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Uncertainty at Rohingya Camps: Health Crisis of Rohingya Refugees in India Amid COVID-19 Pandemic

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ABSTRACT

Introduction: Literature indicates that Rohingya refugees health has been severely impacted and effected by the novel corona virus disease (COVID- 19) in India.

Aim: The aim and objective of the paper are to explore the risk factors faced by the Rohingyas refugees in India during the novel coronavirus (COVID- 19) crisis.

Methods: A detailed and related Review of the literature of the previous work has been collected to extract the information about the vulnerable conditions of Rohingyas refugees in India amid novel coronavirus. Tables have been presented to highlight the issue. The paper is based on a qualitative research design. Data has been collected from official reports, documents, newspapers, journal articles, books based on Rohingyas refugees in India.

Result: The evidence suggests that in overcrowded places or camps, COVID-19 viruses can spread more rapidly. Various international agencies and humanitarian organizations have adopted numerous preventive measures to curb the virus at the refugee's camps in India. However, the Government of India has declared Rohingyas as illegal immigrants into India

Conclusion: The paper will conclude with suggestions or recommendations to curb the virus to spread among the Rohingyas communities in India.

Key Words: COVID - 19, Crisis, Health, India, Rohingyas

INTRODUCTION

The world is facing an unprecedented crisis, namely COVID-19 also known as Novel Coronavirus disease, which is resulting in thousands of deaths in the world. In December 2019, the virus originated from Wuhan in the Hubei province of China and soon spread globally. On March 11, 2020, the World Health Organization (WHO) declared COVID- 19 a pandemic disease.¹ The outbreak of a large-scale infectious disease has also spread to most of the South Asian countries. South Asia, being one of the most populated regions of the world comprising of the least developed nations of the world. India is one of the most populated countries in the South Asian region and such a country, it becomes difficult to combat the virus from spreading in the community. Though, in such populated countries, various refugees are residing in India such as Rohingya Refugees.²

Rohingyas are living illegally in India and the Government of India has denied them the status of refugees and they are continuously portrayed as “illegal immigrants.” India is hosting more than one million Rohingya refugees who fled from Bangladesh and Myanmar. However, many refugees are currently living in shelters that are overcrowded refugee camps. Maintain preventive measures such as social distancing, wearing the mask, washing hands and feet with soap are impossible for Rohingya refugees because they are living in such unhygienic and congested camps.³

While reviewing some of the available data on this subject, it was found to be inadequate as the pandemic is an evolving crisis that is still to be observed by social science researchers in terms of its impact and trajectory. In India, there are a large number of vulnerable populations living in overcrowded places and COVID- 19 is now a litmus test that how a country has overcome lethargic tendencies

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towards Rohingya refugees. This has particularly affected Rohingya refugees that reside in informal settlements, squatter camps, overcrowded places and the absence of social distancing in such camps. Due to the novel coronavirus outbreak, Rohingyas met with social crisis and discrimination on medical grounds in the host communities.⁴

The Government of India has implemented \$2 billion packages for the COVID-19 Emergency Response and Health System which facilitates for the public. However, in such schemes, Rohingya refugees are not even mentioned. However, it has been observed that Refugees are often considered carriers of the virus.⁵ The health care personnel and social service personnel are interconnected to protect the life of the individuals. Though, in such COVID- 19 pandemic era, the life savings medicines are available based on the proof of Aadhar Cards of the individuals. Even medical centres asked for proof of permanent residence to contact and trace the people.⁶ Though, Rohingya refugees lack even this provision.

This paper is based on a review of the literature. Title and abstract were screened carefully and studies that are related to the paper were included. Initially, 30 articles were selected, some of them were found unrelated and some were duplicate. Hence, they were excluded from the study. Only full-text articles were reviewed by the authors and finally, 18 articles were selected for this study. After reviewing such articles, a gap has been found that Rohingya refugee's health is more vulnerable due to the risk of COVID- 19 pandemic, as compared to the other communities living in India.

Research Questions

The research intends to seek answers to the following research questions. These are:

1. Why Rohingya's health is extremely vulnerable to COVID- 19 pandemic?
2. What are the other health issues of Rohingya Refugees in the current pandemic phase?

METHODOLOGY

A detailed literature survey of previous work has been collected to extract the information about the vulnerable health conditions of Rohingyas refugees in India amid novel coronavirus. Tables and diagrams have been presented to highlight the issue. The paper is based on a qualitative research design. Data has been collected from official reports, documents, newspapers, journal articles, books based on Rohingyas refugees living in India during COVID- 19 pandemic era.

RESULTS AND DISCUSSIONS

Risk of COVID- 19 on Rohingya Refugees in India

The novel Coronavirus disease (COVID-19) is spread to almost the entire world. In early March 2020, the World Health Organization (WHO) declared novel coronavirus (COVID-19) as pandemic disease. In India, numerous Rohingyas refugees are living in very congested and unhygienic camps with a dense population,⁷ of who carries the risk because they lack access to clean water, adequate sanitation system and medical facilities. India is facing a very uncertain future for the Rohingya refugees.⁸ Lack of COVID- 19 testing and medical facilities led to the spread of the virus very rapidly in the Rohingyas camps in India.⁹ As a result, it can lead to a risk of community transmission in the country. The Rohingya refugees' camps are more prone to COVID- 19 infections because of the compact area and practically it is difficult to follow social distancing, hygiene rules and physical isolation etc. in such camps. (Figure 1). So, it is the biggest challenge to maintain social distancing at Rohingya refugee camps. In India, Rohingya refugees lack awareness and have insufficient knowledge about the symptoms of novel coronavirus (n- COV 2019). There are some other factors also that lead to the risks of community transmission.¹⁰ On the other hand, some Rohingya refugees hold a belief that COVID- 19 is a punishment sent by Allah.¹¹ Rohingyas have a misconception that if they get infected by the virus they would be taken away by the Indian citizens and killed or might attack by them.¹²

Little access to healthcare

In India, Rohingyas refugees are living in uncertain conditions and they have to face many barriers to access public health and social services. This implies the future hardship of vulnerable communities like Rohingya refugees. (Figure 2). These aspects significantly complicate the efforts to combat the COVID-19 pandemic in such a populated country.¹³ The increasing number of cases is raising a grave concern about the future trajectory of the outbreak.¹⁴ Due to the outbreak of coronavirus, Rohingya's camps became weaker with the health system and poor baseline health status of the refugees.¹⁵ In an overcrowded place with a few public bathrooms are shared between wall to wall, in this way the virus can spread more rapidly and more easily.¹⁶ Another, the major risk faced by Rohingya refugees in India is the lack of resources like medicines, face masks, gloves and soaps. COVID- 19 Pandemic posed a substantial financial burden on the poor populations and the immigrants.¹⁷ Due to economic hardship, Rohingyas refugees have been exposed to prolonged mental health conditions in refugee camps.¹⁸ Rohingya refugees faced a lack of clean drinking water supply. World Health Organization predicts that people affected by

novel Coronavirus disease (COVID-19) and some additional diseases such as tuberculosis are confronting the worst situation of a country. It is considered that tuberculosis and malaria are highly prevalent in refugee populations.¹⁹ Though, the vulnerable Rohingya refugees in India continues to be at the highest risk for exposure to COVID- 19 Pandemic.

Current Health Status of Rohingya refugees in India

Apart from COVID- 19 disease, Rohingya refugees in India are suffering from other such diseases as well. According to WHO 2020 data, nearly 54% of Rohingya refugees children, 60% of Rohingya refugees women and 10% of Rohingya refugees pregnant women's are residing in India. According to a study, the major health problems prevailing among Rohingya refugees are unexplained fever (2,27,928), acute respiratory infection (2,23,651) and diarrhoea (1,92,560). In August 2020, the Rohingya refugees camps located in India are experiencing a sudden outbreak of diphtheria and measles were also spread among the community in June 2020. (Table 1). In India, the cases of tuberculosis (TB) in Rohingya refugees camps are highly prevalent among the vulnerable Refugees, because Myanmar is one of the top 30 countries with the highest TB has ridden country.²⁰

According to a report of September 2020, it is estimated that in India approx. 51.5 % had hypertension and 14.2% had diabetes. Additionally, 36,930 refugees were suffering from injuries. Most of the Rohingya refugees in the congested camps are addicted to alcohol, tobacco etc. Nutritional deficiencies are exceedingly predominant among Rohingya refugees, particularly among children. In Rohingya refugees camps, it is found that children aged among six to 59 months are anaemic and one-fourth had Global Acute Malnutrition (GAM).²¹

MEASURES TO BE TAKEN

The International Organizations and the Government of India should address the prevailing conditions of Rohingya refugees and must provide humanitarian assistance to the vulnerable communities in India particularly the Rohingyas. In the COVID- 19 pandemic phase, it is necessary to provide services and assistance to lactating mothers, pregnant women's and their reproductive health as well as to offer adequate provisions for the newborn child, particularly for Rohingya refugees. International health experts have to be prepared to guarantee satisfactory health promotions, advancement of cleanliness, and a domestic visit to pregnant Rohingya refugee women's.²²

During the lockdown phase, many of the Rohingya refugees faced mental health issues. So, International organizations must provide mental health services to Rohingya refugees. It is essential to provide proper and detailed information to Rohingya refugees about the risk factors related to COVID- 19

pandemic. In the current phase of the COVID- 19 pandemic, a quick measure need to be adopted for the upliftment of the refugees and it is necessary to provide reliable solutions that remain paramount.²³ Most of the Rohingya refugees has been illegally migrated from Bangladesh to India. So, both countries must also take proactive measures to stop infiltrating the migrants.

Thus, International Organizations should pay more attention to the collection of data. Rohingya refugees situation is aggravated due to financial constraints and unhealthy livings conditions in congested camps. All these factors worsen their access to health care facilities, making them prone to various dangers of life and diseases that can easily flare up in the camps. Thus, the Government of India and International Organizations should collaborate to assist and improve the health status of Rohingya refugees.

CONCLUSION

The paper is based on a Review of Literature. We emphatically prescribe context-specific procedures to address the health issues of the Rohingya refugees in India. COVID-19 undoubtedly had a significant adverse impact on the everyday existence of the entire human society. Moreover, the COVID-19 has been declared as a pandemic disease by WHO in March 2020, which highlights it as a global threat, calls for a global response. India is one of the most populated countries in the South Asian region and various refugees are residing in India. In such countries, it becomes difficult to combat the spread of the virus. In India, Rohingya refugees are living illegally and are living in such congested and unhygienic camps, where they are prone to more risk of the virus. Rohingyas must be equipped with necessities such as safe food and water, a hygienic environment, and the essential proper awareness about the COVID-19 crisis must be provided by the Government of India and International Organizations. After recognizing all the problems and several severe consequences for refugees, there is an urgent need to take care of Rohingya refugees in India.

Conflict of Interest- There is no conflict of interest carried out in this research paper.

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AUTHORS CONTRIBUTION

Nancy Puri contributes to data collection and analysis of research data and is responsible for the findings of the article. Dr. C.R. Akhouri studied the concepts in the article.

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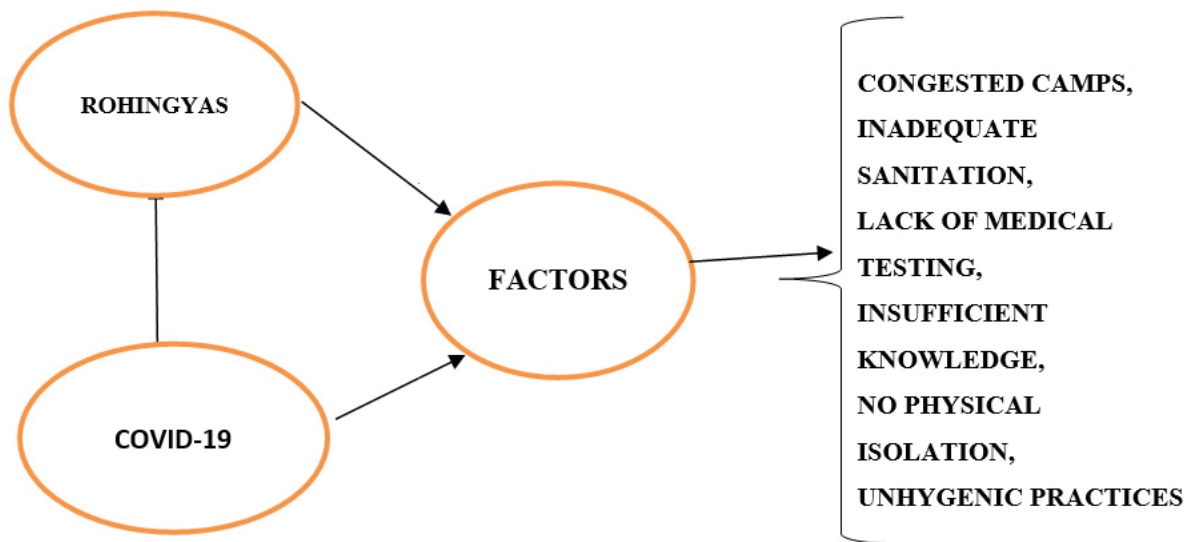


Figure 1: Factors affecting COVID- 19 at Rohingya Refugee camp.

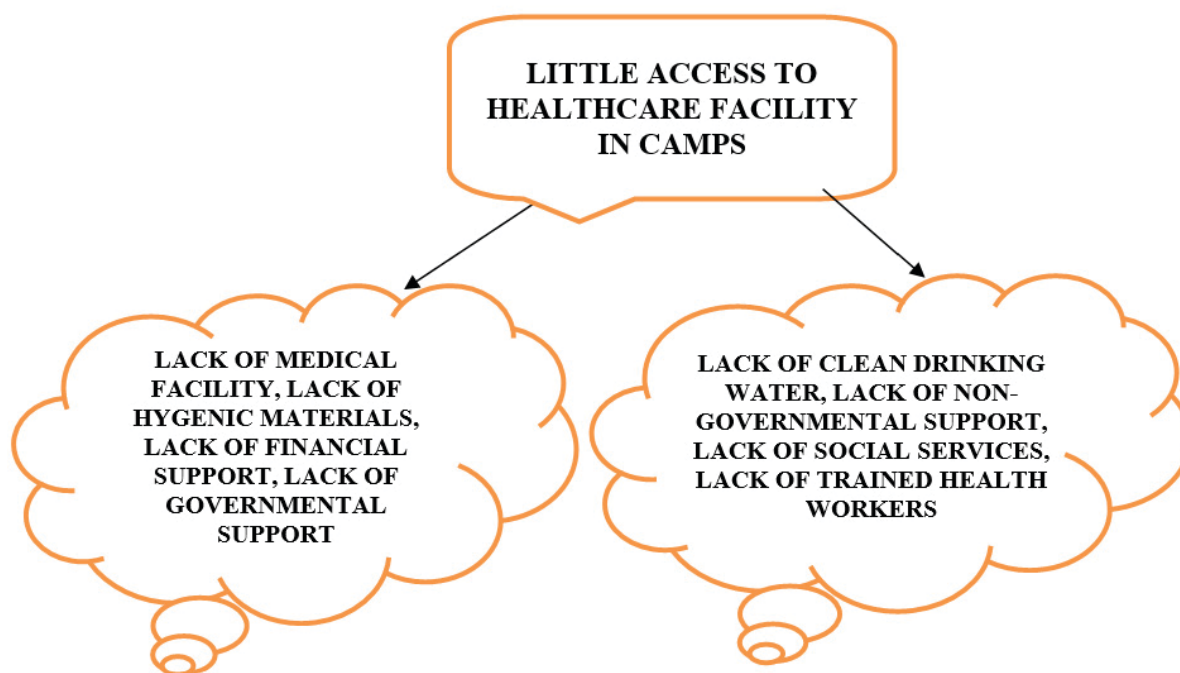


Figure 2: Little access to Healthcare in camps.

Table 1: Health crisis faced by Rohingya refugees in India (source- www.unhcr.org/india)

TYPE OF DISEASE	AFFECTED POPULATION	TOTAL CASES
Unexplained Fever	Adult, Children	2,27,928
Acute Respiratory Infection	Adult, Children	2,23,651
Diarrhea (watery & bloody)	Adult, Children	1,92,560
Malaria	Adult, children	53
Measles/ Rubella	Adult, children	1,410
Diphtheria	Adult, children	7,772 (42 deaths)
Tuberculosis	Adult, children	4,000
COVID- 19	Adult, children	Data not available