repaired only every few years. Bamboo and plastic sheeting have been used to build shelters due to restrictions to build semi-permanent and permanent structures in both refugee camps and makeshift camps. Leaky plastic roofs and broken

bamboo partitions were reported as common problems to house structures. Overcrowding and lack of privacy were also consistent issues due to the small sizes of the houses. Coping strategies have included taking parts of latrines to fill in the holes in houses (MSF 03/2002).

Since 2006 rehabilitation of shelter by creating semi-permanent structures improved living conditions, however, lack of privacy and small space continued to be an issue (IRIN 07/11/2008, UNHCR 2011). Poor shelter conditions have further exposed the Rohingya population to floods, cyclones and landslides (ICSG 01/06/2017).

As Rohingya receive dry foods through distributions, they need to access fuel to cook this food. There is a preference for solid fuels; firewood has been most used. Other strategies have been adopted throughout the years but these have faced significant challenges and the Rohingya population continues to heavily rely on firewood as their main source of fuel (OXFAM 22/11/17).

Various fuel strategies have been piloted

Refugees sell food rations to obtain firewood and collection of firewood in the forest exposes individuals to many protection risks, contributes to environmental degradation and has increased elephant attacks.

In the past, compressed rice husk were used as an alternative. Challenges with compressed rice husk included negotiating adequate supplies with local traders and seasonal sourcing difficulties (low in supply from May – August). Compressed rice husk deteriorates in humid conditions and cannot be stored for long in the monsoon season (UNHCR 2011). As compressed rice husk is also used in other products such as animal feed, heavy use of compressed rice husk may drive up prices for different agricultural products.

Eco-stoves have also been used. The use of these stoves did not however drastically reduce the amount of fuel needed. Rohingya felt the stoves led to more smoke in shelters, either because stoves were not installed properly, or because they were not suitable for camp conditions (UNHCR 2011).

Protection

Overview

Cases of human trafficking and organised crime have been widely reported in Cox's Bazar. Many Rohingya people have been forced into illegal activities as a result of their limited formal employment opportunities in Cox's Bazar (Amnesty International 21/10/2015, Amnesty International 24/11/2016). Smuggling and human trafficking networks have exploited the Rohingya people's vulnerability and increasingly target those who attempt to move

within Bangladesh to find better living conditions (Mahapetro et al. 2017). Protection issues have been exacerbated by repatriation processes that turned violent, leadership structures prone to corruption in camps and community policing. SGBV has also long been an issue in camps.

Cycles of repatriations occurred after influxes in the 1970s and 1990s. In both cases, incidences of forced repatriation were reported. In addition, many indicated not knowing their rights, or that repatriations were meant to be voluntary in nature. These repatriation processes have turned violent in the past (MSF 03/2002). Unrest was reported during the 1992 and 1993 repatriation process, including clashes between refugees and Bangladeshi security forces (Peter et al. 1995, USBCIS 28/03/2001). In 1997 an ongoing repatriation process reached a standstill when the GoM announced to both the GoB and UNHCR it would no longer accept refugees from Myanmar after August. Some Rohingya were forcibly returned to Myanmar before the deadline, leading to riots among Rohingya in Bangladesh. Some Rohingya individuals seized control of Nayapara and Kutupalong refugee camps, organised a hunger strike and restricted movement exiting the camps. The GoB restored order in March 1998, and many Rohingya refugees seen as responsible for the riots were arrested (HRW 2000; Abrar 1995; Amnesty 1997). There has been no formal repatriation since 2005 but it is possible that return movements have continued (WFP & UNHCR 06/2008).

Organisational structures in camps have also led to instances of corruption, abuses and lack of accountability.

The mahji system has been prone to corruption

Majhi are community leaders of blocks in the makeshift camps and have been prone to corruption. They are a point of reference for the army, CiCs, and humanitarian organisations. In previous influxes they were either traditional leaders, or appointed by the army and CiCs as a means of crowd control (CARE 18/10/2017; Social Science in Humanitarian Action 10/2017). Mahjis deal with the day-to-day issues of the inhabitants of their blocks and were charged with distributing aid to those in their block, including dividing food distributions or vouchers among Rohingya in their blocks. The system has been known to be corruptible. In the past, mahjis quickly accumulated power and exploited this. Reported abuse by mahjis includes but is not limited to: corruption, bribing, rape, arbitrary detention of men in order to sexually exploit female family members, withholding or confiscating aid distributions, and physical violence (UNHCR 03/2007; UNHCR 05/2007; Maitra 2017).

Camp management committees have improved community leadership structures

As an alternative to the mahji system, UNHCR and the RRRC were involved in setting up camp management committees in the official refugee camps in 2007. These committees were made up of democratically elected representatives, ensuring that gender equality was taken into account. Since the establishment of these committees, rates of abuse reportedly decreased, though it is unclear to what extent (Olivius 2014; IRIN 07/11/2008).

Boy Scout initiatives empowered youths in their communities

Youth and children may become bored by life in the settlements. UNHCR found a Boy Scouts (and later on Girl Scouts) initiative was a good practice, empowering youth to serve their community. In some events, such as the Cox's Bazar beach clean-up, the Rohingya Boy Scouts were mixed with scouts from local communities. Later on, restrictions on activities made it difficult for the Scouts to partake in events outside the settlements (UNHCR 28/09/2010; UNHCR 2011).

GBV has been a key issue in camps

The number of sexual violence incidents against women and girls is likely to be higher than reported figures. Women and girls are afraid to report rape as it is seen as shameful and taboo. Yet, stories of domestic violence, trafficking, forced marriage, polygamy, rape, and other abuse have been widespread (MSF 03/2002; IOM 08/2015). Women may feel ashamed to report a situation of GBV to a mahji or the army due to stigma (OXFAM 22/11/17).

Primary support to GBV survivors in Rohingya society is generally family based, or involves community leaders who practice mediation rather than justice and punishment of the offender. Support to GBV survivors have included harmful practices such as men working in women and girls' safe spaces, identifiable GBV sign posts for safe spaces, and men exposing survivors to the community (CARE 18/10/2017).

GBV concerns from economic empowerment of women have been reported

Following women's engagement in income-earning activities, GBV concerns have continued to be reported, including from local Bangladeshi community, employers, the police and the camp authorities. Women have been notably vulnerable to violence in private spaces outside their homes. Sexual violence towards women who work outside of home is common but is significantly underreported due to attached stigma (Social Science in Humanitarian Action 2014)..

Community policing has led to criticism

Community policing allows for active participation of refugees in their own security and increases female involvement. It can incorporate local knowledge and practices as well as traditional leadership networks. When used in the Rohingya context however, community policing has come under criticism as refugees said community police practiced abuse, intimidation, and played a role in forced repatriations (K4D 20/10/17).

Undocumented births are further risk to trafficking

Births of children in the settlement have been undocumented by authorities. Birth registration cards for refugee children are issued by health clinics within the camps. As with the identity documents, however, they are not recognized by the authorities. Unregistered refugees are unable to register their children. In case of child trafficking, this increases risks as children are untraceable (UNHCR 2011; MSF 03/2002).

Rohingya interactions with host community

Overview

Despite limitations on integration, the Rohingya population has interacted significantly with local communities. Assessments found that over the years, similarities in cultural and religious characteristics has enabled more interaction with local communities and has resulted in significant intermarriage with the local population (WFP & UNHCR JAM 05/2016). Local communities and established Rohingya have also provided food, shelter, employment and protection to unregistered Rohingya (UNHCR & WFP 2012). However, the presence of the Rohingya population has also created tensions with host communities and increased protection concerns.

Host communities' tensions are a protection concern

Though proximity of host communities and Rohingya languages facilitate integration, there are reports of marginalisation and discrimination of the Rohingya community from host communities (WFP 2012). Locals express discontent regarding the increase in prices of basic goods, loss of income, diversion of aid towards Rohingya, and security concerns. Land which was used for grazing cows is scarce. Some villagers have been found to restrict access to Rohingya who come to collect firewood, and to confiscate their belongings (CPD 11/11/2017). Some also believe that Rohingya population have engaged in theft and abuse narcotics. Resentment has at times been expressed in attacks against refugees inside camps by local gangs (IRIN 25/10/2014). Feelings of resentment are exacerbated by high levels of poverty in Cox's Bazar, high population density and vulnerability to natural disasters.

Site management

Overview

Congestion of sites has been a long-standing issue, as sites have had to expand due to continuous waves of arrivals. Proposals to move camps and build new camps have been put forward by the GoB but have not materialised (IRIN 25/11/2014). A plan to relocate refugees to the island of Thenfar Char in the Bay of Bengal, was put forward in 2015. However, the island is frequently flooded during monsoon season and to cyclones and is deemed unliveable. The plan was abandoned but re-emerges at times as sites are overcrowded and lack land to continue expanding (The Guardian 14/06/2015, The Guardian 02/02/2017).

Refurnished shipping containers have served as confidential spaces

In the past, organisations have found that adapting shipping containers could be used as a solution to create spaces for case management or confidential counselling sessions (Start Fund Lessons Learned 18/07/2017). The GoB previously placed restrictions on building semi-permanent structures in the settlements. Currently, their stance regarding this topic is unclear.

Lack of signs in camps has contributed to protection risks for women

Women are not only culturally restricted in their movement but are also afraid of moving around in camps due to lack of signs and lighting (UNHCR 2011). They reported that signs and colours in block streets would help their movement within the camp and reduce the risk of them getting lost and exposed to dangers (OXFAM 22/11/17). Children have likely been exposed to similar concerns.

This background document has been written based on secondary data available on the Rohingya refugee crisis. Any information that may complement this report is welcomed. For feedback or other inquiries please contact fv@acaps.org. For a situation analysis (November 2017) on the current needs of Rohingya, [click here](#). This note was written with IOM and US government support.

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