

Refugee Women and Girls: Key to The Global Compact on Refugees

ADDRESSING SGBV AND EMPOWERING REFUGEE WOMEN

Consolidated Report of 24 Research
Consultations and Workshops
Rohingya Refugee Camps, Cox's Bazar
November 2019 – February 2020

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“Any incidents of sexual abuse, rape, the survivors have possibility to be revictimized as there is a lack of proper formal justice system. That’s why many of survivors and their family doesn’t want to disclose the incidents with anyone as they fear isolation from the community” (Refugee woman)



Our Thanks

We would like to thank all of the organisations and individuals who participated in collecting and analysing the data contained in this report. We were extremely impressed about your willingness to submit your organisations to scrutiny and to conscientiously collect and submit this data to us. It took courage and demonstrated your deep commitment to providing high quality services to the refugee population. Thankyou.

IN KEEPING WITH THE CONFIDENTIALITY AGREEMENT WE SIGNED WITH ALL PARTICIPANTS, CAMPS, INDIVIDUALS AND ORGANISATIONS NAMES, AND INFORMATION WHICH MAY IDENTIFY THEM, HAS BEEN REMOVED FROM THIS REPORT. WITH THE PERMISSION OF THE PARTICIPANTS, THIS INFORMATION HAS BEEN MADE AVAILABLE TO PROJECT PARTNERS.

Acknowledgement of COVID-19 Impacts and Responses

Since these workshops were conducted, the COVID-19 crisis has disrupted the lives of the Rohingya refugee community and the service providers who support them in unprecedented ways. While many of the barriers and risks that this report details continue to impact on refugee women and girls, they also face increased risks of domestic violence due to being confined in small spaces in addition to the serious health risks as COVID-19 has spread in the camps and local communities. In this context many of the refugee women and men leaders, NGO and UN staff who participated in this workshop have been forced to overcome movement restrictions and serious political and health challenges to continue providing vital and life- saving services to refugee communities. The UNSW team wish to publicly acknowledge all of you as the real heroes of this crisis. We are deeply privileged to have the opportunity to work with you all and trust that in small ways we can continue to support your work with the refugee communities and your efforts to respond to the impacts of the current crisis on refugee women and their families.



SUMMARY OF THE RESEARCH PROJECT AND THE REPORT STRUCTURE

The following summary is designed to briefly introduce the research project and to guide readers through the many layers of data, analysis and recommendations that this report contains.

WHY FOCUS ON REFUGEE WOMEN AND GIRLS?

Refugee women face discrimination and many barriers to participation in decision making, and to implementing solutions to improve their lives and those of their families and communities. This occurs despite the fact that many women are often first responders in emergencies and have immense knowledge and experience which they use to assist their communities on a daily basis. The major barrier they face is that of endemic rape and sexual and gender-based violence (SGBV) which pervades all aspects of their lives. It impacts on individuals, families and communities.



*“Sexual Violence is everywhere.”
Drawing by refugee women,
(Camp G)*

In 2018, The **Global Compact on Refugees** (see Part 1: Background to the Project) was signed by the majority of member states (Governments) of the United Nations. The document makes a number of important commitments to refugees, in particular commitments on **refugee participation in identifying problems, in all aspects of decision making and in suggesting potential solutions**. It specifies that whenever possible these should be refugee led, or projects in which refugees actively participate. A major commitment is to prevent and respond to the endemic SGBV which is part of the refugee experience.

This report brings together data from 24 consultations and workshops with refugees and services providers which took place between November 2019 and February 2020 in Cox’s Bazar, Bangladesh. In total 208 refugee women and 85 refugee men participated in 16 camp-level consultations held across 13 of the camps in Cox’s Bazar. In addition, 86 humanitarian aid workers from the UN, international and local NGOs participated in consultations as an applied training exercise. An additional consultation with self-organised refugee women’s groups involved a further 17 refugee women.

These consultations are part of a project led by a team from the University of New South Wales, Sydney: *Refugee Women and Girls: Key to the Global Compact on Refugees*. The aim of the project is to identify barriers to the implementation of the gender commitments made by member states and stakeholders in the Global Compact on Refugees (GCR), and to identify ways to address these barriers.

The Consultations focused on six Thematic Issues, reflecting priority areas of the GCR and the UNHCR Global Refugee Forum (GRF), held in 2019. They are:

1. The Impacts of Sexual and Gender Based Violence,
2. Barriers to Food, Water, Shelter and Energy,
3. Barriers to Education,
4. Barriers to Livelihoods and Jobs,
5. Protection and Health Services and
6. Barriers to Participation and Decision Making.

	Girls 0-12 	Girls 13-18 	Women 19-24 	Women 25-50 	Older women 	LBTI women 	Women with a disability 
What are the issues and impacts of sexual and gender-based violence? 							
Barriers to shelter, water, food and fuel 							
Barriers to education 							
Barriers to livelihoods and jobs 							
Barriers to protection, health, and documentation 							
Barriers to participation in meetings, capacity building, decision making about refugee lives 							

Using an innovative methodology (See Appt 5 of this report for more details), a Matrix exploring an Age, Gender and Diversity (AGD) approach was designed to capture the experience of and potential solutions from diverse groups of women and girls. The categories were Girls 0-12, Girls 13-18, Women 19-24, Women 25 – 50, Older women, LBTI Women and Women with a disability.

This produced a rich analysis of barriers and problems experienced, and identified which groups of women and girls were most affected by them. A major finding was the extent to which endemic sexual and gender-based violence was identified as a key issue in each of the six thematic areas examined.



Women and girls] are often harassed by community men and boys. [They] are at risk of GBV while fetching water, collecting firewood, accessing WASH facilities. [They] are at risk of being raped due to lack of light in the camp. (Refugee woman)

This report is divided into five sections.

Part 1 provides the background to the project and the research in Bangladesh.

Part 2, which is in two parts, summarises the research findings, analysis and discussion.

- Part 2A provides a brief context, presents a summary of the key findings and analysis of the six thematic issues.
- Part 2B addresses structural and contextual issues.

Part 3 sets out the recommendations from the refugee women and men, service providers and the research team, to address the issues raised in the research.

Part 4 includes concluding observations.

Part 5 details the project methodology and project stages in Bangladesh.

Links to the three Data Analysis reports and a report on Consultations with self-organised refugee women's groups are provided in Annexe 1.

A summary table of all trainings, consultations and workshops undertaken in Bangladesh is provided at Annex 2.

TABLE OF CONTENTS

PART 1: BACKGROUND TO THE PROJECT.....	6
The Global Compact on Refugees	6
The Project in Bangladesh.....	7
PART 2: RESEARCH FINDINGS AND ANALYSIS.....	9
PART 2A: Consolidated Research Findings and Analysis in the Six Thematic Areas ...	9
Camp Populations Represented in the Consultations.....	9
Thematic Area 1: SEXUAL AND GENDER BASED VIOLENCE	11
Thematic Area 2: BARRIERS TO SHELTER, WATER, FOOD, FUEL.....	15
Thematic Area 3: BARRIERS TO EDUCATION	19
Thematic Area 4: BARRIERS TO LIVELIHOODS AND JOBS.....	22
Thematic Area 5: BARRIERS TO PROTECTION, HEALTH and DOCUMENTATION	25
Thematic Area 6: BARRIERS TO PARTICIPATION AND DECISION MAKING.....	28
PART 2 B: Contextual and Structural Issues.	31
Geographic and Structural issues in the camps.	31
Lack of Program Coordination across the Camps	32
A major barrier to good co-ordination - Top down service provision	33
A lost opportunity – Community Based Organisations and Self-Organised Refugee Women’s Groups	33
Quantity, not Quality - Inadequate Monitoring and Evaluation	35
Psychosocial issues.....	35
SGBV Analysis – Personal and Cultural or Structural?.....	35
Positive Strategies for Change.....	38
PART 3: CONSOLIDATED RECOMMENDATIONS.....	40
COMBINED RECOMMENDATIONS FROM PARTICIPANTS.....	40
RECOMMENDATIONS FROM THE PROJECT TEAM	51
Part 4 CONCLUSION AND VALUE OF THE PROJECT	55
Reflections and Feedback from the Consultations and Workshops.	55
Feedback on the Process	55
PART 5 – METHODOLOGY AND PROJECT STAGES IN BANGLADESH	57
The Research Methodology	57
Detailed Project Stages in Bangladesh	59
Description of Camp-Level Community-Based Consultations and Documentation	60
Description of the Data Analysis Workshops.....	61
THANKS AND ACKNOWLEDGEMENTS.....	5
ANNEXE 1: LINKS TO SUPPORTING REPORTS.....	62

THANKS AND ACKNOWLEDGEMENTS

Thank you to Rachel Tan for co-facilitating the Data Analysis workshops and to research assistant Anja Wendt for her assistance in preparing the summary matrices, graphs, organising the storyboard data and formatting the individual camp reports, and to Colleen Bartolomei and Jasmin Shamim for their editing assistance.

The Logic of the Report

Data collected at 16 camp-level community consultations conducted by multi-stakeholder facilitation teams was collated and analysed by the workshop facilitators at three Data Analysis workshops and comprehensive reports from these workshops were produced.

The data from each of the Reports from each Data Analysis workshop has been summarised in this report.

Additionally, data was included from four Training of Trainer (TOT) workshops held in November 2019, a training and consultation with a self-organised women's group working across several camps, and from the debrief and review meetings held in Cox's Bazar.

These reports provide a strong evidence base of the situation and experience of women and girls in the Cox's Bazar refugee camps. (see below and Methodology section for more explanation).

Links to Data Analysis Workshop reports are in [Annexe 1](#).

PART 1: BACKGROUND TO THE PROJECT

The Global Compact on Refugees

The Global Compact on Refugees (GCR)¹ is a major new initiative which was signed by the majority of the United Nations member States in December 2018. It is one of the strongest policies on the protection of refugee women and girls ever adopted by the UN. Commitments include addressing gender inequality, the meaningful inclusion of women and girls in decision making and leadership, and preventing and better responding to sexual and gender-based violence (SBGV). The GCR is predicated on a multi-stakeholder approach, which is aimed at broadening the base of actors who share the responsibility for refugee protection.

Paragraph 13. *The programme of action is underpinned by a strong partnership and participatory approach, involving refugees and host communities, as well as age, gender, and diversity considerations, including: promoting gender equality and empowering women and girls; ending all forms of sexual and gender-based violence, trafficking in persons, sexual exploitation and abuse, and harmful practices; facilitating the meaningful participation of youth, persons with disabilities and older persons; ensuring the best interests of the child; and combating discrimination” (The Global Compact on Refugees, UNHCR, 2018).²*

¹ <https://www.unhcr.org/en-au/the-global-compact-on-refugees.html>

² For a copy of the GCR with gender commitments highlighted, see [this link](#)

A team from the University of New South Wales, (UNSW) Australia, led by Linda Bartolomei and Eileen Pittaway³ from the Forced Migration Research, is conducting an Asia Pacific Region research project to support the implementation and monitoring of the commitments to refugee women and girls in the GCR: [Refugee Women and Girls: Key to the Global Compact on Refugees](#)⁴. It is funded by the Australian Department of Foreign Affairs and Trade. Working with local partners, it is taking place in Malaysia, Thailand, Bangladesh, and Myanmar⁵. The activities have included a series of research workshops and consultations, using the UNSW team's signature research methodology Reciprocal Research⁶, conducted in partnership with refugee women leaders, service providers and academics in each country. Partners in the Bangladesh project are UNHCR, the Centre for Peace and Justice at BRAC University (CPJ) and a large network of refugee leaders, UN, INGO and NGO staff who led and hosted consultations in the camps.

The Project in Bangladesh

The team from UNSW had previously conducted research for UNHCR in Cox's Bazar in 2007 ([Refugee Consultations Bangladesh](#)). As part of the implementation of the current project, they made two scoping trips to Cox's Bazar in 2019, to establish local academic and UN/NGO partnerships, to ensure that the implementation of the project in Bangladesh would bring value to an already overstretched and over-researched population (both refugees and service providers), and to set the project parameters.

Key issues which emerged in these scoping trips were:

- Despite enormous hard work and good will, service providers are often overwhelmed by the size of the problem, both the number of refugees, and geographic spread. They are working in a very difficult political space. There are tensions between host communities and the refugee communities.
- The newer camps are now more established, with some infrastructure in place, and the beginning of some civil society organisations and social structures. However, service providers all live with the fear of funding being withdrawn as the crisis becomes 'old news', while the need for more organised assistance, such as SGBV prevention and response, schools and livelihoods becomes more urgent. There is strong competition for the funding dollar.
- The standard, design and effectiveness of services offered varies quite markedly from camp to camp, even those services with the same focus, e.g. SGBV services, health services, women's leadership and education, and livelihoods. The different entities that run the camps do not appear to have a set of standards which determine the quality of service delivery. We have heard reports of extremely good practice, some basic services and some frankly bad. We continue to hear disturbing reports of NGO staff sexually abusing women and girls.

³ The research team for these consultations were Dr Linda Bartolomei, Adjunct Professor Eileen Pittaway and Geraldine Doney from UNSW, and Rachel Tan from APRRN. Dr Monira Ahsan, CPJ, BRAC University joined the team in November and co-led one of the TOT workshops.

⁴ For the project website see <https://www.arts.unsw.edu.au/research/forced-migration-research-network/projects/refugee-women-and-girls-key-to-the-global-compact-on-refugees/>

⁵ A parallel separately funded project is being undertaken in Australia

⁶ This methodology is detailed below, and more information and resources can be found on the [UNSW website](#)

- Services are unevenly spread across the 32 camps, with some relatively well serviced and others with access to very few services.
- There is little opportunity for refugee women and girls to participate in decision making.
- Despite the best efforts of many involved, there appears to be inadequate and/or ineffective co-ordination between many of the service providers and between services responsible for different but interrelated sectors in the camps.
- Data collection, needs analysis, and responsive program design and evaluation are inconsistent, patchy and not effectively inclusive of refugees.

These issues were explored in the consultations, and further work will be undertaken to address them in the work between the project team and local partners in 2020 and 2021.

Following the scoping visits, in partnership with UNHCR, it was decided to conduct multiple camp-based consultations. This was to ensure greater coverage of the project across the large number of very different camps, and to better respond to the large size and diversity of the Rohingya refugee population living in the camps in Bangladesh.

To enable multiple consultations to take place across different camps, UN and NGO staff and refugee leaders/volunteers were trained in the research methodology. They received comprehensive experiential training from the UNSW, CPJ and APRRN team⁷ in one of **four Training of Trainer (TOT) Workshops and Consultations**⁸ held in Camps and in Cox's Bazar in November 2019. **Sixteen camp-level consultations** with refugees from 13 camps were then co-facilitated by multi-stakeholder teams involving refugee female or male leaders/volunteers working in partnership with UN, INGO, and NGO staff, between December 2019 and January 2020. A 17th consultation/workshop led by the UNSW team was held with 17 self-organised refugee women leaders in February 2020⁹.

In February 2020, the UNSW and APRRN team returned to Bangladesh to conduct **three data analysis workshops** with the multi-stakeholder facilitation teams, followed by a **debrief and planning meeting** in Cox's Bazar.

These activities resulted in a total of 24 workshops/consultations being held across the Cox's Bazar camps between November 2019 and January 2020, involving a total of 226 refugee women, 85 refugee men and 86 UN, INGO and NGO staff.

For full details of the process and methodology, see Part 5 of this report.

⁷ Adjunct Professor Pittaway and Geraldine Doney led the ToT in Cox's Bazar; Dr Linda Bartolomei, Geraldine Doney, Dr Monira Ahsan, CPJ-BRAC and Rachel Tan, APRRN led the camp-based TOTs.

⁸ See details below

⁹ A link to the report of this consultation can be found at Annexe 1.

PART 2: RESEARCH FINDINGS AND ANALYSIS

Part 2A presents a brief overview of the context and a discussion of findings for the six thematic issues addressed in the methodology. Part 2B provides analysis and discussion of the contextual and structural issues of the refugee camps in Bangladesh, and some of the positive strategies already in place to address these. Each section includes narrative, drawings and quotes from the refugee participants to illustrate key points.

PART 2A: Consolidated Research Findings and Analysis in the Six Thematic Areas

“The Rohingya people have faced decades of systematic discrimination, statelessness and targeted violence in Rakhine State, Myanmar. Such persecution has forced Rohingya women, girls, boys and men into Bangladesh for many years, with significant spikes following violent attacks in 1978, 1991-1992, and again in 2016. Yet it was August 2017 that triggered by far the largest and fastest refugee influx into Bangladesh. Since then, an estimated 745,000 Rohingya—including more than 400,000 children—have fled into Cox’s Bazar.

In Myanmar, entire villages were burned to the ground, families were separated and killed, and women and girls were gang raped. Most of the people who escaped were severely traumatized after witnessing unspeakable atrocities. These people found temporary shelter in refugee camps around Cox’s Bazar, Bangladesh, which is now home to the world’s largest refugee camp.

As of March 2019, over 909,000 stateless Rohingya refugees reside in Ukhiya and Teknaf Upazilas. The vast majority live in 34 extremely congested camps, including the largest single site, the Kutupalong-Balukhali Expansion Site, which is host to approximately 626,500 Rohingya refugees”

<https://www.unocha.org/rohingya-refugee-crisis>

The research examines the situation in the camps at a particular moment in time. In 2017 an unprecedented number of refugees fled to Bangladesh, expanding the refugee population in Cox’s Bazar from an estimated 200,000 to over 900,000, evoking a massive international aid response. While both the refugees who have lived in Bangladesh for up to 30 years and the more recent arrivals have experienced common levels of persecution from the Government of Myanmar, there are also significant differences between the two groups. This is highlighted in the research findings.

Camp Populations Represented in the Consultations

The refugee population, and geographic and structural issues varied across the 13 camps in which the consultations took place. While many common issues were discussed in all sites, there were also issues specific to particular camps¹⁰.

¹⁰ For details see the Data Analysis Workshop Reports (links to reports are at Annexe 1).

Most of the refugee women participants in one of the Data Analysis workshops had arrived in earlier waves of refugees, some as long as 30 years ago. Some live alongside the host community in local villages. They are undoubtedly traumatised, and suffering the burden of protracted displacement and statelessness, which causes immense distress. They are, however, more confident, and more willing to speak frankly than many newer arrivals. They have benefited from various training programs, many are working as volunteers with NGOs, were more familiar with life in Bangladesh, and many speak Bangla. There are intermarriages between host community men and refugee women, and host community women and refugee men¹¹. This group of women have been particularly affected by changes to their lives since the arrival of a further 710,000 Rohingya refugees in August 2017. They have seen their freedom of movement diminished, reduced mobile phone and internet access, and less access to livelihoods and services. While living side by side with the host community, many of whom had actively assisted the refugees, they report a rising level of tension and hostility between the two groups.

The female participants in the second data analysis workshop were predominantly women from the 2017 mass arrivals. They generally do not speak Bangla and are less confident than the long-stay cohort. However, as was documented in a consultation with a self-organised Refugee Women's Group as part of this project, there are some women within these later intakes who are actively and independently organising women's groups in the camps. The women leaders of these groups, some with tertiary education, are very successfully mobilising women to improve conditions, assist in service delivery and build women's and girls' education, livelihoods, and leadership skills.

The third Data Analysis workshop involved refugee men and service providers from five different camps, working to document their perspectives on the experiences of women and girls across the camps. All of the male participants in the TOT who facilitated subsequent camp-level consultations, and the men who joined the consultations, are from the newly arrived refugee population. Most have experienced recent and severe violence from the Myanmar military, including the loss of many family members before arriving in Bangladesh. Many of the male refugee facilitators have received some education, almost all speak some English, and some speak Bangla. Most work or have worked as 'volunteers' with the NGO/UNHCR service providers, including in positions related to SGBV prevention and response. In contrast, many of the men participants in the camp level consultation have not enjoyed a high level of education and are less exposed to the issues of women's rights and SGBV explored in the consultations. Nevertheless, their evidence and analysis strongly support the testimony shared by the women participants in their Data Analysis Workshop groups. The quotes from refugees included in the report come from all consultations.

¹¹ It is noted that in 2014 the Bangladesh Government introduced laws which prohibit marriage between refugees and Bangladeshi citizens.

Research Findings on each of the Six Thematic Areas

This section presents a brief summary of the key findings on each of the six areas explored by the participants in the research process. Each thematic section includes a Matrix of the key barriers for women and girls identified in each of the 16 consultations and a Graph showing the which ages/groups of refugee women and girls were most affected by each issue. This is followed by discussion and analysis of the topics raised, including quotes and drawings by participants illustrating key problems and challenges and suggesting solutions. Detailed findings for each Thematic area are presented in the detailed Data Analysis Workshop Reports (See Annexe 1).

Thematic Area 1: SEXUAL AND GENDER BASED VIOLENCE

While addressed as a key issue in its own right, SGBV was strongly identified by participants as an issue that intersects with each of the other five thematic areas. Of particular note are the extremely high incidences of **Rape and Sexual Abuse** across all age and diversity groups.

Matrix 1: SGBV - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in 3 different camps = **Camp 1** / **Camp 2** / **Camp 3**

A. What are the issues and impacts of sexual and gender-based violence	Girls 0 - 12	Girls 13 - 18	Women 19 – 24	Women 25-50	Older Women	LBTI Women	Women with disability
							
Issue 1: Rape & Sexual Abuse	14 5/4/5	16 7/4/5	16 7/4/5	12 5/3/4	8 4/3/1	7 2/2/3	12 5/3/4
Issue 2: Child/ Early/ Forced Marriage	11 4/4/3	15 6/4/5	7 1/4/2	6 1/4/1	1 1	2 1/1	7 2/3/2
Issue 3: Domestic Violence/IPV	9 3/3/3	13 5/4/4	16 7/4/5	16 7/4/5	13 6/4/3	8 4/2/2	13 6/4/3
Issue 4: Polygamy	2 1/1	4 3/1	6 4/1/1	6 4/1/1	1 1		2 1/1
Issue 5: Sexual Harassment	5 5	5 5	5 5	3 3	1 1	1 1	4 4
Issue 6: Human Trafficking	11 4/3/4	14 5/4/5	12 3/4/5	10 3/3/4	3 1/1/1	2 1/1	4 2/2
Issue 7: Unsafe WASH	6 4/2	8 6/2	7 5/2	5 3/2	3 2/1	1 1	4 3/1
Issue 8: Survival Sex	1 1	2 1/1	2 1/1	2 1/1	1 1		1 1
Issue 9: Verbal Harassment	2 2	2 2	2 2	2 2	2 2	2 2	2 2
Issue 10: Kidnapping	1 1	1 1	1 1	1 1		1 1	1 1

There was strong correlation of the issues reported across all consultations, including women and men identifying very similar SGBV problems for women and girls.

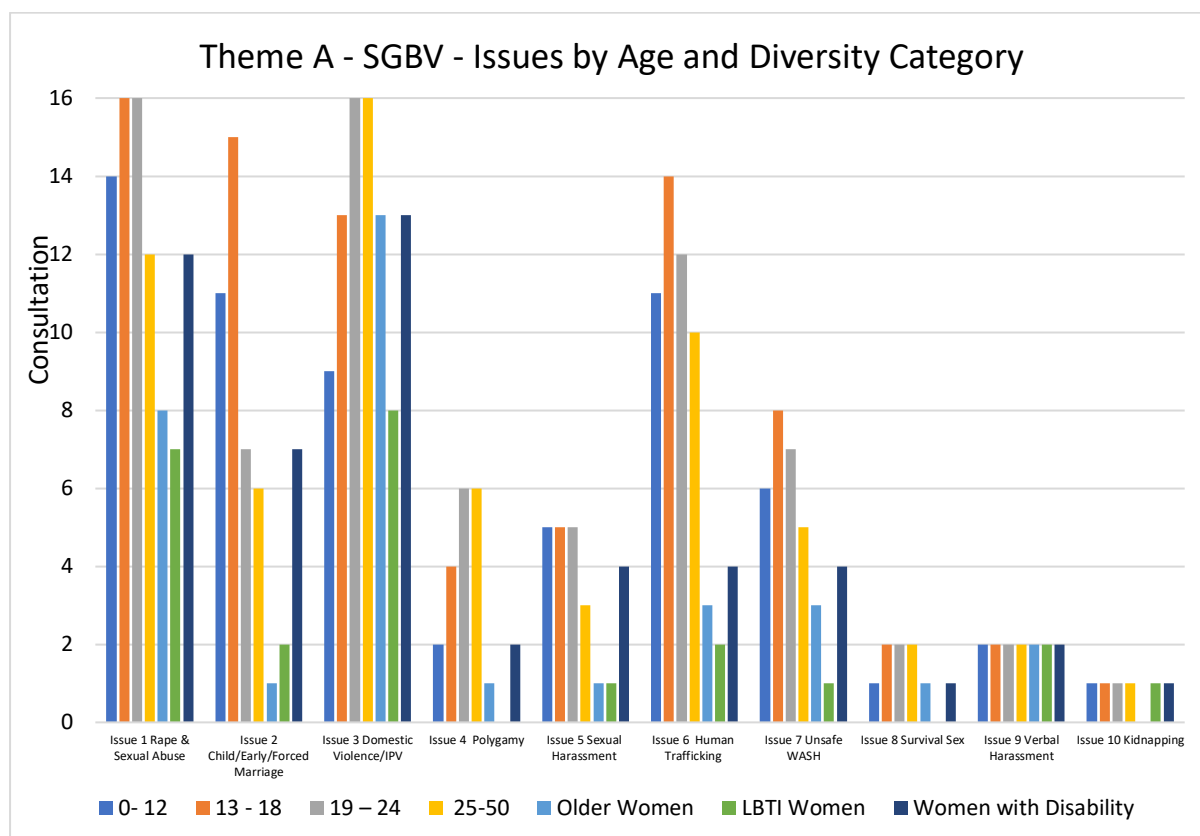


Figure 1: Number of consultations that raised particular SGBV issues for different ages/groups of refugee women. (Total camp-based consultations held =16)

SGBV issues common to all camps

Endemic sexual violence and harassment affects every aspect of women's and girls' lives. While acknowledging that there is a strong personal and cultural component to some aspects of SGBV, both women and men gave a detailed analysis of the major contribution made by structural aspects of the situation and conditions in which they are living. Many groups suggested that the suffering caused by the structural issues exacerbated the personal and cultural issues, some of which were far more pervasive in the refugee camps than they were in Burma. They also challenged the assumption that the main perpetrators of SGBV are refugee men and boys, detailing many instances of assaults by service providers, local men and boys and service providers.

Conditions in the camps, and the lack of access to justice contribute to the extremely high incidences of SGBV perpetrated by men and boys in the refugee community, members of the local community local community and others.

The prevalence of **Forced and Child marriage** for girls 0-12 and 13-18, was of great concern in all consultations. Of particular concern was the occurrence of Trafficking across all age groups, as was Unsafe access to WASH facilities, discussed further below in Thematic Area 2. Intimate Partner and Domestic Violence is endemic for all adult women

and impacts negatively on children. Polygamy was experienced by married women aged 13 and above.

Participants shared many examples of ways in which risks of SGBV and gender discrimination intersect with every other aspect of women and girls lives and are a major barrier to accessing their other rights (See Figure 2).

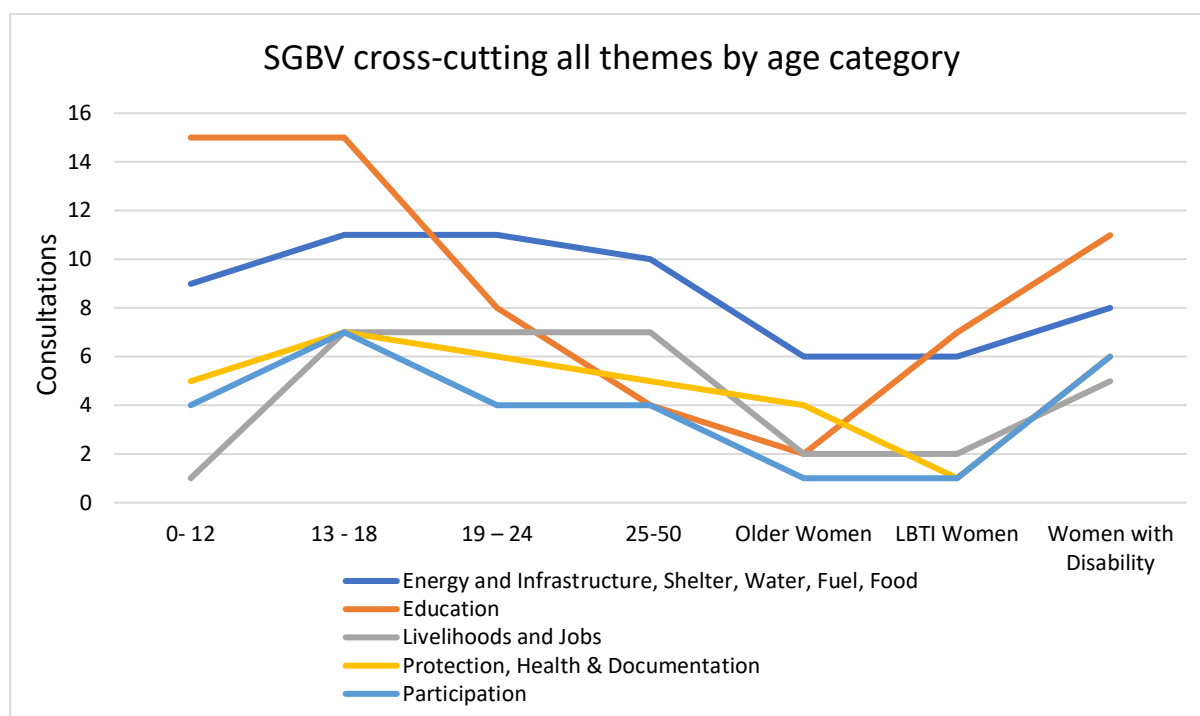


Figure 2: Number of consultations which reported sexual and gender-based violence as a cross-cutting/intersectional issue in other thematic areas, for different age and diversity groups.

For example, women and girls are at risk every time they leave their shelters to collect water and use toilets and bathing facilities. The lack of lighting at night significantly increases the risks of rape, particularly when women are forced to walk long distances from their shelters to use WASH facilities. In some camps, women noted that due to insufficient water points that many women and girls were forced to walk long distances in the forest to collect water and in doing so faced increased risks of rape and sexual abuse.



The girls went into the forest area to collect the water. At that time the person raped her. If any girl faces the rape, people . . . think bad about her family and the daughter. They don't think about the perpetrator. . . . People don't think that, it's not her fault, that she only went to take the water. (Participant - TOT)

Early and child marriage is endemic, with some girls younger than 12 being married. Early pregnancy often leads to death of the mother and/or the baby.



A 12 years – old girl is married to a 40 years-old man.... She got pregnant shortly after the wedding. Being pregnant is not good for her health. This time her physical condition is not well. A lot of bleeding from her body. The women facing some problem such as [early pregnancy], they will be physically un-well, they will die, baby will be die when delivery time. (Refugee woman)

Domestic and Intimate Partner Violence is a major problem compounded by increasing incidents of polygamy. Sexual harassment happens everywhere.

The men attributed an increase in SGBV to the increasingly difficult conditions under which the refugees live, which trigger desperate survival mechanisms, trauma, and loss of hope.

Child labour may be a consequence . . . They work because the food support we get from aid agencies is not enough. . . .Child marriage, sexual harassment – these are consequences because adolescent children don't get enough service and education. (Refugee man)

They discussed how conditions in the camp, including infrastructure (e.g. the location and of design of WASH facilities), lack of livelihoods and poverty contribute to increased SGBV against women and girls.



Mostly men are also jobless and have social expectation to provide for their family. They are very much frustrated about this situation. Their right to work has been taken away in the camps. This frustration is behind to be involved in many bad practice such as beating and ill behave with close family and friends, theft etc. This kind of practice negatively affect them and their family (Refugee man)

Women and men, reported that gender-based violence is largely perpetrated with impunity, and that in many cases a woman seeking justice faces further discrimination and abuse. Both the women's and men's groups agreed that SGBV is endemic, and include unchecked sexual harassment and rape of women and girls as they move around the camp.

Law is quite difficult – . . . What they do is they call the husband or perpetrator and ask, why do you beat her, why you do things to her? And they do nothing. Again violence happen. And we know that they [women] don't get justice. (NGO Participant)

One refugee women leader commented on how important it had been to include the LGBTI category on the Matrix even though this was a difficult group for many women to talk about. In particular she highlighted the fact that while issues for transgender women were more frequently spoken of, lesbian women in the community remained a very hidden group.

LGBTI the name that is new for them. They knew it in different way. So far, they have seen male – transgender to female. But female are not willing to talk about it. (Refugee woman Facilitator)

Some groups reported on incidences of sexual and gender-based violence for boys and men, and/or how some boys and men are affected by SGBV. They also discussed issues relating to men as perpetrators of SGBV, including the detrimental impact of having no livelihoods and no other meaningful activity in the camps.

However, there was acknowledgement and concern that gender discrimination and gendered harassment and violence are overwhelmingly problems that affect every aspect of women's and girls' lives. As well as the physical and psychological harm experienced by the victims. SGBV was identified as the major barrier that prevents women and girls participating in decision making and many activities which could improve their lives.

Thematic Area 2: BARRIERS TO SHELTER, WATER, FOOD, FUEL



One adolescent girl is going to the toilet and washroom, which is far away from her house. She faced harassment from boys, who are abusing her and hurting her badly. She is crying. (Camp consultation Facilitator)

Matrix 2: Barriers to Shelter, Water Food, Fuel - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in 3 camps = **Camp 1 / Camp 2 / Camp 3**

B. What are Barriers to Shelter, Water, Fuel, Food 	Girls 0 - 12 	Girls 13 - 18 	Women 19 – 24 	Women 25-50 	Older Women 	LBTI Women 	Women with disability 
Issue 1 Sexual Harassment while collecting food, water, and fuel	9 5/4	11 7/4	11 7/4	10 6/4	6 2/4	6 4/2	8 4/4
Issue 2 Rape and Sexual abuse while collecting food, water, and fuel	2 1/1	3 2/1	3 2/1	2 1/1	2 1/1	2 1/1	2 1/1
Issue 3 Unsafe/Poor/Overcrowded Shelters	7 2/1/4	8 2/1/5	8 2/1/5	8 2/1/5	7 2/1/4	6 1/1/4	6 2/1/3
Issue 4 Unsafe, contaminated, and insufficient water points	6 1/5	6 1/5	5 1/4	5 1/4	6 1/5	4 4	5 1/4
Issue 5 Problems with access to food and/or fuel	6 1/1/4	8 2/1/5	9 3/1/5	10 4/1/5	9 3/1/5	7 2/1/4	9 3/1/5
Issue 6 Cultural restraints including gender discrimination	5 1/4	8 3/4/1	8 3/4/1	5 1/4	4 1/3	1 1	4 4
Issue 7 Lack of livelihood support/financial resources		3 1/1/1	3 1/1/1	4 2/1/1	4 2/1/1	3 1/1/1	4 2/1/1
Issue 8 Trafficking risks in insecure shelters	3 2/1	2 1/1	2 1/1	1 1			
Issue 9 Lack of Safety including for play	3 3	2 2	2 2	1 1			2 2
Issue 10 Exploitation by service providers	1 1	1 1	1 1	1 1	1 1		1 1
Issue 11 No food supplements for pregnant women	1 1	1 1	1 1	1 1	1 1	1 1	1 1

This table demonstrates that the risk and occurrence of SGBV intersects with access to food, fuel and water, and to achieving safety in shelters. This was discussed as a major issue for all age and diversity groups in most camps. Among the many problems identified, unsafe and overcrowded shelters were a major cause of concern. The design, location and poor maintenance of WASH facilities also pose major dangers to women and girls, and lack of access to an adequate supply of clean water was raised in many of the consultations: The

WASH sector was consistently identified in all consultations as strongly contributing to SGBV risks in the camps, as illustrated at Figure 4.

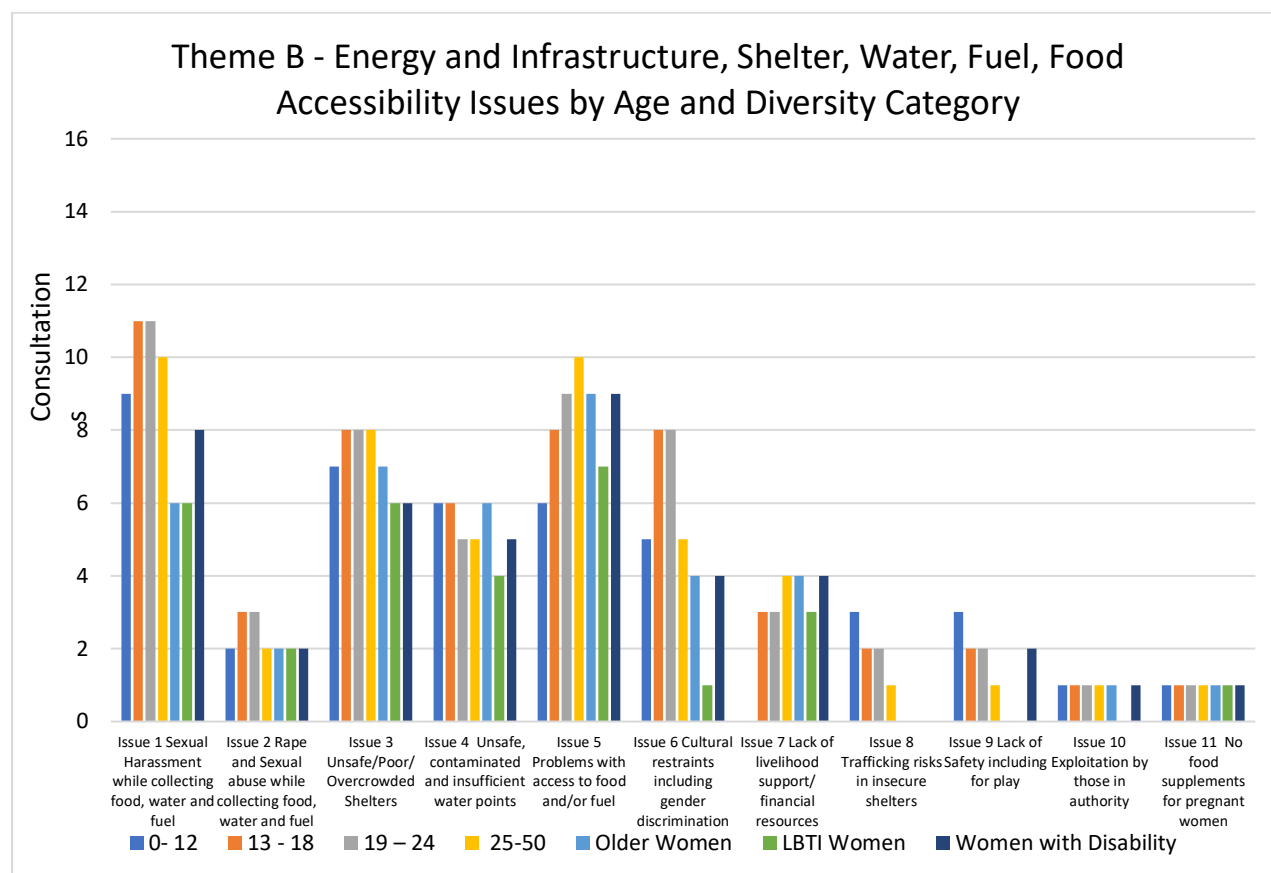


Figure 3: Number of consultations that raised Energy and Infrastructure, Shelter, Water, Fuel, Food Accessibility issues for different ages/groups of refugee women. (Total camp-based consultations=16)

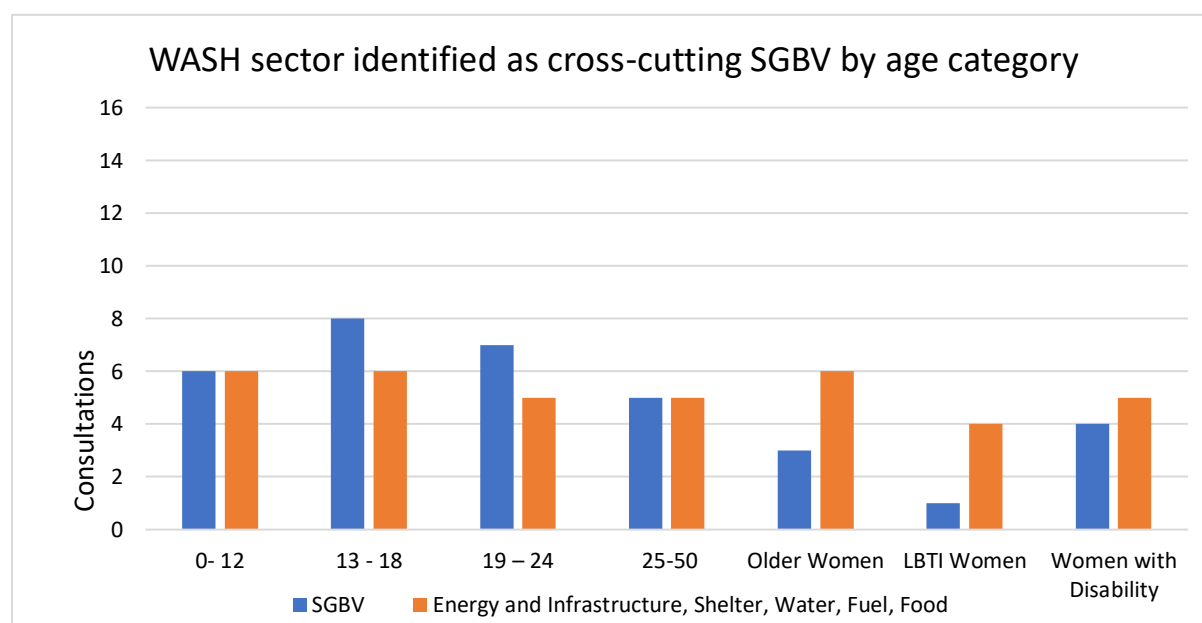


Figure 4: Number of consultations which reported WASH as a major issue across SGBV and Energy, Infrastructure, Shelter, Water Fuel, Food Access issues. (Total camp-based consultations held =16)

Shelter, Water, Energy and Food issues common across all camps

There are many negative impacts relating to shelters in the camps. They are crowded, both in terms of how many people are accommodated in each shelter and in their high density. This crowded living is unfamiliar and stressful for many Rohingya families. The shelters are hot and poorly ventilated, without any relief from heat especially for the majority of families who do not have solar power for fans. There are few shaded or cool areas in the camps that people can go to. As they are impermanent structures, the shelters are easily damaged, insecure, and not watertight in the rainy season. These factors combine to create discomfort, family conflict and health risks for all members of the community.

Women and girl's freedom of movement in the camps is strongly curtailed both by the very high risks of rape, sexual abuse, and harassment as well by social expectations that women and girls have no right or place outside the home. This has a major impact on their experiences when accessing water, food, and fuel. In several consultations' women referred to risks of 'bad mouthing' and the verbal harassment of women who either by choice or necessity move around the camps alone to collect rations, water, attend learning centres or visit women friendly spaces.

Simply going to the toilet is surrounded by both enormous risk and extreme fear of social sanctions if they are seen entering a latrine. As many toilets and waterpoints are located close to mosques or teashops, women frequently do not use them during the day when they might be seen. As a result, many refrain from eating or drinking during the day but then face increased risks of sexual abuse when they are forced to use poorly lit latrines at night, especially if these are some distance from their shelter or if closer facilities are not in use due to lack of maintenance. In some camps women face particular risks collecting water due to the very limited number of clean water points. This forces many women and girls to walk long distances into neighbouring camps or into the forest to collect water. This exponentially increases the risk of rape and sexual abuse, either from men hostile to others accessing 'their' neighbourhood facilities, or when they are alone in the forest.

WASH was another problem area identified which affects all members of the community. In addition to its intersections with SGBV risks, there were also concerns for all groups of men and women and children, about water access and quality, uncovered and dirty drains, inadequate rubbish collection, and unsegregated and dirty toilet and bathing facilities.

While people are greatly appreciative of the support they receive in Bangladesh, it is very difficult to live well without work and income. The distribution of food and non-food items also has many challenges. Many concerns were shared about overall insufficiency of aid, the location or distance of distribution centres, from the refugees' homes, and the harsh and sometimes abusive and discriminatory collection conditions.

Thematic Area 3: BARRIERS TO EDUCATION

Matrix 3: Education - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in three camps = **Camp 1 / Camp 2/ Camp 3**

C. What are the Barriers to Education 	Girls 0 - 12 	Girls 13 - 18 	Women 19 – 24 	Women 25-50 	Older Women 	LBTI Women 	Women with dis- ability 
Issue 1 Rape & sexual abuse on the way to and at school	2 2	2 2					
Issue 2 Lack of safety/ sexual Harassment on the way to and at school/classes	15 6/4/5	15 6/4/5	8 2/4/2	4 2/2	2 2	7 3/2/2	11 5/3/3
Issue 3 Cultural restraints including gender discrimination	7 4/3	9 5/4	6 2/4	4 1/3	2 1/1	4 1/3	6 3/3
Issue 4 Lack of facilities/resources /teachers	11 3/3/5	12 3/4/5	12 3/4/5	11 3/4/4	11 3/3/4	5 1/4	9 3/2/4
Issue 5 Lack of time, childcare & Household work		2 2	4 4	4 4	1 1		
Issue 6 Lack of family support for girls/women to attend school/classes		1 1	3 3	2 2	3 3	2 2	3 3
Issue 7 Child/Early/Forced Marriage	1 1	4 3/1	2 1/1				1 1
Issue 8 Government restrictions on access to Formal Education at all levels	1 1	3 2/1	2 1/1	2 1/1	1 1	1 1	2 1/1

Of particular note is the ever-present threat of lack of safety, harassment, and sexual abuse as major barriers to the education for women and girls. The lack of facilities/resources and teachers was a major concern, while cultural restraints including gender discrimination was discussed in relation to all age and diverse groups.

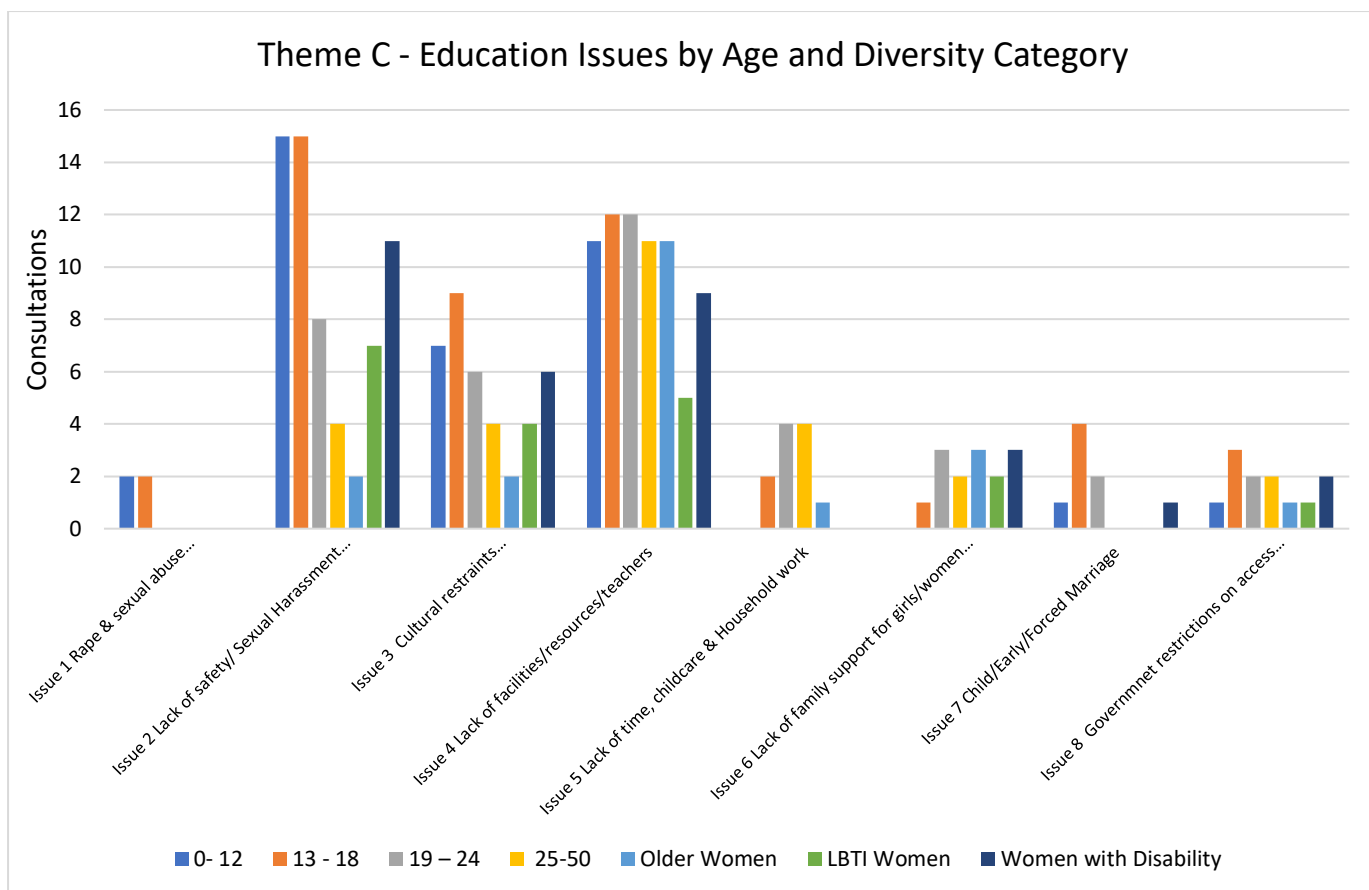


Figure 5: Number of consultations that raised particular education issues for different ages/groups of refugee women. (Total camp-based consultations held =16)

Education issues common to all camps as discussed by participants



This girl is going to school, but she is harassed by some boys, who abuse her with bad language and threatened her sexually. She shared this incident with her parents, they are both scared by this incident and stop her going to school. So, the girl becomes very upset.

They are scared of violence like eve teasing, rape, trafficking, physical abuse; that's why they don't want to go out for learning. [Then they are] getting early marriage, so they didn't receive any kind of education. (Refugee woman)

Participants were extremely distressed by the decreasing lack of access to education for girls and women of all ages. They identified multiple barriers including the risks of sexual abuse and harassment on the way to school. As girls face verbal and physical sexual harassment on the way to and from the learning centres, many parents are afraid to let them attend.

Parents were also upset because if they do not allow the girls to attend school because of fear for their safety, they can be accused of doing this for cultural reasons. They identified that the lack of education for girls is a major factor in increasing the risks of child and forced marriage, trafficking, survival sex and in the exploitation of girls and women working as maids in the local community. Without education women and girls are also at greater risk of being co-opted by local drug rings to assist in the trafficking of drugs.

The lack of formal education in the camps significantly impacts on access to secondary and tertiary education for all children. Although there are informal learning centres, women and men reported that these are insufficient for the needs and do not provide a systematic or high-quality education for their children. There are no special services for children with a disability, and the location of schools, for example on the top of hills, makes it even more difficult for children with a disability to access them. It was also reported that many learning centres that are available are in poor condition and often far from children's homes. This increases risks of kidnapping/trafficking for all children.

It was suggested that many adults have been discriminated against in accessing education in Burma/Myanmar, so have not themselves had any formal education and do not value it for their own children. This is especially the case for girl children. The imperative to earn money and the low value placed on education for children contributes to high incidences of child labour.

Many new arrivals welcomed the new limited opportunities being made available by the Bangladesh Government for refugee children to access education following the Myanmar curriculum up to year 10. However, many among the long stay refugee population were upset that this did not include provision to teach Bangla and English. They identified that being able to speak Bangla is essential in order to support positive relations with their neighbours in the host community, for their general safety as well as essential to enable access to the few livelihoods opportunities, including with NGOs.

Thematic Area 4: BARRIERS TO LIVELIHOODS AND JOBS

Matrix 4: Barriers to Livelihoods and Jobs - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in 3 camps = **Camp 1** / **Camp 2** / **Camp 3**

D. What are the Barriers to Jobs and Livelihoods 	Girls 0 - 12 	Girls 13 - 18 	Women 19 – 24 	Women 25-50 	Older Women 	LBTI Women 	Women with disability 
Issue 1 Sexual harassment at /or on the way to work	1 1	7 4/3	7 3/4	7 3/4	2 2	2 1/1	5 2/3
Issue 2 Cultural or religious restraints including gender discrimination	3 1/2	8 4/4	10 6/4	10 6/4	4 3/1	6 3/3	7 3/4
Issue 3 Lack of resources, education, and opportunities	2 2	4 3/1	4 3/1	4 3/1	3 3	2 2	3 3
Issue 4 Risk of Exploitation, corruption, physical & sexual abuse	1 1	2 2	5 2/3	5 2/3	1 1	1 1	1 1
Issue 5 Lack of Time/Household Work/Family restrictions		1 1	2 1/1	2 1/1		1 1	1 1
Issue 6 Lack of documentation		2 2	2 2	2 2		1 1	
Issue 7 Government restrictions		1 1	2 2	2 2	1 1	1 1	1 1
Issue 8 Lack of Livelihoods for men	1 1	3 3	4 4	4 4	2 2	2 2	2 2
Issue 9 Family conflict/violence due to insufficient resources	3 3	4 4	5 5	5 5	3 3	2 2	3 3

As can be seen, there was a major focus on cultural or religious restraints including gender discrimination, sexual harassment at /or on the way to, and at work and risk of exploitation, corruption, physical and sexual abuse (Including rape by employers). These issues were all exacerbated by a lack of resources, education, and opportunities. They also linked the lack of livelihoods to lack of education for girls, and noted the endemic SGBV risks that contribute to already limited education for girls.

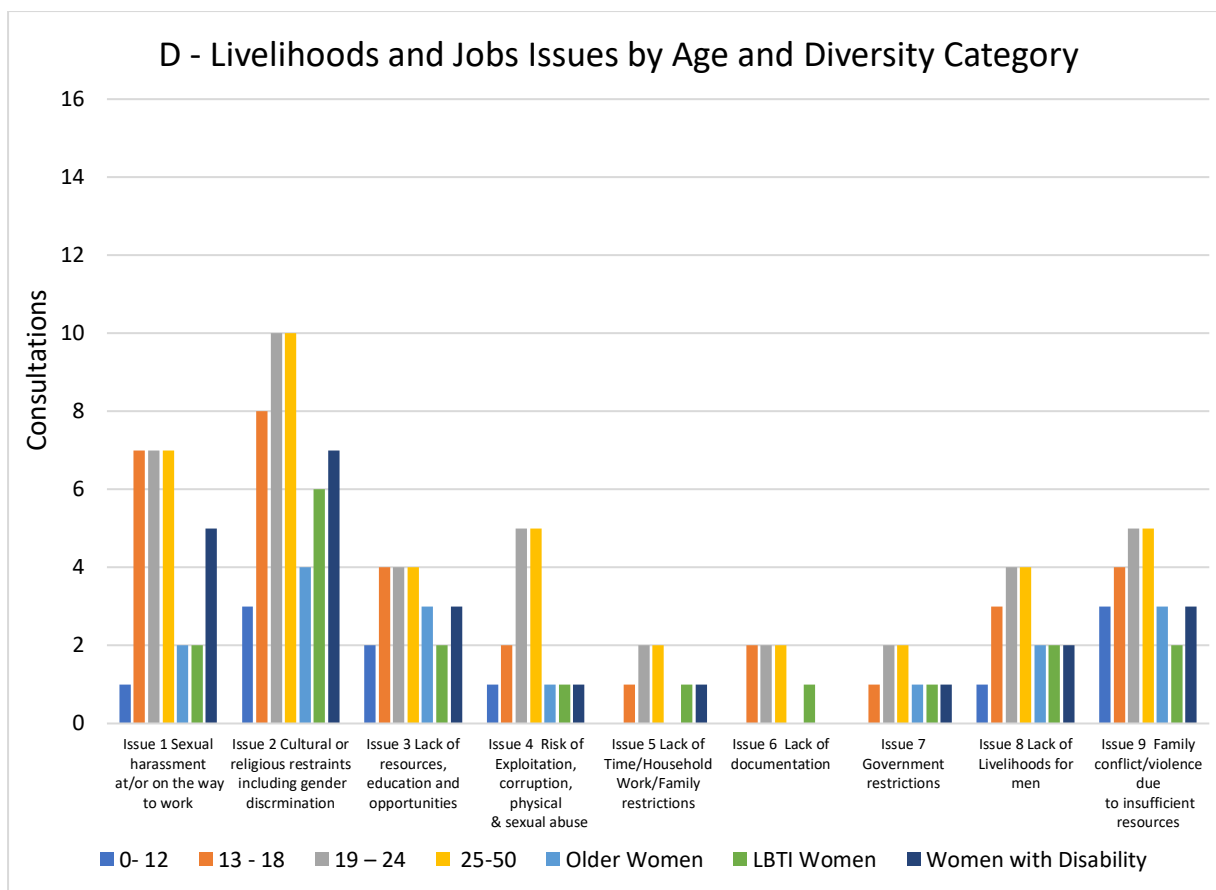


Figure 6: Number of consultations that raised livelihood and job issues for different ages/groups of refugee women. (Total camp-based consultations held =16)

Livelihoods and Jobs issues common to all camps as discussed by participants

Participants acknowledged that there are limited livelihood opportunities for all people in the camp, but that additional barriers to livelihoods for women and girls include discriminatory gender norms and the ubiquitous risks of SGBV when women and girls move around the camps. The women noted a few short- term opportunities but no long term, safe options for them or for the males in their families.

In (X) camp – there are [a] factory of soap-making, computer training centre, sewing training centre but these training centres only provide training for 3 months. So, for 3 months they have a good life. First 3 months provided the training and a stipend (used to be 3000 per month – now 3,500 and then 3 months paid on what they produce and then [they] have to leave. (Refugee woman facilitator)

The lack of means to earn income legally, with limitations on available aid, places great financial stress on all groups, and this has both predictable and unintended consequences. Negative consequences include increased family separation as families seek to obtain an additional ration card to access more aid, and men marrying a second wife to access further dowry payments. There is also significantly increased child marriage as families feel they cannot support their daughters. Child labour is common as families seek any means to access extra income. Elderly women and men and divorced ('abandoned') women, are forced to beg. There is also a black 'economy' of ration goods, as

some groups are forced to exchange a portion of their aid for assistance in obtaining or transporting it and to supplement their diets with fresh food and vegetables.



Girls are on average stopped to go outside after age of 12. They think that the girls will be considered bad if they roam around in the Camps. Moreover, there is no formal education for girls after class 7. This is also discourage parents to continue education for girls. These has a negative impact on them. They are trained to be a wife from a very young age. This increase their risk to face SGBV as often they are survivor of IPV and DV after marriage. (Refugee woman)

Women and girls are expected to do household work and child-care, and are reluctant to, or sometimes not allowed by their families to move freely around the camp, for both safety and cultural reasons. This restricts their limited opportunities to access work or to attend livelihood trainings. Some women do who work, including as volunteers with NGOs, face risks of sexual abuse and harassment, verbal abuse and intimidation as they are perceived to be breaching social and religious norms by engaging in paid work outside the home, even when they are the sole family support. The women's analysis highlighted the importance of understanding the multiple and complex barriers faced by women in accessing livelihoods in the camps. While social and cultural norms in relation to women's roles were clearly identified as a factor that must be considered, it was neither the sole nor primary factor, as all groups also emphasised the high risks of SGBV related to women and girls livelihoods. These include high risks of trafficking, the high risks of rape and sexual abuse by employers including of very young girls working as maids. For many women and their families', it was the terror of rape and sexual abuse which is the major barrier to women and girls working.

Society and respective leader don't allow them to do any job or work. Because of safety concern issue [that] they will be sexually assaulted. When they do any job, society reject them...nobody [will] marry them that's why parents don't allow (Refugee woman)

Providing women and girls with training and pathways to safe and secure livelihoods opportunities are amongst their strongest recommendations.

Women are even further disadvantaged as 'women are not accepted by society to have a job'. (Refugee man)

The few jobs available to women also put them at very high risk of sexual abuse at the hands of their employers, including while working with NGOs in the camps.

Sometimes women need the livelihood activity, and they go to the organisation and share with them. People give the negative proposal, if you do sex with me, I will give you opportunity. Some of the supervisors the NGO [say this]. (Consultation Facilitator)

Because there are few formal livelihood opportunities in the camps for men, and even fewer for women there is an inevitable movement of people seeking work outside the camps. However, the insecurity of work outside the camps results in serious exploitation and risk of arrest for those individuals who willingly, or who are forced to work outside the camps.

Their daily earning would be BDT300-400(\$3-\$4USD). They are in cultivation, collecting woods. Refugees go to Chawkbazar [in Chittagong] and charcoal factory. There are good number of refugees earning in Chittagong until they are caught. Women do not go so willingly. They will go when they are promised jobs, marriage and good life [but end up in forced prostitution] (Male facilitator)

Barriers to safe livelihoods include lack of education and skills development for females and males, discrimination, a lack of suitable work for people with a disability, discrimination against the LGBTI community, and an unfair, preferential allocation of available jobs by the Majhis.

Who have relation with Majhis, they get job. Most of the young men are unemployed. For getting a job, huge bribe money have to be paid to influential group. (Refugee man)

Without access to safe, secure livelihoods, the condition of the refugees will continue to deteriorate.

Thematic Area 5: BARRIERS TO PROTECTION, HEALTH and DOCUMENTATION



The place is hilly area with a bush. Two girls walking by, the boy started pulling their clothes, the girls so scared they are hugging each other. When they came home one child told her mother. But the mother talked to her the girl [angrily, and] the girl was upset & depressed. When child crying, mother said this needs a solution, so mother went to majhi for solution. But the boy bribed the majhi & instead of punishing the boy he punished the girl. (Refugee man)

Matrix 5: Protection, Health and Documentation - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in 3 camps = **Camp 1** / **Camp 2** / **Camp 3**

E. What are Barriers to Protection, Health & Documentation 	Girls 0 - 12 	Girls 13 - 18 	Women 19 – 24 	Women 25-50 	Older Women 	LBTI Women 	Women with dis- ability 
Issue 1 Sexual Harassment/lack safety	5 3/2	7 4/3	6 3/3	5 3/2	4 2/2	1 1	6 4/2
Issue 2 Insufficient and poor-quality health services & no female doctors	10 3/2/5	10 3/2/5	10 3/2/5	10 3/2/5	10 3/2/5	8 2/1/5	10 3/2/5
Issue 3 Lack of Sexual and reproductive health services		1 1	1 1	1 1			
Issue 4 Discrimination and physical and verbal abuse	1 1	2 1/1	2 1/1	2 1/1	1 1	1 1	2 1/1
Issue 6 Lack of Access to Rights and Justice	6 4/2	6 4/2	6 4/2	6 4/2	6 4/2	3 1/2	6 4/2
Issue 7 Lack of family/husband support or negligence		1 1		1 1	1 1		
Issue 8 Cultural Restraints	1 1	5 2/3	5 2/3	5 2/3	4 1/3	2 1/1	5 2/3
Issue 9 Dependency on others	1 1	1 1	1 1	1 1	1 1	1 1	1 1
Issue 10 Corruption, abuse of power by Majhis, volunteers and authorities	4 4	5 5	5 5	4 4	3 3	3 3	3 3

Of greatest concern were insufficient and poor-quality health services and lack of female doctors, followed by access to rights and justice, lack of Safety and SGBV. It was reported that the women felt unable to report these issues.

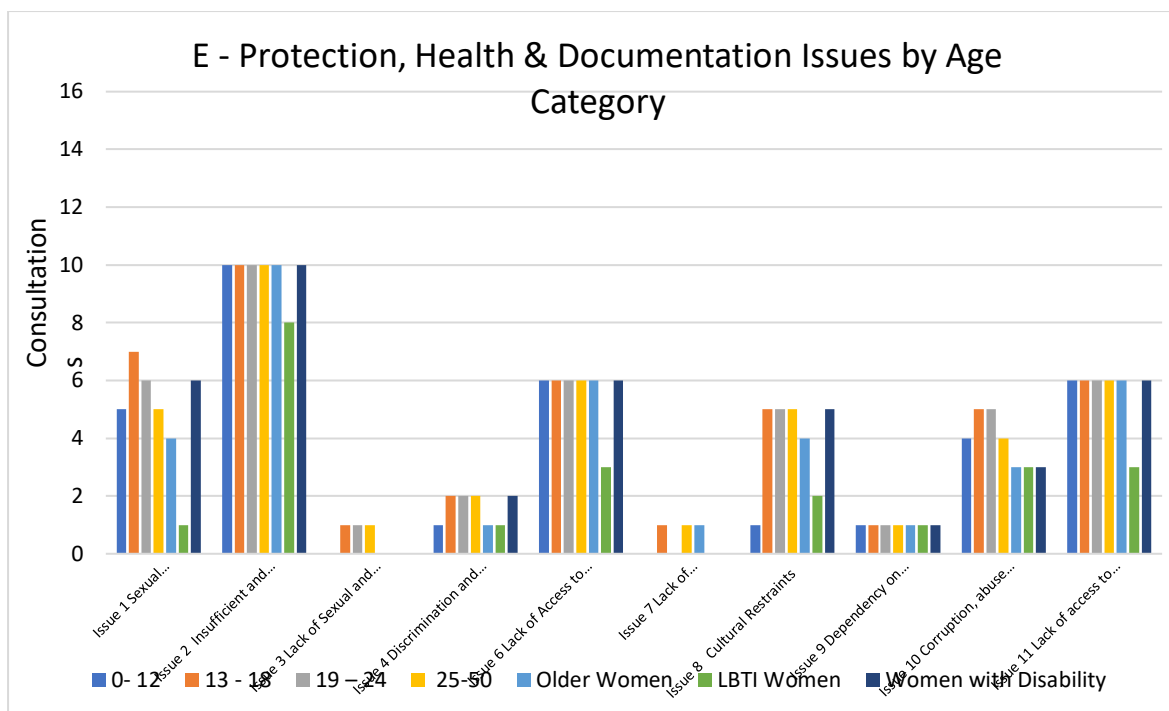


Figure 7: Number of consultations that raised particular protection, health and documentation issues for different ages/groups of refugee women. (Total camp-based consultations held =16)

Protection, Health and Documentation issues common to all camps as discussed by participants

The women highlighted the serious lack of health and protection services, as well as the risks of sexual harassment when they move around the camp as a major barrier to accessing health and protection services. They also reported experiencing sexual harassment and requests for bribes when visiting health clinics or when requesting permission for hospital transfer. There are insufficient health services for all of the people in the camps and lack of access to medical facilities external to the camps. Particular problems include, inaccessible health services that are often far from their homes, lack of finance to reach them, lack of access to medicines and lack of doctors including specialised doctors or services for higher needs patients. Critical to the women, was the lack of female doctors. The shortage of Sexual and Reproductive health services, often donor and ideologically driven, is a major problem for women and girls in the camps and the host community.

There are numerous protection gaps for vulnerable groups, due to family and community neglect, and lack of targeted services. Vulnerable groups often have no knowledge or means to access services that do exist. It was noted that unclean or distant water points and inadequate or poorly managed drains and sanitation in the camps significantly increase disease and safety risks in the camps, particularly for children.

Thematic Area 6: BARRIERS TO PARTICIPATION AND DECISION MAKING

Matrix 6: Participation and Decision Making - Issues identified.

The left-hand axis lists the issues identified by participants. The number in each box identifies how many of the 16 camp-level community-based consultations identified each issue as occurring across the age and diversity categories. The total from all 3 data collection workshops, are in **Black**, totals from the individual data collection workshops held in 3 camps = **Camp 1** / **Camp 2** / **Camp 3**

F. What are the Barriers to Participation? 	Girls 0 - 12 	Girls 13 - 18 	Women 19 – 24 	Women 25-50 	Older Wome n 	LBTI Women 	Women with dis- ability 
Issue 1 Cultural restraints including gender discrimination	5 3/2	9 5/4	8 4/4	8 5/3	6 4/2	2 1/1	6 3/3
Issue 2 Disrespect and Discrimination	3 3	4 3/1	4 3/1	4 3/1	4 3/1	3 2/1	4 3/1
Issue 3 Fear or lack of Confidence	1 1	1 1	1 1		1 1	2 2	4 1/3
Issue 4 Lack of safety & sexual harassment	4 2/2	7 4/3	4 1/3	4 1/3	1 1	1 1	6 3/3
Issue 5 Restrictions from family		2 2	2 2	3 3	1 1		1 1
Issue 6 Lack of time/childcare & household work		3 2/1	3 2/1	3 3/1	3 3/1	2 1/1	2 1/1
Issue 7 Mental harassment or physical abuse		2 1/1	2 1/1	2 1/1	2 1/1	1 1	1 1
Issue 8 Policy and political barriers	1 1	2 2	2 2	2 2	2 2	1 1	2 2
Issue 9 Lack of education or information	5 5	6 1/5	5 1/4	5 1/4	5 1/4	5 1/4	4 4
Issue 10 Not given a chance to make decisions about their lives	6 1/5	6 1/5	6 1/5	6 1/5	6 1/5	5 5	5 5
Issue 11 Refugees cannot choose own leaders	5 5	5 5	5 5	5 5	5 5	5 5	5 5

The main barriers identified to the participation of women and girls in decision making, training and other activities critical to the life of their communities were cultural restraints including gender discrimination, other forms of discrimination and disrespect. Once again SGBV and the constant fear of SGBV and harassment, with the severe impacts they have play a major role. Lack of access to formal education or information is a major barrier. Many participants were angry that they had no opportunities to make decisions about their lives and were not allowed to choose their own leaders.

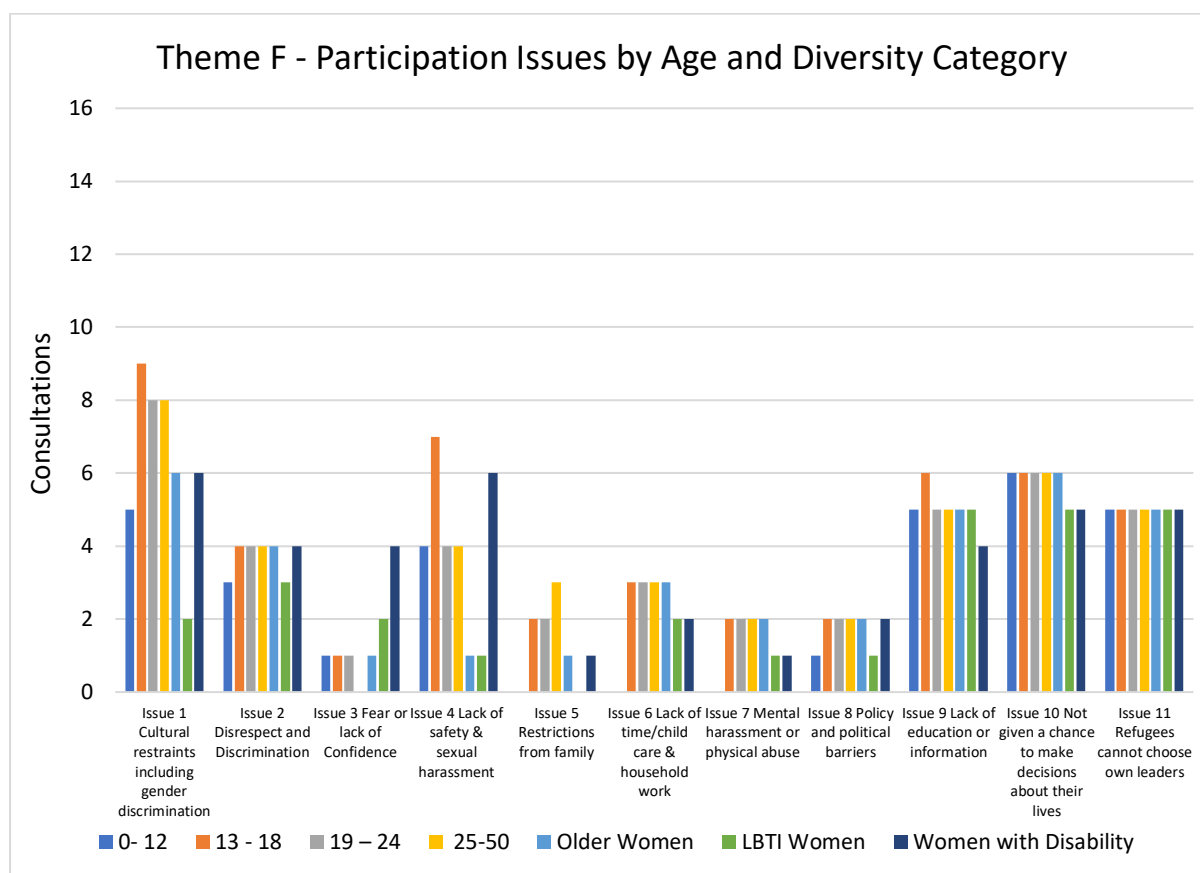
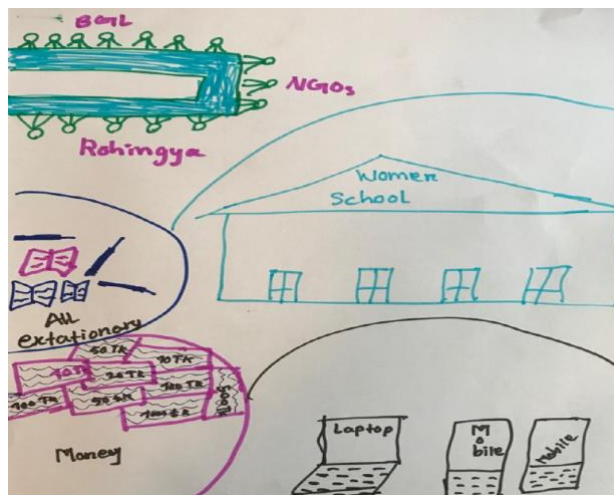


Figure 8: Number of consultations that raised participation issues for different ages/groups of refugee women. (Total camp-based consultations held =16).

Participation issues common to all camps as discussed by participants



We don't need charity, we need our voice to be heard. We already have a voice, but that voice needs to be heard., We need to have a role in decision making. (Self-organised refugee women's group)

The women described a culture in which traditionally it is men in their community who are consulted about decision making. Women and girls' opinions, skills and capacities are not recognised or respected. Their ability to participate is also limited by the social norm that women do not leave their houses as freely as men and have all the responsibility for childcare and home duties. Once again, the lack of security in the camps and ubiquitous risks of sexual abuse and harassment are a major barrier to women and girls' participation.

Women and girls are the victim of eve teasing¹². They can't go out freely and can't attend meeting or any community engagement. (Refugee woman)

Participants identified four major barriers to women's participation.

1. Discrimination towards women – lack of respect for their opinions and voices
2. Lack of security going to meetings and trainings held in women friendly spaces especially for younger women and girls
3. Lack of access to formal education for women and girls.
4. Fathers, elder brothers, and husbands who forbid women and girls from going out, as often for safety reasons as for cultural expectations.

Sometimes women want to go to the women friendly space, but the parents don't allow them to go to the space because they are not secure. They are not confident to send them. (Refugee woman Facilitator).

When service providers, including UN agencies, INGOs and NGOs wish to consult with the community about issues other than things very specific to women, (such as reproductive health), they make little effort to include women in the broader discussion, inviting known senior men and Majhis, who are sometimes not trusted by the community, and who have very little gender analysis.

There was a strong message that as refugees they have few or no opportunities to contribute to decision about their lives, including about leadership of their community.

The intersectional nature of these barriers is highlighted in the Data Analysis Workshop reports.¹³

¹² Eve Teasing is a euphemism commonly used in South Asia including in Bangladesh to describe public sexual abuse and harassment of women and girls. It can include both verbal harassment, involving lewd and suggestive comments as well as physical sexual abuse. The government of Bangladesh has legislated against the use of this term but it remains in common use amongst the refugee and local community.

¹³ See links to reports at [Annexe 1](#)

PART 2 B: CONTEXTUAL AND STRUCTURAL ISSUES.

This section is based on data provided by the refugee and NGO participants, observational analysis from the research team, data from semi-structured interviews, planning meetings and informal discussions with staff from various UN agencies, INGOs, NGOs, CBOs and Funders, as per the methodology. Interviews were done on the basis of absolute confidentiality, as some, (but not all) interviewees voiced concern about being identified. Care has been taken to ensure that information cannot be traced to its source.

While many problems and challenges are discussed, the authors also note the huge commitment and effort of the many organisations and staff working on gender issues to improve their coordination and to develop and implement shared guidelines, SOPs and training programs. Service providers may believe that some of the findings are not correct, and that recommended actions and services are already in place. However what is presented here is the perception of the refugee participants and grass roots service providers. What is reflected in this discussion is that the quantity, spread and quality of services is not always adequate.

A number of key stakeholders from all sectors felt that many services, particularly those for women and girls, could be improved. A common theme was problems with service co-ordination. In 2017 this could be explained by the size and scope of the mass arrivals, and the critical nature of the response needed. It now needs to be addressed urgently as the camps are transitioning from providing an immediate crisis response to recognising the need for longer term, sustainable and improved management of responses. It is obvious that, in the absence of political solutions in their home country, the Rohingya population will remain in Bangladesh for the foreseeable future.

Geographic and Structural issues in the camps.

The biggest structural hardship experienced by the refugees is the lack of effective accessible service provision, health services, WASH facilities and livelihoods, and the endemic levels of SGBV involved in accessing these. While this was reported in all camps in which a community-based consultation was held, the geographic positions of the camps, i.e. distance and accessibility from Cox's Bazar, also has a major impact on the level of service provision provided. The sheer distance means that staff who travel from Cox's Bazar to more distant camps have less time to deliver services once they arrive in camps. Curfews, security issues and restrictions on staff accommodation exacerbate this. While inconvenient to staff, these issues have a very negative impact on services the refugees receive.

The distance also means that senior staff from organisations visit these more distant camps less often and spend less time on the ground. This would not have such a great impact if they consulted regularly with the lower ranking and local staff who work on the ground, but this reportedly seldom happens (See [Top Down Decision Making](#)). Programming and other decisions are often made which are divorced from the reality on the ground. Issues such as the composition of the camps, whether they are separate from or merged with the host community, new with good resources, new with few resources, plays a major role. The same applies to the established camps. Existing program mapping does not adequately explore these issues. The topography of the camps (very hilly and/or

remote) and the shape of the camps (spread-out or compact), also has a major impact on accessibility to services. For example, the Women's Friendly Space in in one large camp is not accessible to many women because of the distance to access it, and the danger of SGBV to women and girls moving around in the camp.

The power structures within camps are also a crucial aspect of the quality of and access to services, and justice in the camps. While there were reports of excellent and supportive service provision, a major theme that emerged was the uneven calibre of local service providers, and lack of accountability. There were many complaints about the power of the Majhis and the prevalence of corruption and violence in some camps. It was reported that a small minority of local staff and service providers are racist, misogynist, and perpetrators of sexual abuse and other forms of violence. However, complaints mechanisms available to refugees are often tokenistic, and most perpetrators enjoy impunity from justice due to the lack of effective legal mechanisms. This creates a culture of fear and anger in the refugee population as they feel helpless to respond.

Lack of Program Coordination across the Camps

"We have far too many coordination meetings but what are we coordinating?"
(Senior staff member, Cox's Bazar)

There were a number of problems discussed in relation to the challenges of good co-ordination.

"We have meetings about meetings, about meetings!! We are so busy co-ordinating we cannot get the work done!" (Senior staff member, Cox's Bazar)

Similar observations were made multiple times by a range of stakeholders:

- There are so many organisations, and staff keep changing. Even within organisations many people don't know what others are doing. What is missing is space to share – so people can get to know each other.
- Coordination meetings try to solve this problem but there are so many of them that it leaves little time to be in the field, to implement what is discussed.
- The relationships between agencies are not helped by the lack of a synchronised funding process, which at times puts organisations in competition with each other. Despite the obvious good will between humanitarian actors, and willingness to explore complementary activities, this can be detrimental to the effective coordination of services.
- It was noted that there are endless staff trainings with little measurement of impact. The primary concern seems to be how many people are trained, not the quality and effectiveness of the training.
- It was also observed that many senior staff are men, some of whom have limited understanding of gender issues and non-traditional programming. This creates problems for the women gender co-ordinators who are often not in senior positions. For example, in conversation with one of the UNSW research team, a very senior male in a key international organisation flatly denied sexual misconduct by his male staff despite numerous reports of this by both refugees and local staff. These factors make implementing change extremely difficult.

- While the Gender Hub is acknowledged as a critically important part of the co-ordination around Gender issues and SGBV, it has a focus on providing technical support. Some local staff expressed the wish that the Gender Hub could play a more prominent role in the actual co-ordination of services.
- There were complaints from all sectors that while many ‘quick and dirty’ focus discussion groups (FDGs) are conducted in camps, there are many problems in the ways in which they are conducted, and they provide little genuine opportunity to explore or develop solutions proposed by the refugee communities. The findings are seldom collated, analysed or systematically applied to programming. Rarely, if at all, are the findings and recommendations from the FDGs shared with the refugee participants. At a meeting in Cox’s Bazar attended by a UNSW Researcher, there was concern that important data from research that had been undertaken many months before had never been analysed, and that the team did not have the skills and experience to do this. Situations like this cause extreme frustration for all concerned, in particular the refugee participants, who feel that their input is considered worthless.
- A focus on gender is seldom written into the job contracts of the community-based protection teams and other front-line staff. This is a universal problem. It is no-one’s job to look at the gender dimensions of different service areas, which makes co-ordination of a holistic gender response difficult.

A major barrier to good co-ordination - Top down service provision

“That’s for the higher ups” (Local NGO)

It was reported that programming is very top down in most organisations. Few local NGOs are involved in high level policy making or coordination, due to structural, language and power differentials. Many of the local staff, from all organisations, have a sophisticated understanding of what is happening and what could be done to improve services. They have information and evidence about the pervasive impact of the corruption, abuse of power, lack of access to justice for SGBV, and the detrimental bad behaviour of some Majhis. However, they reported that their voices are seldom heard, and often feel that they are not allowed to speak at meetings or to senior staff. There are no avenues for them to get their messages to decision makers. This disempowers local staff as well as refugees and works against community development and participatory approaches.

Participants noted that UN staff and big INGOs always volunteer to attend key meetings, effectively excluding voices from the grass roots. Major decisions are made without, or with only token gestures to refugee and local staff participation in decision making. This is further compounded by the fact that coordination meetings are always held in English, without the provision of Bangla interpreters. This effectively excludes many local staff and does little to advance commitments to Localisation. It links directly to the structural issues discussed above. The same issues that prevent the voices of the local NGOs being heard also protect the abusers from being identified and dealt with appropriately.

A lost opportunity – Community Based Organisations and Self-Organised Refugee Women’s Groups

Despite the excellent work undertaken on a voluntary basis by self-organised refugee women’s groups, there are many difficulties and often reluctance to resourcing them. Service

providers have to respect the rules which govern the refugee camps. But also, they are considered to be 'political', mobilising their community in a way which is not considered acceptable. It is often assumed that they do not have the skills to organise, are self-serving or are all affiliated with corrupt Majhis in the camps. These perceptions are also sometimes reflected in the refugee community, with tensions between different social classes and levels of education and between men and women. These assumptions are seldom rigorously tested or challenged.

The 2017 intakes are commonly perceived to be less educated and have less capacity, than those who have been in the camps for a long time. Yet there are some women in this cohort from higher status groups in Burma and with tertiary education. Some of these women have formed groups or community-based organisations in the camps and are mobilising women to improve conditions and assist in service delivery and capacity building. These groups are often dismissed and sometimes feared by key stakeholders with access to funding, as troublemakers and competitors. The accusation that they represent self-interested groups and are competitive with each other for available resources and opportunities to participate is common. The irony is that these behaviours mirror those of some of the service providers working in the space. It mirrors the reality of life in the Humanitarian aid sector and life in general.

There is also a focus on negative cultural practice and the horror of the current situation in Burma/Myanmar, but women do not always refer their lives there as having been totally negative. They talk of happier times and a good family life. They discussed how cultural practice is fluid and often used as a survival strategy, such as the wearing of the Burqa for protection, and the arrangement of child marriage as an act of desperation, both to protect the girl and to enable her family to survive. To work successfully in this environment, service providers have to navigate carefully through these complexities. However, response to life in the camps is often evidence of the knowledge, experience, and capacity of these women, and should be embraced and used to enhance the conditions of all in the refugee communities.

Maximising impact of the value that refugee women and men, CBOs and local NGOs can bring to the table will require more coordination and communication between grass roots workers and programmatic/management staff, service providers and community leadership, and community members. The regular debriefs with local staff as already undertaken, for example, by UNHCR and Relief International could be an effective way of harnessing this experience and capacity.

To date, no local partner has a Principles Partnership Agreement (PPA) with UNHCR to support local women-led groups in the camps. There is political sensitivity to the suggestion of providing financial support to refugee groups. As a result, UNHCR is providing non-financial direct support for these activities. As far as possible they are using a participatory, refugee-led approach, responding to the women's analysis of their needs. Some other service providers and donors criticise this approach, on what seems to be a "we know best" assumption. Other donors, however, are so keen for "women led" initiatives that UNHCR is afraid it may push these groups to develop and expand at a rate beyond their capacity, without the support and training often required by newly emerging groups. Recognising that process is as important as outcomes, a community development approach can be effective in supporting refugee community led initiatives such as these. A Refugee Community Development project run by the Somali and Afghan refugee communities in India, which was

supported by the UNSW project team, with UNHCR, is an example of good practice in this area.¹⁴

Quantity, not Quality - Inadequate Monitoring and Evaluation

The lack of in-depth monitoring and evaluation, usually because of lack of time, means that the circumstances and levels of service provision in camps are often listed but not analysed. A “Tick a Box” approach to monitoring and evaluation (M and E) without analysis is of limited value. For example, Funders are informed that there are ‘X’ Women Friendly Spaces (WFS) in the camps. This is seldom broken down into how many women these shelters serve on a regular basis, how many per capita of women in the camp, or how accessible they are geographically. For example, we are told “*There are 2 WFSs in camp X*”, or “*Yes, Psychosocial support is available*”, giving the impression that these services are available to every refugee, when for complex reasons this is not the case. There is little evaluation of the quality of the services provided, either by the service providers, or more importantly by the refugees who are the recipients of the services.

Psychosocial issues

There are some excellent but very limited psychosocial services available for refugees in the camps. Staff from NGOs complain that they find it difficult to refer seriously traumatised refugees to good psychological services because there simply were not enough available. Some NGOs offering these services commented on the difficulties they face in providing them in sites where there is no privacy. They requested simple solutions, such as brick and concrete huts with proper doors.

There is little analysis by service providers or community members about the different impacts of the violence and forced displacement experienced by the Rohingya people, in the different intakes of refugees. This includes the types and levels of trauma, both pre and post arrival in Bangladesh, for example, the impact of the genocidal nature of the conflict that caused the recent mass intake. Post arrival trauma is exacerbated by the fact that the refugees are now living in crowded disparate neighbourhoods with people with whom they often have no shared connection, other than their Rohingya identity. It is the violent circumstances that have brought them into close proximity, not historic, social, or familial ties.

SGBV Analysis – Personal and Cultural or Structural?

Of note is that while SGBV was explored as a stand-alone topic, as can be seen in figure 1, it is also a major issue in other thematic issues explored in the research consultations which negatively impacts women and girls, families and communities. This is strongly reflected in the data collection which includes both narrative and drawings. The intersections between SGBV and service provision is highlighted in each of the thematic discussion sections of this report, and in reports from the three Data Analysis Workshops.

¹⁴ <https://www.fmreview.org/community-protection/bartolomei-hamidi-mohamud-ward>

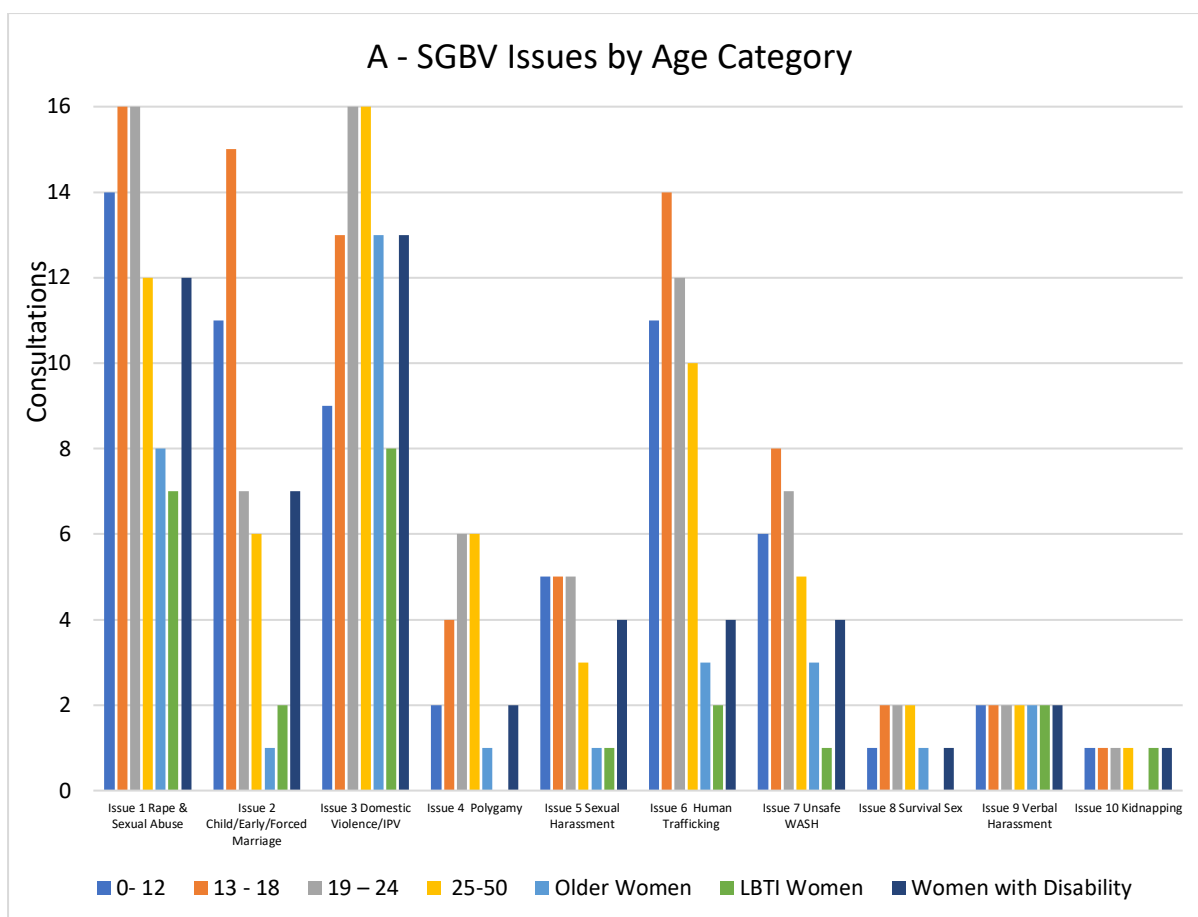


Figure 1: Number of consultations that raised SGBV issues for different ages/groups of refugee women. (Total camp-based consultations held =16)¹⁵

The Personal and Cultural

While the extent of the widespread and pervasive impacts of SGBV on refugee women is well known and documented, there is an almost total focus on the concept that it is grounded in a cultural, religious, and patriarchal base, and that the perpetrators are most often refugee men. This position was also articulated by many of the refugees – even while their stories painted a very different picture.

The result of these beliefs is that many SGBV programs are structured on the assumption that SGBV has only a cultural, religious, or patriarchal base. They consequently have a focus on “awareness raising”, education of “bad men” to turn them into “good men”, and on physical protection, mostly after the event. No-one denies the fact that culture, religion and the actions of some individual refugee men are a major problem. However, while measures addressing this are obviously necessary as part of a suite of responses to SGBV, they only address one part of the problem.

Women reported that while SGBV had been an issue in Burma/Myanmar, before their arrival in Bangladesh, the incidence has multiplied in the harsh conditions in the camps - as has occurred around the world for all forcibly displaced groups. Cultural practices such as polygamy and forced early marriage have increased dramatically post-arrival. There is a de

¹⁵ This is duplicate of Figure 1 used earlier in this report

facto acceptance of sexual harassment as “**something men and boys do everywhere**”, which contributes to the huge extent of the problem and to the lack of effective responses to it. Sexual harassment is a serious root cause of a range of other gender equality/SGBV problems that strongly and negatively impact on women’s and girls’ human rights in the camps, exacerbated by structural problems, and the powerlessness of being a refugee. It is an issue that needs to be taken much more seriously, and strategies to stop it must be identified **WITH** the community. Without this, women will continue to face the double discriminations of gender inequality and pervasive SGBV.

Structural Problems and SGBV

Equally strong was the evidence and analysis by the women that the extremely high incidence of SGBV has a structural base. That is, the structural conditions in the camps *cause* increased incidence of SGBV. The value of the [intersectional approach](#) taken in this project, which recognises the cumulative nature of discrimination and oppression, was clearly demonstrated in the following example, shared by one of the staff who had co-facilitated a community consultation in one of the camps.

So, when they start to draw the storyboard, we have told them to focus on one thing, one specific problem. They said that, “it’s not true that we have one problem: we have many problems. And this problem is interrelated for other problem. Like we need water, so we want rain. We want to get rainwater. But when rain is happening it’s also harmful for our shelter. Our shelter is broken, and water come into our shelter. Water come into our bed and inside the home. So, it is harmful for us. And other thing when collecting water, we are standing in long line, and it causes a big clash. And we have to suffer”. So, one problem is interrelated to other problem. Sometimes the water sources are very far, sometimes it becomes a problem because they got harassed and sometimes, they got raped. So, they say “we cannot say it’s only one problem”.

It is critically important to address the concrete issues which contribute to SGBV, and to name and address the actions of the perpetrators, both refugees and service providers, which are enabled by and contribute to these structural issues in the camps. Participants from all sectors identified that SGBV perpetrators include a range of men who come into contact with the refugee women, not only their family and community members. This was clearly articulated and analysed. Until these issues are addressed, very little will change in the current endemic levels of SGBV.

Addressing SGBV is an intersectional problem and needs a complex intersectional, well-timed, and effectively co-ordinated approach. The constant suggestion of “awareness raising” as a solution highlights the fact that many NGOs and refugee women and men either do not recognise the massive contribution that structural issues make to the problem of SGBV in the camps; or they are so overwhelmed by them that they do not know where to turn. Providing awareness raising is the one thing that is in their control.

Examples of structural failures which contribute to SGBV are included in all reports, and include:

- Poor co-ordination between different sectors, which are siloed. For example, there is little focused programmatic interaction between WASH and SGBV, even though the women strongly identified a clear causal link between WASH design /issues and sexual harassment, abuse, and rape.
- A lack of gender analysis is evident in many programs and in each camp.
- When the mass arrivals first began, gender experts were not employed in all camps at the same time, resulting in an uneven response to gender needs in different sectors.
- “Gender” and “SGBV” are often rolled into one and marginalised as a single issue. This results in a lack of understanding of intersectional issues which lead to SGBV and results in a lessening of the focus on strengthening gender responses in all areas and programs, as a major SGBV prevention response.
- The only forms of SGBV that are taken seriously, and considered/reported as criminal acts, are rape and trafficking.
- All other reports of harassment and abuse are dealt with by the Majhis and in some camps or some cases by the CICs.
- There is a systems wide failure to identify or address root causes, exacerbated by a belief that refugee women and girls are not capable of analysing their own solutions.
- Grass roots workers are frustrated that they have no-where they can go and report these issues with confidence that they will be listened to. Some also expressed fear that if they did this, they may lose their employment.

Positive Strategies for Change.

Both refugee participants and NGOs reported that key stakeholders are taking some very constructive steps to address these issues. The work of the Gender Hub is very much appreciated, as they do the high-level policy work which other stakeholder do not have the time to complete. Their work is seen as very effective, for example they had a very positive influence on the current Joint Response Plan (JRP).

- While coordination was frequently raised as a problem there are clear efforts underway to significantly improve coordination among actors working on gender and SGBV issues. Guidelines are being developed for staff at all levels and training focused on improving coordination and more effective responses such as SASA Together are being implemented.
- There are indications that other service providers will follow the example of Care and Oxfam, and track their budget allocation to gender issues, which will inform their policy and programming.
- UNHCR now has a head of SGBV, Child Protection and Community Development, which will ensure improved co-ordination between the services provided. (It must be noted that these three UNHCR departments were well regarded by other stakeholders with clear evidence of very positive collaborations).
- Care and Oxfam are piloting refugee women led work, with a focus on building women’s capacity to be totally independent.

- Work on Preventing Sexual Exploitation and Abuse (PSEA), which had previously been focused in Cox's Bazar, is now starting to take place at field level.
- There is a concerted effort for providers to use more participatory approaches when working on Gender Issues.
- Gender issues are beginning to be recognised as important issues in their own right, and not only SGBV, with the recognition of the intersectional nature of the problem. For example recognition that the lack of educational opportunities for women and girls leave them more vulnerable to sexual abuse and exploitation.
- Gender issues require a wholistic approach which involves all sectors not just SGBV specialists and the gender teams, but also site management, WASH teams, Education, police etc
- UNWomen are piloting a project which has supported the appointment of five women to work as assistant CICs.

These examples of good practice could be replicated and expanded to address the challenges identified.

PART 3: CONSOLIDATED RECOMMENDATIONS

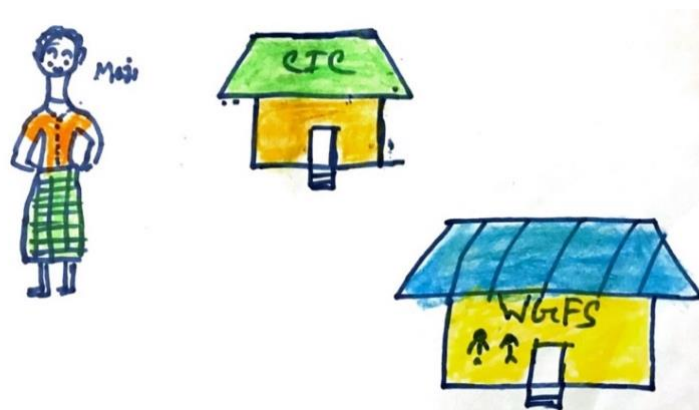
The following recommendations have been compiled by the research team and include recommendations from refugee and NGO participants made in the research consultations and workshops. The combined recommendations from the refugee and NGO participants are organised thematically.

COMBINED RECOMMENDATIONS FROM PARTICIPANTS.

These recommendations have been drawn from all consultations and workshop reports. As far as possible they have been kept in the voice of the participants. (Please see the Recommendations section in each of the three Data Analysis Reports, for further detail and quotes from participants¹⁶.) While service providers may believe that some of the recommended actions and services are already in place, what is reflected in the recommendations is that the quantity, spread and quality of services is not always adequate. As with the Findings, they reflect the reality of the participants.

1. COMBINED RECOMMENDATIONS: SEXUAL AND GENDER BASED VIOLENCE

The strong message from the refugee women was that while they want to be actively involved in addressing the widespread problem of SGBV including child marriage, they cannot do this alone and must have strong support from service providers, local authorities, religious and community leaders and men in their families and communities.



Women said that they want to work together to stop child marriage of their daughters. They said that they are willing make women and men in the community to aware about negative consequences of child marriage. Few people told that they will volunteer to go to houses to stop child marriage. (Image from Refugee woman in one camp narrative reported from Refugee women in a different camp)

Lack of access to justice to address cases of SGBV was a major concern in all groups. Participants in the consultations had many suggestions about ways in which to improve the situation. Their analysis was that the lack of access to justice, and attitudes of some people working with the refugees were exacerbating the problem, and as a result, women were increasingly less able to participate in camp life because of fear for their safety. Their

¹⁶ See links to reports at [Annexe 1](#)

proposed solutions acknowledge that these personal experiences are tightly linked to the structural issues, and both have to be addressed simultaneously.

Participants suggestions included:

Regulations and access to justice

- Improved access to rapid legal assistance is urgently needed as currently, slow access to legal support is a deterrent to reporting SGBV (and other) crimes.
- Gender sensitive female police must be deployed in the camps and that all CICs employ female assistants to whom women can report cases of SGBV.
- Clear reporting pathways to intervene in cases of child marriage must be established and fully supported by the CICs and service providers.
- All referral pathways to report SGBV and to access effective legal responses must be monitored to ensure they are effective.
- More effective and accessible reporting mechanisms for abuse by people in positions of power are urgently needed, with access to protection and a fair, effective justice system after reporting abuse.
- Actions to prevent dowry payments and polygamy, which contribute to early marriage and domestic violence must be developed. This will require intervention at the CIC level.
- Implementation of age restrictions for marriage must take place urgently including registration of **all** marriages by CICs, with the Majhi or community leader to follow up, and restrictions on who is able to authorise or perform marriage ceremonies.

Improving Safety Standards:

- Female elected camp leaders be appointed, who are sensitive to the problems that women and girls face and empowered to assist them.
- A concerted campaign be instigated to ensure that women feel safe to report cases of SGBV and that all perpetrators be prosecuted through the National Legal System.

Awareness sessions

- Women's groups, led by Rohingya women, assisted by supportive NGOs, must be trained and resourced to run awareness sessions and encourage transformative dialogues. The topics they would cover include information sessions with adolescent girls, older women and married women on how to care for children without the support and resources they were accustomed to, and how to support them in their education. They should include the negative impacts of child marriage, domestic violence, dowry payments, polygamy and sexual harassment and rape. These sessions would include a strong message that these things are against the law, and will not be tolerated in the camps, and that if they continue, perpetrators will no longer enjoy impunity.
- Awareness sessions must be held with both men and boys, in all camps, led by supportive men from the Rohingya refugee community about the

Participants made the distinction between awareness raising, which is aimed at community education, consciousness raising and the dissemination of information, and training which has a focus on the development of skills. Of course, there is a cross-over between the two activities.

negative impacts of child marriage, domestic violence, dowry payments and polygamy and sexual harassment and rape. These sessions should include a strong message that these things are against the law, and will not be tolerated in the camps, and that if they continue, perpetrators will no longer enjoy impunity. This could include the further use of film and audio dramas followed by small group discussions.

- The same sessions would be provided to all service providers working in the camps and in Cox's Bazar.
- Awareness raising with adolescent girls and their mothers about their rights should be provided, in particular rights addressing SGBV, education and participation. This must be linked to information about how to access these rights, and what to do if they are denied. This would include accessible complaint mechanisms and pathways to justice.

Development of new programs, with an emphasis on refugee leadership or active refugee participation.

To improve the development and outcomes of programs and services:

- Service providers must more actively involve refugee women and men in identifying the causes of, and solutions to protection problems faced by women and girls through effective consultations. These must be supported by good interpreters, with childcare provided, and held in safe spaces and with sufficient time for discussion. The results of the consultations must be reported back to the women and men, and they must be active participants in the discussion about how the findings will inform programs.
- As a matter of urgency, programs must be developed and monitored to address the widespread verbal harassment of girls and young women by adolescent boys. These programs must involve parents and community leaders to challenge the negative perceptions which stigmatize the victims of this abuse and ensure that effective sanctions are implemented.



Information regarding the disadvantages of early marriage should be disseminated among community people and parents so that they are aware and discourage any further early marriage. Friendly space facility should also be provided for men than men will also be able to learn more and take part in reducing early marriage in the community. (Refugee woman)

Participants specifically requested:

Home outreach programs employing trained and resourced Rohingya people/ volunteers to provide:

- Door to door safety support and counselling.
- Improved mental health support for men and women, which would include involvement of community members in mental health support.
- Programs to increase community support and engagement in preventing child trafficking. This would include increasing awareness of trafficking risks.
- Strengthening/implementing a community committee program focused on ending and better responding to intimate partner and domestic violence.
- Engagement and training with community leaders and religious leaders for them to play a role in raising awareness in the community of the harms of early marriage, and in relation to intimate partner, domestic violence and sexual harassment.
- More banners/brochures/cartoons about the negative impacts of SGBV and steps the community can take to prevent it.

Training specifically requested for the Refugee Community

Separate to general Community Awareness programs, participants requested:

- More training for refugee women leaders on SGBV and on conflict resolution, to support them to keep peace in the family.
- Training on how to respond to intimate partner and domestic violence including some basic counselling skills.
- Legal awareness training relating to marriage and divorce.
- That NGOs, UNHCR and other service providers continue conducting training on human rights and gender equality and widely disseminate information on women friendly services. This training should be designed to build the training skills of Rohingya women and men to conduct this training within their own communities.
- That Human rights training be provided to many more women in their communities as they have not been exposed to this training before. They also requested further human rights training for community leaders and volunteers.
- All community leaders including the Majhi's be trained on SGBV and women's and girls' rights.

Training specifically mentioned for Service Providers and service providers.

- All service providers at all levels need to undertake the same training programs as the refugees listed above, as many do not fully understand the key issues affecting the lives of refugees, such as the intersectional nature and impacts of SGBV, or lack of participation. Others do not understand, lack the skills needed, or do not accept participatory approaches to service provision and have little understanding of the Human Rights Framework. It was reported that some service providers enjoy impunity for corrupt actions or perpetrating SGBV, and this could help address the problem.

Infrastructure/activities to help to reduce SGBV

- More Women Friendly Spaces should be opened in each of the camps as most camps have only one space. Women and girls who live in locations which are far from the WFS are unable to safely access the services and training programs provided.
- Formal and informal learning centres for girls and boys should be established, to reduce the cultural and structural barriers for girls' attendance in formal education, and provide activities that will help to reduce sexual harassment by boys. This could help reduce early marriage and provide the children with something positive to do.
- Community Centres must be resourced in each camp to provide men with training and information sessions on preventing and responding to SGBV as well as access to counselling, targeted livelihoods training and activities.

2. COMBINED RECOMMENDATIONS: SHELTER, WATER, FOOD AND FUEL

While improvement was requested in all aspects of shelter, WASH and aid distribution, specific recommendations for improvements included better coordination between WASH and SGBV services, as these are the major sites of sexual abuse and harassment, and yet there is little evidence of collaboration between those in charge.

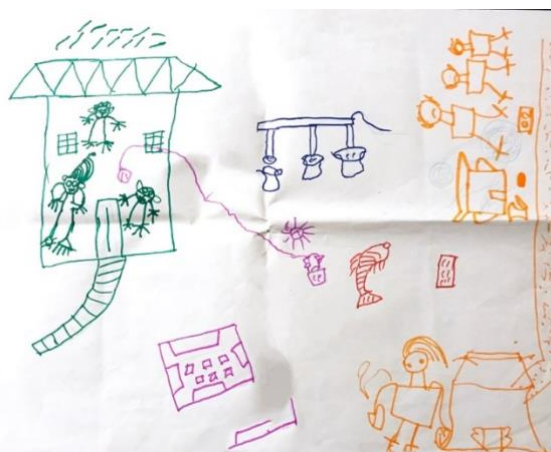
The latrine should be segregated by sex and should not be installed in one line. It would be better if the latrines for both men and women are installed separately. ...the latrine[s] should be brick built so that no one can make any [peep holes] in the latrine wall. (Refugee woman)

Suggestions for WASH infrastructure and services

Participants' suggestions included that:

- Sex segregated latrines are installed in well-lit areas close to women and girls' shelters and away from mosques and tea shops and other areas in which young men congregate.
- All latrines must be accessible for older women and for women and girls with a disability.
- More water points are installed close to women's shelters and away from mosques and tea shops and other areas in which young men congregate to reduce risks of rape and sexual harassment when women and girls are forced to collect water in the forest.
- All families are provided with larger water containers so that water can be collected and stored when it rains.

They said that they want more organizations to build tube well beside every home. They want NGOs to give big container to contain and store big amount of water so that they do not need to go every day to collect water. (Refugee woman)



Suggestions for improvement of camp sanitation

- Awareness sessions on the bad effects of incorrect disposal of rubbish and for correct disposal of rubbish should be increased and strengthened; this should include consultations/discussion with the community members about how to solve the problem.
- Daily removal of rubbish to avoid health risks and contamination of surrounding areas and drains.
- Covering be provided for all drains to improve safety and hygiene.
- A reporting system to Majhis or NGOs to alert them to WASH problems such as damaged drains or water points.
- More regular cleaning of drains and a system for damaged drains etc to be repaired much more quickly than is currently the case.
- All urgent repairs to old and insecure shelters are prioritised
- All roads and pathways in the camps are maintained to facilitate the free movement of the elderly and person with a disability.

Suggestions for Food and non-food item distribution

Participants identified the following measures that need to be taken to address problems in these areas. Services are encouraged to:

- Ensure there are accountable systems for vulnerable groups such as people with a disability and older people to receive their proper allocation of food and non-food items without having to 'pay' another person with a portion of their items.
- Separate queues, managed by specially trained staff, be provided at food and NFI distribution centres for single women, the elderly, LGBTI women and those with a disability to address sexual abuse by those distributing these items.
- Establish a distribution centre for gas, food, and other non-food items in Camp X (particularly requested), to decrease the risk to women and girls who currently have to travel long distances for these items.
- Address the theft of rations from single, older, and disabled women because they cannot collect it themselves. One way to do this would be provide resources to support volunteer young women (Porters) to help carry rations for single and other women.
- Systematically implement sectorial training in humanitarian principles and an accountable code of conduct for all staff and volunteers working in distribution centres.

3. COMBINED RECOMMENDATIONS: EDUCATION

The key and intersecting issues of the impact of SGBV on girls' education and the critical need for refugee participation, equally including refugee women in the provision of education were highlighted. It was noted that resources invested in this sector would have a positive long-term impact on all other sectors. Their recommendations address the barriers they have identified.

Then all society members could understand about this kind of bad effect [of sexual harassment and abuse on the way to school] which are very harmful to all. If there is awareness session about harassment side effects and how to avoid this. (Refugee woman)



They think that if they got educational access then they can understand the way of their better leading life. (Refugee woman)

Participants suggestions included that:

- Separate single sex Learning Centres and schools be provided for girls who are 10 years old and above.
- Educational service providers must consult with women and men in the community to identify safe locations for Learning Centres to reduce risks of sexual abuse and harassment of girls walking to school.
- NGOs are requested to support and provide better physical facilities for children's education, with more child friendly spaces and play areas, including sex segregated spaces for adolescent children, and in safer locations.
- All the refugee children be educated in the National Bangladeshi curriculum and have access to the Burmese curriculum.
- All teachers should be fully trained on Child protection issues and to treat all children with equal respect.
- Additional Rohingya women be resourced and supported to be involved as volunteers, mentors, and teachers' assistants in Learning centres to increase safety for girls and to build women's capacity as teachers. Community members must be involved in small learning centres, sharing the current skills and knowledge in the community.

- Experienced teachers from the community should be supported to provide evening sessions to assist children's learning and children's study groups should be established so that children can assist each other.

[The women] said that they can make study groups in the community or WFS to learn from one another. They also want to have one to one support for girls. This will help girls to be more confident and interested to continue education.
(Refugee woman)

- Formal employment opportunities be provided to Rohingya women who already provide informal classes in the camps for girls.

They said that they will raise awareness in the community if any school established for girls or any other learning opportunity...They sometimes go to [work] as volunteers or teachers or WFS workers. (Refugee woman)

- Steps must be taken to keep young girls at school as an immediate physical protection measure, and to ensure that they receive education which has been proven to be the best protection measure against SGBV. This includes a decrease in forced and child marriage.
- Literacy classes must be provided for women which will increase their knowledge of available services and their confidence to complain when they face abuse or exploitation.
- More organizations to provide education, and WFS to provide additional livelihood and other trainings for girls and women. They want more literacy classes to understand basic things as how to complain or how to fill forms to receive services. (Refugee woman)
- Women and girls, men and boys should be provided with peacebuilding training so they can build skills to address conflict in their families and communities.

4. COMBINED RECOMMENDATIONS: LIVELIHOODS AND JOBS

Her husband learned farming from NGO and started farming in the fields since he works in all day, he has no time to quarrel with his wife. This brings peace back to their family life. (Refugee woman)

Legal access to Livelihoods and employment were seen as the key to addressing many of the barriers to justice and participation identified in this report. It was also seen as a potential major positive contribution to the mental health of the refugee community, which would improve the condition of the refugees and enable them to contribute more effectively to Bangladesh. It would provide a way to show their gratitude to the Government for granting them asylum. However, many participants see the opportunity for livelihood diminishing rather than increasing.

Before there was an adolescent learning centre but now project have stopped. It'll be good for this project to start again. In the long run they can learn more things. They can teach the next generation and the environment can change.
(Refugee woman)

Participants suggestions included that:

- Freedom of movement in and out of the camps be allowed to enable refugees to take up employment legally.
- Livelihoods training programs and safe income generation opportunities conducted in the Women Friendly spaces be significantly expanded to include all adolescent girls and women at risk of being forced into marriage or to engage in survival sex.

In the learning centre, we should open learning point so that women can learn, and so that they can make money. We can create awareness session for the girls. So that they can learn and earn money. It'll be very good.

(Refugee women)

- Livelihoods training programs for women and girls should be expanded to include computer training, mobile and electronics repair in addition to training in sewing and traditional handicrafts.
- NGOs should develop targeted capacity building and livelihood training programs for LGBTI women and women and girls with a disability, many of whom face significant discrimination, which prevents them from participating in services used by other women and girls.
- Employers, who abuse and exploit refugee workers including local families who employ Rohingya young women as maids, must be brought to justice.
- Livelihood opportunities for men as well as women should be developed in order to reduce stress on families and to contribute to reducing the risks of domestic and family violence.

In our community our husband has no work that's why they quarrel with their wife every day. (Refugee women)

- They felt that the community could be more involved in many of the programs operating in the camps, such as social support and practical activities like cleaning.

5. COMBINED RECOMMENDATIONS: PROTECTION AND HEALTH SERVICES

Protection

If the NGO and INGO people and UN people talk to their higher authority about the problem Rohingya community are suffering, it will be good and helpful to reduce the problem. (Refugee women Facilitator)

Participants suggestions included that:

- The International community must be informed of the seriousness of the situation facing the Rohingya community in Bangladesh and consider how it can respond through responsibility and burden sharing to ensure that the needs of the population in the camps are met and their rights are respected.
- The international community continue to provide adequate funding and resources to meet the needs of the refugees and their Bangladeshi hosts until their safe return to Burma/Myanmar can be guaranteed.

Due to resettlement in other country, Rohingya people got job opportunity, they got developed. When I see this, I want this, I want this for my family. ...Because they have dreams, they take unsafe route, the boat, as a result of this many people die. (Refugee woman facilitator)

- Humanitarian agencies should routinely inform the communities about the status of the policy and advocacy efforts being undertaken at the Dhaka and international level, so that they understand the measures which are being taken to assist them.
- The international community should consider increasing resettlement opportunities, to prevent desperate people attempting to escape via boat, with many dying at sea.
- Police to provide improved security against 'robber' gangs which operate in some camps.
- More systems for accountability of Majhis and other community leaders be introduced to counter corruption, nepotism, and SGBV.

Health

There was an overwhelming discussion about the inadequacy of health services in most camps.

- All health facilities should be regularly monitored to reduce risks of extortion or sexual harassment by staff, and a safe complaints mechanism be established to receive and investigate all reports of malpractice.
- Reproductive health services should be increased, including through providing services attached to Women Friendly Spaces which can be safely and confidentially accessed by adolescent girls and women.
- Improved sanitation is urgently needed to decrease infection and illness.
- The number of health facilities in the camps must be increased, to reduce excessive waiting times and so that women and girls do not have to travel long distances, which increases the risk of sexual harassment and abuse.
- Access to specialist doctors for the seriously ill must be made more available than currently happens.
- All health staff must receive training on the principles of health equity and inclusion and supported to develop services that are gender and diversity sensitive.

6. COMBINED RECOMMENDATIONS: PARTICIPATION AND DECISION MAKING

The key message from discussion of this issue was that all service providers take active steps to include refugees in all decision making.

We don't need charity, we need our voice to be heard. We already have a voice, but that voice needs to be heard. We need to have a role in decision making. (Self-organised Refugee women's group leader)

We would like to change our own selves and our neighbours in our own way. If a third party comes it will not be accepted easily. (Men's group facilitator)

The participants suggestions included that:

- There is increased inclusion of community members in running programs and activities in the camps.
- Refugee women be encouraged to take leadership roles at the local level in each camp and provided with support and resources, including training, access to spaces, to host meetings, safe passage through camps and between camps, refreshments, childcare and transport allowance.
- Male community male members to be encouraged to support women, to assist them to access WFS, and promote women's leadership at camp level.
- Needs analysis and training programs be designed with women and provided to support their leadership and participation.
- Women leaders be provided with formal opportunities to meet with the CICs to share their concerns and recommendations to address these.
- Training on the importance of Human rights, Gender Equality and the importance of participation be provided to male leaders. This must be positive, and not punitive in its approach.

In our community [gender equality] is in a bad state - so there should be a program to address this misguided thing. (Men's group facilitator)

- Based on the pilot Camp elections which have already taken place, strategies must urgently be implemented for people to choose their own community leaders and Majhis, and this process be facilitated by authorities and service providers.
- Systems of oversight and accountability of Majhis and other community leaders must be developed and implemented by NGOs and authorities, to reduce exploitation and to ensure that they also support refugee men and women participation in decision making.

RECOMMENDATIONS FROM THE PROJECT TEAM

Positive Strategies for Change

- While working in some of the most difficult circumstances ever documented, many service providers are providing excellent services and constantly adapting and improving their program models and implementation strategies. The local learning from these initiatives could assist all key stakeholders.

Addressing Lack of Program Coordination across sectors and across camps

- Improved co-ordination procedures will need to be put in place in order to address the many problems and barriers to ensuring the participation of refugee women and girls in all aspects of decision making and service delivery, and in achieving a truly effective response to the prevention, mitigation and response to all forms of sexual and gender-based violence experienced in the camps.
- Co-ordination must occur at both a macro level, including UN bodies, INGOs, key local agencies and funders in Cox's Bazar, and at a Micro level among the many players who provide services in the camps, and most importantly involving the informal services provided by the refugees themselves.
- The existing co-ordination network could be consolidated and simplified to achieve this. Trust building exercises and procedures could be required for this to happen.
- Plans could be made for linked and complementary funding submissions, which balance each other, and do not heighten competition between agencies.
- Every effort should be made to flatten the "top-down" model of service planning and organisation which is currently in place, to capitalise on the knowledge and wisdom that grass roots workers, including refugee led CBOs, can bring to the table and to ensure it is incorporated into project and policy design and implementation.

A lost opportunity - CBOs and Self-Organised Refugee Women's Groups

- Service providers and key stakeholders should make every effort to incorporate the work and experience of CBOs and refugee led organisations into the consolidated response to the problems faced by refugees and the challenges these pose to service providers.
- In order for this to be successful, many refugee women and men, who have great personal capacity and leadership skills, will still need training and support, such as childcare and transport, to enable them to take their places at planning and decision-making meetings with confidence. If this is not provided, they are often just "set up to fail".

Now because we have an organisation, people are inviting us to come and talk etc but no one is offering us anything. Now we are going here and there to meet people, so if we had an office that would be helpful. We will be independent working, but we need technical support. Like UNHCR leading that technical support but so that we are still independent (Self-organised refugee women's group leader).

Quantity, not Quality – Addressing Inadequate Monitoring and Evaluation

- While acknowledging the extreme pressure under which service providers are working, it is still critically important to conduct thorough monitoring and evaluation, for all projects. This has to be more in-depth than simple ‘tick a box’ and write a sentence model, and the outcomes must be analysed and applied to ongoing and new projects.
- If the skills to complete monitoring and evaluation are not available, then training should be provided to relevant staff. Ineffective services are a waste of time and money, and lead to further distress for the refugee population, and great frustration for those on the ground who deliver services.

Psycho-Social issues

- While acknowledging the scarcity of resources and of specialist Psycho-social support personnel available, it is important to recognise that many of the refugees in the camps are suffering from PTSD, and that this impacts on their ability to cope with life on a day to day basis.
- More knowledge and information should be provided to grass roots service providers, who are often thrust into the role of “accidental counsellor”, and they need to be provided with training and resource materials to assist them with this aspect of their work. The UNSW team have produced a series on psychosocial support materials designed to support grassroots refugee and NGO workers¹⁷.
- Service providers should utilise the capacity of the many refugees who have expertise and knowledge of traditional ways of working with people who are traumatised. With support and training they are very capable of providing front line services to their peers, as long as it is backed up by a functioning referral system to professional counsellors.

Gender in its own right

- There is concern that gender in its own right is not reflected as an integral part of service provision, as separate from the gendered aspects of SGBV. While there is an increased emphasis on women and girls’ access to education, this is seldom reflected across other aspects of service provision.
- Gender analysis to identify the different needs of men and women must be done of all programs and by all service providers.
- When females are appointed into roles traditionally held by men, such as CICs, they must be provided with the necessary information and training to ensure that they are fully responsive to the needs of women and girls. Some women have little analysis or understanding of gender issues and can therefore use a male perspective in these roles, which negates the value of their appointment.

¹⁷ These are available at: <https://www.dropbox.com/sh/i4q5mf30zcorh4t/AACCG3V3aOP8yl1pqbfF-umJa?dl=0>

Gender-Based Analysis

- Gender assessment tools such as Gender Markers or the excellent model developed by the Canadian Government¹⁸, provided below, which requires that all applicants for program funding answer the following questions, should be applied to all program design, however small the program. A favourable evaluation of how organisations have addressed these issues in their programs should be a key decider about whether their subsequent funding applications are considered.
 - ♦ **Question 1.** How are women, men, boys, and girls affected differently by the problem your project is seeking to address? (The answer also informs question 2)
 - ♦ **Question 2.** How do the identity factors of women, men, boys, and girls influence their experiences of the problem?
 - ♦ **Question 3a.** Were women and/or girls consulted on the project? Describe who was consulted and how.?
 - ♦ **Question 3b.** Have you considered facilitating the participation of women and girls in the project, if so in what roles?
 - ♦ **Question 4a.** How did you incorporate the findings from your gender-based analysis in the project design?
 - ♦ **Question 4b.** Has feedback from the consultations with women and/or girls shaped the project design?
 - ♦ Fund recipients will be required to track age and gender-disaggregated beneficiary data (e.g.: number of women/girls over and under 18 years of age; number of men/boys over and under 18 years of age) and were possible issues of disability and other key diversity categories (Government of Canada referenced at footnote 19).

Sexual and Gender Based Violence

SGBV was as **THE** most pervasive and intersectional problem across all areas of concern. There are many practical recommendations from participants above. However, if **ALL** staff from the senior policy makers to the grass roots service providers do not fully understand or acknowledge this it is unlikely to improve.

- Management of critical services, such as WASH and SGBV, which are so crucially linked as key sources and responses to the same problem, are currently siloed. They must be coordinated so that they function hand in hand.
- An understanding and empathetic response to SGBV must be part of the criteria for staff selection at all levels of all organisations. One of the major barriers to addressing the problem is the attitude of so many people who have power over the refugee community. It is a problem in the wider community and across the world, both in developed and developing countries. As so clearly articulated in the evidence provided by participants in these consultations, for refugees it can be an issue of life and death, of living or merely surviving.

¹⁸ https://www.international.gc.ca/world-monde/funding-financement/gender_equality_toolkit-trousse_outils_egalite_genres.aspx?lang=eng&_ga=2.135858168.870404295.1602316233-562014349.1602316233

- On-going, and proven, effective SGBV prevention and response training should be mandatory for staff at all levels of all organisations. Demonstrating this should be a key performance indicator. Staff who are perpetrators should be dismissed and if applicable reported to the police.

Participation

- Whenever possible a participatory approach to program design, implementation and evaluation should be utilised.
- Staff may need awareness raising and training about what this means in practice and how to apply it. This would include knowledge of the differences between Refugee Led projects, Refugee Participation and Refugee Inclusion.
- As noted above, full support must be provided to the refugee community for this to occur.
- Funders may consider having this as a criteria for funding applications.

PART 4 CONCLUSION AND VALUE OF THE PROJECT

Reflections and Feedback from the Consultations and Workshops.

While the majority of the objectives of the consultations were achieved, there is certainly room for the findings to be explored further and applied to future service provision.

Many of the problems discussed were already known, but the consultations have provided a strong evidence base and solid recommendations for actions to address these from the perspective of refugee participants and grass roots service providers. Many commented that this was the first opportunity they had been given to have their voices heard, and it was a very empowering experience. They requested that this become part of on-going service provision.

The process highlighted the capacity of the refugee community to analyse the problems facing them and suggest viable solutions. It clearly demonstrated the intersectional nature of the problems, with a strong need for intersectional solutions.

The evidence gathered allowed for a deep analysis of the differences in camp populations and the physical structure of camps. It also provided a safe space in which key Stakeholders could explore issues of concern to them in confidence.

Feedback on the Process

(For full details see the Data Analysis workshop reports.)

Both the service providers and the Rohingya women and men agreed that the process had been a very inclusive and collaborative one which had provided a genuine opportunity for the refugee women to share their concerns and propose workable solutions. Some NGO workers expressed surprise at the depth and quality of the refugee women's analysis and the solutions they proposed.

They understood the activities well and we realised the women are very smart and very intelligent. (Service provider)

The refugee women were very vocal about the value of conducting the community consultations and most particularly the opportunity it provided to women and girls to openly share their problems.

They noted that the discussion about confidentiality had been central in creating a safe space in which the women felt comfortable to share their problems and experiences. Most particularly the women appreciated the assurances from the refugee women co-facilitators that they, like the UN and NGO staff, were bound to maintain confidentiality as part of their role.

They commented that the process was very different to the Focus Group Discussions (FGDs) that they were used to participating in.

Service providers gave strong feedback that the matrix activity helped them to better understand an AGD approach and gave them a simple tool to think about how programming must be targeted to meet different the different needs across the diverse groups and ages.

When asked if they would like to continue to use it as a tool in their regular work there was a resounding yes, from the whole group!

This matrix board is really helpful because those Rohingya people who comes from Myanmar cannot read and write, they are very illiterate. Because of this matrix board we are able to understand them and show them picture. Through this matrix we are able to know the specific problem with the specific age group. So, it's really helpful. (Refugee woman Facilitator)

The feedback on using the storyboards as a tool to depict and explain the impact of problems on women and girls and their communities and to suggest potential solutions was equally positive. They noted that storyboards also provided an effective approach in encouraging adolescent girls who are often shy to speak out in the presence of older women to also share their experiences and ideas.

It is hoped that participants will be enabled to continue to use these tools to further explore the experiences, analysis and solutions suggested by the refugees with whom they are working and to provide enhanced levels of service provision, which actively include the refugee women.

PART 5 – METHODOLOGY AND PROJECT STAGES IN BANGLADESH

The Research Methodology

The ‘[Reciprocal Research](#)’ methodology used for this project was developed by Eileen Pittaway and Linda Bartolomei over many decades of working with refugee women and girls¹⁹ in over 20 countries around the world.

The focus of the method is the collection of information from often vulnerable populations in a way that is empowering, not harmful, not exploitative and which has the potential for bringing about social change. It is ideal for use with marginalised and disadvantaged groups who have valid and historically based reasons for distrusting people in authority, including researchers, academics and representatives of Government and other institutions. This might include people who experience discrimination on the basis of such things as class, race, gender, disability, or refugee status. The reciprocal nature of the method transforms people from subjects of research to participants in research, moves from “harm minimisation” as an ethical base to reciprocal benefit, and from researcher directed projects and outcomes, to participants and community directed outcomes. It included the use of and data from semi-structured interviews, planning meetings and informal discussions with staff from various UN agencies, INGOs, NGOs, CBOs and Funders, as per the methodology.

The training component of the Training of Trainer (TOT) workshop consultations explored the development of the GCR and its commitments to women and girls, and topics including human rights, gender, privilege, intersectionality, women’s participation and leadership, advocacy, understanding structural violence and sexual and gender-based violence.

This set the framework for a series of research activities, including an analytical matrix activity and ‘storyboards’ (for details see below) to document issues related to different thematic areas, the impacts of these issues, including the intersectional impact on diverse groups of women, and potential solutions. The same research activities were used by the facilitators in the community-based consultations.

Overarching themes throughout the activities and discussions in the TOTs the camp-based consultations and the Data analysis workshops were women’s participation and the impacts of SGBV, in keeping with the key commitments of the GCR and the aims of this project.

Theoretical Framework - Human Rights, and Intersectionality.

The Human Rights framework was introduced in the four TOT workshops and all the camp-based consultations. It involves the use of a series of graphics illustrating groups of rights²⁰ and the discussions are framed in the context of how refugees accessed these rights. Intersectionality is a theory that seeks to examine how various socially and culturally constructed categories, such as gender, age groupings, race, class, disability, sexuality, and other identity labels interact and contribute to systematic inequality. Intersectionality holds that the layers of oppression and discrimination which prevent people accessing their human

¹⁹ For more information go to <https://www.arts.unsw.edu.au/research/forced-migration-research-network/resources/>

²⁰ In the camp-based consultations in the written materials these were framed as ‘the things we need to live a safe and dignified life in order to avoid using the more contentious language of human rights. However it was clear that the facilitators and refugee participants continued to use the language of rights in their discussions and presentations. The facilitators also provided strong feedback about how important the inclusion of the human rights training was and how much it was valued by the refugee women and men who participated in the consultations.

rights do not act independently of one another. Each type of discrimination compounds the effects of other discriminations suffered by refugee women and girls thus reducing their ability to access many of their rights. They cannot be alleviated by stand-alone solutions. This theory was introduced to all the participants in the four TOTs women through the use of a complex road map, with a major intersection, where roads named after discriminations, such as Sexism Street, Religious Persecution Highway, Patriarchy Place, Racism Road etc crossed each other, and cars caught up at the intersection crashed. They demonstrated their understanding by applying the concept to produce complex and sophisticated analysis of the problems they are experiencing. Their analysis informed their approach to the camp-based consultations they led and reported on and has informed the analysis shared in this Data Analysis workshop report and in the final combined report.

Applying the Age Gender and Diversity Framework

Given the strong focus on the importance of an Age Gender and Diversity²¹ (AGD) approach in the implementation of the GCR, the women and men in both the TOTS and the camp based consultations completed an exercise using a Matrix which had diverse ages and categories along the top access, and the thematic areas addressed in the Global Compact on Refugees along the left axis. As noted above, they analysed the different impacts of six thematic areas on each divers group, which were:

1. Experiences and impacts of sexual and gender -based violence,
2. Barriers to shelter, water, fuel and food
3. Barriers to education,
4. Barriers to livelihoods and jobs,
5. Barriers to protection, health, and documentation,
6. Barriers to participation and leadership.

Each of these was explored through the lens of eight diverse groups: Girls 1 – 12, Girls 13 – 17 Women 18 – 25; Women 25 – 50; Older Women; Women with a disability; LGBTI Women and Single Women and Single Mothers. The men's consultations also explored these issues for men and boys in the same age and diversity groups.

	Girls 0-12	Girls 13-18	Women 19-24	Women 25-50	Older women	LGBTI women	Women with a disability
What are the issues and impacts of sexual and gender based violence?							
Barriers to shelter, water, food and fuel							
Barriers to education							
Barriers to livelihoods and jobs							
Barriers to protection, health, and documentation							
Barriers to participation in meetings capacity building, decision making about self & others in refugee lives							

²¹ For UNHCR's AGD policy, see <https://www.unhcr.org/5aa13c0c7.pdf>

Detailed Project Stages in Bangladesh

Planning Phase – April – September 2019

During this period, the UNSW team made two visits to Bangladesh. Meetings and camps visits were held with UN agencies, INGOs, NGOs, refugee community leaders and the Centre for Peace and Justice (BRAC University) to identify the most suitable approach for the project in Bangladesh.

Formal Ethics approval to undertake the research granted by both the UNSW Research Ethics Panel in Sydney and the Ethics Panel at BRAC University in Bangladesh. Permission to undertake the research in the camps was negotiated by UNHCR with the relevant Camp authorities. UNHCR generously provided the additional funding required to undertake the TOTs and many of the community- based consultations. Additional funding and resources were provided by the other project partners including IOM and Relief International.

Stage 1 – ‘Training of Trainer’ Workshops - November 2019

12-14 November – An experiential ‘Training of Trainer’ workshop to train participants project aims and principles and the Reciprocal Research Methodology was held in Cox’s Bazar involving 47 UN, INGO and NGO staff. This workshop was held in English and Bangla.

17–21 November – Three experiential five day ‘Training of Trainer’ workshops to train participants project aims and principles and the Reciprocal Research Methodology were held, two for women and one for men in three separate training spaces in camps 2W, 16 and 26. Each group was comprised of a mix refugee leaders/volunteers and NGO and UN staff. The workshops involved a total of 145 participants: 43 Rohingya women, 16 Rohingya men and 86 UN, INGO, and NGO staff. The workshops were English with Rohingya and (as required) Bangla interpretation.

The four TOT workshops were conducted in the form of experiential consultations. Participants ‘learned by doing’ the research activities that they would use in their own consultations (see below). These activities have been developed by the UNSW team over several decades, as part of a ‘Reciprocal Research’ method²² of working with refugees. A Step by Step Guide²³ and materials required to conduct the research consultations were provided to all the participants.

They were run with the dual aims of training the participants to lead community consultations using the Reciprocal research methodology and following a strictly negotiated ethical process, were fully documented as research consultations in their own right. Individual reports were prepared from each of the TOTs.

24 November – UN, INGO and NGO representatives from all ToT groups came together in Cox’s Bazar to discuss the outcomes of the TOT workshops and to plan next stage of the project.

²² For more information go to our [resources page](#)

²³ The Step by Step Guide to Conducting Community Consultations using Reciprocal Research that was used in this project and is available on request.

Stage 2 – Multi stakeholder-run consultations with refugee women and men in camps December 2019 - January 2020

The camp-based research consultations were coordinated and supported by an organising committee of local UNHCR and NGO staff. Each consultation was facilitated by a team of Rohingya women or men and UNHCR, INGO and NGO staff who had attended one of the TOT Workshops.

A total of 16 community-based consultations were conducted in 13 different refugee camps. These involved 11 consultations with a total of 165 refugee women and 5 consultations with a total of 69 refugee men. An additional community-based consultation was held with 17 self-organised refugee women's group members from several camps.

Stage 3 –Data Analysis, Program development and training opportunities

February 2nd - 13th February 2020 - Three Data Analysis workshops led by the UNSW and APRRN team with the refugee community leaders, NGOs and UNHCR team who conducted the community consultations in the camps.

3rd - 5th and 9th February – The first Data Analysis Workshop was conducted in one camp with the multi-stakeholder teams who had conducted the community-based consultations with refugee women in 7 camps. Two Data Analysis workshops were held in the second week. The first of these workshop involved the multi-stakeholder teams who conducted the 4 community-based consultations with refugee women. The second of these workshops involved the multi-stakeholder teams who had conducted 5 community-based consultations with refugee men in 5 camps.

16th February - UN, INGO and NGO representatives from all the facilitator groups came together in Cox's Bazar to discuss the outcomes of the Data analysis workshops, review the overall and process and to agree on the content of a report to be written by the academic team on behalf of all stakeholders. A process for sign off the draft reports from each consultation was agreed and preliminary plans for a stakeholder meeting to be held later in the year were discussed. (Note due to the current COVID crisis these plans will need to be revised).

Description of Camp-Level Community-Based Consultations and Documentation

Each community-based consultation took place over three days, for three to four hours each day. They were conducted by facilitators who had attended the ToT workshops, and followed detailed guidance in the Step-by-Step Guide to maintain consistency across the consultations.

Participants were introduced to the project and individual consent was negotiated following the strict ethical protocols covering confidentiality. They were then introduced to the Human Rights framework and shared ideas about what all people need to live in safety and with dignity. The 'Matrix activity' explored how different ages and groups of women or men experience six issues differently. The final activity involved the Storyboard exercise in which participants developed a series of graphics, drawing their answers to five questions about a problem facing their community, what is available to respond to this problem, their ideas for other solutions, and what role the community, NGOs or other groups could take in these solutions.



Storyboard presentation, Camp based Community Consultation

The facilitators of each consultation documented the responses to each activity using a form provided by the research team. This documentation and storyboard pictures were shared with the research team in February 2020, at follow-up 'Data Analysis Training Workshops' by the facilitators who had conducted one or more research consultations in the refugee camps.

Description of the Data Analysis Workshops

Each Data Analysis workshop took place over four days for four hours each day. On the first day the aims were outlined and the participants shared their experience of conducting the consultations using the matrix and the storyboards. They then started to share the key issues which were identified in the Matrix exercise. On the second day, a brief training on the difference between qualitative and quantitative data was provided and the idea of thematic analysis was introduced. The women were introduced to a series of data analysis sheets to guide their thematic analysis of the data they had collected from the Matrix activity in the community-based consultations. The women and men worked in the small multi-stakeholder teams to complete the data analysis sheets for each consultation they had undertaken. They identified sub themes for each of the six thematic areas listed in the matrix. The combined findings were then presented to the larger group. The data from all the consultations was then combined in order to identify issues common to all camps. This enabled the range and frequency of issues to be recorded across the camps.

On the third day the groups presented the Storyboards that the women and men had prepared in the consultations and detailed the women and men's recommendations. In keeping with the projects' core aims, on the final day the women and men's recommendations related to addressing SGBV and supporting refugee women's leadership and participation were further explored. In addition to sharing and analysing data from the individual consultations, discussion also strongly focused on the participants' ideas for solutions. The discussion focused on asking the women and men to identify concrete recommendations for things that could be done to implement some of the women and men's ideas for solutions. In the final hour time was spent planning a process for reviewing the draft reports and convening future stakeholder meeting.

ANNEXE 1: LINKS TO SUPPORTING REPORTS

[Group 1 Data Analysis Report](#)

[Group 2 Data Analysis Report](#)

[Group 3 Data Analysis Report](#)

[Self-organised women's group Consultation Report](#)

ANNEXE 2: SUMMARY TABLE OF ALL PROJECT WORKSHOPS AND CONSULTATIONS

Trainings and consultations included

- Training of Trainer in reciprocal research Consultations x 4
- Community consultations in refugee camps with refugee women and refugee men, facilitated by local multi-stakeholder teams x 16
- Data Analysis workshops x 3

'Training of trainer' in reciprocal research methodology – 4 workshops, November 2019			
#	Location	Participants	Facilitated by
1	Cox's Bazar	47 participants: 9 local NGO staff, 19 INGO staff and 13 UN Staff, representing 25 organisations plus 6 interpreters.	Research team members from UNSW, CPJ, and APRRN
2	Refugee Camp	25 men participants: 16 Rohingya men from 8 camps 9 service providers from 8 organisations (3 NGO, 4 INGO and 2 UN Staff)	Research team member from UNSW with 2 interpreters and volunteer documenter
3	Refugee Camp	39 women participants: 20 Rohingya women 19 service providers (3 NGO, 8 INGO and 6 UN Staff, 2 not recorded)	Research team member from UNSW with 2 interpreters
4	Refugee Camp	34 women participants: 23 Rohingya women from 5 camps 11 service providers from 6 organisations (6 NGO, 3 INGO and 2 UN female Staff)	Research team members from CPJ and APRRN with 2 interpreters
	Totals	145 participants (86 from service provider organisations, 43 Rohingya refugee women and 16 Rohingya refugee men)	

#	Participants	Facilitated by
1X ²⁴	15 refugee women	2 refugee women, and 3 service providers (2 INGO and 1 UN)
2X	15 refugee women	2 refugee women, and 3 service providers (1 NGO, 1 INGO and 1 UN)
3X	15 refugee women	2 refugee women, and 2 service providers 1 INGO and 1 UN)
4X	15 refugee women	1 refugee woman, and 2 service providers (1 INGO and 1 UN)
5X	15 refugee women	2 refugee women, and 4 service providers 1 NGO, 2 INGO and 1 UN)

²⁴ The X and number in this list indicate that the camps have been de-identified. The number simply denotes that a total of 16 camp consultations were held and does not relate in any way to the camp number.

6X	15 refugee women	2 refugee women, and 3 service providers (1 INGO, 1 INGO and 1 UN)
7X	15 refugee women	1 refugee women, and 3 Xservice providers (2 INGO and 1 UN)
8X	15 refugee women	3 refugee women, and 3 service providers (2 NGO and 1 UN)
9X	15 refugee women	3 refugee women, and 2 service providers (1 INGO and 1 UN)
10X	15 refugee women	2 refugee women, and 2 service providers (2 UN)
11X	15 refugee women	3 refugee women, and 3 service providers (3 INGO)
TOTAL: 165 refugee women		

#	Participants	Facilitated by
12X	15 refugee men	1 refugee man, and 2 service providers (2 INGO)
13X	15 refugee men	3 refugee men, and 2 service providers (2 UN)
14X	12 refugee men	3 refugee men and 2 service providers (1 INGO and 1 UN)
15X	15 refugee men	1 refugee man, and 2 service providers (2 INGO)
16X	12 refugee men	3 refugee men, and 3 service providers (2 INGO and 1 NGO)
TOTAL: 69 refugee men		

Data analysis workshops - 3 workshops, February 2020			
#	Group #	Participants	Facilitated by
1	Group 1 3 - 5 and 9 February	19 participants: 6 refugee women, 4 INGO staff, 5 UN staff, 4 NGO staff	Research team members from UNSW and APRRN
2	Group 2 10 - 13 February	20 participants: 13 refugee women, 5 INGO staff and 2 UN staff	Research team members from UNSW and APRRN
3	Group 3 10 - 13 February	20 participants: 11 refugee men, 4 INGO staff, 2 UN staff, 3 NGO staff	Research team member from UNSW
Total participants		19 refugee women, 11 refugee men, 29 service providers (13 INGO, 7 NGO, 9 NGO)	