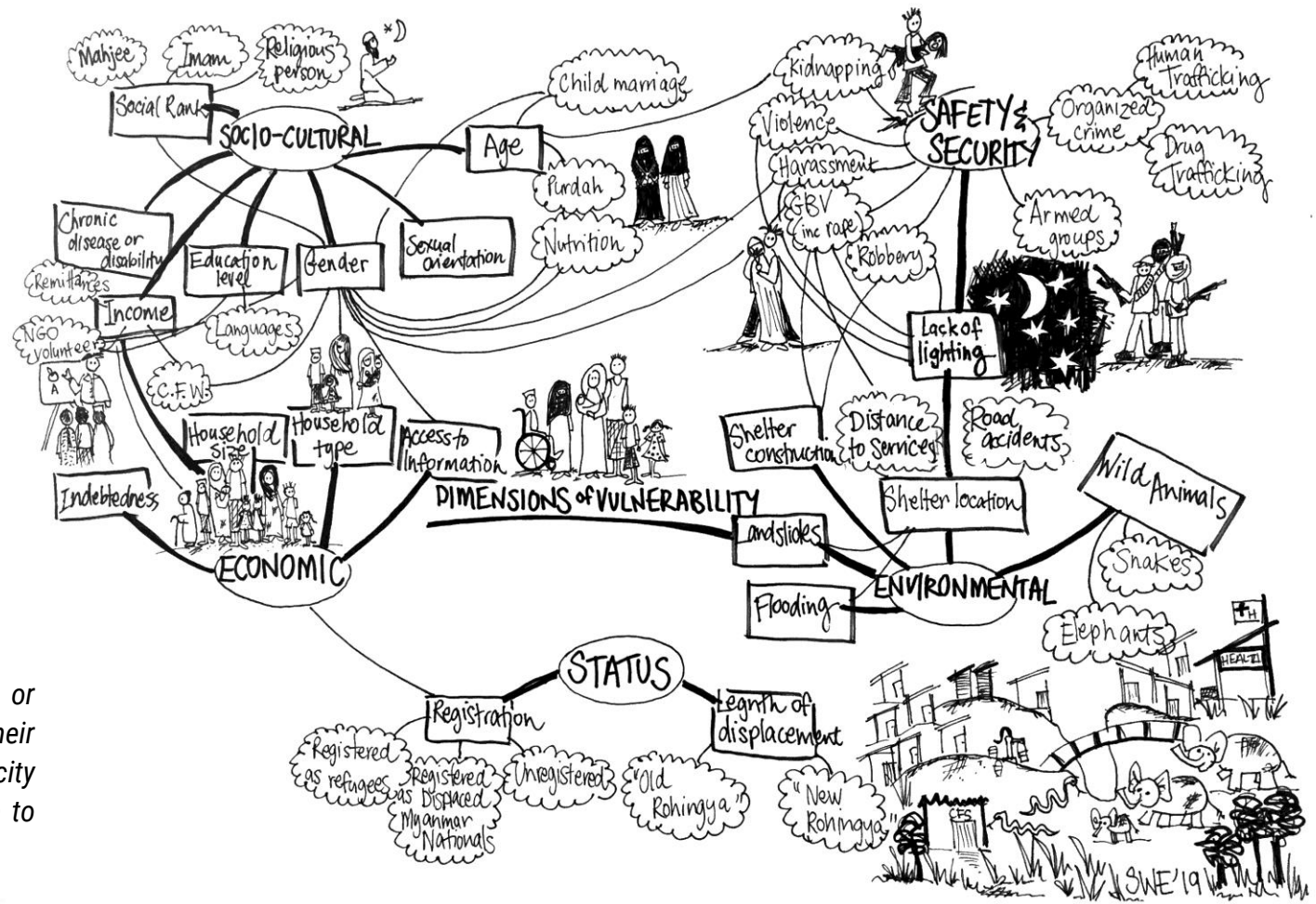# Vulnerabilities in the Rohingya refugee camps

Vulnerability, *n* /ˌvʌlnərəˈbɪləti/

The characteristics of an individual, household or sub-group within the Rohingya population, and their situation in Cox's Bazar, that influence their capacity to meet basic needs, as well as their exposure to physical or mental harm.

Contents

Contextual information

As stateless people dependent on humanitarian aid, all Rohingya refugees in camps in Bangladesh are vulnerable. To date, a more nuanced picture of the dimensions of the Rohingya's vulnerability has been an information gap in the humanitarian response – which necessarily has been focused on establishing systems and services for all. To address this gap, the ACAPS-NPM Analysis Hub, in partnership with REACH Initiative, undertook a vulnerability study to identify types of Rohingya individuals and households which are *more vulnerable* and *more at risk* than others.

Vulnerability is a broad concept. For the purpose of this study, the definition used by Wisner et al. (2004), was adapted to become: *The characteristics of an individual, household or sub-group within the Rohingya population, and their situation in Cox's Bazar, that influence their capacity to meet basic needs, as well as their exposure to physical or mental harm.*

The study was based on the premise that understanding the reasons for, and implications of, vulnerability beyond the typical[1] humanitarian categories, should help humanitarian agencies provide a more nuanced response to needs, based on evidence. Additionally, this study should support the design of future assessments to fill gaps in understanding and knowledge. Preliminary findings from this fieldwork informed the design of the Joint

Multi-Sector Needs Assessment (JMSNA, 2019) and this vulnerability report is intended to provide an evidence base to inform a more tailored and better use of resources as the response moves forward.

Methodology

At the outset of the study, it was assumed the Rohingya population in Cox's Bazar is not homogenous. Although there are obvious similarities across the population based on their history and current circumstances, it was assumed there would be different *types* and *intensities* of vulnerability experienced by different types of individuals, households and groups. It was hypothesized that some of these would be a legacy from the social system and economic environment in Rakhine prior to displacement, while others would have developed as a result of the current living arrangements in Bangladesh.

The first step was to carry out a secondary data review (SDR) to identify gaps and inform the research design. This included breaking down the concept of vulnerability specific to the Rohingya context. Through this, five key dimensions were identified to be investigated in the research. The conceptual framework for the study can be found in Annex I.

The analytical framework for the vulnerability study was designed to fit within the analytical framework developed for the Rohingya response by the ISCG (Annex II) and informed by the findings of the SDR. The context focuses on the dimensions of vulnerability identified through the SDR, which are explored in terms of their impact on humanitarian conditions as well as community, household and individual level response capacities.

A focus group discussion (FGD) tool was developed based on the analytical framework, using open ended questions to encourage discussion and not assume predefined responses. Emphasis was put on working closely with the field research team, who were selected based on their language skills and experience with previous data collection in the camps.
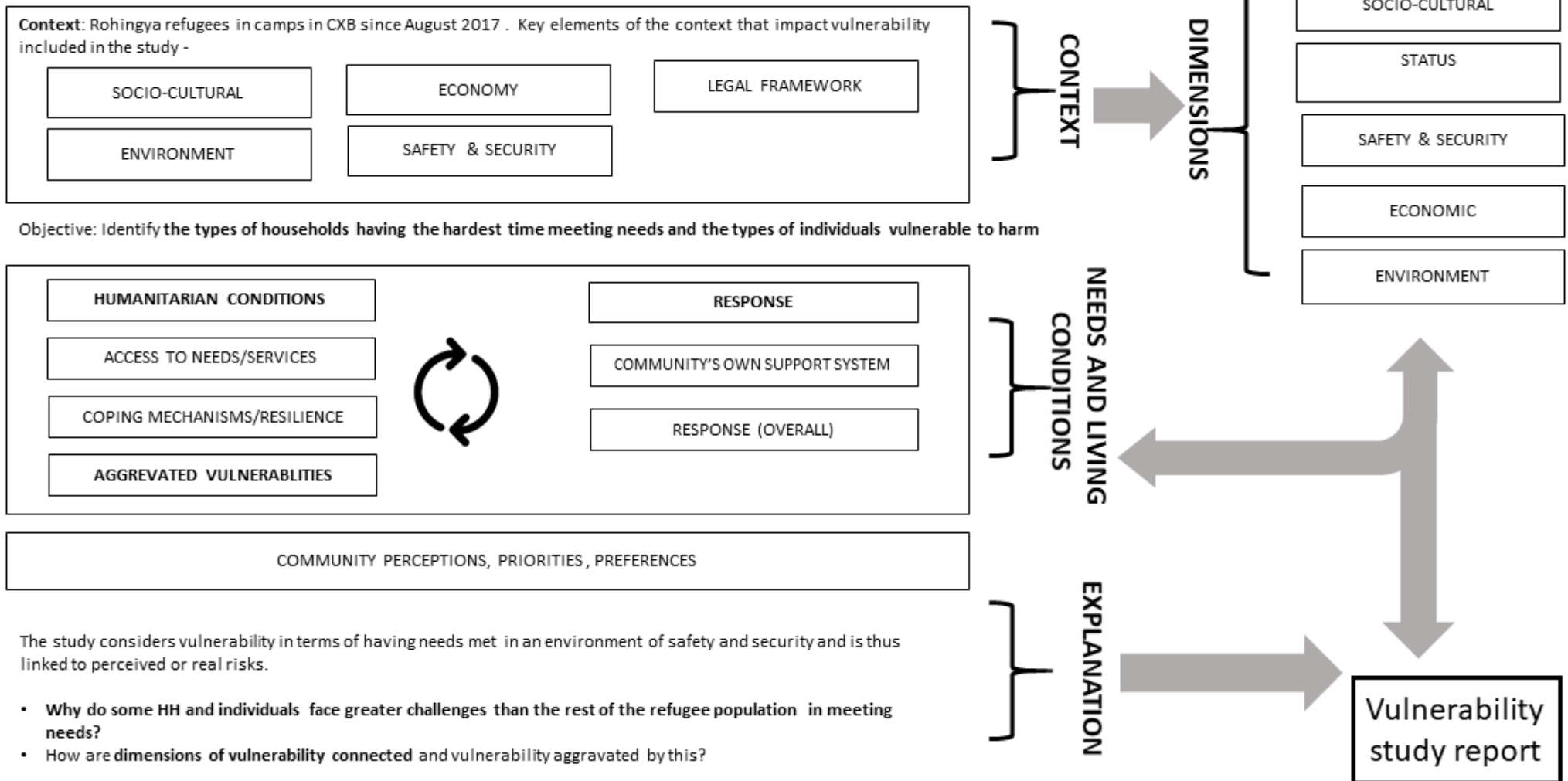
The fieldwork component consisted of 12 in-depth FGDs in camps 7, 8E, 17, 20Ext., 22 and 24. Site selection was designed to include a cross-section of more and less congested camps, covering camps in both Ukhiya and Teknaf. The fieldwork was complemented by a range of key informants, including site management staff, camp volunteers and the field research team themselves. Three ACAPS staff, including a gender specialist, spent two days training and familiarising four field researchers (two male, two female) on the objectives of the study and the FGD tool. The team of seven

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[1] Groups such as pregnant and lactating women, elderly, disabled, infants, minority religious and ethnic groups are typically considered vulnerable.

worked closely throughout all stages of the study, including in each FGD. Extensive debriefing was carried out daily, as well as after completion of the fieldwork. This ensured a focus on high quality, detailed, qualitative information.

Findings of the study are presented using the structure set out in the analytical framework.

Vulnerability study analytical framework

Context: Rohingya refugees in camps in CXB since August 2017 . Key elements of the context that impact vulnerability included in the study -

SOCIO-CULTURAL

ECONOMY

LEGAL FRAMEWORK

ENVIRONMENT

SAFETY & SECURITY

CONTEXT

Objective: Identify **the types of households** having the hardest time meeting needs and **the types of individuals** vulnerable to harm

HUMANITARIAN CONDITIONS

ACCESS TO NEEDS/SERVICES

COPING MECHANISMS/RESILIENCE

AGGREVATED VULNERABLITIES

RESPONSE

COMMUNITY'S OWN SUPPORT SYSTEM

RESPONSE (OVERALL)

NEEDS AND LIVING CONDITIONS

COMMUNITY PERCEPTIONS, PRIORITIES , PREFERENCES

The study considers vulnerability in terms of having needs met in an environment of safety and security and is thus linked to perceived or real risks.

- **Why do some HH and individuals** face greater challenges than the rest of the refugee population in meeting needs?
- How are **dimensions of vulnerability connected** and vulnerability aggravated by this?

EXPLANATION

DIMENSIONS

SOCIO-CULTURAL

STATUS

SAFETY & SECURITY

ECONOMIC

ENVIRONMENT

Vulnerability study report

Key findings

Overall the study found that **individuals and households often experience multiple vulnerabilities at once, and that being vulnerable in one way often leads to another form of vulnerability, resulting in an inescapable and vicious circle.** Even those who are least vulnerable and appear to have a safety net, such as remittances from abroad, are not completely immune from vulnerability. While income sources enable people to have some control over their living conditions, rather than being entirely dependent on the assistance provided in the camps, when a household is known to have extra resources it becomes vulnerable to other concerns such as the kidnapping of family members for ransom.

The following key findings are elaborated in the report:

1. Life in the Rohingya camps is characterised by **scarcity and a breakdown in social cohesion** (Safety and security p. 9-10, Humanitarian conditions, p. 11).

2. **Everyone in the camps is vulnerable to some degree**; no one has all their basic needs fulfilled, and everyone experiences challenges in terms of safety and security (Humanitarian conditions, p. 11-12, Physical and mental health, p. 15).

3. **Primary needs, including having enough food to eat and shelters that provide sufficient protection** from the elements, remain key concerns for refugees.

4. **Mahjees are gatekeepers to assistance and opportunities.** They have significant influence on households' capacity to meet basic needs (Social rank, p. 7).

5. **Access to income is the key feature that sets people apart and gives them a better life in the camps making them less vulnerable than others**. The best income sources are remittances, and 'volunteer' roles with NGOs (Income, p. 8).

6. **The most vulnerable types of households are:**

   - Female Headed Households

   - Households without an income

   - Households many dependents (Humanitarian conditions, p. 12).

7. **Food assistance is not needs based.** While it varies based on the number of household members, assistance is not adjusted if households have an income source. While some mechanisms exist to assist vulnerable households with challenges such as transportation of distributions and repair of shelters, this assistance is not uniform. Therefore, the way vulnerability plays out results in assistance being diminished according to need. So **those who are more vulnerable end up with less** (Humanitarian Conditions p. 13).

8. **There is a high value placed on education.** Educated adults have access to better income opportunities. Their access to information means they do not miss out on assistance and they are respected in decision making. The high value placed on education also results in frustration because education options for children are insufficient, and participants feel their children are missing out on education that could prove very valuable to their future (Education, p. 7, Social barriers, p. 14).

9. **Gender and sexuality are key factors contributing to vulnerability** in Rohingya society, both in terms of meeting needs and exposure to physical or mental harm. This is exacerbated in the context of the displacement. Societal norms make it extremely difficult for women to act independently; this is compounded by physical challenges associated with distance and terrain (Gender, p. 4; Sexual identity and orientation, p. 5).[2]

10. **Adolescent girls experience frequent "harassment"** (this appears to encompass both verbal harassment and physical assault, which is difficult to directly discuss) when they are outside their shelters. Households use early marriage, from as early as 10 years old, as a way of mitigating this risk (Age, p. 5-6, Adolescent girls, p. 16).

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[2] Sexual orientation was not a topic covered in the FGDs, this was part of the SDR analysis.

Dimensions of vulnerability

An analysis of existing pre- and post-influx information on the Rohingya was used to reflect on the concept of vulnerability through different dimensions which could cause, perpetuate and exacerbate vulnerability. These were further developed and explored through the field research. These dimensions of vulnerability are not mutually exclusive; households and individuals can experience multiple dimensions simultaneously, resulting in the aggravated vulnerabilities discussed later in this report.
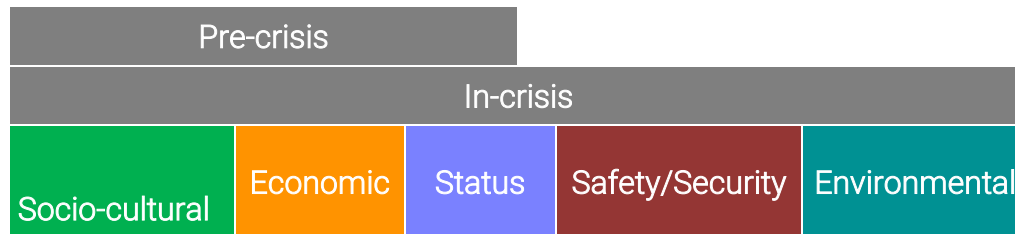
Pre-crisis				
In-crisis				
Socio-cultural	Economic	Status	Safety/Security	Environmental

Table 1 - Rohingya Dimensions of Vulnerability

Socio-cultural

Sociocultural dimensions of vulnerability are conceptualised to include both personal/demographic characteristics as well social structures, practices, values, and norms. This is because the personal/demographic characteristics that impact vulnerability mostly do so as a result of the social construction of those groups in Rohingya society.

Personal/demographic

Personal dimensions of vulnerability are those related to the personal sphere of the individual. In the Rohingya population, as with most groups of people in humanitarian crisis, these are gender, sexual identity and orientation (explored only through SDR in this study), age, and presence of disabilities and chronic diseases.

Participative ranking exercise

As part of each focus group discussion a participative ranking exercise was completed to better explore social status and individual and household abilities to meet basic needs. Participants were presented with three different sets of images, or icons, and asked to collectively order those images from lowest to highest in three separate questions:

- "Please arrange these people in order from highest to lowest social status in your community."

- "Please arrange these individuals in order from those who have the hardest time meeting their needs to those who have the easiest time meeting their needs."

- "Please arrange these households in order from those who have the hardest time meeting their needs to those who have the easiest time meeting their needs."

Examples of arrangements made by different groups, and the questionnaire used, can be found in Annex III. Results are discussed in more detail in the Aggravated Vulnerabilities section, and various relevant findings are mentioned across the dimensions of vulnerability.

Gender

Gender related vulnerabilities:
- Female headed households are identified by FGD participants as facing the greatest challenges in meeting their daily needs
- Exposure to sexual and gender-based violence
- Compromised or more challenging access to services and aid due to physical and cultural constraints
- Reduced access to information impacting access to services and support
- Nutrition concerns (especially for key groups such as babies >2 and PLW)

Pre-crisis: Traditionally, in Rohingya society gender roles are strictly defined and related to power structures shaped in cultural traditions, practices, and social rules. The head of the household is usually an older man, although women could take this role in the absence of an older male in the family. Property is distributed according to Islamic Sharia Law. Women can receive property in the family, but it can easily be challenged by a brother's opposition. In addition, woman's property is administered by male members of the society. Commonly held ideologies in Rohingya society see women as inferior to men.

These ideas create the belief that a husband has the right to beat his wife, highlighting the existence of domestic violence (BBC MEDIA ACTION 08/2018).Outside the domestic sphere, widespread sexual and gender-based violence (SGBV), perpetrated by Tatmadaw soldiers was a weapon of war used systematically in Myanmar that boosted mass displacement into Bangladesh. Rape and other forms of sexual violence were reported on a massive scale, largely against women and girls but also against men and boys (OHCHR 12/09/2018, UNHCR 2018).

Rohingya women are generally restricted from participating in many parts of public life, due to the practice of *purdah*, which implies that after reaching puberty they should not be seen by men other than their husbands or male relatives. Consequently, women are essentially confined to their homes. (Ripoll et al., 2017, Kamal Zafari, 2018).

Cultural practises of the Rohingya in their place of origin in Rakhine state placed women and girls in a more vulnerable position than their male counterparts, hampering women's capacity to access income, education, and livelihood activities, and allowing the persistence of domestic violence and SGBV cases.

In-crisis: The FGDs conducted for this assessment revealed that cultural practises make it substantially more difficult for women to meet their needs in the camps than men. The challenges faced by women in the camps is a theme that runs throughout this report. In the participative ranking exercise, all FGDs (both female and male) consistently identified female headed households as those facing the greatest challenges to meet their needs. The interaction of cultural practices with the context of camp life means that access to services and participation in income generating activities such as collecting relief items from distribution points and working in cash for work programmes, reduces female headed households' ability to meet their needs. Proximity to services was continuously raised as a critical factor for all FGD participants. Women were frequently mentioned as having problems collecting food. Both male and female groups expressed that unless women are accompanied by an adult male, they require assistance to overcome the physical, administrative, and social barriers of collecting assistance.

In addition to the increased access challenges for women, SGBV is reported to be prevalent in the camps, exacerbated by overcrowded conditions (ISCG 30/03/2019). Discussions revealed that female headed households are the target of continuous harassment, sexual assault, and rape, with men breaking into their homes at night.

Women's access to information is also constrained. Mosques are a source of information, being the centre of life in the camps, but this excludes women from receiving first-hand information and prevents them from having a forum to share their views and ask questions. Women do not have access to imams due to cultural prohibitions, and rely on information shared second-hand by male relatives.

Additionally, in a study conducted by TWB, it was found **that women are less likely than men to understand spoken Bangla and Burmese, likely due to the practice of purdah which restricts female exposure to spoken Bangla** (Translators Without Borders 11/2018).

Sale of SIM cards to Rohingya refugees is officially banned by the Government of Bangladesh; however, many families have access to mobile phones. These are a source of information for the household, but are predominantly controlled by men (TRANSLATORS WITHOUT BORDERS 11/2018). As of September, the GoB has restricted data coverage in the areas occupied by the Rohingya; however the point remains that men have greater access to information than women.

Purdah also has effects on the education of women, who are prevented from attending learning centres after puberty. Assessments show that learning centre attendance significantly drops after 15 years of age, particularly for female children, due to marriage and cultural inappropriateness (REACH, UNICEF, 04/2019). As educated people were commonly viewed as having better access to opportunities by FGD participants, reduced access to education for women further reinforces and maintains their vulnerability.

Infant girls are particularly exposed to nutrition issues, given boys and men are prioritised for food intake (ISCG 30/03/2019). WFP's REVA assessment also revealed a significant number of pregnant and lactating women who may not be getting their particular nutrition needs met for the same reason (WFP 12/2017; WFP 08/2018).

Sexual identity and orientation

Sexual orientation and identity related vulnerabilities:
- Protection concerns and exposure to violence
- Absence of targeted assistance and services due to invisible nature of LGBTQI in the camps
- Increased barriers to access services

Pre-crisis: Sexual and gender minorities faced abuse and intimidation in Myanmar, having been socially stigmatised, and prosecuted by law (REUTERS 16/11/2019). Teachers have reportedly forced gender non-conforming boys to change their behaviour. The UN Human Rights Council Independent International Fact-Finding Mission on Myanmar found that the Rohingya transgender community, particularly transgender women, have suffered sexual and gender-based violence, including rape by the Tatmadaw and Border Guard Police (UNHRC, 22/08/2019).

In-crisis: Information on the LGBTQI community in Cox's Bazar is currently limited. There is reference to both *kothi* (men who have sex with men) and *hijra* (third-gender person, transgender women and intersex persons with masculine gender at birth) reportedly fleeing the camps for nearby towns and cities and engaging in sex work as a coping strategy. They report exposure to violence from clients, family and community members,

and police, including being reticent to use clinical services both inside and outside the camps, for fear of being identified (Women's Refugee Commission 11/2018). There is a complete lack of information regarding women who have sex with women, transgender men, and intersex persons with female gender at birth.

Age

Age related vulnerabilities:
- **Older people** in terms of protection, access to services and aid due to the physical obstacles to key services
- Girls face early marriage due to cultural belief and economic reasons
- Age can impact access to humanitarian information and services

Pre-crisis: Child marriage, despite legal restrictions, was common practice among Rohingya in Myanmar. Girls are married young, based on religious traditions and as a way of reducing the number of dependents in the household. Early marriage exposes girls to early pregnancy, with associated health-related risks. In 2015, the average age of pregnancy in Rakhine state was reported to be 16-20 years old (Ripoll et al., 2017).

Barriers to education for the Rohingya were intentionally created in the Myanmar Government's policies, thereby exposing children to the worst forms of child labour (ILAB 2018).

In-crisis: FGD participants explained that, although marriage before the age of 18 is not permitted in Bangladesh, early marriage has increased since arriving in the camps.

"In Burma if we got caught marrying children under 18, we were punished with jail time. In Bangladesh if we get caught we just get scolded, so we try more for early marriages here."
– Female participant, Camp 22

One reason is punishment for early marriage has been much less severe than in Myanmar. Participants reported that early in the 2017 influx, many marriages happened because they faced no restrictions at all and could get their daughters married at any time, to anyone. Many Rohingya girls were married to Bangladeshi men; this was seen as a good option because no dowry was required. However, in 2018 a law prohibiting marriage between Bangladeshis and Rohingya became more strictly enforced (Dhaka Tribune 01/2018)., and marriages are now between Rohingya within the camps.

Participants also explained that marrying their girls as soon as possible is a way of protecting them. Unmarried adolescent girls (agreed by all FGDs to be girls 12 and over) are at high risk of being 'ruined'[3] and destroying the family's reputation. This social risk has become more acute since fleeing Myanmar, as the overcrowded camps and temporary shelters make it very challenging to practice *purdah*. Adolescent girls also face extremely high risks of harassment and assault; confining them to the shelter and getting them married as soon as possible is seen as a way to protect them, both physically and socially.

Underage marriage put girls at risk of negative physical and mental consequences including domestic violence and early pregnancy. They have limited access to education, knowledge of reproductive health, and influence over family planning (UNHCR 2018).

Age impacts access to information and communications. Studies have revealed that Rohingya aged 25-44 show lower listening and reading comprehension in a second language compared to other age groups, both younger and older. This can hamper access to humanitarian information and services if not taken into account (Translators Without Borders 11/2018).

Although older men are central in Rohingya families, in general older people report a feeling of rejection and exclusion due to limited social interactions resulting from the geographical isolation and the physical, and environmental barriers in the camps (UNHCR 2018; ADH, CDD, ASB 2017).. FGD participants indicated elderly people are highly respected within society, but also particularly vulnerable in cases where able bodied family members were not present. The physical challenges in accessing services including not having the strength to personally transport relief items, present barriers to meeting their needs.

Parents in FGDs reported that children are at risk of getting lost or stolen in the camps, injured in road traffic accidents, and many were concerned about drownings during monsoon season. In four of six camps, participants shared personal stories of family or community members' children being stolen, kidnapped, and held for ransom as well as seeing dead children in the forest when they went to collect firewood.

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[3] Unmarried girls that have reached puberty are considered ruined if they are seen by a male outside of their immediate family. Many believe that girls going outside the home even for work is not acceptable as girls who work are too old for marriage. Girls that are outside collecting water or visiting facilities face harassment and even assault.

People Living with Disabilities / Chronic Diseases

Disability related vulnerabilities:
- Accessibility to services and aid, due to distance and topography of the camps
- Protection concerns related to exclusion and stigma

Pre-crisis: Information on pre-crisis vulnerabilities related to physical and mental disabilities is limited. People with physical disabilities are assumed to have faced challenges in moving within communities due to the known lack of infrastructure. In the local language, the terms describing intellectual and developmental disabilities are often stigmatising and pejorative, suggesting that people with these types of disabilities may have faced social exclusion in Myanmar (UNHCR 2018).

In-crisis: According to the WASH household survey, which utilized the Washington Group short set questions, 14% of camp households have one member living with a disability, with Nayapara having the greatest percentage of disabled residents (REACH 11/2019; UNHCR, REACH 07/2019). People living with physical disabilities are reported to face increased barriers in the settlements. The physical environment of hilly terrain, uneven ground, and unpaved walkways, makes people with mobility challenges and people with visual impairments particularly vulnerable (Human Rights Watch 28/09/2019, Humanity & Inclusion 01/2019). During the participative ranking exercise all FGDs identified PWD and families with PWD as among the "more vulnerable" (mean rankings of 2.4 and 3.5 out of 9 respectively). In camp 8E some participants noted that life was easier in Bangladesh for disabled people because they can access treatment that was not available in Myanmar.

People with physical disabilities face discrimination and exclusion. Similar to elderly people, they express feelings of rejection and sadness due to limited interactions with the community as a result of geographical isolation. People with intellectual and developmental disabilities are also likely to experience isolation resulting from social stigmatisation and exclusion (UNHCR 2018).

People living with chronic diseases such as diabetes and high blood pressure (common among elderly) are vulnerable because they require specialised and more frequent medical support and have additional dietary needs (Médecins Sans Frontières 05/02/2019). Health workers fear the burden of infectious diseases may be masking the needs of those with undiagnosed non-communicable disease, leaving them vulnerable to health deterioration (WHO 5/2018).

Assessments have found that health facilities are within thirty minutes walking distance for the majority of camp residents. This is a problem for people who are not able to walk easily. FGD participants confirmed that people with disabilities have difficulty accessing services, and are generally unsatisfied with health services available.

Social rank

Social rank related vulnerabilities:
- Exclusion from social and relief networks
- Limited access to information and assistance
- Vulnerability to extortion and other protection concerns
- Exclusion from decision making

Social status within the Rohingya community seems to be determined by a variety of factors, including income, religious status, and education level. Income is also explored in the Economic section, as it has a direct impact on a household's ability to meet needs.

Pre-crisis: Rohingya society was organised hierarchically. *Hukumot*, made up of police, army, Nasaka and Myanmar intelligence, enjoyed the highest social rank. They were responsible for giving final permission for marriage and building houses. Bribes were reportedly necessary to get support from these authorities. Under the *Hukumot*, was the *Ukatta*, local government elected by the community, responsible for solving intra-communal issues. Below the *Ukatta*, a *Murobbi*, which could be an Iman, a teacher or educated person, was responsible for helping solve issues that could not be solved within a family. *Family* is the nuclear base of the society and it has a head, called *Uji*, generally an older man (Kamal Zafari, 2018, BBC MEDIA ACTION 08/2018). The local *Ukatta* was a prominent local Rohingya leader, often with wealth and land ownership. These leaders also belonged to mosque and madrassa committees. Educated people were generally well respected, unlike particular occupations that were considered lower class, such as cleaners (*Methor/Haijja*), barbers (*Napit/Maitella*) and undertakers (*Dome/Diener*). People belonging to these groups generally lived close to each other, at the edge of the villages (BBC MEDIA ACTION 08/2018). The constant attack on Rohingya institutions in Myanmar over recent decades is likely to have eroded this system (Ripoll et al., 2017).

In-crisis: Focus group participants often referred to "committees" they had in Rakhine when asked about social systems Rohingya people used to help each other. Every FGD spoke of these "committees" and lamented not having any such organisation now. These structures broke down with the chaos of the exodus from Myanmar and the rapid establishment of camps where people are not located along the lines of their pre-crisis communities. They continue the practice of holding educated people and religious leaders in high esteem, as well as their elders, and consult these people in decision-making.

Fig. 2 - BBC MEDIA ACTION 08/2018

The closest proxy for community representation was reported to be "Mahjee committees". The *Mahjee* system was first
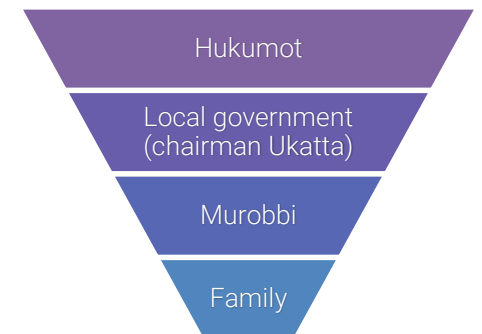
established by the Bangladesh government in 1994 to manage order and administration in the camps. Participants stated that Mahjee committees were in effect only groups of friends of the *Mahjee*, who assisted him in the block administration, and sometimes enjoyed the benefits of controlling the supply of information, opportunities – including for employment – and sometimes relief materials to block residents. A UNHCR report reflecting on the legacy of the Mahjee system prior to the 2017 influx, reports high levels of corruption, abuse of human rights, including detaining refugees, sexually abusing women, imposing taxes, and colluding with local authorities inside and outside the camps. The Mahjee system was re-introduced by the Government of Bangladesh following the 2017 influx (UNHCR 2007).

On top of the material advantages that having more income and resources bring, FGD participants indicated through the ranking exercise that wealthier people are more respected in the camps. Some participants stated that *Mahjees* would take payment from those who were wealthier in order to recommend them for jobs. Those with a little bit of money are therefore able to continue making more. However, wealthy families are noted to be at risk for kidnapping and extortion.

"Those who are poor, no one listens to them. Mahjee and others only listen to better off people. No one cares about the poor. If they want something they have to praise the Mahjee." – Female participant, Camp 22

Education

Education related vulnerabilities:
- Less likely to access better **livelihood or income opportunities**
- Vulnerability in terms of information and **communication** as they are less likely to understand Bangla, Burmese or English

Pre-crisis: Educated people were generally well respected in Rohingya society. Rohingya boys were able to study beyond the local *Maktab* attended during early years. Generally, they went to a *Madrasa* for 12 years, achieving the highest level of local education.

Rohingya students have been heavily constrained from participation in the formal education system of Myanmar, and effectively excluded from higher education through restrictions on movement which prevented Rohingya from traveling to even the nearest university in Sittwe since 2012 (Plan International, REACH 11/2015). Due to these limitations, among other factors, the majority of Rohingya people are not well educated. Women in particular are rarely educated, owing to the impact of the practise of *purdah* on school attendance

In-crisis: People who had completed some education seem to be much more likely to understand written Bangla, Burmese, and English (Translators without borders 11/2018).

FGD participants consistently stressed the importance and value of educated people in discussion. Educated people were said to enjoy more respect, be consulted in decision-making, have better access to information and ability to communicate with humanitarian personnel, and access to better livelihood options, such as NGO volunteer positions in the camps. Educated people were ranked highly in the participative ranking exercise in terms of both social status (mean ranking of 12 out of 19 types of people) and ability to meet their basic needs (mean ranking of 6.8 out of 9 types of households).

"Educated people are more respected, people obey them. Their decisions have more value than others." – Male participant, Camp 20Ext

Economic

Income related vulnerabilities:
- Less likely to access better **livelihood opportunities**
- Vulnerability to **food insecurity**
- More exposed to **indebtedness**
- More likely to be **female headed households**

Economic status impacts capacity to cope in the camps and meet basic needs. Household size, or dependency ratio, also has a well-documented relationship with household vulnerability as does the gender of the household head (discussed in Gender section).

Income

Pre-crisis: Economic activities in Rakhine were mostly related to agriculture, and wealthy people were given more respect in Rohingya society (BBC MEDIA ACTION 08/2018). Women who were able to engage in income generating activities relied mostly on agricultural casual labour and domestic work (WFP 08/2018).

"In Myanmar we had our own land and farms so [there was] no poverty." – Male participant, Camp 17

In-crisis: While some literature suggests that pre-displacement income levels play an important role in current wealth among the Rohingya, the majority of FGD participants stated that wealth in Myanmar has no bearing on current economic status. IOM reports that those engaged in businesses in Myanmar before migration seem to be likely to take on similar activities in the camps, and are in a better economic position (IOM 23/10/2017). Similarly, WFP's Rohingya Emergency Vulnerability Assessment (REVA) reports that women continue practising the same types of jobs as pre-displacement, although in smaller percentages (WFP 08/2018).

In some FGDs participants indicated that displacement may have changed the relative poverty for some households. In Myanmar increased wealth seems to have been based on land ownership. Being well off was largely about being able to live well, usually through living off the land and selling excess production. Rohingya were not entitled to attend Burmese schools, so apart from mosques and madrassas, obtaining education was not straightforward and the benefits of an education were not clear in a country where rights were limited. In the camp context educated people have greater relative access to opportunities for earning income. In some cases, those who were wealthier in Myanmar have lost everything because they were unable to bring assets with them. Those able to bring assets were initially in a better economic position but have largely exhausted these extra resources (WFP 08/2018).

"People who were rich in Burma are poor now, and people who were poor in Burma are still poor." – Male participant, Camp 8E

Additionally, a number of groups suggested that the *Mahjee* system had dramatically shifted the pre-existing social hierarchy that otherwise would have determined who had better access to opportunities.

FGD participants repeatedly stated that "access to better income sources" was the most important factor in determining current household economic conditions. The best source of income was consistently reported to be remittances from relatives and friends abroad, followed by an NGO volunteer position, business, and finally cash for work. Participants had developed a very clear hierarchy of the best NGOs to volunteer for and the best types of positions to hold. Refugees who are able to earn an income are more likely to have acceptable food consumption according to the WFP, relying less on external humanitarian assistance. The importance of the NGO volunteer roles in supplementing household food security and general cost of living highlights what would happen if these income opportunities did not exist – a far greater number of people would be more vulnerable.

Households are reported to take new debts as a way of meeting basic needs. Less wealthy households, or households with less individuals working or more dependants, are likely to incur greater debt (UNHCR, REACH, 07/2018).

Income opportunities for women

Income generating opportunities for women are much more limited than for men. However, there was a marked difference in the perception of available opportunities between female and male focus groups. Male groups consistently reported no income opportunities for women. Female participants in Ukhiya[4] camps saw more opportunities for women than male participants did, including as NGO volunteers in the women friendly spaces (WFS) or child friendly spaces (CFS), stitching and, and one group raised that there is opportunity for educated women to establish private "schools" where they charge to teach children in their homes. Despite this, there was consensus that women had far fewer opportunities than men.

A key factor in the extreme vulnerability of FHH is the link between income opportunities and the presence of an adult male family member in the household. While income generating opportunities are not designed exclusively for men, social and cultural norms about the role of women, the particular job opportunities available, and the fact that women have domestic duties make it far more likely for men to access income generating opportunities. This is particularly problematic for FHH as it means there will be no income at all. This means FHH are more likely to need to rely on negative coping strategies, such as sale of assistance (thus reducing consumption of food and other relief items) to generate income for unmet basic needs, which cannot be covered by in-kind assistance alone.

The result of this is that assistance packages are effectively smaller for more vulnerable households. The more vulnerable the household, the more of their assistance they are required to use to meet fundamental needs (even to get the assistance back to their shelter) the more vulnerable the household.

Household size

Household size related vulnerabilities:
- High dependency ratio related scarcity
- Vulnerability to **food insecurity**, particularly where food distribution is in-kind

Pre-crisis: The Rohingya typically lived in large multi-generational family households, with parents, grandparents, siblings, and grandchildren (BBC MEDIA ACTION 08/2018). Female-headed households experienced more severe living conditions than male-headed households (Japan International Cooperation Agency, INTEM Consulting, 12/2013).

In-crisis: Larger households and households with more than five children tend to be more vulnerable with respect to food security, according to the results of WFP's REVA (WFP 08/2018). Until recently, food distribution packages were based on household sizes categorised into a few brackets of household member numbers. Household sizes at the top ends of each bracket would struggle more with food volume, and be likely to rely on harmful coping mechanisms to reach an adequate level of food consumption (WFP 12/2017; WFP 08/2018).

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[4] Female participants in Teknaf camps in which FGDs were held (22 and 24) perceived no income opportunities for women.

Recently the food distribution system has been changing to an e-voucher system, whereby households will receive a certain value of rice and vegetables per household member, per month. Focus group participants call this the "bazar card" because they go to certain vendors in the bazar to collect their food items. The system was rolled out among 49% of refugees as of September 2019 (Food Security Sector 10/2019). Participants indicated it is keenly anticipated in the areas still relying on in-kind food distribution.

Beyond food security, large households still face many challenges. As household members increase, particularly dependents, other forms of scarcity increase. FGD participants also ranked households with many children as highly vulnerable in the participative ranking exercise (mean ranking of 2.6 out of 9 types of households), and in conversations about poverty, families with many children were commonly reported to be among the poorest.

Safety/security

Safety and security related vulnerabilities:
- Protection concerns, including criminal groups, kidnapping and trafficking risks
- Lack of lighting exacerbating physical and social safety concerns at night

In-crisis: Crime in Cox's Bazar area, a hotspot for drug and human trafficking networks for decades, has increased since the influx of refugees (IRC 02/2019).

As of September 2019, there are reports of kidnapping and increased security concerns (IOM 06/09/2019; IOM 30/08/3019). Previous assessments highlighted kidnapping, as well as

land usage, access to markets, rape, and human trafficking as sources of inter-community conflict. The phenomenon of kidnapping from Rohingya families who have access to money is on the rise, along with the concern that law enforcement agencies are failing to catch the culprits and recover the missing persons (IRC 02/2019). Impunity seems to be one of the main factors exacerbating tensions, contributing to the rise of militants and gangs attempting to consolidate control over camps. Security at night is in the hands of untrained and unarmed night watchmen appointed by the refugees. People report security as a very serious concern, causing lack of sleep for fear of attacks (International Crisis Group 25/04/2019, JMSNA 10/2019). Presence of criminal groups, fear of violence, petty crime, bullying, harassment, and fear of abduction are all flagged as security concerns by the Rohingya population in the camps. Women report being highly concerned about insufficient light around wash facilities (JMSNA 10/2019).

These safety concerns were confirmed by FGD participants, who specifically highlighted concerns about their children being stolen, being kidnapped for ransom, being killed for organs, and being injured in road traffic accidents. Groups in four of six camps shared personal stories of children being taken from their families or families in their communities.

"One day I was home alone and needed to collect water, so I left my child in the shelter. When I came back a woman was running away with him. The community people help me catch her and we turned her over to the CiC." – Female participant, Camp 22

The Rohingya are known to be victims of human trafficking. The deployment of Bangladeshi security forces in the camps may have prevented some trafficking crimes; however, the phenomenon persists (US Department of State 06/2018). Rohingya girls are vulnerable to sex trafficking, while boys and girls are both recruited for work (UNICEF, UNFPA, UN Women 07/2019). Rohingya girls are typically sent to Cox's Bazar as maids, then forced into sexual exploitation. Reporting this type of trafficking to authorities has not been shown to yield any results in finding missing people (IRC 02/2019).

In focus groups participants further highlighted concerns over their shelters being weak and constructed of materials that are very difficult to lock[5] in such a way to prevent intrusion, as well as insufficient lighting in the camps being major safety threats. All groups mentioned concerns about shelters being damaged and weak as a key factor that made them feel insecure. The lack of lighting makes night-time particularly concerning. Groups discussed the presence of "bad people", as well as the physical dangers when going to latrines at night.

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[5] The 2019 MSNA reported that almost all households had locks; however, FGD participants reported that shelters were very difficult to secure.

Groups frequently mentioned their ongoing fear of repatriation. They do not believe conditions in Myanmar will be any better than when they left, and many feared being killed if they returned. One group said that people with children are most afraid of repatriation.

Status

This dimension of vulnerability pertains to the conditions of displaced in terms of legal status as well as length of displacement.

Registration Status

Legal status related vulnerabilities:
- **Protection** concerns, with difficulties to access basic rights
- Constraints in **access to aid and services**

Pre-crisis: The Rohingya people, despite living in Myanmar for generations, have no formal citizenship or documentation. This makes them stateless and highly vulnerable in any country (UNHCR 17/05/2019).

In-crisis: Rohingya can be categorised into three groups by registration status: registered as refugees by UNHCR (34,917 people), registered as forcibly displaced Myanmar nationals (762,633 people) and few remain completely unregistered as the registration process is not yet complete (UNHCR 10/2019). Registration status is an undeniable factor in enhancing the vulnerability of those who are unregistered (WFP 12/2017; WFP 08/2018).

The Government of Bangladesh does not recognise the legal refugee status of the Rohingya, thereby excluding them from the rights associated with that status. This lack of legal status can be linked to many issues that contribute to making people vulnerable, including the right to work, the right to freedom of movement, the ability to build permanent housing, and access to formal education (EXCHANGE FOUNDATION 28/08/2018; Human Rights Watch 01/04/2019).

Access efforts are ongoing in the camps to register all refugees as "Forcibly Displaced Myanmar Nationals", however, this confers no legal status, and further fails to meet one of the Rohingya's key concerns with their protection as a people: recognition of their identity as Rohingya. During FGDs many participants raised concerns over the true purpose of the "UNHCR card" as they called it. Some were afraid that the card would be used to send them back to Myanmar, and others had heard rumours that accepting the card would render them stateless, undocumented refugees for the next 50 years. Fears around repatriation were expressed most acutely in Teknaf camps. Concerns over an unknown future, and how long they would have to live in a situation and place where they could not be settled and could not plan for the future were expressed more broadly.

Length of displacement

Length of displacement related vulnerabilities:
- **Protection** concerns, with restrictions on **fundamental rights**
- Limited **coping mechanisms**

In-crisis: WFP identifies length of displacement as an indicator of vulnerability, with the most recent arrivals being the most vulnerable. Rohingya refugees who arrived in Cox's Bazar prior to 2017 have developed coping strategies which are inaccessible to the vast majority of the current Rohingya population, who have arrived since August 2017 (WFP 12/2017; WFP 08/2018). In some camps, such as Leda, new arrivals were assigned to underdeveloped areas of the settlement, requiring additional costs to set up their living space that apparently were not charged to longer term residents (IOM 23/10/2017). Arrivals since August 2017 are also more likely to be paying rent on the land their shelter is built on in Teknaf camps, as well as paying a higher rate compared to the pre-2017 arrivals who pay rent (JMSNA 2019).

Environmental

The environmental dimension relates to the physical location of camps and settlements, location of shelters within camps, the overall congestion in the limited space allocated for the refugees, and how these factors influence vulnerability for households (a detailed analysis of vulnerability to natural hazards was beyond the scope of the study).

Shelter location

Location of shelter vulnerabilities:
- **Physical safety** concerns related to landslides, floods and animal threats
- Exposure to **shelter damages**
- Distance to services and assistance

In-crisis: The majority of camps have been established in 24 square kilometre, largely deforested, sometimes hilly, areas of Cox's Bazar which is exposed to cyclones, floods, and landslides. The implications of over 900,000 people living within this space are extreme congestion, leading to lack of shelter privacy, exposure to various natural and man-made hazards, and lack of space for services and facilities.

Makeshift shelters located on or below sloping hills are particularly vulnerable to landslides, and those on low ground are vulnerable to flooding, especially during monsoon season (REACH, UNHCR, 07/2018). Concerns over these issues were raised consistently by participants in every focus group. Participants stated that living on hilltops

increased the barriers to accessing services and assistance because of dangerous pathways and roads, particularly during monsoon season. However, having a shelter located near water of any kind, including drains or latrines, or at the bottom of a hill meant that water would frequently come into the shelter, especially as water levels and volume rise in the rainy season.

Additionally, some camps have been built on or near wild elephant trails, resulting in a number of deaths from trampling, as well as shelter damages during elephant passage (ICCCAD 07/02/2018, UNHCR 12/2018). Information suggests that elephants are no longer the same kind of threat as they were earlier in the influx as they found ways to avoid the camps, nevertheless, they remain a source of fear. Elephants and snakes were raised as serious concerns by FGD participants. Several participants in various camps shared stories of community members being bitten by snakes, and frequent snake sightings.

Fear of wild animals, as well as shelter damage, were raised as reasons for shelter relocation. Relocation out of risky areas has been accompanied by a new set of challenges in accessing assistance. In some camps participants reported that those who had to move were now too far away from the Mahjee to get proper information or access to opportunities or "tokens" for additional assistance.

Shelter location impacts access to goods and services, but FGD participants also noted that in most cases it is not possible to be close to everything so many will be disadvantaged in some way by their location. It was also stressed that if good facilities are accessible, people do not mind having to walk a long way to reach them. People express frustration over having to endure a risky journey in order to reach facilities that are far away and perceived as not good enough.

In general, the preferred locations are close to distribution points and water points, with a preference for living on level ground rather than on top of the hills. In Teknaf camps participants stressed that the middle of the camp is safest because there is less risk of robbery compared to the periphery of the camp. Least desirable locations are on top of hills because these places are far from services and dangerous in rainy season. The very bottom of hill or between two hills or anywhere that water collects, near latrines or drains, is also less preferred.

There was, and continues to be, no choice in the location of shelters. Locations were assigned upon arrival. The focus groups mentioned that most households do not want to change location now because they have become familiar with the people in their block. Even if their location is bad, they prefer it to the unknown.

Dimensions of vulnerability

Illustration by Sandie Walton-Ellery
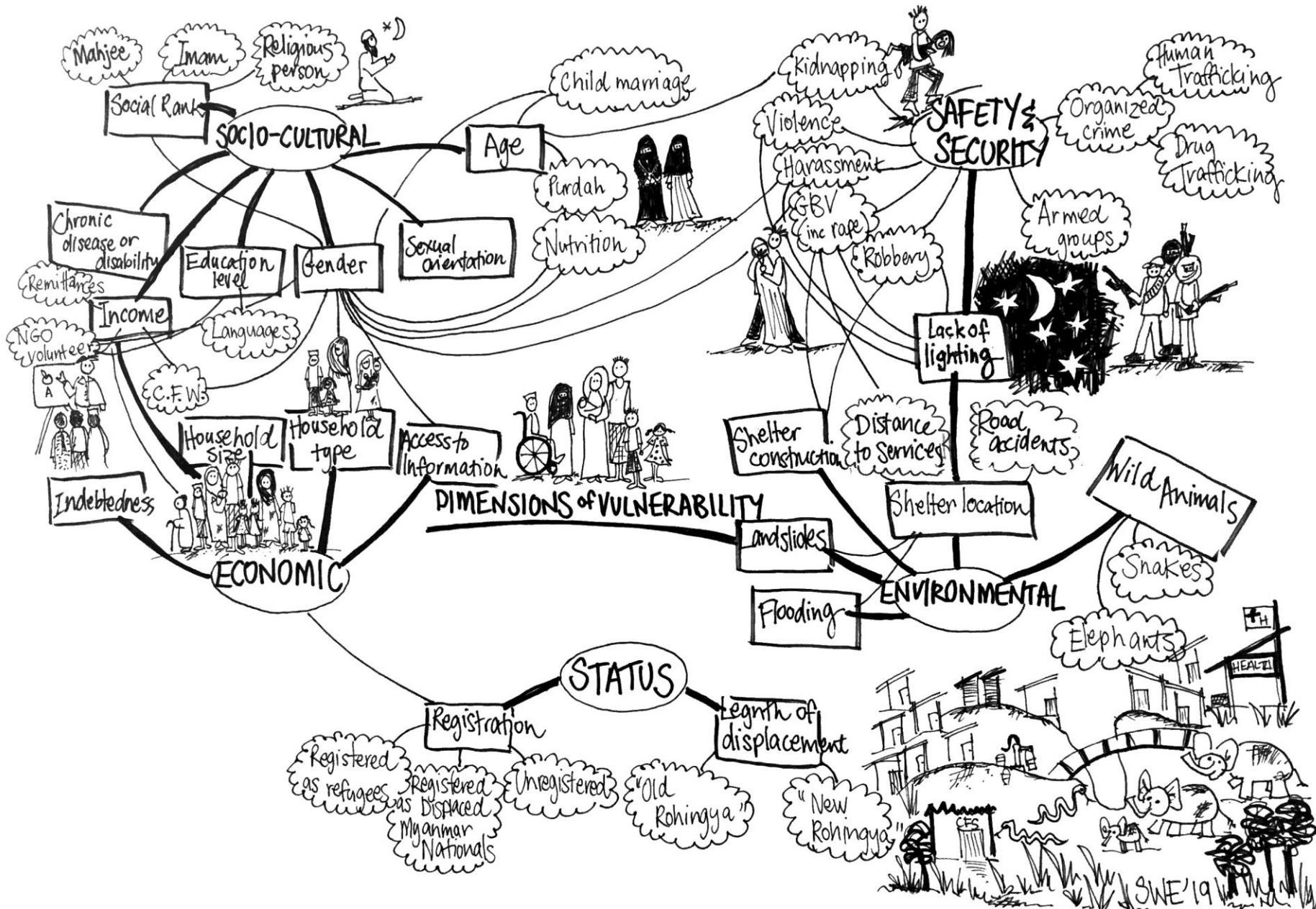
Humanitarian conditions

Analysing the field research

The camp context is an environment of unmet needs and lack of personal security. Participants painted a picture of life in the camps characterised by extreme scarcity and breakdown in social cohesion. Within this environment the different ways people can be vulnerable and the different things they are vulnerable to –framed here as the dimensions of vulnerability – interact with each other as well as with the context.

It is possible that for a limited few people these interactions may sometimes work in their favour [6]. However, the study found that for most people, being vulnerable in one dimension is usually the beginning of a series of interlinked circumstances and situations which increase and perpetuate their vulnerability. Without some dramatic external intervention, this will not change.

The most important finding to come out of this study is that across all camp locations and for all types of people the humanitarian services available did not meet needs or ensure conditions that are safe and secure. While there are people who have more of their needs met than others, these people and households do not have all their needs met. Similarly, while there are people who are safer and more secure than others, these people are not immune from risks and concerns. In the words of one of the Chittagonian speaking field researchers: *"no one is 'okay', everyone faces some problems."*

The relationship between income and expenditure determines the degree to which households are meeting needs. Given the limited opportunity to be partially self-sufficient (e.g. by growing vegetables or raising chickens), households with the greatest obstacles to generating income and those with the highest level of expenses are most vulnerable to not meeting their needs. These are:

- **Female Headed Households (FHH).** These households were considered more vulnerable if there were no male children. Additionally, there is a strong connection between being a FHH and being unable to earn an income.

- Households without the ability to earn an income.
- Households with a large number of dependents.

Most assistance provided in the camps is based on allocations per household (commodities such as tarpaulins, stoves, and cooking sets) or per number of household members (food assistance, hygiene items, etc.). This blanket distribution ensures everyone receives the same overall package/value. There are no allowances made based on household resources, income, or potential for income. Given some households are able to supplement their food and offset costs with remittances, income from NGO volunteer positions, and cash for work (CFW), differences between households with income and without income are reinforced and magnified.

The response programmes include design features intended to support vulnerable households, such as porters to assist in carrying goods from distribution points and the option for vulnerable households to nominate several members on the distribution card to receive goods. For shelter upgrades, female headed households are allocated skilled labour to do the work and follow up is provided by the shelter team. The extent of these interventions, however, is unclear, and they were not discussed by the focus groups

This absence of needs-based programming means assistance diminishes more quickly for more vulnerable households, and actively disadvantages the most vulnerable.

As the response moves toward the use of a carded assistance system using the WFP/SCOPE card rather than in-kind distributions, houses identified as vulnerable will receive additional credit on their card.

Access to assistance/services

For the purpose of this study access is defined as the ability to obtain the commodities (food and non-food) and services when needed. In relation to commodities this could be through distribution or acquisition.

Accessing assistance and services was difficult in some way for all households. The most significant barrier to meeting needs is the lack of income, either through livelihood

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[6] For example, in the case of a Mahjee, the influence and access to information may have elevated his position in society.

opportunities or unrestricted cash-based assistance. Participants indicated that the assistance currently provided does not cover all household needs, consequently refugees without any form of income are required to take debt, sell or trade some of their assistance, or resort to increasingly dangerous coping strategies in order to cover their most urgent needs.

People's ability and inclination to access the goods and services provided depends on the **quantity and quality of services** available, and on **physical and social barriers** to using them.

Service quality and quantity: All FGDs regardless of the location or composition of the group highlighted challenges and dissatisfaction with both quantity and the quality of assistance and services.

The perception that "no one gets enough" commodities or services emerged across all groups. This idea of insufficiency applies to in-kind distributions as well as what people can access using the "bazar card"[7] and to services such as the number of water points and latrines. Groups gave examples including:

- Health facilities run out of drugs by the end of the day, so if you arrive late you will miss out.

- Food supplied (in-kind and through vouchers) is insufficient to meet family food requirements.

- Long waiting times; e.g.

  - at health facilities

  - to get LPG fuel (one camp reporting that it takes two days to receive LPG because of crowds, with some households missing out).

- Not enough latrines and water points; latrines becoming full quickly and not being desludged in a timely manner.

When looking at the different access considerations participants expressed that the quality of services causes frustration and is one of the main reasons why people do not access services. Many explained that challenges with physical access, though a major barrier for some, would be overcome if the service was of good quality. However, FGDs revealed that use of services is not an indication of satisfaction, it simply indicates they have no better options.

Participants focused on the sectors of health, food, and education[8]. Across all the FGDs **health services were the most discussed**. All but one FGD expressed their dissatisfaction with the long wait times and the perception they do not receive the medical support they require. Participants reported medical centres being closed when needed, receiving paracetamol for every illness (perceived not to be proper healthcare), and being mistreated and disrespected by health workers. This has led to the perception that paid-for health services are better than free of charge services. Consequently, many participants reported selling their assistance, such as food items, to access what they believe to be more adequate healthcare. Only a few comments indicated an exception – the MSF hospital was seen as good, yet access was constrained in terms of the wait times and insufficient medicines.

"We are not happy with the hospital because they are busy with their phones and talking together, so we have to wait for a long time and after that they give us only paracetamol, no matter what the disease." – Female participant, Camp 17

In at least some cases this reported dissatisfaction with healthcare quality may be related to a lack of information. People are more satisfied when they get a more tangible sense of being valued, when treatment is explained, or when techniques and treatments they consider more medically valid are used. For example, FGD participants often spoke of preferring injections they were accustomed to getting in Myanmar, and feeling happy about being checked "with the machine" at health posts. This indicates that satisfaction or dissatisfaction may relate to their understanding, more than the reality, of what constitutes good healthcare.

"Most of us are going to hospital but adolescent girls are not going [to the hospital] because they are shy, there are lots of people and men. If they are sick we call a doctor to the home, but we have to pay for this." – Female participant, Camp 8E

Food assistance, both in-kind and through vouchers, is a source of angst for many participants. The food provided was considered insufficient to meet family needs, especially for large families. Another issue continuously raised across FGDs was the inflexibility of the food distribution system, in which only one family member's name is registered on the distribution card and can collect the assistance. While there may be exceptions to this for some households; it was clearly regarded as a significant obstacle. This causes a severe problem if that member of the household is unable to attend the distribution point. Some female FGD participants reported being scolded by aid providers and forced to wait until last when they went to receive household assistance with a card in their husband's name, and were often given only what was left over. In camp 20Ext.

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[7] Believed to refer to WFP's Scope Card

[8] FGD questions did not ask about any sectors specifically. The questions used were "Are there people who don't access services?", "Why don't/can't they access services?" and "What makes it more difficult to get the things you need (food and non-food)?"

participants stated that some camp residents had been relocated from other camps, but their assistance cards were still linked to the distribution centres in those camps, requiring long travel to collect assistance. An additional challenge with this particular situation is that refugees are technically not allowed to leave their camp without permission from their Camp in Charge (CiC).

Participants also reported that some aid workers' behaviour (both Rohingya and Bangladeshi) at the distribution points is unacceptable, leading many participants to believe that *"NGO workers don't care about us. They accuse us of missing the bazar card and other distributions." – Male participant, Camp 24*

Education: Overall the participants expressed their dissatisfaction with the education available for their children. They see the quality as poor and children over the age of 15 are excluded. In many FGDs they explained that schools are seen as entertainment for their children rather than an educational service. Only one FGD reported they were happy with the learning centres because their children had more educational opportunities than they had in Myanmar. The findings of an education needs assessment indicated that the quality of education was thought to be lower than in Myanmar, though the coverage was much greater for children under 15 years. Inadequate education was one of the top concerns of nearly every focus group. While Rohingya have traditionally valued educated people in society, in the context of the camps, their value is even greater, having access to the most information, the ability to communicate with all types of people and access to work opportunities. The frustration over education becoming the least accessible, at the time when it is most valuable, is clearly expressed by FGD participants.

Physical barriers: Paths and roads in the camps are unpaved and mostly rugged and uneven. Road quality combined with distance was cited by all FGDs as a challenge, even for able bodied people, with the level of difficulty increasing during the long monsoon season. The size and topography of the camps make it significantly more difficult for people with mobility issues to access services and receive assistance.

Women have problems collecting food and other commodities. The physical act of going to a distribution point and carrying supplies back to shelters is a challenge, both physically and socially. Unless women are accompanied by an adult man, they need help. Participants explained that some distribution points have a porter system provided to address this, but in most cases those requiring a porter had to pay for it, in cash or in kind. Every FGD said that if people were unable to follow their porter closely, he would run away with their assistance. Some participants in camps that had porter services provided using a porter distribution point claimed that porters would carry assistance halfway and then demand payment to continue. This can be interpreted as a sign of the lack of community cohesion in the camps: in a well-functioning community having able bodied people without enough work, and other people struggling to carry goods, the able bodied

people would likely assist those in need of help. Additionally, the situation is illustrative of the environment of scarcity in the camps: porters' demands for extra payment or even stealing the goods is something that would not normally happen when people are secure that their needs will be met.

The same challenges are present for elderly people and people with disabilities, who are unable to physically transport assistance themselves. For female headed households, having a male child to carry assistance is helpful.

Able-bodied males heading households have the advantage of being able to carry their own assistance, but can face trade-offs at times between paid work (NGO or CFW) and collecting assistance due to the inflexibility of the distribution system. Participants reported that alternate family members are not permitted to collect assistance unless their names are registered.

Services are more difficult to access when they are located far from one's shelter. However, participants say they find a way to access *essential* services regardless of distance. Distance will prevent people from accessing services not believed to be essential. For example, one female FGD explained that she and women living near her enjoyed spending time at the women's friendly space (WFS); however, after the space relocated further away they stopped attending.

Social barriers: Access to information is a key issue. People are unable to access services they are unaware of. This is currently a problem, constraining access to assistance among some groups of people, and in some parts of the camps. Information can also be used to raise awareness and clarify misunderstanding which may be affecting attitudes to, and use of, some services.

Lack of information, or challenges accessing information, was identified by FGD participants as a significant barrier to meeting daily needs. This challenge disproportionately impacts monolingual households and those which do not have a close relationship with their Mahjee.

The Mahjee is a key source of information and there is a perception that residing close to, or having a better relationship with, the Mahjee puts households in a better position to know about available services, any special (non-regular) distributions, and any paid work opportunities. One FGD gave the example of vouchers for certain assistance, explaining that sometimes vouchers or "tokens" go to the Mahjee for distribution, and when there are not enough for all households in the block, people who are close to the Mahjee (both geographically and socially) get this extra assistance. In addition, there was a sense that information was used as power and shared by the Mahjee preferentially, rather than systematically, to individuals and households.

FGDs identified educated people, including those who can read and speak languages other than Rohingya, as having an advantage because they can access information and communicate with different service providers. This earns them a valued position in camp society and also means they are more likely to capture "better income opportunities", such as an NGO volunteer position. Service providers are not always able to communicate in Chittagonian[9] adequately. As women are less likely to speak additional languages, female headed households with young children[10] are more at risk of missing out on key information, hindering their access.

Inaction or a lack of follow-up on complaints causes frustration among the Rohingya. Although there are opportunities to lodge complaints, FGDs highlighted that they rarely get a response to their complaints, or see any changes in service delivery. This makes them increasingly frustrated and less inclined to provide feedback.

"In every block some people did not get LPG because there were not enough cards for all. We reported this problem but didn't get any result yet." – Male participant, Camp 24

Misconception and lack of communication impacts whether services are used or not. As one example, a focus group participant explained that after admitting his wife to the IOM health post, she died and he was given no explanation of the cause of her death. In the absence of an explanation, he believes the oxygen she was given killed her. Such incidents have led to a fear of health posts within the broader community. FGD participants stated they were confident that hospital will make them worse. This may be linked to decades of living in a country that was hostile to their presence, and where they could not be sure which services they could trust.

Physical and mental health

Focus group discussions aimed to understand vulnerability related to physical and mental wellbeing, including health, safety, and security. At times it was difficult to probe a more nuanced picture of vulnerability due to **the overwhelming, common insecurity caused by the limited control people have over their own living conditions and access to food, water, and secure shelter**.

Mental stress over inability to meet basic needs

Mental health issues were raised by participants, as well as issues around personal safety and fear; however, there was no discussion around treatment or support available for mental health.

In many of the male FGDs men opened up and expressed their feelings of intense hopelessness and frustration with being unable to provide for their families.

"I am unable to provide enough food to see my children smile" – Male participant

When asked about the main things that make them feel insecure, every group cited the weak nature of their shelters as a key factor. In some cases this meant exposure to elements, in others it was because people were worried about break-ins, armed groups, robbery, and kidnapping of children. For female headed households their weak shelters mean that "anyone can break in and do bad things or hurt us." One key informant to the study from a site management agency told the field team that single women got "no rest" at night because shelters were easy to break into and men would come around all night to harass and "worse than harass" them. Households who have money have made upgrades to their shelters but there are few that can afford it.

Groups discussed that limited water is an ongoing concern and a source of tension, with fights regularly breaking out in long lines at water points.

In some parts of the camps households are required to make payments. Examples of this include: to host communities in some Teknaf camps for renting the land where their shelters are located; to Imams in madrassas to teach their children because they do not feel they can get quality education elsewhere; and to porters to transport goods. These are most often cash payments, but in some cases may be a share of a household's aid distributions. Considering the extremely limited income generating options in the camps, this is a source of great tension. Over half of the groups mentioned the need to sell some of their assistance to make payments and meet needs not covered by distributions.

"We do not get all of the things we need, so we need to sell some of the things we get to meet our most urgent needs." – Male participant, Camp 22

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[9] Chittagonian, the local language in Cox's Bazar is similar to Rohingya, but key differences remain. Speaking Chittagonian helps bridge the language barrier with refugees but is still not completely accurate.

[10] Older children may be able to assist with the translation.

An environment of fear

Focus group participants also discussed a broad range of serious safety and security fears and concerns of the Rohingya living in camps:

Robbery: Many participants expressed fears related to break-ins and robberies due to the weak nature of the shelters, built of tarpaulin, which can be easily cut and broken into. This concern was raised in camps in both Ukhiya and Teknaf, but fears seemed to be more intense in Teknaf camps.

Armed groups: Fears over threats by armed groups, including kidnapping for ransom, were expressed particularly strongly in the Teknaf camps. The fear of these groups prevented any detailed or in-depth discussion of these threats by participants.

Sexual assault: Fears over the possibility of sexual assault were raised as being particularly acute for adolescent girls, as well as women in households with no adult males present. Similar to the concerns about robbery, participants raised that the weak nature of shelters means that anyone can break in, particularly at night, and assault women who are not perceived to be protected by a man.

Harassment: Across all camp locations participants discussed fears of their adolescent girls being harassed. This fear is less related to the psychological impact on the victim of harassment, and much more strongly related to the consequence of public harassment being social stigma for the family of the girl, and difficulty getting the girl married in the future, leading to economic consequences of additional family members.

Kidnapping: When asked about concerns for their children, participants in four of six camps in this study shared accounts of children being kidnapped, of attempted kidnapping, and of children found dead in the forest. There are concerns children will be stolen and trafficked as well as held for ransom. Because camps are crowded and difficult to navigate there are concerns that children will become lost, increasing their risk of being stolen. While this is a widely shared concern, fears were expressed more acutely in the Teknaf camps. If people are known to have access to income, they are perceived to be at higher risk.

Wild animals: The majority of focus groups discussed fears of wild animals, specifically elephants and snakes. Elephants are a year-round concern; snakes particularly in the wet season. fears are more concerning for households living towards the outer areas of the camps, closer to vegetation.

Road traffic accidents: Every focus group talked about the paths and roads being dangerous and presenting physical risks, particularly during monsoon season. There are steep paths where people could fall and the roads are used by many vehicles. These physical challenges were stated to be even greater for elderly people, people with disabilities and single women, especially while attempting to transport assistance. Additionally, many participants expressed concerns that children will be hit by cars.

Darkness: Lack of lighting makes people feel insecure. They think it is dangerous after dark due to the presence of "bad people" and worry about physical dangers when going to latrines and moving around the camp at night. This particularly affects adolescent girls and women. Many focus groups mentioned how important lighting is to them in safety concerns for their children. They say children can easily get lost and stolen in the camps after dark.

Repatriation: Many participants expressed fears over repatriation. Some believed the UNHCR card may be a tool of future repatriation, or that it may force them to remain stateless, undocumented refugees for the next 50 years. They believe if they are sent back they will be killed. Those with small children are most concerned about this. People are also concerned that families will be separated, with some members repatriated and others left in Bangladesh. Fear of repatriation was expressed most prominently by participants in Teknaf camps.

Aggravated vulnerabilities

To get the Rohingyas' perspective on how vulnerabilities interact and overlap, a participative ranking exercise was completed, in which each focus group was asked to arrange a set of households, and then a set of individuals (depicted in a range of graphics on sheets of paper[11]), from those who have the hardest time getting their needs met, to those who have the easiest time getting their needs met.

Types of households	Median Ranking
Single female headed family	1.0
Family with no income	2.3
Family with many children	2.6
Family with disabled member	3.9
Family with elderly members	4.0
Normal families	6.5
Family with educated member	6.8
Families with NGO volunteer	7.5
Family with Mahjee	8.0

Table 2 – Household vulnerability ranking results

For households, the ranks were coded into 1 (hardest time) to 9 (easiest time). Table 2 summarises the results of this exercise across all camps with the mean rank for each type of household. Without exception, every group agreed that female headed households had the hardest time meeting their needs in the camps.

Similarly, for individuals, the ranks were coded into 1 (hardest time) to 9 (easiest time). Table 3 summarises the results of this exercise across all camps with the mean rank for each type of individual. Single women were commonly accepted to be the most vulnerable.

Being a woman without a husband in the camps implies vulnerability to physical and mental security threats due to cultural norms. Being a female headed household makes it much harder to earn any income because there are less opportunities for women, and because female headed households are constrained from taking any available income opportunities by childcare responsibilities, the need to collect relief items, and social norms around women's work outside the home which can result in harassment, among others. Having no income means a woman is unable to repair her shelter, making it less secure and increasing her vulnerability to robbery and sexual assault. Being vulnerable, or challenged,

Types of individuals	Median ranking
Single women	1.2
People with disability	2.4
Elderly women	2.8
Elderly men	2.9
Men with no income	3.9
Adolescent girls	5.7
Women	5.8
Boy (age)	7.4
Girl (age)	7.6

Table 3 – Individual vulnerability ranking results

in one area often leads to further vulnerabilities, creating a downward spiral for those most in need and most at risk.

The following image provides a visual depiction of the ways in which types of vulnerabilities can interact with one another, according to the FGDs held with Rohingya camp residents, using the example of a female headed household.

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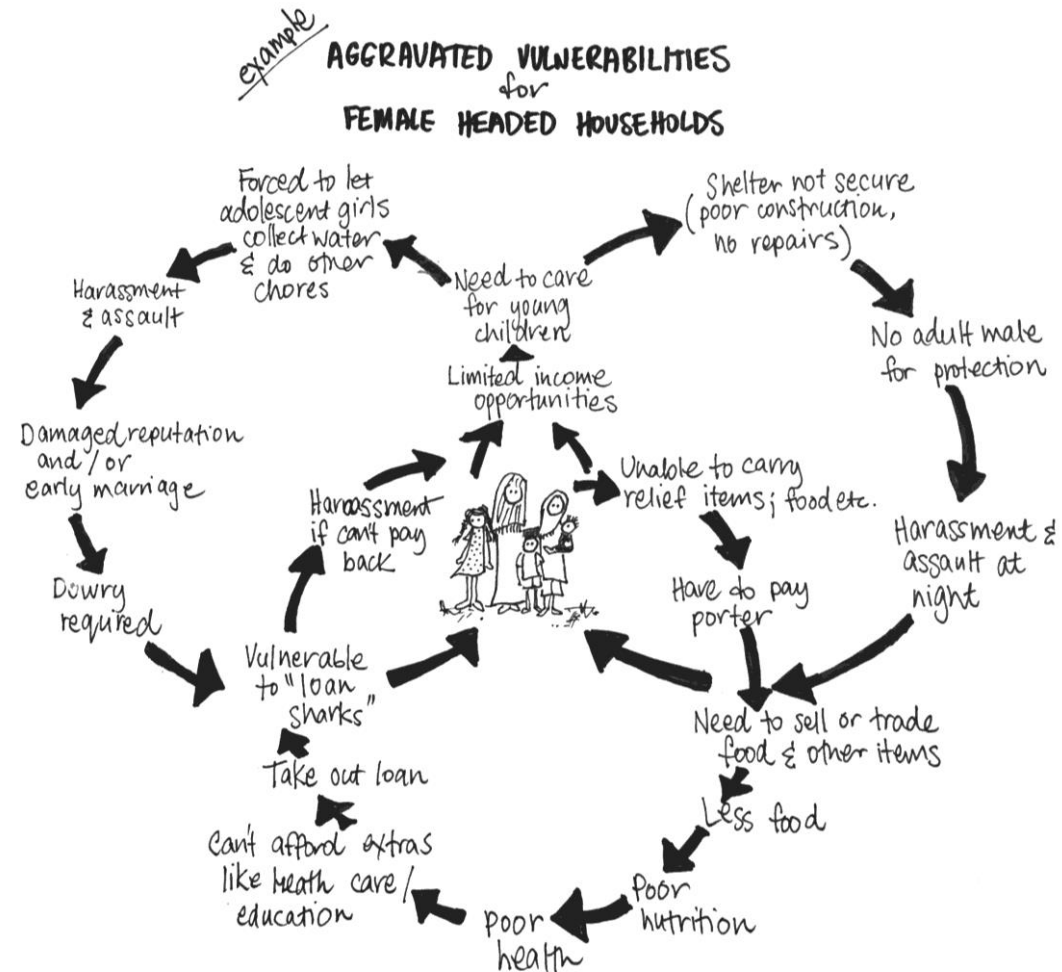
[11] For an example of arranged graphics please see Annex VI

Adolescent girls, a special group facing restrictions and risks

As soon as a girl approaches adolescence her life becomes severely restricted. Adolescent girls seldom leave their shelters. In exceptional cases when they must leave the shelter and enter the wider world of the camp, they will be completely covered (wearing a burqa, sunglasses, gloves and socks) and chaperoned by a father, brother, or even their mother.

The period before marriage is a high-risk time for adolescent girls and their families. Families are under great pressure to protect their daughter from being "ruined" in some way (commonly through being seen or spoken to by a non-family male), disgracing the family and impacting her chances of getting married. From the family perspective, marriage is desirable as soon as possible after reaching adolescence.

Girls who must venture outside the shelter to help their families collect water or even to use the latrines and other services are a target for harassment and assault. There is also a high risk that girls of this age group will be targeted at night.

Restrictions on movement for adolescent girls have increased since arriving in Bangladesh, in part because of the congested nature of the camps and the increased risk of girls being unable to properly observe *purdah*. The fear of unknown people and aggressive behaviour towards adolescent girls also significantly contributes to these restrictions.

As a result, the motivation for child marriage has increased, as it can be seen as a risk mitigation strategy by the family. In addition, the deterrents to child marriage are not as severe for Rohingya in Bangladesh as they were in Myanmar. Even though it did occur, marriage before the age of 18 was illegal in Myanmar, and reportedly punishable by a jail term.

Groups admitted that in the camps they prefer to marry their daughters much younger than in Myanmar, sometimes as early as 12 years old. This saves the family the risk of disgrace and the girl of harassment by strangers, but submits her to the sexual assault that comes with child marriage and risk of early pregnancy, which female groups say usually occurs within the first year of marriage.

Officially the CiC does not approve early marriage, but participants said families can "increase the age" of their children to facilitate it. Unlike in Myanmar, those caught marrying children before 18 face no repercussions. In the absence of more severe consequences, early marriage is preferred by most families. Now the main impediment to getting a daughter married is not legal ramifications but not having enough money to pay her dowry. This was reported by all groups to be the biggest concern they had in relation to adolescent girls.

Response

Community support

Focus groups explained that In Myanmar there were committees in communities with official positions. These committees were intended to unite the community and could be used to provide assistance when required. In the camps these community committees no longer exist, but in some places participants said the Mahjee had formed a "committee" of his own "volunteers". These committees were viewed by the groups as completely different from the committees they knew previously, although some said that if something drastic happens to a family, the Mahjee, and his "committee" may come around to each household asking for donations to support that family.

The living arrangements in the camps do not mirror the communities that people lived in prior to their exodus from Rahkine, with extended family members dispersed throughout the camps and neighbours mostly unknown prior to displacement. This has impeded the development of supportive social structures, particularly where there is a deficit of resources. After two years in the camps, the groups told us that they now are forging connections with their neighbours, that they do help each other when they can (although their capacity to do so is severely limited) and that they would choose not to relocate for concern of being surrounded by strangers again. If something serious happens to a neighbour, they do what they can, and they help each other with day-to-day needs as much as possible, but they have no real means and no organisation or structure to facilitate this.

Coping mechanisms

There are very few positive coping mechanisms available to the Rohingya living in the camps. As assistance is not based on need, the only way for a household to improve its wellbeing is for one or more member to have a source of income. Overall, being male, educated, and well connected to the Mahjee gives one a much greater likelihood of finding such an income source. There are far fewer paid volunteer opportunities for women, and women's child care and other domestic duties together with the rigid social norms around gender are barriers to participating in most income generating activities.

In FGDs participants said that some of the educated Rohingya, including women, were setting up small informal schools in their shelters for which they would charge a fee, but at this stage this appears to be limited.

The chaotic exodus from Myanmar, initial days of the influx and settlement in the camps resulted in the fragmentation of existing community structures and relationships.

Extended families and communities are not located together in the camps, resulting in a situation where people are unable to employ community-based support mechanisms previously used to cope during difficult periods. Group discussions indicated that now, two years into displacement, they have formed relationships with the people they live close to; however, participants stated that they do not have sufficient resources to help each other, even though they would like to.

The most common negative coping strategy being practiced is the sale (or trade) of in-kind assistance in order to pay for immediate goods or services needed. This is particularly the case for households (mostly female headed) which needed to pay porters to carry their goods to their shelter, as well as when medical services or supplies were needed beyond those offered by the free healthcare service.

Sale of assets is also a common coping strategy for people in distress. However, two years into their displacement, the Rohingya have largely exhausted any assets they may have been able to bring with them and to have used up any advantages afforded by the initial sale of assets.
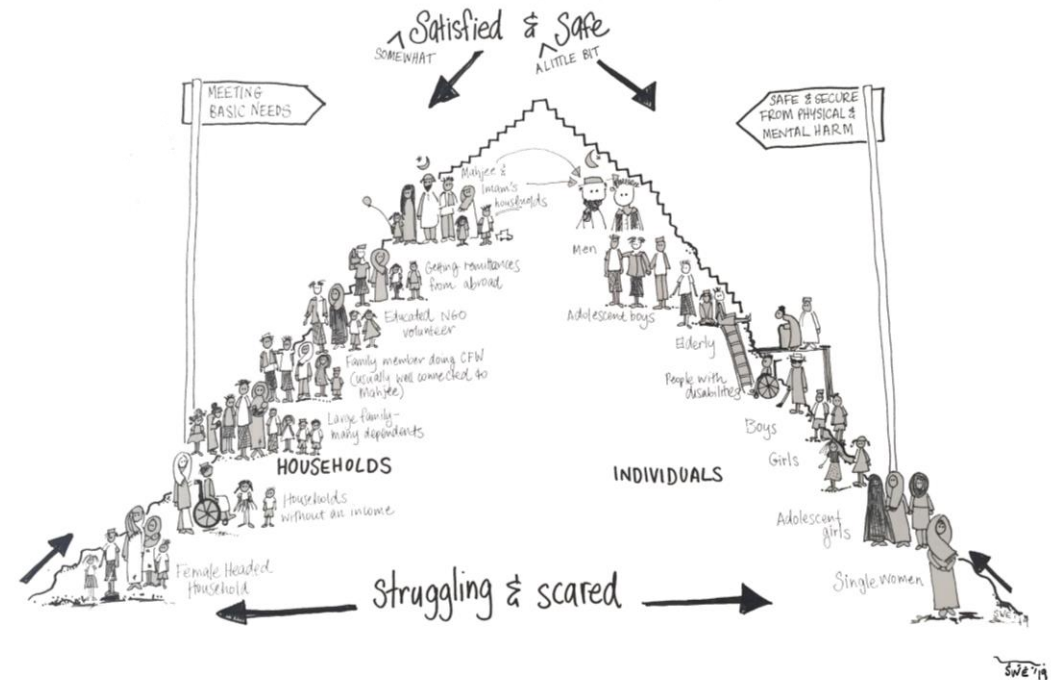
How women are coping with the continual harassment, assault and other security concerns was not discussed openly in the groups; however, the primary strategy used to cope with the risk to a family's honour that having an adolescent girl presents is to marry their daughters as soon as possible after puberty.

This strategy was seen to have multiple benefits: fewer mouths to feed, a lower dowry price for an unspoiled young bride, and the protection of the girl's honour. Presumably this arrangement also had perceived benefits for the receiving household where they could be sure of not bringing disrespect onto their home by taking on a girl of questionable reputation.

Overall, coping strategies discussed by focus group participants to deal with the environment of scarcity and physical insecurity are extremely limited and with the exception of those limited few households with access to income from remittances or a paid NGO "volunteer" position, or even cash-for-work, entirely negative and harmful. Those households most in need of employing harmful coping strategies are those most vulnerable already to not having their needs met, creating a situation where more vulnerable households end up with less assistance, and are actively deepening their vulnerability by exposing themselves to increasingly harmful and risky coping strategies. In the continued absence of a means of appropriately targeting the most vulnerable households, this pattern will continue in the Rohingya refugee camps, exposing the most vulnerable in ever-increasing harm.

Meeting needs and being safe from harm are challenging for the Rohingya

This illustration trues to show the overarching findings of the study – no one was completely satisfied or completely safe, and single women were struggling the most to meet needs while also the most vulnerable to harm.

Annex I

Vulnerability among the Rohingya
Conceptual framework and methodology

Focus and research questions

Which types of Rohingya refugee households and individuals are _more vulnerable_ and _more at risk_ than others. within the Rohingya population in Cox's bazar, influence their capacity to meet basic needs and make it more likely that they will be exposed to physical or emotional harm?

1. What made people more vulnerable than others prior to the influx?
2. Have these pre-existing vulnerabilities changed since the influx?
3. What is the impact of the current context on pre-existing differences in vulnerability/wellbeing?
4. What new factors that make people more or less vulnerable now?
5. What are the indicators that some households/people are in a better position than others?

Process

Review available information (SDR) → Identify dimensions of "vulnerability" for the Rohingya → Identify gaps in understanding → Identify expectations from primary data collection → Train teams / translate → Collect data / field work → Debrief → Compile, collate, analyse → Report findings

Dimensions of vulnerability

Socio-Cultural | Status (Linked to legal framework) | Safety & security | Economic | Environmental

Tools and techniques

SDR | Focus group discussion, separate male and female groups | Key informant interview (staff) | Sense making conversations

Outputs

SDR (for development use) → Transcripts, photos of participatory outputs of FGDs (for development use) → Report (product for sharing)

Annex II: The analytical framework for the Rohingya response

CONTEXT PRE-AUGUST 2017		
SOCIO-CULTURAL	ECONOMY	HUMANITARIAN CONDITIONS
VULNERABILITIES	DISPLACEMENT	

CURRENT CONTEXT		
SOCIO-CULTURAL	ECONOMY	LEGAL FRAMEWORK
POLITICS	NATURAL HAZARDS	MAN MADE HAZARDS
ENVIRONMENT	SAFETY/SECURITY	LOGISTICS AND COM

OF REFUGEES AND IN HOST COMMUNITY AFFECTED
by sex, age and other relevant characteristics of diversity

HUMANITARIAN CONDITIONS	RESPONSE
ACCESS TO NEEDS/SERVICES	COMMUNITY
COPING MECHANISMS/RESILIENCE	NATIONAL
PHYSICAL AND MENTAL HEALTH	INTERNATIONAL
AGGREVATED VULNERABILITIES	HUMANITARIAN ACCESS

COMMUNITY PERCEPTIONS, PRIORITIES, PREFERENCES

OF PEOPLE IN NEED AND SEVERITY OF NEEDS
by sex, age and other relevant characteristics of diversity

TREND/RISK ANALYSIS

CURRENT AND FORECASTED NEEDS AND CONCERNS

Annex III:

Exercise examples