



Consolidated Data from Malaysia, Thailand and Bangladesh

[2019 – 2020]

***Refugee Women and Girls: Key to the
Global Compact on Refugees***

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Overview

This reference document highlights evidence collected from over 600 refugee women from 10 ethnic communities based in Malaysia, Thailand and Bangladesh between 2019 and 2021. This evidence speaks to the common experiences of women and girls as reported at all three sites. Recent work done in African Nations, Latin America and the Middle East also support these findings.

Given the strong focus on the importance of an Age Gender and Diversity¹ (AGD) approach in the implementation of the GCR, the women and men in each of the three countries completed an exercise using the AGD matrix as a tool of analysis. They examined the different impacts of seven thematic areas through the lens of eight diverse groups.

Their analysis clearly demonstrated the intersectionality of issues for each age group. They were very frank in naming problems and were very clear about root causes, and the structural issues which both caused and exacerbated the problems. While the intersectionality of the issues was clear in all thematic groups, the crosscut of SGBV, and the various barriers to participation across the majority of thematic areas were very stark.

The following data has been disaggregated on the basis of the seven key thematic areas and eight categories of diversity, listed as follows:

Thematic Areas

1. Sexual And Gender-Based Violence (SGBV)
2. Barriers To Participation And Decision Making
3. Education
4. Livelihoods And Jobs
5. Protection Capacity
6. Energy, Housing, Health, Food, Water And Infrastructure
7. Durable Solutions

Categories of Diversity

1. Girls 0 – 12 years
2. Girls 13 -17 years
3. Women 18 – 25 years
4. Women 25 – 50 years
5. Older Women
6. Women with a disability
7. LBTI Women
8. Single Women and Single Mothers.

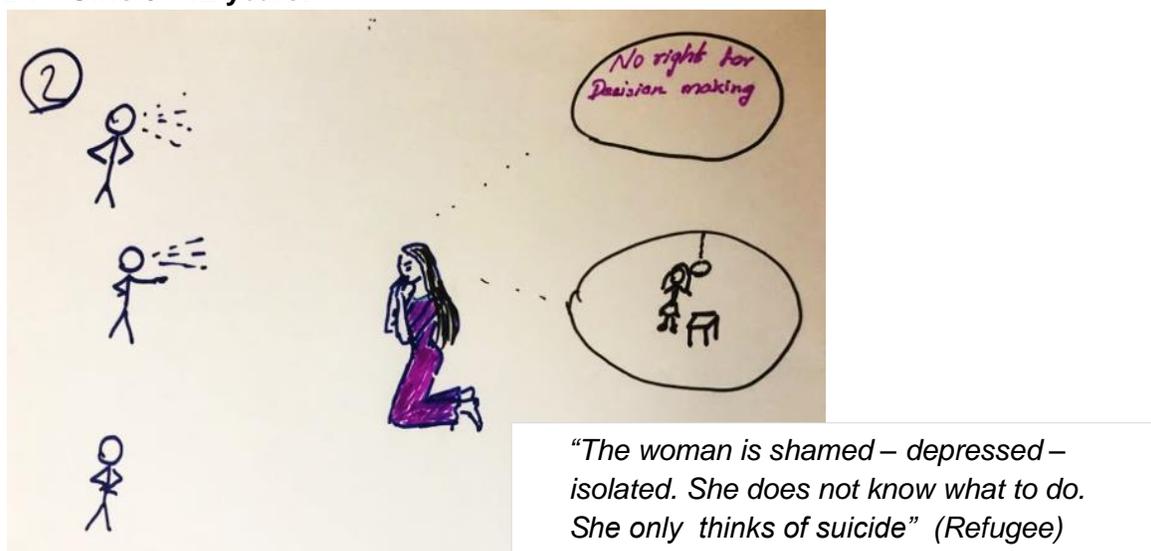
¹ For UNHCR's AGD policy, see <https://www.unhcr.org/5aa13c0c7.pdf>

Key Findings

Following the completion of the matrix activity as part of the reciprocal research methodology, refugee women and girls in each category of diversity reported the following findings against key thematic areas:

1. Sexual and Gender Based Violence (SGBV)

SGBV - Girls 0 - 12 years:



“For the kids, if they are abused physically or sexually ..it will affect the physical development and then it will remain black spot in their entire life ...but when she is older, a lot of people in her environment, women and men will judge her and that will affect her a lot. .. that kind of things happen when we don't have a safe school, a safe environment. And then, if they are pregnant they will be giving birth at a very young age. It will affect their physical development”. (Refugee woman 2019)

The women relayed many examples of young children experiencing sexual and gender-based violence. This included rape and sexual harassment by stepfathers, in particular when mothers had remarried to seek protection for themselves and their children; They are victims of severe family violence, including watching their mothers being abused. Risks of SGBV for children are increased by lack of parental supervision while they try to earn money. The impacts discussed included low self-esteem, dropping out of school, running away from home, poor mental health.

Of particular concern was the occurrence of Trafficking across all age groups, as was unsafe access to WASH facilities. 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 impact of these problems has serious implications for girl children in their future lives, as they create vulnerability to future SGBV and produce even more barriers to participation in decision-making.

SGBV - Girls 13 – 17 years:

Forced and early marriage is a major problem, and a major manifestation of sexual and gender based violence.



"This is a child, and she is playing with a toy. The father is with cane and he say "You will marry a man. And he arranged marrying. But this girl, she didn't know anything. Her body is not ready for marriage. She is waiting to grow up. Now she is crying, when the father came and she holding her doll because she doesn't know what the father is do." (Refugee Woman 2019)



"So what happened? - the girl she got in pregnant. Her body is not ready for pregnant. She is facing body problem. This man he don't love the daughter. Because her father give this man so she don't have any idea about marriage, any idea about the pregnant. And she is a child carrying another child. The man he beating the girl because he don't love. Finally she taking two decision: to make suicide; another one to take divorce."

The women described sexual violence in this age group as endemic. Many issues are the same as those for girls aged 0 -12. Girls who are raped and “shamed” often drop out of school and take whatever illegal work they can get to support their families. Levels of sexual violence in these situations are extremely high.

There is also a high incidence of child marriage (including forced marriage) and early motherhood. *“The other thing is dowry And we can say that, it’s a kind of selling girls and women. And it is mostly related to poverty. “*

These girls are often deserted by their husbands and left with children at a very young age. Many do not have the skills and knowledge to raise a child, which places their babies at risk. “They are too young to manage a family.” While early marriage is often attributed to ‘culture’, the women analysed its structural causes in their lives in Kuala Lumpur, including lower access to education for girls. It is exacerbated by the introduction of school fees and lack of other meaningful activities, high levels of sexual violence, poverty, and the view that marriage is a means of protecting young girls from rape and sexual harassment.

There were many complaints of sexual abuse in schools, by school bus drivers, and by fellow students, who felt they could act with impunity because of the attitudes of their teachers. Women also discussed that when very young girls give birth, the babies were often not documented because of shame.

“For teenage mothers, when they are not physically or mentally very strong, if they get pregnant they will tend to be more stressed, more depressed, and sometimes it can lead to suicidal thoughts. They will become afraid of going outside, they will be isolated” (Refugee Woman 2019)

“If something bad happens that they are going to just take it all out on the girl from the family so girls are used for honour killings as well. ...Yes, even here” (Refugee Woman, 2019)

Women 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. 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.

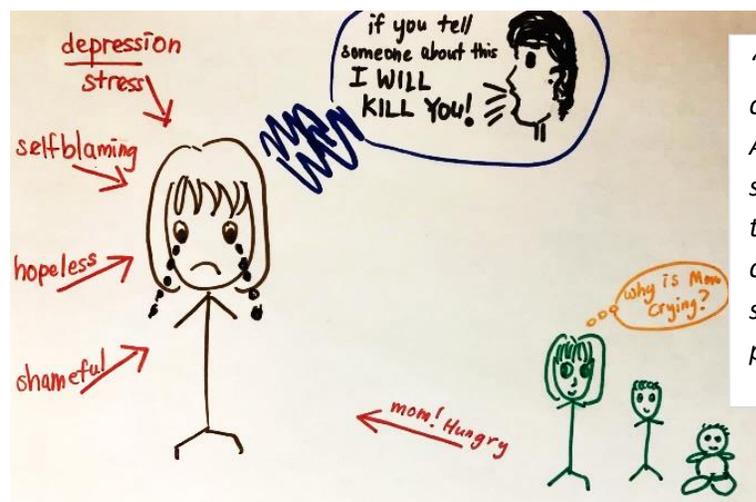


Mostly men are also jobless and have social expectation to provide for their family. They are very much frustrated about this situation. Their right to work has been taken away in the camps. This frustration is behind to be involved in many bad practice such as beating and ill behave with close family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

kind of practice negatively affect them and their family (Refugee man)

SGBV - Girls 18 – 24 years:

“Women are raped in refugee camps... then when they run, at borders...., then here in Malaysia...in schools...in jobs....in the market... by the police”
(Refugee Woman, 2019)



“Some women can sell her body to feed her children because there are no job opportunities. Also . . . when a woman faced rape she will be silent, she cannot talk. Because if she talks about that, she may lose her husband, she may lose her children and her community. But if she keep on silent she cannot get the solution for this problem SGBV”. (Refugee woman, 2019)

Once again rape and sexual abuse are endemic for this group, and women reported an alarming increase in domestic and family violence. Both married and single women are forced to seek illegal work which puts them in danger of sexual abuse. Women in this age group often have the care and responsibility of young children, and are unable to leave even severely abusive relationships. There is a chronic lack of safe longer- term shelters which means that many women who do flee for safety have to return to the abusive situation from which they fled.

The women also reported lack of access to justice for women who have experienced rape, domestic violence or other gender- based violence, with camp justice level responses described as completely inadequate. Many cases of abuse are not taken seriously by the male representatives. Women reported that rape cases taken to the Thai authorities are also often not taken seriously and sometimes result in further abuse or victimisation. This high level of impunity results in significant underreporting of SGBV.

Cyber-bullying is a growing problem in Malaysia, with men promising to marry girls, taking suggestive photographs, and then threatening to post them on line if the girls does have sex with him. Women stated that when they are sexually abused, victims often just remain silent. Sometimes they choose drugs, or suicide. If they have a baby from these abuses, some engage in survival sex to feed themselves. They don't participate in anything.

SGBV - Girls 25 – 50 years:

“Survivors of SGBV need mental health care. If we go for counselling and are sent to a psychiatrist, there is no counselling - we are given medication...they are handed to us like

candy. Women [who experience this] are like dead people – like walking zombies”. (Refugee Woman 2019)

Once again, this group suffers from endemic levels of domestic violence, The impacts are depression, despair and sometimes suicide. They also have less access to livelihood opportunities. Many have not completed their education, which makes them vulnerable to workplace exploitation and harassment. If they are widows or single mothers, the reduced food and other rations makes them even more vulnerable to sexual abuse. Some are forced into survival sex to support themselves and their families. This also happens to younger women. Their houses are not safe having neither front or back doors and unable to be secured, which is a further risk as building material supplies have also been reduced. This increases the risk of violence to women and girls.



“and if they run to a shelter, they can only stay one month, and then there is no-where for them to go, so they go back to that toxic place, to the hell” (Refugee Woman, 2019)

SGBV – Older Women:

Older women are often the victims of domestic violence, either directly or as witnesses of violence in the homes they share with their children. Some are seen as burdens by families already struggling to survive, and they are subject to both physical and psychological violence.

SGBV - LGBTI Women:

“for LGBT woman, in our culture and religion we really tend to deny and then ignore them in our society. And then for all those cases if you are abused sexually you will have sexually transmitted diseases and there is no cure, you can die”. (Refugee woman 2019)

This is a mainly hidden group because homosexuality is little understood or accepted. As well as being vulnerable to the abuses experienced by other women, they can endure additional layers of violence from the community. Many see it as against their culture and/or religion. Those who are identified as LGBTI endure both physical and verbal abuse and shaming. Due to the stigma that they suffer, they are even less likely to seek protection and justice than other groups when they experience violence, abuse and harassment.

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.

LBTI 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)

SGBV - Women with Disability:

The women reported that women and girls with a disability are stigmatised and discriminated against. They have less access to education and employment than other women and girls, and are consequently very vulnerable to SGBV. They suffer from very high levels of sexual abuse because of these issues.

“If they need to go out they have to take Taxis, and taxi drivers have raped women with a disability.”

In cases where a person with a severe disability has had a child of rape, they are often unable to care for the child. This affects their mental health and ability to cope at any level. It also puts an additional burden on their family.

SGBV – Widows/Single Mothers:

This appears to be a generic term used by the interpreters to cover widows and all single women with children. In spite of the many types of violence experienced by women, and the high levels of DV, and drug and alcohol addictions amongst the men, the women stated that “any man was better than no man, because without the protection of a man, a woman was vulnerable to sexual abuse in every part of every day”.

2. Barriers to Participation & Decision Making:

Barriers to Participation – Girls 0 – 12 years:

“And the more sad thing is that there is a stigma related to giving birth to a baby girl. If there is a new born baby girl, the family feels sad, they are just feeling dishonoured that we are making a baby girl” (Refugee Woman 2019)

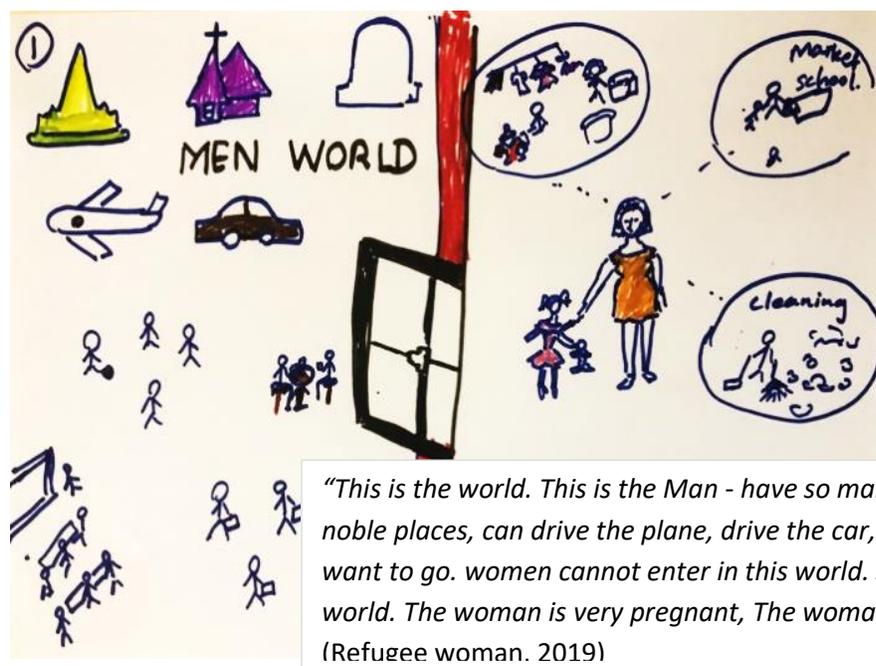
The main barrier to participation in decision making for this age group was identified as the cultural expectation that children should be seen and not heard. There is no expectation that girls would be allowed to participate in decision making.

Barriers to Participation – Girls 13 – 17 years:

Again, there is little expectation that girls in this age group should have any part in decision making. The women said that girls who did demonstrate some outspokenness or leadership are put down and discouraged from expressing their opinions. *“If a smart clever girl tries to do something, it is not seen as good, she is shamed and called a bad girl”*. Dropping out of school, early forced marriage and pregnancy also present huge barriers for their participation.

The simple fact of danger of harassment on the way to meetings stops girls participating – their parents do not like them going out alone.

“The more you are left out, the more you become incompetent. ... and the child feel that they don’t want to do anything for their life decision. Sometimes because they have been abused kids.” (Refugee Woman, 2019)



Barriers to Participation – Women 18 – 24 years:

“Our culture might stop us women and girls to be a leader, but that does not stop me to lead my community, my family and my own self!” (Refugee Woman, 2019)

Women reported that there is a cultural expectation that fathers make decisions on behalf of their daughters until they are married, then husbands take on that role. They said that this is very hard to challenge, and that women who do are often victims of domestic violence.

Women also take the major responsibility for child rearing, care for the elderly and disabled, and home duties. This is very time consuming and also precludes them from participating in meetings and training opportunities.

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.

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 teasing². 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).

² 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.

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 other influential male refugees, who are sometimes not trusted by the community, and who have very little gender analysis.

Barriers to Participation – Women 25 – 50 years:



“So here, the effects in this picture is represent all ... as a woman. This can impact the woman mentally and emotionally. She has a lot of negative thought, falling into [depression] because mental health is [affected]. Her children are crying and asking for attention. But she cannot do anything because her thoughts are consuming her and her mental health is affecting her” (Refugee Woman, 2019)

“Women are second class – they even have to eat after the men” (Refugee Woman 2019)

The situation of these women is in many ways similar to the women 18 – 24 age group. As their children get older and particularly in light of the reduction in rations and services, they are forced to work outside the camp illegally. They reported that the increase in drug use and alcoholism is widespread among men from these age groups, and this puts even more stress on the women to hold the household together, leading to even less time for participation in other activities, even if these were available. They reported depression, suicide and suicidal thoughts.

Barriers to Participation – Older Women:

In a reversal of the respect that the elderly would have expected as part of their culture, in the harsh conditions in the camps older women are often seen as a burden and discriminated against. Their wisdom is no longer sought or respected, leading to depression and despair. They are not even considered to have a role in decision making. If they are given a role it is that of child minding while their adult children work. *“First they spend their lives caring for their own children, then they end their lives caring for their grandchildren, they have no other life”*

Barriers to Participation – LGBTI Women:

Women who are known to be LGBTI are stigmatised and marginalised. This places a very big additional barrier to participation in decision making.

Barriers to Participation – Women with a disability:

This group is also stigmatised and marginalised. Additionally, those with physical disabilities are often unable to move in the camps due to lack of transport, wheelchairs and other aids, and the condition of the roads and pathways. Women and girls with mental illness are ignored, shamed

and at times confined to their homes. These situations effectively prevent women with disabilities from any form of participation.

Barriers to Participation – Widows/single mothers:

These women experience all of the barriers to participation listed above, with the additional stigma and burden of being a single mother.

3. Education

Education – Girls 0 – 12 years:



“This picture represents a Malaysian school for refugees—they force very young girls from age 3- to 12 to wear hijab, which is not related to Islamic religion, while boys can wear whatever they want. They wear hijab in the school but at home and outside they don’t wear hijab, which affects their personalities—becomes like double personalities. Sad girls in the school; happy and different appearance outside the school. And this will affect to make their confidence, lower confidence, also lead to lower educational level, confused children.”
(Refugee Woman. 2019)

Access to education was a major problem for all children and in particular for girls. Where family resources are limited often girls will be withdrawn from schools to assist with household chores while women go out to seek work.

Participants also reported incident of sexual abuse of young girls in the schools and on the way to school.

Education – Girls 13 – 17 years:

“education is more important for boys than girls. So if our family can afford only one child to send to school, then they will obviously send the boys [rather] than to send the girls”
(Refugee Woman 2019)

“We want them to go to school, but salary is not enough to pay the fees” (Refugee Woman 2019)

This group faces similar problems to those of younger girls. Girls in this age group (and even younger, as noted above) are often required to care for younger siblings and/or family members with a disability while their parents work, so cannot attend school. Lack of educational opportunities denies girls the protection this affords and contributes to early marriage and a cycle of disadvantage and violence for young mothers and their children. It leads to low self-esteem, loss of hope for the future, working in dangerous illegal jobs, and vulnerability to SGBV. It also fosters a loss of trust in adults in their community and of NGO service providers, who they see as often powerless to assist them.

“Girls miss opportunities for secondary education and vocational training because they are afraid of being sexually abused” (Refugee Woman 2019).

Education – Women 18 – 24 years:

Concerns were expressed that women and girls' lower access to education further entrenches gender inequality. This restricts opportunities to make decisions in their own lives, and to take leadership roles in their communities. Lack of education is a contributing factor to early marriage and its consequences; and in a vicious cycle, early marriage also prevents girls from completing their education.

“For these women, there is lack of any higher education opportunity”. (Refugee Woman 2019)

Education – Women 25 – 50 years:

By the time women reach 25, there is no opportunity for further education, nor remedial education to make up for lost opportunities. This ties women who have not had an adequate education to either home duties or illegal and dangerous work. It increases their vulnerability to SGBV and severely limits the possibility for leadership opportunities, participation and decision making. Participation in training offered is usually not available to these women.

Women identified that English language is the most important thing for them to get jobs or to have a future, but they don't have this opportunity. They reported that the available educational centres are very poor quality.

Education – Older Women:

It is generally considered that older women are not able to learn, and there are no education services to assist them. Women who are preliterate are not able to access written information. This increases their dependence on family and marginalisation and isolation from the wider community.

“As most of these women are illiterate, they need special centres to help them but there is no such chance”. (Refugee Woman 2019)

Education – LGBTI Women:

Unless women in this group are willing and able to hide their sexuality, the discrimination and violence they experience in all areas of their lives will also exclude them from accessing education and the multiple benefits and protection this can bring. Women reported that known LGBTI girls are stigmatised and shamed at school, which often leads to them dropping out of school.

Education – Women with disability:

There are few specialist services available to women and girls.

Education – Single women/mothers:

As noted above, single women (in particular single mothers) face extreme difficulties in procuring sufficient food and other basics for survival. They have neither resources nor time to access education, and most often are unable to raise the fees for their children to attend school.

4. Livelihoods & Jobs

Livelihoods & Jobs – Girls 0 – 12 years:

While livelihoods and jobs should not affect this age group, many young girls who are forced to drop out of school do informal work. There are many cases of exploitation and sexual abuse of young girls engaged in this work.

Livelihoods & Jobs – Girls 13 – 17 years:

Many girls in this age group are forced by circumstance to find work. Most of this is illegal and dangerous, for example foraging in rubbish tips or cutting bamboo shoots outside the camps. There is a high level of rape and sexual harassment in these situations. However, there is very little opportunity for these girls to gain access to training or stable livelihoods inside the camps. “They are too young to work, but not too young to be forced into marriage”. The women discussed the need for income generation and training for girls who are not able to attend school.

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.



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)

Livelihoods & Jobs – Women 18 – 24 years and 25 – 50 years:

The women discussed the fact that in all nine camps there has been a lot of vocational training courses provided by the NGOs. However, there are not markets in the camps for the goods they produce and they are not allowed outside. “They teach us how to weave, but we have no money to buy thread so we cannot produce anything”. “Even if they make something, who will buy from them?”.

They also reported that the training certificates they are given are not recognised outside the camps. It was agreed by all of the women that the only sustainable solutions to livelihood and

jobs are work rights, alongside permission to leave the camps and transport to available work. Without viable, legal livelihood opportunities, the women are dependent on humanitarian aid, which is shrinking because of “the reductions” and inadequate to cover basic needs.

“And also refugee women doesn’t report about SGBV cases at workplace because they are afraid that this won’t help because they are refugees and also the employer may blackmail her that ‘if you report to police they might arrest you because you are working here illegally’. So women have to keep silent” (Refugee Woman 2019)

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.

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 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.

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)

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 influential male refugee community members.

Who have relation with influential male refugees, 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)

“She is pregnant .., so she has to go to work. She has to leave the children alone without any supervision, without any education because there is no day care. She is at the chance of SGBV by the owner, by the boss, even though she is pregnant. So this is how these problems affect this woman’s life” (Refugee Woman 2019



Livelihoods & Jobs – Older Women:

The major work opportunity for older women is to care for their grandchildren. It was mentioned that they are seldom if ever given opportunities for livelihood training, despite having many skills, both due to cultural reasons, and as long term survivors in the camps.

Some elderly women and men and divorced (‘abandoned’) women, are forced to beg.

Livelihoods & Jobs – LGBTI Women:

Unless they elected to keep their sexuality hidden, stigma and marginalisation excludes LGBTI women from training and job opportunities.

Livelihoods & Jobs – Women with disability:

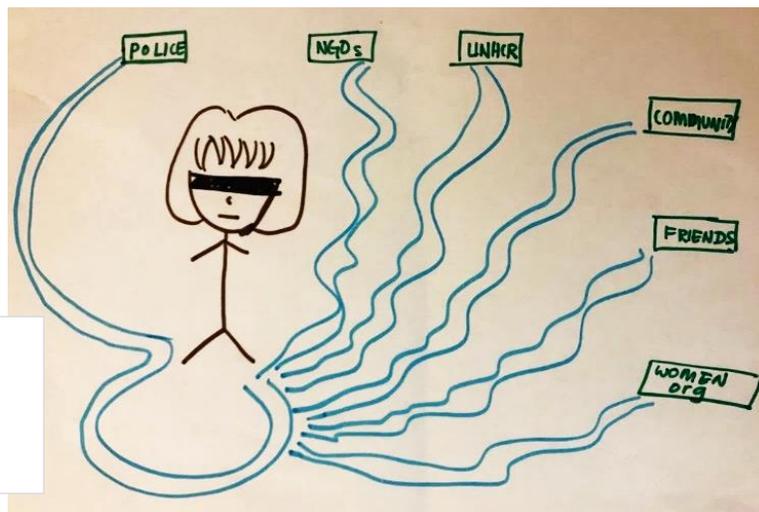
Lack of access to education, marginalisation and structural barriers all combined to exclude women with a disability from job opportunities, even though some of them have high levels of skills and knowledge. *“They might be very good at weaving or know a lot but [because they have a disability] no-one listens to them”.*

Livelihoods & Jobs – Widows:

This group was identified as one of the most impoverished and vulnerable groups, facing enormous challenges to keep themselves and their children alive. For reasons cross cutting all of the themes they were unable to access training or safe and legal jobs.

5. Protection Capacity

“There is help – but unfortunately, she cannot see because she is blinded by fear, by all the worry and shame and trauma.” (Refugee Woman, 2019)



In addition to SGBV and Barriers to Participation, the major cross cuts are with education, solutions, and energy and infrastructure.

Apart from the specific examples mentioned below, the issues discussed in this theme covered all groups, including age groups up to and including the elderly, women with a disability, LGBTI women and widows.

The fact that the Governments of Malaysia and Thailand, despite generously hosting refugees for over thirty years, have still not signed the 1951 Refugee Convention makes the refugees feel very insecure. They requested that a strong case for signing the Convention be advocated to the Malaysian and Thai governments, as a pathway to realising more of their human rights.

There was concern that the international community is not aware of the very serious humanitarian crisis developing on the border because of the reductions in aid, and a plea that they be made aware of and respond to this. They requested that there be no further cuts to essential services, which are currently all providing less than a minimum standard of services, until it is safe for the camp population to return to a secure future in Burma/Myanmar.

The women reported numerous examples of lack of access to justice systems and the protection offered by There were also some disturbing reports of harassment and sexual abuse by authority figures leading to a serious under-reporting of SGBV and pervasive impunity for perpetrators. The women reported that they felt that SGBV, in particular domestic violence, was often not considered as or treated as a criminal act.

Finally, the women and the service providers commented on the lack of data, or “evidence” collected on the key issues that affect them. They perceived this as a major barrier to addressing the problems.

Protection Capacity – Girl 0 – 12 years:

*“First I want to advocate for my documents – legal documents which I don’t have.... For me and my children. Next advocate for me is education – the right of education for our children because they are our next generation and I don’t want them to be like us – uneducated! “
(Refugee Woman 2019)*

Despite the work undertaken by Thai human rights activists to guarantee the right of every child born in Thailand to be issued a birth certificate, in some cases and in some camps, there is still not universal access to birth registration. In other cases, documents have been lodged with officials in the camps, and a year later, parents have still not received a Thai birth certificate. Refugees are usually unable to leave the camp themselves to go to the MOI to arrange this. In other cases, there are older children who for some reason do not have birth certificates, which has serious ramifications for their access to services and durable solutions. The refugees asked that steps be taken to remedy these problems which are causing a lot of anxiety to parents. Many of the participants, who are women leaders, did not have full information about birth registration and the issuing of birth certificates. They requested that this be made available to all parents in all camps.

Protection Capacity - Girls 13 – 17, Women 18 -24, and Women 25 – 50 years:

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 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.

Women discussed how lack of adequate protection services and access to justice for parents who suffered from sexual violence often rebounds on children, who witness violence in the home and are often the targets of violence.

“A woman was raped by her violent husband and became pregnant, they could not even feed the children they had, and had no money for healthcare. She went to the hospital and begged for an abortion, and was told “You should have thought about it before you had unprotected sex – so it is your fault and you cannot have an abortion” (Refugee woman 2019)

6. Energy, Housing, Health, Food, Water And Infrastructure

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 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 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, 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.

Girls 0 – 12 years:

Unsafe shelter was discussed as the major problem for all age groups including young girls. Refugees cannot afford to rent homes by themselves so are forced to share housing often with strangers. Children left alone while their parents work, and who cannot attend school are at high risk. There are no safe spaces where the children can go to play. 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.

Women discussed how the reduction in health services, and the decrease in the number of hospitals had a major impact on babies and young children. Camps are so widely spread that they reported that children with fever sometimes went into shock during the long journey to a hospital, and that some people had died, because they could not access medical care. Vaccination programs receive supplies to match the number of registered refugee children, but because unregistered refugees and people from the host population also access the hospital, some children are not vaccinated. The low level of food rations is affecting the health of all children, with cases of malnutrition starting to appear.

Girls 13 – 17 years:

As above, and it was reported that many children of this age could not attend school because they had to work to assist provide their families with basic goods. Again this was seen as a contributing factor to early marriage.

“ If these girls are raped an become pregnant .. because they are too small and get damaged...often they need to spend a long time in hospital and their families cannot afford this”. Refugee Woman 2019

The reductions in humanitarian aid are leading to a much higher rate of child and early marriage and its consequences, including girls too young to give birth, bearing children. The loss of hospitals and distances which need to be traversed to reach them mean that very young pregnant girls are not getting the pre-natal support (or nutrition) they need. Girls are also beginning to show signs of malnutrition. Young girls often are allocated the task of collecting water, and this puts them in danger of harassment as they move through the camp and wait in queues. Teenage girls are reacting to the pressures and showing signs of anxiety and depression or going out of the camp to work illegally in places which exposes them to high risk of sexual exploitation.

Women 18 – 24 and 25 – 50 years:

Participants discussed problems in being able to get enough rations and cash to survive. They were often requested to provide sex to landlords.

“The owner’s brother asked her ‘You are a refugee, how you are rented the house?’, so she said ‘Your sister already know about this’. So the police offer said ‘OK, you can stay our house rental period if I ask to sex with me you can continue stay in the house’” (Refugee Woman, 2019).

It was discussed that only having a UNHCR card as identity made women very vulnerable to this sort of abuse, as the landlords thought they could abuse them with impunity, and there is a high level of difficulty in securing rental accommodation.

The women reported that at times they could not get enough food for their families, or medicine or transport. While they did have access to local hospitals, they discussed being sexually abused by guards and medical personnel.

“.. sometimes the Doctors do the harassment – This is really happen!”. (Refugee Woman 2019)

Often women could not afford medication and this forced them to take and to remain in employment where they were being sexually abused but saw no alternative.

“These women are of childbearing age, and there is no affordable health care for them, so things go wrong” (Refugee Woman 2019)

Women reported that there was only short term shelter available for women fleeing violence. This was also not safe, with many cases of rape and harassment in the shelter.

“They are advised to go and find a job, but if they do, there is no-one to look after the children. They just have to leave them in an unsafe space while they work. After one month the women have to leave and often return to their abusive husbands because they have nowhere else to go”.

Reductions in energy provision and Infrastructure have been exacerbated by the reductions of services. In the dry season, women and children often queue all day to find that there is no water when they get to the front of the queue. Some are having to scavenge for food. The standard of housing is deteriorating because of lack of building materials. Inadequate charcoal supply means that if a family cannot reach the few filtered water pumps, they are not able to boil the water they drink, unless they leave the camps to forage for firewood. These conditions are forcing many women to work illegally outside the camps. Others are resorting to survival sex as a means to feed their families. The inadequate supply of all basic provisions is causing stress, family conflict and mental health problems, and women reported a large increase in suicide and suicidal thoughts. The large increase of drug and alcohol use and its impacts was a major theme. Women reported that while it is mainly a male problem, some women were also using drugs and alcohol, and so the impacts cut across all age groups. It is having an extremely negative affect on family life, causing an increase in DV, and using scarce family resources. Younger children are taking the example of their older siblings, and starting to take drugs at an early age. This all increases the burden of responsibility already carried by the women. The lack of building materials is leading to constantly decreasing standards of shelter, made worse in the wet season, and increased insecurity in the refugees' homes.

Older Women:

As already marginalised and stigmatised groups, the participants saw the situation of these women as very similar. They experienced additional difficulties because of the reduction in humanitarian aid to those living in families, and suffered more SGBV when trying to fulfil their most basic needs. It was reported that even if they could acquire building materials often there was no-one to assist them to repair their houses. The elderly and those with disabilities were often isolated because of the poor state of roads and pathways.

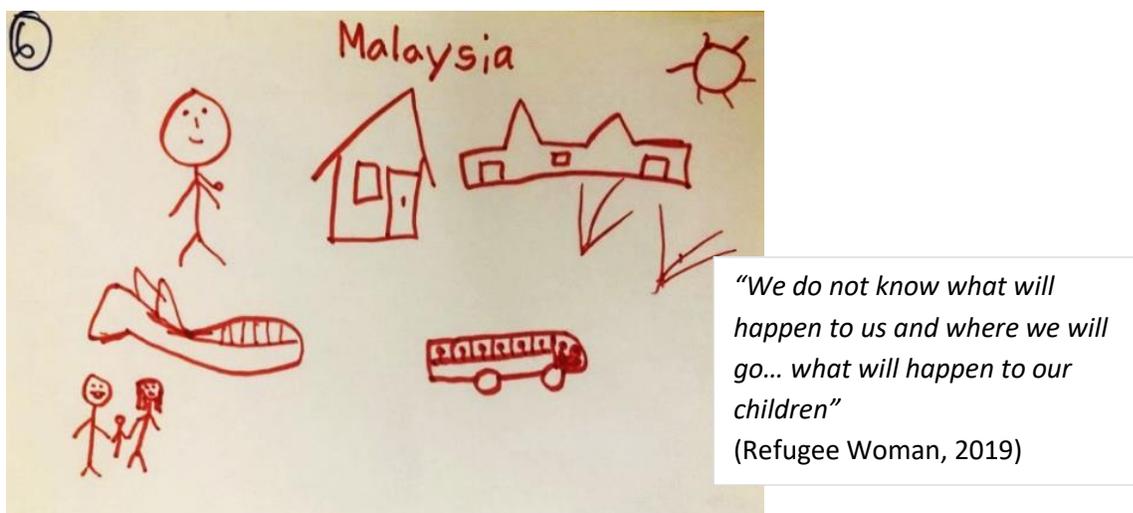
There are no specialised physical or mental health care services available to this group, many of whom have been in exile for years. They have a lot of health issues but cannot afford to get help.

LBTI Women

As already marginalised and stigmatised groups, the participants saw the situation of these women as very similar.

7. Durable Solutions

The major cross-cut for this theme for the women was with protection capacity, as an uncertain future looms large in their minds.



Women raised statelessness, or the perception of statelessness, as a key problem which affected women across all categories. being a citizen of any country.

“We need a document which gives us a state, to be a citizenwe are not able to live in our country as we are living here. We are still blessed and thankful to Malaysia. That is another reason why we really want to contribute for that. We also thankful to NGO to UNHCR who help us to stay in this country. we are really thankful that we were able to live in this country, breathing—in our country, if we were in our country we would have been killed, chopped, burned alive. So we are thankful to be in this country.. . . . At least if we have that document we can be standing on our own feet.

Because of not having this document, we are not allowed to work if we request a job we are not accepted, we cannot study, cannot go to school. Because of not having documents, it's hard to survive. It is so many big issue to being undocumented, we are not even accepted in hospitals” (Refugee woman 2019)

“We are able to bring benefit to this country – we can be contributors” (Refugee Woman 2019)

Durable Solutions Girls 0 – 12 and 13 – 17 years:

Durable solutions for children were entirely in the hands of their parents. There were reports of family violence and despair when children asked parents why they had brought them to this terrible life, and requested to go back to their home country even though most had been born in the camps.

Durable Solutions - Women 18 - 24 and 25 – 50 years and Widows:

Mature women across these age groups reported that they had little choice in major decisions on Durable Solutions. Most married women are dependent on the decisions and status of their husbands. Lack of education and family violence which exacerbate the lack of opportunities for participation in decision making render them silent. Only a small number of extremely vulnerable single women have access to resettlement. All discussed the fear of forced return. They requested more information about what was happening from the governments, UNHCR and NGOs. Women stated that they are often not given information and that even their fathers and husbands could not access this at times. This leads to rumour, misinformation, myths and speculation, which causes disquiet, mistrust and a sense of hopelessness. Unfortunately, this in turn contributes to an increase in family disharmony and antisocial behaviour. The women stated the need for a guarantee of security and an end to conflict before they can consider returning to their home country. In addition to this they demanded adequate infrastructure for return, including involvement in planning meetings and training for return, citizenship, identity cards, travel documents, safe housing, decent education systems which recognised the certificates gained in the country of stay, proper health services and livelihoods. They also requested support for up to two years after return to enable them to rebuild their lives. Above all they wanted a place at the planning and decision-making tables, to put forward their analysis and suggestions for the future.

Durable Solutions – Older Women, LGBTI Women and Women with Disability:

The participants noted that these very marginalised groups had little or no say in the major decisions which will shape their future. They were totally dependent on the males in their families to make these decisions, and were usually given no information about their options, and what was happening.

Key Resources

1. Refugee Women and Girls: Key to the Global Compact on Refugees: Bangladesh Final Report
2. Refugee Women and Girls: Key to the Global Compact on Refugees: Malaysia Final Report
3. Refugee Women and Girls: Key to the Global Compact on Refugees: Thailand Final Report