Stories of the Rohingya Refugees

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The Rohingya population have faced decades of systematic discrimination, statelessness and targeted violence in Rakhine State, Myanmar. As of January 2019, over 900,000 stateless Rohingya refugees are residing in Ukhiya and Teknaf Upazilas with the vast majority living in 34 extremely congested camps. The largest single site, the Kutupalong Balukhali Expansion Site, hosts approximately 626,500 Rohingyas. While the overall humanitarian response endeavor reports that the conditions in the camps have achieved stability, the severity of the crisis and the limits on humanitarian programming mean that activities remain, more or less, oriented towards meeting immediate needs. The COVID-19 pandemic has added further complexity to the operational challenges involved in the response. The spread of the virus within the camps would no doubt lead to an unmanageable tragic and catastrophic human disaster of immense proportions. Rapid case stories are being collected to understand social behaviors and changes in practices if any, the stigma associated with the virus, the concept of "social distancing", and their overall understandings of the pandemic itself.

Health Systems and Service Delivery

In Bangladesh, healthcare is offered either through government-run hospitals or through privately-run clinics. Bangladesh is still lagging in health care services for the poor as well as the affluent. The most critical challenge faced by the health system in Bangladesh is in the area of human resources, with the 2007 Bangladesh Health Watch report stating a staggering shortage of over 60,000 doctors (the current figure stands at 31,000 physicians), and a deficit of almost 140,000 nurses. Moreover, Bangladesh has one of the worst nurse-physician ratios in the world. Eighty percent of the population still seek their first line of care from informal healthcare providers such as traditional healers, faith healers and community health workers. Absenteeism, inefficiency, and weak governance are common traits within the current health infrastructure. Considerable challenges remain in improving the population health status, reducing health inequalities, improving quality of care and public satisfaction with healthcare, and increasing the efficiency and sustainability of service-delivery agencies. This fragile situation has considerably worsened in the context of the Pandemic.

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