UNHCR The UN Refugee Agency | Bangladesh

A UNHCR staff member is leading a focus group discussion with women and girls during a participatory assessment. The setting is a modest community center, where the interviewer is attentively listening while other colleagues take detailed notes. @UNHCR

PARTICIPATORY ASSESSMENT REPORT

ROHINGYA REFUGEE RESPONSE

April 2025

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Executive summary

In March 2025, UNHCR conducted a participatory assessment (PA) with refugees and implementing partners in six camps and Transit Centers in Cox's Bazar, Bangladesh. The objective was to better understand the perceptions, concerns, solutions, capacity and priorities of refugees—especially women, children, older persons, persons with disabilities, and members of minority groups—through direct engagement and qualitative discussions.

Key findings across outcome areas reveal persistent challenges related to protection, access to services, and overall well-being. **Gender-based violence** remains widespread, with intimate partner violence and child marriage frequently reported. Participants expressed concern about underreporting, stigma, and lack of safe reporting mechanisms. Despite these risks, community-based actors are raising awareness, and women expressed a desire for greater empowerment and education.

Child protection risks remain high, including the prevalence of corporal punishment in schools, child labor due to economic hardship, and increasing substance abuse among boys. While families and volunteers are working to mitigate risks, children remain vulnerable to exploitation and harmful practices.

Access to education remains a major concern. Participants cited poor teaching quality, lack of certified learning pathways, and restrictive cultural norms, especially for adolescent girls. The absence of secondary and tertiary education options has led to frustration among youth. Community members called for expanded education services and safe, inclusive learning environments.

Concerns about **safety and justice** were raised in nearly all discussions. Overcrowded camps, lack of lighting, movement restrictions, and limited access to legal remedies were frequently mentioned. Many participants expressed awareness of trafficking risks and the presence of smuggling networks.

Community engagement efforts face persistent barriers, particularly for women and religious minorities. Leadership structures remain male-dominated, and awareness of community feedback mechanisms is low. Participants called for increased female leadership and equitable access to decision-making spaces.

Participants who discussed access to territory and documentation raised concerns about **pushbacks at border**s and difficulties in obtaining clear, transparent, and fair **registration**. Many expressed deep frustration over the lack of legal pathways to citizenship or long-term solutions.

Health services, though available, were reported as under-resourced, lacking medicines, and unable to provide adequate consultation time. Mental health concerns were underreported but surfaced in multiple FGDs. Communities requested better staffing, respectful treatment, and more psychosocial support.

Access to clean **water, sanitation, and hygiene** services remains uneven across camps. Participants reported water shortages, especially during dry seasons, as well as a lack of gender-sensitive WASH infrastructure. Refugees requested more latrines, water points, and consistent maintenance of shared facilities.

Food insecurity and insufficient basic assistance were widely reported. The recent reduction in food assistance has pushed many families into negative coping strategies, such as skipping meals or selling rations. Community members emphasized the need for increased food support and improved communication about assistance schedules.

Shelter and settlement conditions, particularly for those living in host communities or minority groups, were reported as overcrowded and unsafe. Refugees called for better infrastructure, access to solar lighting, and support for improving the physical conditions of their homes.

Despite these challenges, the assessment also highlighted strong community cohesion, mutual support systems, and a desire among refugees to lead change, especially for women and youth. Community volunteers and protection actors remain key entry points for strengthening protection and resilience.

The insights and recommendations from this Participatory Assessment will inform programming, advocacy, and coordination efforts aimed at enhancing the dignity, safety, and well-being of refugee populations in Bangladesh.

Introduction

Bangladesh hosts over one million Rohingya refugees from Myanmar, making it one of the largest protracted refugee situations in the world.

Following the influx in 2017, UNHCR worked closely with the Government of Bangladesh (GOB), UN agencies, partners, actors and keys stakeholders to respond to the humanitarian needs caused by the large-scale displacement. Rohingya refugees are currently hosted in temporary shelters in 33 highly densely populated camps in Cox' s Bazar District and on Bhasan Char. The Rohingya refugees rely entirely on humanitarian assistance for protection, food, water, shelter and health. With Bangladesh ranking third in the world among states most vulnerable to natural disasters, Rohingya refugees are, like the host community, highly at risk of weather-related hazards, such as cyclones, flooding and landslides.

In principle, the GOB does not allow official registration of new Rohingya refugee arrivals after the 2017 influx. Exception was made in 2023, when some 3,000 Rohingya from Konapara were moved to the camps in Cox's Bazar district. In 2024, the conflict in Myanmar intensified leading to more Rohingya fleeing to the Cox's Bazar camps with an estimated number as high as 60,000 individuals. A joint UNHCR-GOB headcount and biometric identification of new arrivals was agreed to ensure life-saving assistance could be provided to the new arrivals.

Absence of a legal framework on asylum in Bangladesh limits refugees' freedom of movement, access to education and livelihoods opportunities and exposes them to exploitation and abuse when leaving the camps. Within the camps, safety and security is a main concern of refugees with organized groups fighting for dominance, mostly in Ukhiya camps. In Teknaf camps, criminal groups are mostly involved in drug trafficking. Threats, extortion and abductions for ransom have been widespread in the camps. A ''truce'' brokered between the main organized groups in November 2024 has led to a reduction of security incidents between organized groups in the camps but remains precarious. The criminal groups in Teknaf are not party to the so-called "truce" and have continued their violent activities throughout the year.

Based on the data from UNHCR Bangladesh, 9,963 refugees were detected in 2024 as having moved from Bangladesh to neighboring countries by sea and/or land. More than half of the onward movers from Bangladesh moved to Malaysia (56%), followed by Indonesia (22%), India (21%), Thailand (0.6%), and a very few individuals to other countries (0.4%).

Resettlement is a limited protection tool in the Cox's Bazar context, with only a small number of resettlement opportunities reserved for the most vulnerable refugees.

Repatriation of Rohingya to Myanmar remains the main solution for the GOB, despite the conditions not being presently conducive for a safe, dignified, voluntary and sustainable return.

The political situation that led to the installation of an interim government in Bangladesh had some noticeable ripple-through effects towards the end of 2024. Tensions rose between the refugee and host communities, with some religious figures taking a more restrictive approach to the rights of women and girls, particularly for refugees.

Forced displacement impacts people differently, depending on age, gender, and diversity. Understanding and analyzing the impact of intersecting personal characteristics on people's experiences of forced displacement are necessary for an effective response. Participatory assessments are UNHCR's primary tool to obtain a comprehensive understanding of the situation of refugees, host communities and the evolving context as they experience it. This includes identifying:

- The problems and risks faced by refugees and host communities;
- The strategies and coping mechanisms they employ to manage these problems and risks;
- The priorities refugees and host communities have for programming;
- Community and local capacities that should be supported;
- Opportunities and constraints that will affect implementation of our programmes.

The participatory assessments seek to promote meaningful participation of refugees in shaping UNHCR and partners' interventions, to ensure that the perspectives inform their programmes of refugees and host communities, and that the communities' capacities are mobilized in pursuing solutions to the issues faced.

In consultation and discussion with UNHCR multi-functional team and safety and security incidents, gender-based violence hotspot, and number of children at risks identified, six camps (Camp 1E, 6, Kutupalong registered camp, 26, 27, and Nayapara registered camp) and Transit Centre were selected.

Objectives

In Bangladesh, UNHCR aims to conduct one participatory assessment in a select number of camps to guide the upcoming 2026-2029 multi-year plan and

- Obtain an essential understanding of the current situation of girls, boys, women and men of concern of diverse backgrounds, including the problems and protection risks faced, underlying causes, capacities and coping mechanisms to address those problems, and their priorities for programming.
- Promote meaningful participation of refugees in shaping UNHCR and partners' interventions to ensure that their programmes are informed by the perspectives of refugees and host communities, address the priorities and needs of the community, and mobilize the communities' capacities, thereby rendering them more relevant, effective, and sustainable.
- Invest in capacity-building for frontline staff and volunteers on protection principles, inclusive programming, accountability to affected populations (AAP), and community-based protection approaches.

Themes

The selection of themes was made according to the UNHCR Participatory Assessment Guidelines 2024, and concerns raised by the refugee women, men, boys, and girls and UNHCR multi-functional team during regular services monitoring, focus group discussions, community consultation reports, protection and child protection situation monitoring reports, and voices from refugee leaders, religious groups, and partners. Below are the selected themes.

- Access to territory, documentation, and asylum (OA1)
- Gender-based violence (OA4)
- Child protection (OA5)
- Safety and access to justice (OA6)
- Community engagement and women's empowerment (OA7)
- Well-being and basic needs (OA8)
- Sustainable and housing settlements (OA9)
- Healthy lives (OA10)
- Education (OA11)
- Clean water, sanitation, and hygiene (OA12)
- Durable solutions (return)

Methodology

The targeted population profile and number of persons of concern to UNHCR multi-functional team to conduct participatory assessment exercise were considered according to the demography of refugees and asylum seekers residing in Cox's Bazar, protection concerns, and challenges in accessing available services in the camps identified by community, UNHCR's partners, and UNHCR during regular monitoring and community consultation as well as reports received from different sectors.

According to proGres database as of March 2025, UNHCR Bangladesh had registered/identified 1,102,556 Rohingya refugees (229,059 households) who fled persecution in Myanmar. Significant waves of arrivals occurred in 1990 and 2017, and new refugees continue to seek safety in Bangladesh in 2024 and 2025 due to escalating conflict in Rakhine State. As a result, a wave of new arrivals to the camps was identified in late 2024, and their biometric identification is ongoing.77% of the refugees are women and children, while 9% are individuals with specific needs including persons with disabilities, single parents, those with serious medical conditions, unaccompanied minors, older persons at risk, and others requiring legal and physical protection.

Four minority groups residing in different camps were **refugees** and new arrivals, believing in different religions (Buddhism and Christianity), and a gender diversity group. Please see the table of participatory assessment groups below.

Focus Group Discussion (FGD)	Camp 1E	Camp 6	Camp 26	Camp 27	NYP RC	KTP RC	TC
FG1: Adult Women (25-59 years)		11-Mar		16-Mar	16-Mar	13-Mar	13-Mar
FG2: Adult Men (25-59 years)		11-Mar		16-Mar	16-Mar	13-Mar	13-Mar
FG3: Youth Women (15-24)	11-Mar	13-Mar		17-Mar	17-Mar	13-Mar	
FG4: Youth Men (15-24)	11-Mar	13-Mar		17-Mar	17-Mar	13-Mar	
FG5: Girls (10-14 years)		16-Mar	16-Mar	18-Mar	18-Mar	11-Mar	
FG6: Boys (10-14 years)		16-Mar	16-Mar	18-Mar	18-Mar	11-Mar	
FG7: Older Persons (60+ years)	13-Mar		11-Mar				
FG8: Community Leaders			11-Mar		17-Mar	16-Mar	
FG9: Persons with Disabilities		17-Mar	11-Mar				17-Mar
FG10. Persons Minorities & indigenous groups (Christian, Buddist, Hidus and gender diversity)	3/13/2025 (Hindu para)		16-Mar	11-Mar			17-Mar

Key Information Interview (KII)	Camp 1E	Camp 6	Camp 26	Camp 27	NYP RC	KTP RC	TC
KII 1: Refugee leaders (male & female)			16-Mar		18-Mar	19-Mar	
KII 2: Protection partner staff		13-Mar	16-Mar		18-Mar	19-Mar	19-Mar
KII 3: GBV community activist	18-Mar	13-Mar	19-Mar	18-Mar			19-Mar
KII 4: GBV partner staff	18-Mar	18-Mar	19-Mar	18-Mar			
KII 5: Child Protection Community Structure Member				18-Mar			
KII 6: Child protection partner staff				18-Mar			19-Mar
KII 7: Representative of host community	18-Mar			18-Mar	18-Mar		
KII 8: Teachers	18-Mar				18-Mar	19-Mar	
KII 9: Health worker of Health Partner		18-Mar					
KII 10: WASH worker of WASH partners							
KII 11: Shelter and Settlement workers	18-Mar			18-Mar	18-Mar	19-Mar	
KII 12: Environment and Energy workers	18-Mar		19-Mar				

UNHCR has established a participatory assessment multi-functional team comprising 81 UNHCR male and female staff members from the following units: Registration, Legal Protection, Community-based Protection, Education, Gender-based Violence, Child Protection, WASH, Health, Livelihood, Shelter, Field and Site Management, Environment and Energy, and Durable Solutions. In March, with technical support from the Information Management unit, one meeting and two orientation sessions were organized for the PA facilitators and note takers to introduce tool used (Kobo) and the concept of PA, including the methodology and target population of the exercise.

Limitations

The PA was conducted under significant operational and contextual constraints. Notably, the data collection coincided with the Holy month of Ramadan, which impacted participant availability and engagement, and may have contributed to shorter or less in-depth discussions. In addition, the presence of organized groups in the camps or around assessment locations may have further contributed to hesitation in expressing views freely, particularly among already at-risk individuals.

Moreover, while participatory assessments typically require several weeks of planning and engagement to ensure inclusivity and depth, the current exercise was fast-tracked and completed within a one-month window due to operational deadlines. As a result, the number of camps and population groups covered was limited, and the level of community engagement may not fully reflect the diversity of voices across the operation.

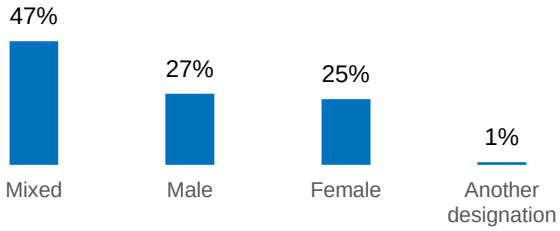
While the findings offer valuable insights into prevailing risks, needs, and capacities, they should be interpreted with caution. Future participatory assessments will be done in coordination with partners, UN agencies, government authorities and all relevant stakeholders.

Demographic

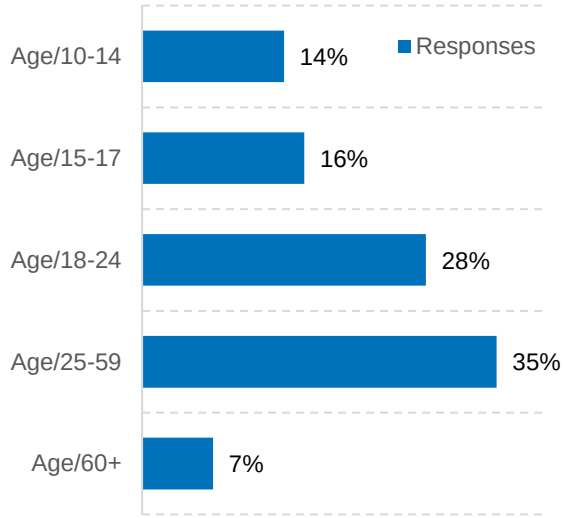
495

Participants were engaged through 42 Focus Group Discussions and 39 key informant interviews.

Composition of the respondents

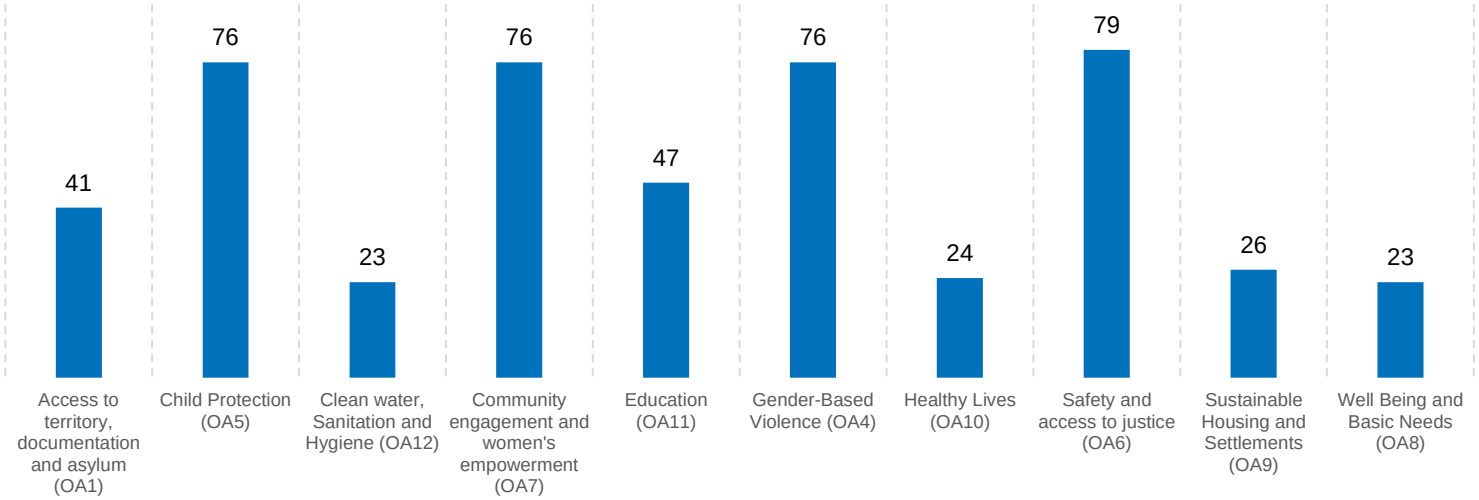


Breakdown of respondents and their percentages

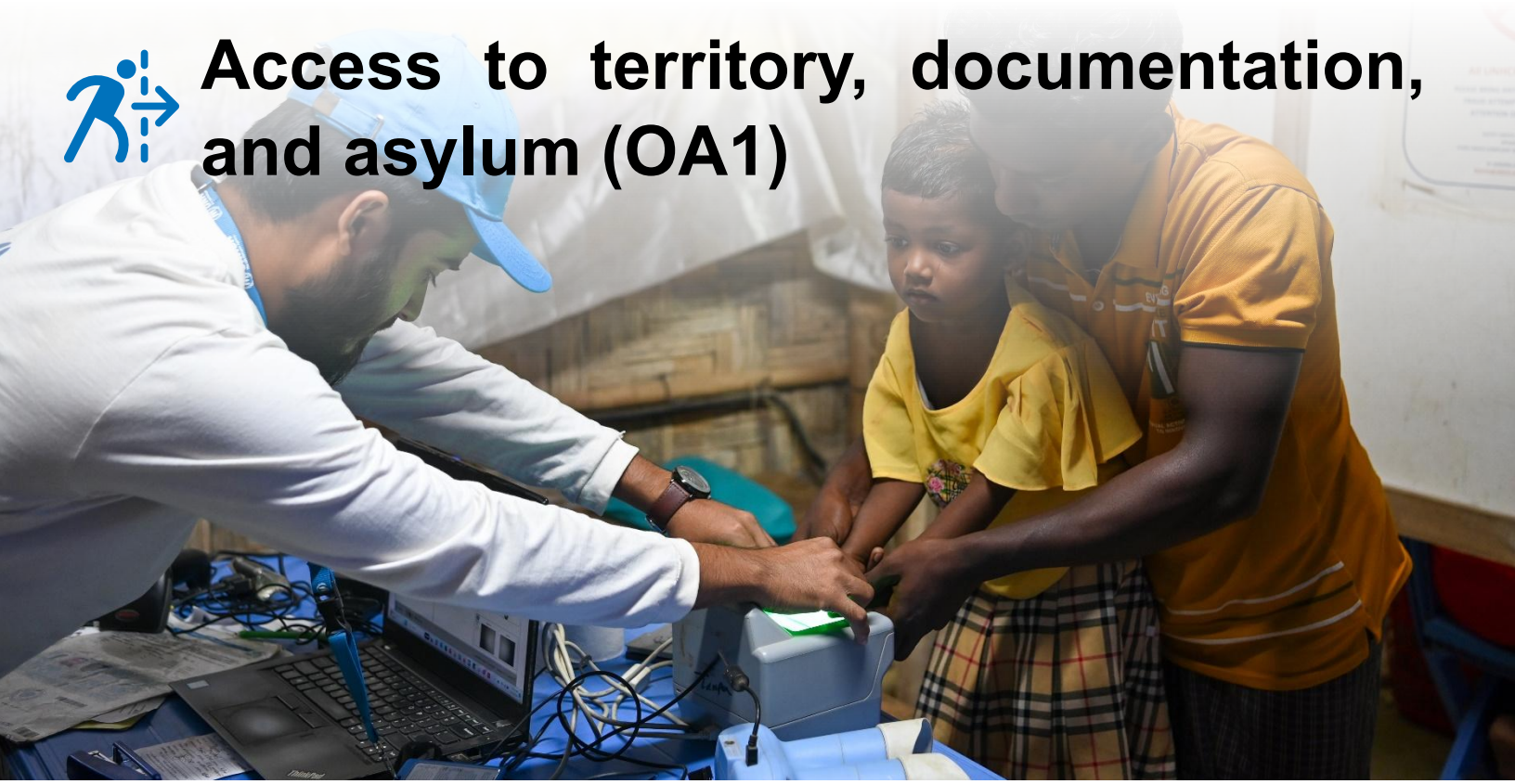


- The majority of these respondents 47% were engaged through mixed-gender groups, ensuring inclusive discussions that brought together diverse perspectives.
- In addition, 27% of participants took part in male-only sessions, while 25% joined female-only groups. A small portion (1%) fell under other designations.
- The breakdown of respondents by age group was collected through a select-multiple format, indicating the presence of individuals from different age groups within discussion settings. This means that individuals may be counted in more than one category, and the figures do not necessarily reflect a one-to-one ratio of participation. According to the responses, adults aged 25-59 years were present in 35% of the discussions, followed by young adults aged 18–24 years (28%), adolescents aged 15–17 years (16%), younger adolescents aged 10-14 years (14%) and elderly persons aged 60 and above (7%).
- While these figures provide an indication of demographic diversity within the groups, they should not be interpreted as exclusive or absolute participation.
- Inclusion of individuals with diverse characteristics was facilitated through both integrated and dedicated approaches. Specifically, 7% of the FGDs and KIIs included individuals with diverse characteristics within non-dedicated groups. In addition, 19% of the discussions were specifically dedicated to individuals belonging to groups such as LGBTIQ+ persons, persons with disabilities, minorities, and indigenous communities. This brings the overall participation of individuals with diverse characteristics to 26% of all discussions.
- 21% of the total participants were part of minority groups.

Number of discussions per theme



Access to territory, documentation, and asylum (OA1)



Access to territory/admission

Problem Refugees across several camps, including new arrivals new arrivals in camp 1E, 6, 26 and the Transit Centre, reported serious challenges related to access to the territory and in seeking admission into Bangladesh. Community leaders and youth, particularly young women and men aged 15 to 24, described a pattern of pushbacks and denial of entry at border points carried out by law enforcement actors and border authorities. These incidents typically occurred as individuals attempted to cross the border fleeing persecution, armed conflict, or insecurity in Myanmar. Some participants shared accounts of being physically blocked, verbally abused, or financially extorted at crossing points. Adult men noted that even when access was granted, the lack of regulated access and entry procedures caused fear, confusion, and in some cases, led to coercion and exploitation. Individuals who lacked necessary documentation (ID establishing their nationality), such as identification documents, birth certificates, and education certificates, or arrived during heightened border monitoring periods by the Border Guard Bangladesh (BGB) were especially vulnerable to being detained, deported or pushed back.

> *"After paying eight thousand taka, we watched our boat drift away and were pushed back into the river at dawn"*

Single men and youth faced particular difficulties in access to territory, perceived by authorities as "suspicious" or "economic migrants" rather than legitimate asylum seekers. Youth women further highlighted the gendered risks associated with border crossings, including harassment, extortion, and lack of safe reception areas for unaccompanied females or mothers with children. In some cases, refugees reported that entry into Bangladesh was only possible after paying sums to the authorities, ranging from BDT 8,000 to BDT 10,000. After payment, they were admitted to the territory without formal procedures or being able to have their presence immediately recorded by UNHCR, placing

them at further risk of exclusion from assistance and exploitation in Bangladesh.

Capacity in response to these protection concerns, community members organized informal support systems. Some newly arrived refugees were received by relatives or acquaintances within the camps who helped them navigate settling in the camp and avoid undue exposure. Community leaders and youth volunteers took a key role in identifying new arrivals and assisting them with the initial steps needed to access basic services, including referrals to UNHCR or humanitarian partners. However, participants noted that these community support mechanisms were overstretched and lacked formal recognition or capacity. Several youth women reported that information sharing at the block level helped new arrivals understand how to access food distributions or shelter, though this information was not consistently available and often outdated. Adult men emphasized that while the community showed solidarity in welcoming new arrivals, they lacked the tools, training, and authority to address the protection needs arising from their lack of legal status in the country.

Solution Drawing on firsthand experience, refugees propose a series of practical measures to formalize arrivals. They call for UNHCR-run reception centers at every major crossing—staffed by Rohingya-speaking personnel offering immediate food, shelter, medical triage and information on legal procedures. Priority lanes and transit points for children, older persons and people with disabilities would ensure prompt processing and end arbitrary detention. To safeguard against potential protection risks for people at the border, they recommend establishing clear agreements with government authorities that uphold non-refoulement principles, complemented by UNHCR's presence for on-site monitoring. Additionally, multilingual signage and interpreters could help reduce communication barriers and ensure that persons of concern receive accurate information and assistance.

Finally, mobile registration teams capable of issuing provisional identity tokens within 24 hours would address days of uncertainty and lack of access to assistance.

UNHCR registration and identity management

Problem The process of registration and identity management by UNHCR continues to be a cornerstone of protection for refugees but also presents several persistent challenges and unmet needs across different population groups. Refugees—including youth men and women, adults, and adolescent girls—consistently raised concerns over delays and gaps in registration procedures, which can result in the denial or restriction of critical services. Despite approval of biometric identification of newly arrived Rohingya and new procedures on registration of newborns, participants reported that the initial registration process, especially for newly arrived individuals and children born in the camps, often suffers from a lack of timely follow-up, leaving many refugees without updated or accurate identity documentation. For youth men and women, the absence of biometrically-linked registration cards not only restricts their access to assistance but also undermines their sense of belonging as they are severely restricted in education, movement and integration. Adolescent girls highlighted additional challenges when their documentation did not match family records, such as names, date of birth, parent names, and place of birth, causing complications in school enrollment and exposing them to exploitation and abuse due to the lack of formal identification.

> *"Without a registration card, we are invisible—not just to the agencies, but to everyone around us."* @Young man, camp 6

Capacity Participants acknowledged the presence of dedicated UNHCR registration staff and the deployment of biometric technology as positive aspects of the process. In some camps, block-level volunteers and community leaders play a crucial role in notifying families of upcoming registration drives and in helping to compile the necessary paperwork. Some refugee youth mentioned that protection partners and volunteers help ensure that the

registration process is inclusive and that the needs of persons with disabilities and elderly family members are taken into account. However, these capacities remain inconsistent, with many refugees relying on informal word-of-mouth and limited support from community representatives. Adult men, in particular, expressed a lack of information about registration updates, especially in cases of lost registration cards or how to correct errors in personal data. While there is recognition of the progress made in rolling out digital and biometric registration, many participants still experience anxiety over the security and privacy of their information that is collected,

Solution Across all groups, there was a strong call for solutions to make registration more accessible and responsive from UNHCR and other partners involved in assessment or issuing the supporting documents. Refugees advocated for regular, scheduled registration campaigns within all camps, with clear advance communication to reach all household members, including women, youth, and persons with disabilities. They recommended a more robust system for resolving documentation discrepancies, with dedicated help desks or mobile registration units to address cases of lost, damaged, or inaccurate identity cards. Participants emphasized the importance of capacity building for both refugees and local authorities to ensure consistent understanding of registration requirements and procedures. Women and youth proposed targeted information sessions and the development of accessible complaint and feedback mechanisms to ensure all community members could raise concerns without fear of retaliation. Furthermore, the community called on UNHCR and partners to maintain strict confidentiality of personal data, reassure refugees regarding the use and security of their information, and involve refugee leaders in outreach to increase trust and participation in the registration process.

> *"Every time there is a mistake in the paper, it takes months to fix. Sometimes, we just give up and live with the wrong name."* @Adult woman, Camp 6

Civil documentation

Problem Access to civil documentation remains a persistent protection concern among refugees, with particular challenges highlighted in obtaining birth certificates, identity documentation, and marriage-related civil status documents. Refugees, especially young parents and caregivers across camps such as Camp 6 and KRC, reported delays in obtaining birth certificates, lack of information, and procedural inefficiencies. Young women aged 18 to 24 described how verification steps and hospital-issued notifications often create confusion, particularly for home deliveries, where birth registration is not systematically followed up. In cases where certificates are delayed or denied, children are left without essential identity documents that are critical for accessing basic services, such as health care, education, and legal protection. Refugees also reported that it still takes on average of a few weeks to several months to receive even simple documents, with little follow-up or tracking mechanisms once an application is submitted. For adolescent girls, the lack of civil documentation was framed not only as a legal gap but also as a source of social exclusion, especially when attempting to enroll in school or establish eligibility for services requiring proof of age or family status.

Capacity In terms of capacity, some participants reported utilizing community-based channels such as camp Protection Focal Points or block-level information sharing networks to learn about the required documentation steps. Among youth women, there was a noted reliance on female volunteers who assist with relaying birth notifications to local health authorities, although these efforts are not always synchronized with formal government registration systems. In a few cases, particularly within Camp 6, refugee participants acknowledged that the presence of health volunteers and community leaders contributed to a more consistent flow of information regarding birth documentation processes. However, these support mechanisms

remain informal, unstandardized, and uneven across camps. Male youth, on the other hand, voiced a significant lack of knowledge and support structures to obtain or rectify their own identity papers or those of their children. Some mentioned that community leaders occasionally assist by directing families to the CiC office, but these efforts are highly dependent on personal relationships and are often unsuccessful when not accompanied by follow-up from humanitarian actors.

> *"My son was born two years ago, and we still don't have any papers for him. Every time we ask, they tell us to wait."* @Youth woman, Camp 6

Solution Participants collectively called for concrete improvements in access to documentation. Key among their suggestions was the need to expedite the issuance of birth certificates, particularly for home deliveries, through enhanced coordination between health facilities, volunteers, and civil registry offices. Refugees requested the presence of mobile registration teams within the camps to ensure that families without mobility or awareness of procedures could complete documentation close to their shelters. Participants also stressed the importance of training and deploying refugee volunteers to act as documentation focal points, helping households navigate the system and provide timely updates on the status of applications. Both male and female youth participants emphasized the urgency for more child-sensitive approaches in civil registration, including clear communication of timelines, document requirements, and complaint resolution channels. In addition, adult men expressed the need for civil status documentation—such as marriage and divorce records—to be formally recognized within the camps, allowing families to avoid complications related to inheritance, guardianship, and legal recognition of household status.

Expulsion / removal from territory

Problem In Camp 1W, adult male refugees raised concerns about ongoing threats of forced expulsion and involuntary removal from Bangladesh to Myanmar. These concerns were particularly voiced by participants in the 25–59 age group, who reported that they or others within their demographic cohort had been subjected to intimidation and coercive tactics by law enforcement and local authorities. Participants described incidents in which men were stopped near camp boundaries, due to government encampment policy, accused of violating movement restrictions, and threatened with immediate removal or handed over to local authorities with no due process. These actions were perceived as arbitrary and disproportionately targeting adult men suspected of seeking work opportunities or attempting to contact family members outside the camps.

The problem was framed as deeply systemic and exacerbated by the lack of clear documentation, legal rights or protective oversight. Many of the affected individuals stated that these removals or threats occurred without any formal process, documentation or explanation, fueling a widespread sense of fear, helplessness, and exposure to exploitation and abuse. Adult men expressed that these incidents further marginalized them, leaving them vulnerable to exploitation and community-level stigma, particularly when viewed as potential "troublemakers" for having come into contact with authorities. Female participants in other sessions also voiced indirect concern, emphasizing the psychological toll such removals had on family units and the disruption of male roles in caregiving and economic support.

Capacity Despite limited legal rights, adult male refugees demonstrated resilience and community-based problem-solving. In certain cases, families and community leaders (Majhis) intervened to de-escalate the situation or negotiate informally with the authorities involved. The informal mediation efforts, particularly by older men with social influence, were critical in protecting individuals at imminent risk, although such interventions were not always successful and relied heavily on personal networks.

Participants also showed a high level of legal and contextual awareness, especially regarding their rights under refugee protection frameworks. They highlighted that while they lacked formal documentation or status recognition, they were aware of the non-refoulement principle and consistently stressed that returning to Myanmar would expose them to persecution and violence. The psychological and collective resilience of the affected demographic was evident through organized communication systems within the community, often led by adult men and elder leaders who shared updates about potential risks and coordinated responses when threats emerged.

Solution In response to these challenges, participants called for enhanced and sustained engagement by UNHCR and other humanitarian actors with government authorities to prevent forced removals and ensure greater accountability. They recommended the deployment of trained protection staff to monitor high-risk areas and the establishment of accessible and confidential reporting mechanisms where individuals, particularly adult men and other at-risk groups, can safely share information about expulsion-related threats. Participants also urged the need for legal awareness campaigns and targeted advocacy with law enforcement actors to promote compliance with international protection obligations, including non-refoulement. Community members emphasized the importance of building the capacity of refugee leaders especially those who are already actively intervening to strengthen their ability to document incidents, liaise with protection actors, and support those at immediate risk. Women and men alike noted that enhanced legal counseling services tailored to different demographics would be essential, both in preparing individuals to respond to threats and in building overall community resilience. Throughout the discussion, there was a clear call for recognition, dignity, and protection rooted in legality and fairness.

Gender-Based Violence (OA4)

GBV response services

Problem In Camp 1E, adolescent and young adult refugee women (ages 15 to 24) consistently reported that gender-based violence (GBV) response services remain limited, inconsistent, and often inaccessible to those most at risk. Focus group participants highlighted that despite the high prevalence of GBV—including intimate partner violence (IPV), harassment, and sexual violence—affected individuals, especially young women and girls, face numerous obstacles in seeking support. These challenges include a lack of awareness of available services, fear of stigmatization, social pressure to remain silent, and distrust in referral pathways. Youth women expressed that GBV survivors often hesitate to report incidents due to perceived inaction by service providers or fear of retaliation from perpetrators, who in many cases are close relatives or community members. Participants specifically noted that if a rape incident occurs at the camp level, survivors may avoid seeking help altogether due to concerns over confidentiality and shame.

> *"When something happens to us, we don't know where to go, or we fear being judged. That's why we keep silent."* @Youth woman, Camp 1E

In addition to gendered barriers, structural limitations were also noted. GBV actors, including caseworkers and safe space personnel, were described as under-resourced or inconsistent in their presence across blocks. Youth men acknowledged that GBV response services are generally perceived as "women-only" spaces, resulting in a lack of involvement from men in prevention and accountability. Minority and indigenous group representatives further pointed out cultural stigma and marginalization within both host and refugee communities, making it even harder for their members—particularly women and girls—to access services or participate in GBV-related decision-making forums. In some cases, adolescent girls who experienced harassment in public spaces such as markets or learning centers reported feeling unsafe but had no one to turn to for protection or advice. The lack of female staff among GBV responders was mentioned as a key barrier to disclosure, especially

for survivors of rape or IPV who seek culturally sensitive, gender-appropriate care.

Capacity Despite these concerns, some community-led and partner-supported initiatives were acknowledged as points of entry for improving GBV response. Youth women reported that information-sharing sessions and awareness campaigns have been helpful, especially when delivered in small, trusted groups. Local leaders and women's groups have organized informal support systems, including peer-to-peer networks where survivors can confide in each other and receive emotional support. In certain cases, individuals from minority backgrounds have begun participating in GBV trainings and expressed willingness to work as community focal points, though they require more structured mentorship and capacity development. One group of women shared that their husbands had participated in behavior change activities, showing gradual improvement in attitudes toward gender roles and violence.

Solution To address these barriers, participants recommended scaling up safe, survivor-centered GBV services across all blocks, with clear, confidential, and timely referral mechanisms. Youth women urged for the availability of more female caseworkers, counselors, and health personnel trained in trauma-informed care. Some groups also recommended that safe spaces be made more inclusive and visibly supported by community leaders to build trust. Adolescent girls proposed integrating GBV response messages within education activities and advocating for safer public spaces, especially around learning centers and latrines. Minority and indigenous group participants emphasized the need to localize services and conduct targeted outreach using their own languages and cultural lenses. Both women and men agreed on the importance of engaging men and boys in GBV prevention and response—suggesting that family-based counseling and positive masculinity workshops be expanded as entry points. Lastly, participants called on UNHCR and partners to ensure that protection actors are consistently present and well-trained, and that GBV is addressed not only as a protection issue but also as a critical part of mental health and community well-being.

> *"They teach us to speak out, but if the services aren't there when we do, then it's just words."*
> *@Minority woman, Camp 1E*

Gender-Based Violence

Problem Participants from Camp 1E highlighted the widespread and multidimensional nature of GBV within the refugee context, with young women (ages 15 to 24), youth men, and members of minority and indigenous communities identifying several interlinked violations, including IPV, rape, harassment, and forced or child marriage. Young women shared that IPV is not only prevalent but often normalized within households, with physical abuse, coercion, and psychological harm widely reported. Alcohol abuse by husbands was frequently mentioned as a trigger for violence, and in many cases, survivors remain silent due to shame, fear of retaliation, or pressure from extended family to maintain the marriage at all costs. Rape was noted as a particularly sensitive topic—participants disclosed that if an incident of sexual violence occurs, survivors rarely seek help due to fear of judgment and the lack of confidential, survivor-centered reporting options. There was also mention of survivors being blamed or silenced by their communities, reinforcing the stigma that surrounds GBV in camp settings.

> *"When a girl is married at 15, she doesn't know anything. She just obeys and suffers in silence."*
> *@Youth man, Camp 1E*

Youth men in focus group discussions expressed awareness of ongoing sexual harassment (often referred to as "eve-teasing") occurring in public spaces such as markets, schools, and water collection points. These incidents, while sometimes dismissed as "minor," were recognized by participants as serious and harmful, particularly for

adolescent girls and young women who experience ongoing fear and restriction of movement. Boys also acknowledged their role in perpetuating or witnessing this behavior and stressed the lack of positive male role models and structured awareness on gender rights and respectful behavior. Participants from indigenous and religious minority groups flagged that forced and child marriages remain common, especially among families struggling with financial constraints or cultural expectations. Girls from these communities were described as having limited agency in choosing if or when to marry, and once married, they often faced isolation and increased risk of abuse, including sexual violence.

Capacity participants identified several protective capacities within the community. Women reported small-scale awareness efforts and support circles where survivors could find emotional encouragement and, in a few cases, information about available services. Wives in IPV-prone households showed openness to engaging in counseling with the hope of improving their situation, particularly when such counseling was offered discreetly. Minority group members mentioned efforts by religious leaders and Majhis to denounce child marriage through public messaging during community meetings, though they stressed that these efforts were still insufficient without broader social norm change and systemic intervention. While some community awareness sessions on GBV are ongoing, they are sporadic and have not yet reached all blocks or target demographics consistently.

Solution To address these challenges, participants recommended an urgent scale-up of comprehensive GBV prevention and response programming that goes beyond awareness to include service delivery, legal advocacy, and active community engagement. Youth women requested safe, confidential channels to report IPV and rape, with female staff trained in trauma-informed care and survivor-centered approaches. Community leaders called for stronger enforcement of laws prohibiting child marriage and suggested involving male family members and religious figures in gender-transformative dialogue sessions. Young men proposed structured school-based and community-level education campaigns to redefine masculinity and promote respectful, non-violent behavior. Several groups stressed the need for greater investment in early detection of at-risk cases through household-level outreach by trained protection actors. A consistent theme across groups was the importance of building trust and confidentiality in all GBV programming, ensuring that survivors are believed, protected, and empowered to access the support they need.

GBV Prevention

Problem Across various locations including Camp 1E, Camp 26, Camp 27, Camp 6, and NRC, refugee participants expressed serious concerns about the persistence of GBV and the insufficient scope of existing prevention efforts. Youth women, particularly those aged 15 to 24, highlighted the dominance of rigid gender norms and harmful cultural beliefs that normalize male control and aggression while silencing female voices. These underlying social structures have led to high tolerance for harassment, early and forced marriage, and intimate partner violence. One youth woman shared that “even speaking out against a husband’s violence is considered disobedience,” reinforcing the sense that GBV is not only unreported, but structurally protected. In Camp 27, women (including from minority groups) explained how they wear the hijab not solely for religious practice, but as a strategic protective measure to avoid being harassed in public. The use of clothing as a self-protective strategy reveals the extent to which violence—or its threat—has been internalized as a daily reality by women and girls.

While some GBV sensitization efforts have been implemented, participants noted that these are often ad hoc, inconsistently delivered, or fail to address root causes such as unequal power dynamics or lack of male accountability. Refugee leaders, both male and female, acknowledged the existence of community-based awareness sessions, yet questioned their depth and sustainability. In many cases, sessions are generic and do not sufficiently involve men, boys, or powerholders such as

religious figures and teachers. GBV community activists also reported facing resistance from within the community, particularly when promoting messages that challenge traditional gender hierarchies. Teachers involved in key informant interviews mentioned that they often witness signs of gender-based exclusion and control in classrooms but lack the training or safe channels to intervene. Several participants emphasized that young men often grow up without exposure to gender-equitable models of behavior, which perpetuates cycles of harmful masculinity and silence around abuse.

> *"We know GBV is wrong, but changing what we've been taught since childhood is not easy. We need help to unlearn."* @GBV community activist, Camp 1E

Capacity Despite these barriers, the community possesses notable protective capacities. In Camp 6 and Camp 27, awareness-raising by trained female staff and volunteers has slowly shifted perceptions in specific blocks, encouraging women to speak up and support each other. The existence of Women and Girls Safe Spaces was frequently mentioned by youth women as a positive, if underutilized, structure for information-sharing and social connection. In Camp 1E, GBV community activists noted improvements in peer-based approaches, where youth are trained to raise awareness among their own age group. Participants also shared that when community and religious leaders are fully engaged and informed, they are often capable of reinforcing GBV prevention messages effectively. This was particularly true in settings where male leaders publicly condemned child marriage or harassment, leading to more openness in discussing prevention at the household level.

Solution To strengthen GBV prevention, participants recommended a shift toward more inclusive, sustained, and locally owned programming. They called for a more strategic engagement of men and boys—not only as beneficiaries but as co-creators and implementers of GBV prevention strategies. Youth women proposed gender-transformative sessions embedded in school and vocational settings, while teachers and community leaders suggested integrating prevention messages within broader community dialogue platforms. Participants from minority groups emphasized the need for tailored messaging in local dialects and adapted to their cultural contexts. All groups agreed that training and deploying more community-based GBV champions—including youth, teachers, and religious leaders—would enhance outreach and make prevention efforts more trusted and sustainable. Finally, they called on UNHCR and protection actors to ensure continuity in awareness efforts, integrate GBV messaging into all sectors, and invest in pathways that allow individuals—especially women—to safely challenge and change harmful norms.

> *"Covering ourselves is not always a choice. It's what we do to stay safe when no one else protects us."* @Minority woman, Camp 27

Sexual exploitation and abuse (SEA) by UN and partner personnel

Problem Across multiple sites, including Camp 6 and NRC areas, participants raised serious concerns regarding Sexual Exploitation and Abuse (SEA) committed by humanitarian staff, including those affiliated with the UN and implementing partners. In Camp 6, youth men reported an incident involving an NGO driver who allegedly coerced a female refugee into sexual activity in exchange for promised assistance. Though this case was described as isolated, its implications were far-reaching: participants voiced a deep sense of betrayal and a growing fear that humanitarian personnel could exploit their authority without facing consequences. In NRC areas, adult men and service providers, such as teachers and shelter staff, confirmed that SEA incidents were rarely reported formally, often because survivors fear retaliation, disbelief, or further marginalization. Some participants also stated that due to power imbalances and economic dependency, women and

girls may feel pressured to comply with inappropriate requests, especially when aid distribution or referrals are involved.

Youth men and teachers in key informant interviews stressed that community awareness around SEA remains critically low. Most refugees are unfamiliar with what constitutes SEA, how to report it, or where to seek protection without placing themselves at additional risk. Even among service providers, such as shelter staff, there is limited understanding of their responsibility to refer survivors or intervene when misconduct is suspected. Teachers acknowledged that discussions on sexual misconduct are taboo, and in many families, even speaking about abuse could lead to shame or punishment for the survivor. Participants expressed that while SEA policies may exist on paper, they are often not accessible, visualized, or discussed openly in a way that empowers community members to understand and claim their rights.

> *"When those who are supposed to help us are the ones hurting us, who do we turn to?"* @Young man, Camp 6

Capacity Participants were aware of the UN zero tolerance of SEA and showed readiness to contribute to SEA prevention if the necessary structures and guidance were provided. Some staff indicated they are familiar with referral mechanisms and willing to engage in trainings to better recognize and report SEA. Adult men mentioned that they had heard of focal points for reporting but were unsure of their location or whether the system would protect confidentiality. There was broad agreement that increased community ownership—through inclusive consultations, participatory reporting systems, and sensitization workshops—would create safer environments and deter misconduct.

Solution To prevent SEA, participants proposed that all humanitarian organizations, including UN agencies, implement clear and localized prevention and accountability strategies**.** First, they called for widespread, culturally appropriate awareness campaigns that define SEA, explain reporting pathways, and clarify survivors' rights in non-threatening ways. These campaigns should include visual materials, camp-wide announcements, and discussions in safe spaces—particularly targeting women, youth, and persons with disabilities. Second, participants emphasized the importance of establishing anonymous, survivor-centered.

reporting mechanisms**,** including suggestion boxes, hotlines, and trusted focal persons trained to receive complaints confidentially. Youth men specifically recommended the deployment of trained community monitors, who are independent from aid agencies, to serve as observers and safe intermediaries. Lastly, they requested zero tolerance and public accountability**,** including suspension and investigation of any staff involved in SEA, and transparent communication of outcomes (without exposing survivors) to rebuild trust in humanitarian systems.

> *"We hear that SEA is wrong, but no one shows us how to report it. If you speak out, you might lose everything."* @Adult man, NRC area

GBV risk mitigation

Problem In NRC, adult male participants (aged 25 to 59) shared critical reflections on the current state of GBV risk mitigation efforts within the camp setting. While acknowledging that some risk reduction activities—such as awareness sessions and occasional infrastructure improvements—have been implemented, the participants expressed concern that these efforts remain sporadic, inadequately resourced, and not fully embedded into daily humanitarian operations. Many men observed that the locations and conditions of essential services such as latrines, water points, and communal spaces often leave women and girls vulnerable, particularly after dark. The lack of lighting in key areas, combined with long distances between shelters and service points, was cited as a major risk factor for harassment and assault. Participants noted that women frequently avoid using facilities at

night or rely on male escorts to ensure safety, which limits their autonomy and dignity.

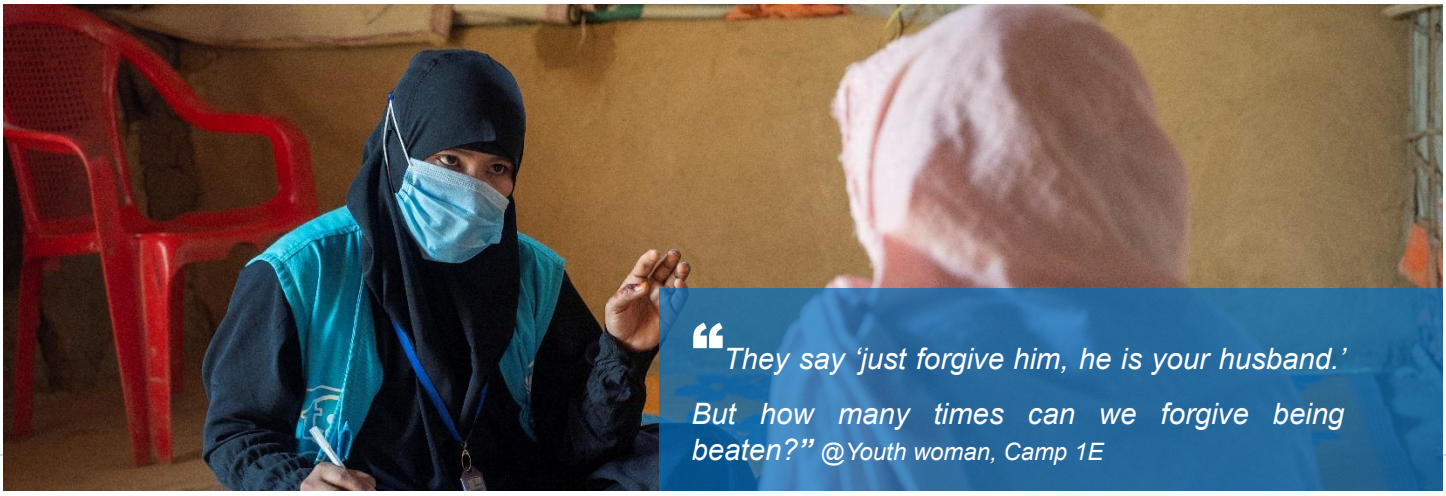
Participants emphasized that existing GBV mitigation initiatives are often perceived as "external" or disconnected from community realities. Many adult men were either unaware of who was responsible for implementing mitigation measures or unsure how to contribute to these efforts meaningfully. While some were familiar with the concept of GBV through awareness campaigns, they noted that such initiatives rarely addressed practical safety issues or involved men in a substantial way. Participants further acknowledged that even where GBV risk assessments had been conducted in the past, there was little evidence of follow-up or feedback to communities regarding actions taken. This gap in communication and accountability reinforced the perception that GBV risk mitigation is driven more by organizational requirements than by a genuine commitment to community safety.

> *"We hear about GBV, but no one tells us how to make the environment safer. We're ready to help if they involve us."* @Adult man, NRC

Capacity Despite these challenges, adult men showed readiness to participate in efforts that reduce GBV risks, particularly when engaged through culturally appropriate dialogue and practical action. Several men expressed willingness to support infrastructure improvements—such as maintaining lighting or patrolling pathways at night—if provided with guidance and coordination. Participants also suggested that men could be mobilized to monitor risk-prone areas, especially those frequented by adolescent girls and unaccompanied women, and report concerns discreetly through established protection focal points. However, they highlighted that any such role must be clearly structured to avoid misinterpretation and ensure the safety and dignity of both monitors and those they seek to protect.

Solution To enhance GBV risk mitigation, participants recommended that UNHCR and partner organizations integrate protection-sensitive design into all sectors, including WASH, shelter, and site planning. Key proposals included increasing solar lighting in vulnerable areas, constructing gender-segregated and well-lit latrines closer to shelters, and ensuring that service delivery points are safely accessible at all times. They also proposed establishing joint community committees—including women, men, youth, and persons with disabilities—to monitor safety conditions and provide regular feedback. Awareness sessions should be redesigned to include men not only as attendees but as co-facilitators and advocates of safe behaviors and inclusive service design. Importantly, participants requested stronger transparency and follow-up mechanisms, where agencies clearly communicate what mitigation actions are planned or completed based on community feedback.

> *"Sometimes our wives wait until morning to use the latrine. That's not dignity. That's fear."* @Adult man, NRC



Child protection (OA5)

Rights violations

Problem The data reveals a range of severe child protection issues affecting refugee communities.

Corporal punishment remains a widely reported and socially accepted form of discipline across various Rohingya camps, though its prevalence, justification, and setting vary by age group, location, and social role. In KRC, boys (10–14 years old) reported being physically punished by teachers using dusters and rulers, with slapping also mentioned, reflecting a normalization of harsh disciplinary measures in formal learning settings. This was echoed in NRC, where boys from the same age group emphasized that teachers and parents use corporal punishment as a cultural response to disobedience or perceived misbehaviour, such as requesting non-essential items like toys or extra food. Additionally, boys in NRC shared that Rohingya children are beaten up by members of the host community when they are found playing or working outside the camp.

In Camp 26, minority group members (18 years old and above) described corporal punishment as a routine disciplinary tool used by parents or caregivers, reinforcing the intergenerational and systemic acceptance of this practice. Girls (10–14 years old) in the same camp confirmed being subjected to physical punishment by both parents and teachers for disobedience. In Camp 27, girls added a disturbing dimension—abuse by religious teachers (huzurs), including sexual violence when they resisted. This dual abuse under the guise of discipline signals a critical protection gap within religious institutions. In Camp 27, boys (10-14 years old) shared that while they are still being beaten by madrasah teachers and parents, the teachers in learning centers reportedly refrain from corporal punishment. These boys said they feel emotionally hurt and frustrated and signaling a desire for non-violent discipline and a recognition of their dignity.

Teachers in Camp 1E denied corporal punishment in learning centers but acknowledged it in madrasahs, justifying it as necessary for educational discipline. In contrast, GBV activists in Camp 6 noted corporal punishment was absent in some religious institutions due to strict Camp-in-Charge (CiC) oversight, showing the importance of the consistent implementation of enforcement and accountability from the government can influence behaviour and reduce harmful practices of the community. Still,

cultural justification remains widespread, even among service providers.

Capacity Across camps, teachers and other service providers, including those in Camp 1E and NRC, identified themselves as frontline allies in protecting children but emphasized the need for capacity building, clear referral systems, and better integration between education and child protection. Some suggested involving educated community members and youth in training and awareness work, indicating a willingness to share responsibility for prevention and response to corporal punishment.

Solution To address corporal punishment, there is a need to increase community awareness about the harmful impact of physical punishment and promote safe, non-violent alternatives. Teachers and child protection staff across camps highlighted the need for stricter community norms against corporal punishment, improved school supervision, and integration of psychosocial support (PSS) into education. Trusted community figures such as Majhis and religious leaders can play a key role in shifting attitudes. Teachers and caregivers, including those in madrasahs, should receive practical training on positive discipline and child-friendly behavior management. Strengthening the role of the CiC is also important to ensure that rules against corporal punishment are consistently enforced across schools and religious settings. Safe reporting channels must be available for children and families, with clear follow-up by child protection actors. Some learning centers are already applying non-violent approaches, and these examples can be expanded to other locations. Creating space for children to express how they feel about the way they are treated will also help inform better responses. These steps are essential to reduce harm and ensure children in the camps are treated with dignity and respect.

It was recommended to establish school-based child rights clubs and anonymous reporting boxes where children can safely report mistreatment. School inspectors or community monitors should be deployed to ensure compliance.

Violence, abuse, and neglect are widespread and vary by age, gender, and camp. In NRC , youth women (15–24 years old) and teachers reported that children often face physical and emotional abuse from parents, with some being denied access to school, which are linked to parental stress driven by poverty, food insecurity, and lack of basic resources. Adult women (25 – 59 years old) in the Transit Centre similarly described verbal and physical abuse toward children was triggered when children requested food or unmet needs. Additional concerns from adult women (25–59 years old) in NRC and members of the child protection community-based structure in Camp 27 confirmed that poverty and caregiver stress are key factors behind domestic violence, and child abuse and exploitation.

In KRC and Camp 6, boys (10 – 14 years old) said that some children are using drugs and gambling, often copying adults. They felt this happens because parents struggle to discipline their children, and there is little support from camp security enforcement. In Camp 6, girls in the same age group shared that children are sometimes neglected, especially when fathers remarry and focus more on new families. They also said boys are treated better because they are expected to earn money in the future. In KRC, Camp 1E, and Camp 6, girls and youth women said that staying at home and following traditional roles protects them from some risks, but it also hides other problems. In Camp 1E, youth men and women (15–24 years) said abuse often comes from caregiver stress and complex family situations like polygamy, where children from previous marriages are sometimes left out. They also felt that child protection programmes are not effective, as outreach often avoids real problems and only shares positive messages during donor visits. In Camp 27, youth men reported that children face violence both inside the camp and from people outside, including from the host community. This shows that risks for children are not only in the home but also beyond the camp.

Capacity Through the participatory assessment, different groups demonstrated different levels of awareness, motivation, and structural support to reduce or respond to those risks. Community leaders in Camp 26 and NRC showed their strong understanding of child protection risks and solutions and willingness to engage in discouraging harmful

practices, raising awareness among parents and caregivers, and directly intervening in child protection cases, as they have ability to influence broader community norms. The existing child protection community-based structures have been actively reaching out to the community and are able to provide insights into the targeted groups or geographical locations to focus on implementing mitigation activities. Community Based Child Protection Committee (CBCPC) and GBV community activists, particularly in Camps 6 and 27, reported organizing awareness sessions, working with refugee volunteers, and conducting door-to-door campaigns. However, they also acknowledged gaps in coverage, limited coordination with other sectors, and challenges in reaching certain marginalized populations, including older youth and children from minority groups.

Solution Community engagement remains an essential pillar to prevent, mitigate, and respond to risks of violence, abuse, and neglect toward refugee children within the Rohingya community. Children (10–14 years) in Camp 6 and NRC called for increased parent monitoring, child-friendly spaces, and engagement in structured programmes to reduce unsupervised time and exposure to violence. Boys in Camp 27 also recommended positive parenting campaigns. Adult women and men in Camp 1E and KRC stressed the importance of PSS for caregivers and traumatized children, especially in polygamous or impoverished households. They also supported child safeguarding training for community volunteers. Engaging with families to promote positive parenting and understanding child rights as well as increased support from CBCPC and inclusion of community leaders, Majhis, youth, and teachers in awareness campaigns.

Communities proposed 24/7 helplines, safe reporting spaces within each block, and satellite protection hubs. Children at risk should be temporarily housed in crisis shelters, and judicial support should be fast-tracked for prosecuting child abuse and trafficking cases. Refugees also emphasized creating community justice watch groups to support reporting without fear of reprisal.

Child marriage is a common issue in the Rohingya refugee camps. Refugee leaders in Camp 26 said girls lacking education often view marriage and pregnancy as survival strategies, driven by poverty, limited options, and overcrowded living conditions. Leaders in NRC said parents often ignore the risks of child marriage and wealthier families offering dowries can be a strong motivation. Family problems, including polygamy, also lead to early marriage. Children from earlier marriages are often neglected and married off early. Some families are pressured into arranging marriages by community members, especially when teenage relationships are already known.

In KRC, NRC , camps 26 and 27, boys and girls (10 – 14 years old) said child marriage mostly involves older adolescents (15–18 years). In camps 26 and 27, girls said parents arrange early marriages due to fear of insecurity, abduction, and social shame if their daughters elope or judgment if they delay marriage. Families perceive marriage as protection and a way to maintain family reputation. Youth men in camps 6 and 26 and boys in KRC described child marriage resulting from romantic relationships, elopement, family pressure, including some cases of forced marriage. Youth women and adult women in NRC said they know about the health risks of early marriage and teen pregnancy but have little say in decisions due to traditional practices. Adult women in NRC said poverty is a major reason for early marriage. Families arrange marriages to reduce financial burden, avoid high dowry costs, or take financial opportunities, including marriage to people living abroad. Some marriages happen over the phone when the groom is not present. In crowded shelters, some families choose early marriage to reduce tension.

Opinions about trends differ. Some young and adult men in Camp 27 and youth men in Camp 26 said child marriage has decreased. But girls from the same camps said it is still common, especially for younger girls who are married early to avoid higher dowry.

In camps 6 and 27, GBV staff said CiC's enforcement helped reduce child marriage, but some families arrange marriages in other camps to avoid the CiC. In Camp 27, girls said they tried to become pregnant early to prevent being abandoned, believing pregnancy would secure the marriage. Refugee leaders and child protection partner staff said elopement, family approval, and peer influence also lead to child marriage. Many young people do not understand the long-term impact. Teachers and GBV staff in Camp 1E linked child marriage to school dropout, teen pregnancy, and domestic violence.

Capacity In Camp 6, youth women showed a strong understanding of child marriage risks and stressed the need to report cases to the CiC. Youth men in the samp camp recognized poverty and overcrowding as contributing factors and saw themselves as having a role in prevention. In Camp 26, adolescent boys were aware of key reporting channels, including the CiC office, UNHCR focal points, and the CFM desk. Their knowledge shows early awareness of protection mechanisms among young boys. Adult women in Camp 27 said they help prevent child marriage by talking to their daughters and choosing formal schools over religious ones. This reflects growing parental involvement where awareness is present. In KRC, adult men supported regular meetings with families and the involvement of religious and community leaders to guide marriage decisions. This shows openness to community-based dialogue and influence from trusted figures. Community leaders in Camp 26 work directly with families to discourage harmful practices and promote positive parenting. In NRC, leaders viewed prevention as their responsibility and called for broader awareness at the block level. In Camps 6 and 27, GBV activists and CBCPCs organized awareness sessions and door-to-door visits to educate families. While outreach challenges remain, these structures serve as key actors in community-level prevention. Overall, youth, parents, leaders, and volunteers are already playing important roles in child marriage prevention. With continued support and coordination, these efforts can be strengthened to build sustainable community-led protection systems.

> *"My cousin was married at 13. Her school was far, her father was poor. No one asked her."*
> *@Girl, Camp 1E*

Solution Child marriage in the Rohingya camps is driven by insecurity, poverty, limited education, social pressure, and harmful traditional practices. Families often see marriage as protection for girls, a way to avoid social shame, or to ease financial stress. These root causes need to be addressed through coordinated efforts from the community, government, child protection partners, and UNHCR. Community awareness should be strengthened, especially for parents, adolescents, and key community leaders, including religious leaders and Majhis, and must include boys and men to help shift norms. Increasing girls' access to education is crucial. Many families choose marriage, claiming schools are far or unsafe. UNHCR, education partners, and CiCs should work together to make schools safer and offer flexible or vocational options for girls who are out of school or already married.

Economic support is essential for vulnerable families, especially those led by women or caring for adolescent girls. UNHCR should connect child protection efforts with cash or livelihoods programmes. Tackling dowry practices and long-distance phone-based marriages is also important.

CiCs should consistently enforce rules against child marriage, with clear messages across all camps. Coordination is key to preventing families from arranging child marriages in other locations. Child protection community-based structures should be strengthened to help identify and report early warning signs.

Some girls said they tried to get pregnant to avoid being abandoned by their husbands, showing the urgent need for support. Adolescents need safe spaces and trusted adults. Life skills training, psychosocial help, and safe environments should be expanded so girls and boys understand their rights and have better choices.

Strengthening referral systems and teamwork between child protection, GBV, education, and health partners is needed. Teachers, volunteers, and

service providers should be trained to spot and respond to early marriage risks. Government actors should also be involved to align actions with national laws. Birth registration and proof of age should be checked before any marriage takes place.

Child labour is a serious protection concern mentioned by the participants. In KRC, girls (10–14 years old) noted that boys and young men (10 – 18 years old) are primarily expected to contribute to household income, particularly those who have dropped out of school. Adult women and men (25 – 59 years old) in KRC and NRC emphasized that ongoing ration cuts and food shortages leave families with little choice but to send their children to work. Teachers from the same camps echoed this concern, noting that many parents deprioritize education and view child labour as a necessary coping mechanism to earn income. In Camp 6, young men (15–24 years old) described boys undertaking physically demanding tasks such as carrying heavy goods in markets and working in brick factories, often resulting in physical injuries. Adult women (25 – 59 years old) from the same camp mentioned that some children work in construction sites and they do not get proper wages or being robbed after receiving payment. Protection actors further reported that some children face severe exploitation, including long hours, meagre wages, and, in some cases, trafficking or forced begging. For many families, the lack of adult employment opportunities pushes children into harmful work environments.

In camps 6 and 26, girls (10–14 years old) shared that they are denied educational access and are expected to sell goods in markets, work in tea shops, perform housework, or care for younger siblings. Youth women (15 – 24 years old) in Camp 6 confirmed that while boys are sent to earn income, girls are largely confined to the home. In NRC and Camp 27, boys and girls (10–14 years old) reported being involved in income-generating activities. Many children receive little or no pay, particularly when working for relatives. Some caregivers take their earnings while offering no support for education or basic needs. Refugee leaders noted that adolescents from female-headed households or families facing extreme poverty are disproportionately pushed into work. Protection partners staff in the same camp mentioned that boys aged 14-15 often work at tea stalls or are involved in drug use or carrying, while girls are more commonly employed as maids in host community houses.

> *"My son carries bricks. He earns more than I do. What choice do I have?"* @Father, Camp 26

GBV actors in Camp 5 expressed concern that income-earning children are more likely to enter early marriages, exposing them to heightened risks of domestic violence and reproductive health complications. In NRC, community leaders pointed to a link between child labour and criminal involvement, including theft, drug use, smuggling, and trafficking, particularly where children are unsupervised and vulnerable to external influences. In Camp 1E, youth women and men groups (15 – 24 years old) and teachers identified child labour as a response to family abandonment or when children become de facto heads of households. With minimal education and few skills-building opportunities available for adults or youth, children are left with no viable alternatives. Refugee leaders from KRC and Camp 26 observed that while some children work at very young age under strong family encouragement, especially when adults are unable to earn an income. The normalization of child labour is further reinforced by the absence of schools, vocational training, and structured opportunities for children under 18.

Capacity Community capacity to prevent and respond to child labour varies across groups and camps. While some demonstrate strong local engagement, others face limitations due to knowledge gaps, social norms, and limited support systems.

In Camp 6, youth women showed strong awareness of child labour risks and the importance of reporting to the CiC. They noted higher awareness in blocks like B and C, where refugee volunteers actively promote children's rights and act as referral points. Youth men in the same camp identified poverty and overcrowding as key drivers of child labour and acknowledged their role in discouraging harmful work practices. In KRC, adult men said that the

religious leaders have the capacity to provide counseling to influence family decisions and reduce reliance on child income. They proposed to be engaged in regular discussions with families and community leaders as a preventive measure. Adolescent boys in KRC, Camp 26, and NRC demonstrated knowledge of child protection services and reporting mechanisms. In Camp 26, they named the CiC office, UNHCR focal points, and the CFM desk as key reporting channels for concerns like child labour.

In Camp 27, adult women recognized their role in prevention by encouraging education and choosing formal schools over religious options. However, in Camp 1E and KRC, adult women expressed limited ability to respond due to low awareness and restrictive socio-economic conditions. Community leaders in Camp 26 and NRC showed strong engagement on child protection, including child labour. In Camp 26, they reported working with families to discourage harmful practices and promote positive parenting. In NRC, leaders expressed readiness to support block-level child protection committees and youth-led awareness campaigns.

CBCPCs and GBV activists in Camps 6 and 27 organized awareness sessions and door-to-door campaigns on child labour but reported challenges in reaching older youth and minority groups, limiting their overall impact. In Camps 26 and 27, minority groups such as gender-diverse individuals and Christians were aware of services but did not feel included in child protection activities due to stigma and exclusion from mainstream structures.

Solution Across KRC, Camp 6, Camp 27, NRC , and Camp 1E, community members consistently pointed to the need for economic relief and education-linked incentives as the most effective ways to reduce reliance on child labor. Girls in KRC and Camp 6 emphasized the importance of providing food or stipends to families, particularly those identified as extremely vulnerable individuals (EVI), to keep children in school. They also highlighted the need for engaging parents, especially mothers and fathers, in regular awareness sessions on child rights and the value of education.

Youth men in Camps 6 and 27 recommended flexible, practical education models such as part-time schooling and vocational training for boys, adolescent boys, and youth men who are out of school. They also mentioned that the government and UNHCR should create adult employment to reduce economic dependency on children's earnings. Community leaders in NRC and Camp 26 reinforced this view, proposing the development of youth skill-building initiatives and the integration of livelihoods into education through school stipends and incentives. They also suggested establishing small-scale production hubs, such as tailoring or garment zones, to create safe, age-appropriate work alternatives that do not interfere with children's education.

Teachers, GBV staff, and protection partners in NRC and Camp 1E raised the need for community-wide awareness campaigns on the harmful effects of child labor, and recommended household-level counseling and closer monitoring of UASC's school attendance. They also called for stronger enforcement of child labor laws, with active involvement from CiCs and the Armed Police Battalion (APBn), especially in high-risk work areas.

UNHCR and child protection actors should scale up targeted support for at-risk families, including cash or food assistance, particularly for female-headed households and caregivers of vulnerable children. Education partners should collaborate with CP actors to design flexible learning options and vocational training for older children who cannot attend regular school. Government engagement is essential to ensure enforcement of minimum labor age standards and coordination with camp authorities to monitor and prevent underage work.

At the community level, child protection committees, youth groups, and CBCPCs should be supported to carry out household-level engagement, identify at-risk children early, and reinforce positive caregiving practices. Meanwhile, school attendance monitoring should be linked to available support, such as school feeding or cash-for-education programmes, to improve retention and reduce dropouts, especially among working children and those in foster care.

Child recruitment by organized groups and child abduction and trafficking were raised in several camps, with varying levels of direct experience, fear, and speculation. The confirmed child recruitment by organized groups is limited but concerns from different groups suggest ongoing risks, especially for adolescent boys.

Child recruitment by organized groups: In Camp 1E, youth women (15–24 years) reported that organized groups are recruiting adolescents to cross into Myanmar and fight. One known case involved a 13-year-old boy who was killed after being abducted. Youth men in the same camp expressed fear of forced recruitment, even though no recent cases were confirmed. Shelter and settlement workers, along with teachers, said they were aware of past incidents involving children under 18 being forcibly recruited.

In KRC, boys (10–14 years) said they had heard about children from other camps being taken to fight, which caused fear in their community. Youth men (15–24 years) believed recruitment is more common in unregistered camps due to weaker oversight from the government and the humanitarian workers.

In Camp 6, boys (10–14 years) and adult women (25–59 years) described incidents of kidnapping and recruitment. These reports led some adolescents to leave the camp to avoid being targeted. GBV activists in Camp 6 said that while forced conscription is not happening now, some children in the past joined organized groups voluntarily.

In Camp 27, adult men (25–59 years) said they had heard of child recruitment in other camps but not in their own. In NRC, community leaders, adult men, and protection partners said that lack of education and job opportunities makes boys and young men (14–20 years) more vulnerable. Refugee leaders noted that children are sometimes paid small amounts, like BDT 100, to gather and pass information inside the camp. These tactics take advantage of economic hardship and trust.

Child abduction and trafficking: Reports of child abduction by refugees and unknown groups were raised in several camps. In Camps 26 and 27, girls aged 10–14 said they heard that adolescent boys and youth men had been abducted and sent to the Myanmar border to join organized groups, especially those without the supervision of parents or caregivers. They said parents should stay alert. Girls said some perpetrators, including CNG drivers, lured children with snacks or street food before abducting them. In some cases, victims were held for ransom or killed.

In Camp 1E, teachers linked child abductions to online gambling networks, suggesting digital risks are fueling new forms of exploitation. In KRC, adult women (25–59 years old) said criminal gangs are active and involved in child kidnapping. Youth women (15–24 years old) reported that these groups use children to gather information in exchange for small payments and raised concerns about increasing juvenile crime due to lack of education. They recommended religious instruction by moulavis (Imams or Muslim scholar) to support moral guidance.

In Camp 6, protection staff said kidnapping and trafficking often result from children being left unsupervised, especially in public places. Ransom was cited as a common motive. WASH and child protection staff at the Transit Centre said that the lack of secure play areas forces children to use unsafe spaces, increasing their risk of abduction.

> *"Our younger children go to play spaces. But the older ones—they are just lost." @Community Group, Camp 1E*

In NRC , teachers reported that abducted children were subjected to abuse and families received ransom demands, sometimes with threatening videos. They said law enforcement, including APBn, rarely takes proper action. In contrast, child protection actors were recognized for supporting family tracing and reunification. Refugee leaders and child protection partners expressed concern over the lack of legal action and accountability, which may be encouraging further crimes.

Across camps, common risks included the use of food or small rewards to lure children, weak adult supervision, and the absence of safe spaces. These risks are worsened by poverty, insecurity, and limited law enforcement response.

Capacity None of the FGD and KII participants directly mentioned their capacity to respond to or mitigate child recruitment, abduction and trafficking. However, some demonstrated relevant awareness and structures that could be built upon. In Camp 6, youth men showed a good understanding of broader child protection risks, including child labor and early marriage, and identified poverty and overcrowding as key drivers. Although recruitment was not discussed, their level of awareness suggests they could be engaged in prevention efforts with proper orientation. In Camp 26, adolescent boys demonstrated knowledge of key reporting mechanisms, including the CiC office, UNHCR Protection Focal Points, and the CFM desk, indicating potential for early warning and reporting if equipped with relevant information. Community leaders in Camp 26 and NYP RC were actively involved in addressing harmful practices such as child marriage and labor, and their leadership role positions them well to support prevention of child recruitment. CBCPCs and GBV community activists in Camps 6 and 27, who are already engaged in community outreach, can be mobilized further to include recruitment risks in their messaging. Teachers and service providers in Camp 1E and NYP RC identified themselves as key actors in child protection and could contribute to prevention if appropriately informed. Overall, while there are promising community structures and awareness around child protection, child recruitment remains under-addressed. This highlights the need to explicitly integrate recruitment prevention into ongoing training, outreach, and community engagement initiatives.

Solution The community suggested the importance of community vigilance, awareness, and strong coordination with local authorities and protection actors. In Camp 6 and Camp 1E, youth men and boys recommended increasing close collaboration between the refugee community with the CiCs and security forces to monitor any suspicious activities in the camps as well as organizing targeted awareness sessions to educate children and families about recruitment tactics such as how the recruiters may offer gifts, food, or small amount of money to lure children. Protection staff and teachers in Camp 26 and Camp 1E proposed to increase night patrols in high-risk areas, implement regular sensitization campaigns for both parents and children, and set up a community-based rapid reporting system for recruitment incidents. The system should include mobilizing trained community volunteers and using the existing communication tools in the community, such as mosque loudspeakers, to alert community of emerging threats. In Camp 27, community activists emphasized the need for safer environments in the camp to reduce children's exposure to the risks of recruitment. Alternative play areas, in addition to those provided by child protection partners, mitigate risks in other abandoned spaces where children often play or gather unsupervised and are vulnerable to being approached by recruiters. Safe anonymous tip-lines and youth-watch groups should be activated. Refugees called for trauma support for children returning from recruitment experiences and proposed joint counseling for their families. Youth groups asked for structured recreational activities, such as organized sports leagues, creative arts programming, and religious engagement forums, as viable alternatives to the appeal of recruitment by organised groups.

Minority and gender-diverse children face unique threats. In Camp 26, adult Christian refugees reported regular harassment and discrimination from the majority Muslim community, including being sprayed with water and excluded due to differences in religion and lifestyle. Gender-diverse individuals shared experiences of physical violence, neglect, and public humiliation, such as being forced to perform in exchange for money since adolescence. Children seen as gender-nonconforming also face social exclusion, including being forced to cut their hair or explain themselves in public spaces. In Camp 27, Christian children face restrictions in using public spaces. They reported being physically attacked by Muslim children and adults when trying to access playgrounds. As a result, their recreational activities are mostly limited to Child Protection partners' spaces (Child-Friendly Spaces or Multipurpose Centers)

Minority children from Christian and gender diversity groups experience limited mobility, peer isolation, and social exclusion. Interfaith relationships among adolescents were said to be socially unacceptable, reinforcing cultural separation. In contrast, minority residents in the Transit Center reported fewer incidents of discrimination.

Lack of access to higher education was a common concern for all minority groups. This contributes to poverty and increases the risk of child labor, especially among children from female-headed households or without paternal support. Although minority groups reported no direct cases of child recruitment or abduction, they were aware of such incidents nearby. The combination of religious discrimination, gender-based exclusion, and poverty leaves minority children with fewer opportunities and greater protection risks.

Capacity According to the discussions, the capacity of minority groups, particularly Christian and gender-diverse individuals in Camp 26 and 27 to protect children and reduce child protection risks within their communities remains limited. While some participants acknowledged awareness of available child protection services, they did not see themselves as active contributors to community-based protection efforts. This sense of exclusion is mainly caused by social stigma, limited engagement from the majority of the community who are Muslim and protection actors, and inadequate inclusion in mainstream structures. These minority groups are often disconnected from awareness activities, community-based reporting systems, and volunteer networks that are essential for early identification and response. The lack of representation and participation not only weakens the overall protection network but also leaves children from these communities at heightened risk. Strengthening the protective capacity of minority groups requires intentional inclusion in community-based child protection mechanisms, targeted outreach, and tailored capacity-building efforts. Ensuring their participation and representation will help close existing gaps and create a more inclusive and protective environment for all children in the camps.

Solution Christian and gender-diverse groups in Camp 1E, Camp 26, and Camp 27 described marginalization in education, recreation, and child protection services. Their proposed solutions included inclusive education and child-friendly spaces, targeted awareness sessions for both minority and majority groups to improve coexistence, and enabling access to reproductive health, GBV support, and safe marriage practices without stigma. They emphasized that child protection services must be available, culturally sensitive, and accessible.

Unaccompanied and separated children (UASC) are placed in informal care with extended family, but concerns about abuse and neglect persist. In KRC, youth women (15–24 years old) reported that some separated children live with extended family after being abandoned or neglected by their parents. One case involved a mentally unwell child repeatedly beaten by an aunt for asking for food, leading to calls for child protection actors to arrange safer care. Refugee leaders in the same camp acknowledged limited understanding of formal care procedures under the Best Interests Procedure (BIP), showing a gap between community practices and structured protection systems.

In Camp 26, refugee leaders and adult women (25–59 years) said many separated children live with relatives, elderly caregivers, or neighbors. Concerns were raised about poor care in some households and the lack of oversight from child protection actors. Protection partners in the camp confirmed that most care arrangements for UASC follow BIP procedures and foster families may receive support, but the ongoing financial constraints could threaten this support and reduce caregivers' willingness to take in children. In NRC, community members highlighted custody disputes and the absence of formal guardianship or adoption mechanisms, further complicating care arrangements.

Across camps, GBV actors and CP partners noted the widespread reliance on informal care within extended families, which offers familiarity but may expose children to neglect, exploitation, or lack of

accountability, especially where poverty and social stigma are involved.

Capacity Community members across several camps demonstrated a growing understanding of the needs and responsibilities involved in supporting UASC, reflecting both awareness and emerging capacity to contribute to their care and protection. Youth women and adult men in Camp 26 and KRC recognized the importance of stable caregiving environments and the need for sustained support to ensure quality care. Community members, including youth, caregivers, teachers, and service providers, are willing and capable of supporting UASC when provided with appropriate training, oversight, and resources.

Solution In Camp 26 and KRC, youth women and adult men proposed a more structured approach to UASC care arrangement, combining short- and long-term foster care options, caregiver training, and targeted support for fostering families. In Camp 1E, GBV and child protection actors emphasized the need for closer oversight of foster arrangements, improved identification and mapping of child-headed households, and the provision of incentives to the foster families to help UASC continue their education. These suggestions point to both frontline engagement and a practical understanding of service gaps. Community members also expressed openness to considering spouses without children as potential foster caregivers, suggesting flexibility in community norms around caregiving roles. In NRC and Camp 26, teachers reinforced the importance of family-based care by recommending placement with known relatives and regular home visits by child protection actors to monitor safety and well-being. The existing formal foster care registry should be formalized and paired with positive caregiver training and modest financial incentives. Legal pathways should be created to support resolving custody disputes and provide guardianship documentation in addition to the existing Best Interests Procedure (BIP) and Best Interest Determination (BID).

Gaps in child protection services were consistently raised by participants across different camps. Discussions with various groups revealed challenges in accessibility, quality, and awareness of child protection services in the selected Rohingya refugee camps.

In Camp 27, adult women (25–59 years old) noted that children often spend time playing or quarreling at school due to frequent teacher absences. Some parents send their children to maktabs (religious schools) because of dissatisfaction with the quality of formal education and limited parental understanding of its importance. A similar concern was raised in KRC, where adult men (25–59 years old) highlighted that teachers sometimes bring their infants to class, which disrupts the learning environment and undermines the quality of education.

Girls (10 – 14 years old) in Camp 6 and CP volunteers in Camp 27 mentioned that communities are often excluded from meaningful involvement in child protection programme design. Outreach remains limited, especially for children with disabilities, minority children, and adolescent girls. In KRC and NRC, youth women (15 – 24 years old) shared concerns that CP messages are often repeated without being linked to tangible support.

Limited awareness of child protection risks and available child protection services was also raised. In NRC, youth women (15–24 years old) observed that many parents are unaware of when children are at risk and require their intervention or support, leaving children more vulnerable. In Camp 1E, both shelter and settlement workers and GBV partner staff emphasized a general lack of awareness among both refugees and frontline workers about available child protection services. Although GBV partners could name services such as case management and alternative care arrangements, the environment and energy workers in the same camp reported not knowing about safe spaces for UASC or family tracing and reunification support. This reflects a lack of inter-sectoral coordination, weakening referral pathways and may delay timely protection interventions.

In KRC and the Transit Centre, adult men (25 – 59 years old) reported the absence of a foster care pool, leaving UASC in the care of untrained neighbors or extended family members. They also pointed to the lack of higher education opportunities and official

certification for refugee children, which limits their future prospects.

In NRC, community leaders pointed to a lack of playgrounds and child-friendly spaces, noting that adolescents and youth are more likely to engage in harmful or illegal behavior when safe alternatives that are suitable to their age are unavailable. Age restrictions at multipurpose centers were also reported to limit access for older children and adolescents. CP volunteers were described as lacking adequate training and support to manage children in difficult situations, particularly in NRC, where adult men and community leaders recommended additional training and supervision.

In Camp 27, GBV activists reported the absence of community-based child protection programming. Environmental risks were also flagged by settlement workers in the same camp, who noted that current settlement planning does not prioritize child safety. Hazards such as uncovered drains, open ponds, steep staircases, and poor road safety increase the risk of injury, particularly for unsupervised children. These concerns were echoed by adult men in NRC, who called for more child-sensitive planning across the camps.

Capacity The community members across several camps have demonstrated existing capacities that can help fill these gaps of the identified child protection services. In Camp 6, youth women and men showed a strong understanding of child protection issues, particularly child labor and early marriage. They also recognized the role of proactive refugee volunteers in raising awareness and linking children to services, particularly in blocks with stronger community engagement. This suggests that youth and volunteers can serve as key actors in early identification and community-level referrals.

In KRC, adult men and youth women acknowledged informal mechanisms, such as using religious leaders and family discussions, to influence the community's negative behavior and address protection risks. While some practices, such as paying moulavis (Muslim religious scholar) with rations, reflect gaps in formal education, they also show the community's willingness to find alternative solutions. These informal systems can be strengthened through capacity building and coordination with formal structures.

In Camp 26 and NRC, adolescent boys demonstrated awareness of reporting channels, including the CiC office, UNHCR focal points, and the CFM desk. Their familiarity with referral mechanisms and their use of mosque loudspeakers for emergency alerts show potential for youth-led advocacy and community response, especially in urgent situations. Adult women in Camp 27 also showed their ability to influence decisions around child marriage and education by encouraging daughters to attend formal schools instead of maktabs.

Community leaders in Camp 26 and NRC presented the strongest institutional awareness of child protection responsibilities. Their ongoing engagement with families, promotion of positive parenting, and involvement in responding to child labor and marriage risks show that they are already filling critical gaps where formal services are limited. Their call for support to strengthen block-level CP committees and involve youth and teachers further demonstrates readiness to scale community-led solutions.

CBCPCs and GBV community activists in Camps 6 and 27 have been conducting awareness sessions and door-to-door campaigns. Although they reported limitations in coverage and coordination, their existing involvement reflects strong potential to expand outreach and strengthen referrals, particularly with targeted training and support. In the Transit Center, some adult caregivers expressed willingness to assist unaccompanied children, despite limited formal foster care pool management, suggesting that with proper guidance, informal networks could provide temporary protection and care.

Teachers and service providers across Camp 1E and NRC recognized their frontline role in child protection and proposed involving educated youth and community members in training and awareness. Their understanding of the service gaps and willingness to take on more responsibility indicates an opportunity to improve coordination between formal actors and the community.

Solution Participants recommended expanding child-friendly spaces and ensuring that existing spaces are inclusive of adolescents and children with disabilities. Structured recreational activities such as arts, music, and sports were highlighted as effective ways to improve psychosocial well-being. Camp-based protection teams should conduct routine outreach to identify children at risk and follow up with survivors of abuse, while ensuring families receive feedback and updates throughout the case management process.

Refugee leaders in Camp 6 noted that trained CP volunteers could bridge the gap between service providers and the community if equipped with clear referral tools and supported by trained caseworkers.

Teachers and volunteers (GBV, Shelter, Energy and Environment) in Camp 1E emphasized the need for refresher training on child protection referral mechanisms and services. Adolescent girls in NRC and boys in KRC advocated for inclusive youth platforms where youth and adolescents could raise concerns with protection actors.

Youth across several camps proposed the formation of adolescent advisory groups, where young people could advise humanitarian agencies on the appropriateness and delivery of services. These groups could also coordinate child-led initiatives and campaigns, such as awareness sessions or community clean-ups, to strengthen engagement. Participants emphasized that case management services should be linked to education, health, and GBV partners, ensuring a multi-sectoral response to child protection risks.

Participants recommended providing safe, anonymous feedback boxes in learning centers, distribution sites, and child-friendly spaces to ensure that children have confidential ways to share concerns. Many urged humanitarian agencies to adopt a more sustained presence in camps, with regular feedback and trust-building to restore confidence in protection services.

Safety and access to justice (OA6)

Right to liberty and security

Problem Participants cited the escalation of abductions, kidnappings, human trafficking, and extortion as widespread threats. In Camp 1E and Camp 6, youth women reported organized groups forcibly taking women and adolescent girls, often using threats or deception. These groups operate both inside and along the perimeters of camps, taking advantage of overcrowded shelters, poor lighting, and minimal patrolling. Several reports from Camp 6 noted that organized groups members are actively involved in organizing kidnappings, sometimes targeting individuals known to have relatives abroad or receiving remittances.

> *"We don't know if our daughters will return once they leave the shelter. There's no one to protect us but ourselves."* @Youth woman, Camp 6

Children and adolescents are also vulnerable. In KRC and Camp 27, boys aged 10 to 14 shared that smuggling routes pass through their areas, and peer pressure to act as lookouts or messengers for traffickers is growing. In one documented incident, a Christian child with an intellectual disability was harassed by neighbors and left without meaningful intervention from camp authorities. Child protection staff confirmed that youth fear retaliation and often stay silent after witnessing or surviving abduction attempts.

Refugees also spoke about a decline in communal safety, citing theft, intimidation, and threats occurring even during the day. Women in KRC explained how factional tensions within blocks have led to revenge attacks and exclusion of minority or "less connected" families. In multiple locations, including Camp 26, community leaders confirmed that those voicing security concerns face backlash, and many now avoid reporting incidents due to fear of retribution or loss of aid.

Capacity While formal security mechanisms exist—including focal points for safety and law enforcement engagement—many are perceived as inaccessible, ineffective, or untrusted. Refugees reported that police responses are slow, sometimes dismissive, and in some cases, suspected to be complicit in failing to protect camp residents. Some capacity exists at community level: self-organized safety committees, informal patrols, and family-based protective practices like escorting women to latrines or discouraging movement after dark. However, these are not standardized or supported and often place pressure on individuals without addressing root causes.

Committees led by Majhis were cited in Camp 6 and Camp 26, yet participants noted a lack of coordination with formal protection actors. Victims of kidnapping or their families frequently rely on borrowing money to negotiate the return of loved ones, especially in cases where the abductors demand ransoms. Several participants also spoke about community-based trauma—the long-term fear and anxiety resulting from unchecked violence, particularly for women and children.

Solution Participants called for an integrated, multi-level strategy to restore security and uphold their right to protection. Central to these proposals was the immediate need to increase physical safety measures: better lighting, fencing around high-risk areas, visible patrols (preferably community-supported), and secure safe spaces for women, children, and persons with disabilities. Many requested that camp safety focal points be more accessible, trained in survivor-sensitive approaches, and integrated into wider camp governance structures.

From a systems perspective, refugees advocated for the revival and formalization of community protection committees—including youth, women, and elders—with direct links to law enforcement, UNHCR, and protection actors. Refugees emphasized the need for stronger investigation and prosecution of kidnapping and trafficking cases, especially when perpetrators are known and remain unpunished. Youth women and minority groups also called for targeted engagement to ensure those most at risk are not overlooked in broader camp security responses.

Lastly, participants urged humanitarian actors to conduct confidential case follow-ups, provide psycho-social support to victims and witnesses, and involve community dialogue platforms to break the culture of fear and silence that now surrounds these crimes.

> *"When a child disappears, we mourn quietly. Speaking up brings threats, not justice."*
> *@Community leader, Camp 26*

Freedom of movement

Problem In camps such as KRC, Camp 1E, Camp 27, and the Transit Centre, refugees of all ages and backgrounds expressed strong dissatisfaction with the restrictions placed on their freedom of movement. The limitations not only affect day-to-day access to services and livelihoods, but also reinforce a broader sense of confinement, dependency, and vulnerability. Refugees described living under rules that strictly control their ability to move between camps or leave the camp area altogether. Youth girls from KRC explained that even though many were born in Bangladesh, they are still treated as "outsiders," with no access to external education or recreational opportunities. This feeling of exclusion is compounded by the perception that permissions are arbitrary, unevenly applied, or manipulated by powerholders.

Adult men from the Transit Center emphasized the harsh reality of checkpoints and the requirement of CiC or APBn permission to travel—even for medical emergencies. Multiple participants recounted incidents where individuals were denied exit despite having medical documentation. One case mentioned a disabled refugee who had to abandon a hospital referral because no escort or clearance was provided in time. Adolescent boys in Camp 27 noted that when they attempt to move to other blocks or camps, they are often subjected to identity checks and accused of suspicious intent. Refugees from minority groups described regular harassment at checkpoints, including verbal abuse, bribery demands, and physical intimidation. In some cases, women reported being too afraid to leave their shelters due to aggressive behavior by guards or the fear of being accused of attempting to flee.

> *"We are not prisoners, but we are treated like we don't have the right to breathe beyond the fence."*
> *@Adult woman, Camp 27*

The restriction on movement has also produced serious protection and economic impacts. Adult women explained that employment opportunities are largely inaccessible unless facilitated within their immediate block. Those seeking training, health care, or distribution services across the camp face logistical and social hurdles. The rigidity of movement rules has further prevented camp residents from engaging with host community markets, exacerbating food insecurity and limiting coping mechanisms. During emergencies, such as floods or fire, participants described the chaos and confusion caused by the inability to evacuate quickly due to blocked exit points and the absence of pre-approved permissions. In Camp 1E, GBV partners flagged that women escaping violence may have no safe place to go if they are unable to move freely to another part of the camp.

Capacity Despite these serious constraints, refugees and partners proposed pragmatic and community-grounded solutions. Participants suggested that UNHCR and CiC offices work together to formalize a more transparent movement policy, including the issuance of valid, recognized IDs that allow travel within the camps and surrounding areas. Refugees recommended that emergency medical and protection cases be granted immediate clearance, supported by a pre-designated focal point with round-the-clock access. Persons with disabilities asked that escort mechanisms be standardized, including volunteers or community members designated to support their safe movement. Community members also called for camp-wide orientation and rights awareness sessions, to ensure refugees know their entitlements and responsibilities around movement and can report harassment or abuse at checkpoints.

Solution Security actors, such as the APBn, were asked to undergo training on refugee rights, conflict-sensitive practices, and gender-sensitive patrolling techniques, especially around high-risk areas such as checkpoints, latrines, and learning centers. Several respondents emphasized the need for an independent complaints system, where abuses by security forces could be confidentially reported and followed up by protection actors. Host community representatives added that more interaction and positive engagement between refugees and local authorities could help reduce suspicion and encourage a policy shift toward greater mobility and inclusion.

> *"Even when my child needed urgent care, we had to wait for permission. Sometimes, the permission never comes."* @ *Adult man, Transit Center*

Access to justice

Problem Participants highlighted that the formal judicial system is slow, complex, and often intimidating. Youth women from Camp 1E noted that pursuing justice—especially in GBV cases or land disputes—is time-consuming and discouraging, with hearings delayed or abandoned entirely due to bureaucratic hurdles or lack of follow-up. In Camp 27, host community representatives explained that even when perpetrators are arrested, they are often released quickly or bribe their way out, undermining survivors' faith in any form of legal accountability.

In several camps, refugees reported that informal justice structures, particularly Majhis and block committees, have taken on the role of mediating disputes. However, this has introduced a parallel justice system that often favors those with influence or resources. In Camp 26 and the NRC area, adult men reported cases where committees asked for money to resolve or prioritize complaints, further reinforcing inequality and limiting justice for those without financial means. In Camp 1E, GBV activists raised concerns that Majhis were presiding over intimate partner violence cases, leading to outcomes that silenced or re-traumatized survivors, particularly women and adolescent girls.

The issue is even more severe for persons with disabilities and minority groups, who are often excluded from justice processes altogether. At the

Transit Centre, persons with disabilities reported confusion about whom to approach and a lack of accommodations during hearings or complaint procedures. In Camp 26, women from marginalized backgrounds noted that complaints involving them were frequently deprioritized or dismissed without explanation.

> *"Majhis say they're solving our problems, but sometimes they just make them worse—especially for girls."* @Youth woman, Camp 1E

Capacity While the presence of legal actors and protection partners in some camps was acknowledged, their visibility and approachability remain limited. In Camp 1E, participants recognized that legal aid is technically available but noted that actors were hard to reach or unable to provide support beyond basic referrals. Legal literacy among refugees especially women, persons with disabilities, and youth remains low, and very few know how to file complaints formally or what outcomes to expect. However, in some blocks, community-based activists and trained refugee paralegals have started to raise awareness and help individuals navigate justice systems more effectively.

There is also a recognition of potential within existing structures. Community leaders expressed willingness to improve their roles if given proper training and oversight. Some adult women highlighted that when Majhis were instructed clearly by CiCs to refer serious protection cases to legal actors, outcomes improved. However, this coordination is inconsistent and often depends on the personality or interest of individual block leaders or CiC officers.

Abuse of authority

Problem Youth women in Camp 1E recounted how APBn officers, rather than ensuring protection, extort money from small shopkeepers, vehicle drivers, and even individuals moving goods between blocks. In Camp 6 and Camp 26, adolescent boys and youth men described illegal taxation and manipulation by Majhis, who demand bribes for token issuance, referral approvals, or access to distributions. These practices extend even to services such as rental permissions, use of sound systems, or gathering approvals—turning essential community life into an informal economy of gatekeeping.

Solution Refugees proposed a range of solutions to ensure more equitable and survivor-sensitive access to justice. Youth women emphasized the need for justice services to be physically and socially accessible, with dedicated focal points for women and girls. Participants called for refresher trainings for Majhis and community leaders to clearly define which types of cases should be mediated and which should be referred to legal actors. Several groups suggested that UNHCR and partners deploy roving legal aid teams to conduct regular case reviews, particularly in blocks with high numbers of unresolved disputes.

Participants also requested the establishment of community complaints platforms that are neutral, multilingual, and physically accessible—including visual signage and complaint drop boxes. Host community members in Camp 27 urged for cross-sectoral coordination between refugee and Bangladeshi justice actors, especially for cases that involve cross-border or intergroup disputes. Persons with disabilities highlighted the need for legal support services that account for physical and communication barriers, including accessible hearing spaces and sign language interpretation.

Participants agreed that justice must not only be delivered but seen to be delivered. They requested greater transparency and follow-up on legal outcomes, particularly in criminal or GBV-related cases, to restore trust and ensure community protection standards are upheld.

> *"We don't want revenge. We want someone to listen, believe us, and do something."* @Person with disability, Transit Centre

Adults in Camps 26 and 27 reported harassment and violence during night patrols, where APBn officers have allegedly entered shelters without consent or physically assaulted male youth. Elderly individuals and those with disabilities shared that even when they approach local authorities for help, they are often ignored, belittled, or told to pay in order to file a complaint. In KRC, shelter staff and host community members confirmed that corruption runs deep within both police and camp committees, with some members openly requesting bribes to "facilitate justice" or resolve disputes.

> *"You can't move a chair, open a shop, or even charge your phone without someone asking for money."* @Adult man, Camp 26

In several cases, CiCs and humanitarian actors were aware of misconduct but did not intervene effectively. Teachers and GBV focal points in NRC raised the alarm that abuse of power is normalized, and those who speak out face retaliation, loss of aid eligibility, or even eviction threats. This climate of fear undermines not only refugee protection but also the integrity of humanitarian space.

Capacity Despite the systemic challenges, some camp residents have organized around community feedback mechanisms and protection focal points. In Camp 1E and Camp 27, older persons and refugee leaders mentioned helplines and complaint desks, although many said they were underutilized or lacked follow-up. A few reported successes when CiC offices intervened—particularly when community pressure was high, or complaints were jointly submitted through formal channels. Shelter staff and community workers also reported trying to de-escalate disputes and advocate with partners to avoid confrontations with abusive authority figures, but with limited leverage.

Some capacity exists within community structures to monitor and report abuses, yet it remains informal, under-supported, and fragmented. Youth and women in particular feel disconnected from decision-making platforms, with very few mechanisms to hold Majhis or APBn accountable.

Solution Refugees called for a comprehensive oversight and accountability framework to combat abuse of authority at all levels. First, they demanded the establishment of an independent complaints body, managed by UNHCR or an external neutral party, where individuals can safely report cases of abuse, extortion, or threats. Several proposed the deployment of trained ombudspersons or rights monitors who conduct regular spot checks and community consultations—particularly in high-risk blocks.

Majhis and committee members should undergo mandatory code of conduct training and be subject to community voting or performance evaluations tied to humanitarian standards. APBn officers, meanwhile, must receive consistent protection-sensitive and rights-based training, with a particular focus on ethics, conflict resolution, and gender-based protections. Teachers and youth suggested that protection committees be revitalized and diversified, ensuring representation of women, persons with disabilities, and minority groups, so that no one powerholder dominates the justice space.

Lastly, refugees requested public communication of investigations and disciplinary measures, without exposing complainants. This would serve both as deterrence and a sign of restored trust in the system.

> *"They say they're here to protect us. But who protects us from them?"* @Youth woman, Camp 1E

Organized criminal activities

Problem Children and youth reported being direct witnesses to gunfire exchanges, organized killings, and factional battles among rival groups. Boys aged 10 to 14 in Camps 6 and 27 described gunfights as "a weekly fear," sharing how their learning centers and playgrounds often go unused due to the risk of

stray bullets. In some cases, they heard about children from neighboring camps being kidnapped or forcibly recruited. Protection partners in the Transit Centre confirmed that criminal elements have resorted to ransom kidnappings, particularly of boys, with threats issued to families who cannot pay.

In Camp 1E and Camp 6, youth women described growing incidents of civilian deaths, sexual violence, and targeted threats, especially for those who resist or refuse involvement with organized groups. GBV partners flagged that survivor of conflict-related violence, including rape, do not report due to fear of retribution. Criminal groups—some armed and others operating under informal influence—have also been implicated in nighttime raids, extortion, and house-to-house intimidation. Multiple accounts in NRC areas mention that organized crime is so embedded that civilians feel unprotected even by law enforcement, with some alleging complicity or non-responsiveness from APBn forces.

Community leaders in Camp 6 and Camp 26 noted that violence often peaks during periods of political transition or religious holidays, when power dynamics shift, and groups assert territorial control. WASH and protection staff further indicated that conflict often coincides with service disruptions, as frontline staff are unable to safely access parts of the camp. In Camp 27, gunfights have damaged shelters and even basic infrastructure like latrines and solar lighting, leaving large sections of the camp in disrepair and darkness.

Capacity Despite the severity, some community-based protective practices exist. Families have begun self-relocating away from high-risk zones, though this often disrupts service access. In a few blocks, community patrol groups—comprised of adult men and male youth—have formed informal watch systems, although these remain under-resourced and lack formal recognition or support. Community leaders acknowledged the strong bonds among neighbors, especially during violent nights, when families share shelters for protection or provide emergency first aid to the wounded. Teachers and shelter staff in NRC areas spoke of psychological resilience among children, but also noted that trauma is accumulating with few outlets for support or recovery.

Some Majhis and youth leaders have taken it upon themselves to report threats or monitor group movements, but these efforts are fraught with risk and often targeted by the very groups they attempt to track. Legal reporting is rare due to the absence of confidential, protective channels and the widespread belief that no meaningful protection will follow.

Solution To address the growing threat of armed violence, participants proposed multi-tiered interventions focused on deterrence, protection, and recovery. Central to these calls was the demand for a greater and more consistent law enforcement presence—including increased patrolling at night, protection of community leaders, and immediate responsiveness to gunfire or criminal activity. Some suggested the deployment of the military (army) in the most insecure zones, while others proposed a rotation-based system of external, neutral security monitors, not affiliated with existing power structures.

Refugees requested that UNHCR and protection partners conduct joint camp risk mapping, identifying hotspots and establishing safe zones for women, children, and persons with disabilities, particularly during heightened periods of tension. There was also a strong push to strengthen community-based surveillance, including training and compensating selected focal persons to act as protection observers and relay concerns through secure channels.

Participants called for increased mental health and psychosocial support (MHPSS) services, especially for children and survivors of armed violence. Teachers and youth mentors suggested mobile trauma teams and safe corners in learning centers to help children process what they witness. Finally, several adult men and youth requested that organized group demobilization and reintegration strategies be explored with government and civil society partners, recognizing that some youth involved in violence are victims of coercion or lack alternatives.

Right to life

Problem Refugees consistently spoke of direct, immediate threats to their lives. Youth women in Camp 1E shared how members of criminal networks openly threaten them and their families if they refuse to cooperate, or if they speak out about extortion or harassment. Refugee leaders in Camp 26 reported that killings of civilians—whether through targeted attacks or crossfire during organized group clashes—have become increasingly common, with several recent incidents causing widespread trauma.

Children aged 10–14 in Camp 6 described seeing bodies near their shelters or hearing gunshots at night. These events have not only created normalized fear, but also stripped away childhood entirely for many. Teachers in NRC areas spoke of growing absenteeism in classrooms, as parents keep children at home due to safety concerns. In several blocks, older persons and minority group members reported that they were explicitly targeted due to past family affiliations or religious identities. In TC and Camp 26, Christian households were reportedly told to leave or face violence, with some threatened for attending religious gatherings.

The use of death threats as a tool for control was repeatedly mentioned—whether to enforce silence, coerce marriages, extract money, or punish dissent. Refugees noted that perpetrators frequently boast that they cannot be held accountable, as law enforcement does not intervene or is viewed as complicit. In some blocks, refugees explained that simply speaking out about these threats could put an entire family at risk.

> *"We don't talk to neighbours anymore. One wrong word, and you might not wake up."* @Youth woman, Camp 1E

Capacity Despite the high risks, refugees have demonstrated remarkable self-organization and vigilance. In Camp 6 and Camp 26, community members have started night patrol rotations in their blocks—largely informal, unsupported, and driven by necessity. These patrols are often made up of adult men and youth and have helped deter some low-level threats but remain vulnerable to confrontation with organized groups.

In KRC, victims of threats sometimes seek assistance from humanitarian staff or protection actors, but follow-up is inconsistent. There is limited knowledge of existing legal or protection pathways, and a widespread sense that such avenues are either unsafe or ineffective. Some older participants noted that imams and religious elders occasionally mediate conflict or discourage revenge attacks, but even these roles are increasingly marginalized by the growing boldness of criminal groups.

Among minors and youth, the coping strategies include hyper-vigilance, self-isolation, or relocation, with some families moving across blocks or even to different camps to escape known threats. However, these shifts often lead to the loss of access to aid and services, making displacement both a survival tactic and a new vulnerability.

Solution Participants called for urgent and comprehensive interventions to restore their right to life and physical safety. There was a unanimous call for the deployment of external and neutral security forces, such as the Bangladesh Army, to high-risk areas in place of APBn officers, who are widely seen as ineffective or compromised. Refugees demanded enhanced night patrolling, emergency response teams, and functional alert systems, especially in densely populated blocks and near known conflict zones.

Community members suggested the establishment of block-level security monitors or focal points, trained and supported by humanitarian agencies, to document and escalate high-risk threats. They also called for confidential hotlines that link directly to protection actors or CiC offices without routing through intermediaries who may be compromised.

Youth and adults alike advocated for visible, consistent follow-up on reported threats, including public action on known perpetrators. Some groups suggested that refugee-led protection committees be formally recognized and resourced, with a mandate to monitor safety conditions and support safe relocation of high-risk families. Religious and minority leaders requested specific protective measures for faith-based gatherings, including event-based security and privacy.

Participants also called for survivor support services, including trauma counseling, legal assistance, and urgent shelter relocation for families facing imminent threats.

> *"They kill with no mask, no fear, no consequence. And we just pray we are not next."*
> *@Adult man, Camp 26*

Right to personal integrity

Problem In Camp 1E, older persons shared multiple cases of physical assault, including beatings by unknown individuals and attacks stemming from intra-community disputes. One 60-year-old man explained that the elderly are often targeted for small-scale theft, resource competition, or even out of frustration, with very limited ability to defend themselves or seek recourse. Health workers in Camp 6 corroborated this through their clinical observations: patients frequently present with injuries from violence occurring either inside their shelters or in nearby community spaces. These injuries are often underreported or attributed to "falling" out of fear, stigma, or hopelessness.
In Camp 27, child protection actors and shelter workers raised concerns about community-level violence related to land access and ownership. In areas where shelter expansion or relocation is contested, families—particularly those lacking strong community networks—face harassment,

forced removal, or retaliatory attacks. A Shelter and Settlement partner in Camp 27 shared that approximately 80–90% of the land is contested, either informally claimed by influential individuals or assigned without transparent consultation, leading to frequent verbal and physical confrontations.

Participants noted that these incidents often occur in private, are not documented, and are rarely investigated. Victims fear that reporting the violence will result in backlash, especially when perpetrators are linked to powerful actors or community leaders. The lack of visibility and institutional response allows a culture of impunity to persist, undermining the safety and bodily security of refugees—particularly the most vulnerable.

> *"They hit me for asking why they built on my path. I cannot fight back. I just stay quiet now."*
> *@Older person, Camp 1E*

Capacity Refugees and frontline actors indicated that formal capacity to address personal integrity violations is limited, especially in the context of rising communal tensions. In Camp 27, some land-related incidents were informally mediated by shelter partners, but without legal mandate, the solutions were often temporary or incomplete. Health workers in Camp 6 noted that while they can document injuries, they are not equipped to initiate protection referrals unless the survivor explicitly consents, which rarely occurs.

In Camp 1E, older persons mentioned relying on neighbors or distant relatives to intervene during threats, but such interventions are informal and dependent on relationships. Shelter actors acknowledged that while conflict-sensitive site planning has been discussed, enforcement remains uneven, and protection teams often intervene after harm has occurred, not before.

Despite these gaps, there is a collective awareness among protection and shelter staff that better systems are needed, and a willingness to pilot more proactive mechanisms—such as joint monitoring, evacuation protocols for high-risk shelters, and community engagement around bodily integrity rights

Solution Participants recommended that UNHCR and partners prioritize the integration of personal integrity safeguards into broader safety and shelter strategies. First, they called for formalized reporting mechanisms for physical assault and shelter-related violence—separate from armed violence channels—to ensure that "private" violence does not remain invisible. This includes assigning camp-based personal integrity focal points with training in confidentiality, trauma sensitivity, and survivor-centered approaches.

Health workers requested clearer guidance on how to triage patients with violence-related injuries into protection systems, with defined pathways for legal, psychosocial, and shelter referrals. In Camp 27, protection staff urged for a land use and shelter allocation grievance platform, where complaints and threats related to shelter boundaries, occupancy, and inheritance can be submitted without facing retaliation.

Older persons and community structures also recommended peer protection groups, where those at risk—especially the elderly and isolated—can be identified and monitored through regular home visits, either by volunteers or protection-trained community members. They further called for stronger CIC and police presence in known high-conflict shelter zones, and for protective action to be proactive rather than reactive.

Finally, participants emphasized the need for public messaging on bodily autonomy and non-violence, especially through imams, teachers, and camp leaders, reinforcing that no one should be touched, harmed, or threatened regardless of land, resources, or relationships.

Community engagement and women's empowerment (OA7)

Information, communication, feedback and response

Problem Participants outlined several interrelated barriers to effective information and communication in the camps. First, there is a severe gap in awareness and outreach, particularly for harder to reach groups and minorities. Christian refugees in Camp 27, persons with disabilities, and adolescent boys in KRC revealed that they had never heard of the Complaints and Feedback Mechanism (CFM) or assumed it only functioned for grievances about distribution . In many cases, those outside mainstream block leadership structures remain cut off from updates, unknowing how to access complaint desks or unaware of how to escalate concerns beyond their immediate community.

Second, a recurring theme was the inaccessibility and non-responsiveness of CFM mechanisms. Youth women in Camp 6 explained that while help desks and complaint boxes exist, responses are rarely provided or arrive too late to address urgent issues. Participants in the transit center (TC) highlighted that protection-related complaints—especially regarding security threats, GBV, or eviction—were often ignored or deprioritized, contributing to a perception that the CFM is only "for minor issues." In Camp 26, community members noted that complaint channels are unevenly staffed, with some concerns receiving prompt attention while others are entirely unmonitored.

Third, there is a trust deficit and fear of reprisal, particularly among older persons and those reporting against influential figures such as Majhis or the APBn. In Camp 1E, older persons said they "prefer to remain silent" after seeing neighbors face consequences for complaints submitted anonymously. This chilling effect is compounded by inconsistent follow-up and lack of community-wide communication about what actions were taken in response to complaints submitted.

Fourth, the language and modality of communication remain exclusionary. Information boards are rarely updated, located far from shelters, or contain content not tailored for low-literacy populations. Shelter and protection staff in Camp 26 noted that many refugees receive third-hand information, risking distortion and misinformation.

Fifth, the referral and feedback loops between service providers are often broken. Refugees in the NRC area stated that after submitting complaints through one agency, they were redirected multiple times without clarity on who was responsible for addressing the issue. GBV partners and child

protection staff confirmed that this lack of harmonized response creates frustration and damages credibility, especially for sensitive protection cases. Community spaces and outreach initiatives are insufficient, limiting refugees' ability to engage in recreational, educational, and social activities. Many community centers are either too far away or lack adequate play materials, making them inaccessible or unappealing. Adolescent girls face additional barriers, as cultural norms restrict their movement, especially after puberty.

Communication gaps further exacerbate these issues. Low literacy rates and language barriers prevent many refugees from understanding available services, referral pathways, or emergency announcements. Information boards are often damaged or outdated, and outreach efforts are inconsistent, leaving vulnerable groups—such as women, the elderly, and Persons with Disabilities—uninformed.

Capacity Despite the gaps, certain strengths were identified. Community Outreach Members (COMs) and some trained refugee volunteers in Camp 6 and Camp 27 were mentioned as effective frontline actors for conveying updates and encouraging feedback submissions. Youth networks, particularly among boys and male youth, have developed informal reporting channels, including WhatsApp group sharing, that enable faster alerts—though these are limited by reach and not officially recognized.

Refugee leaders in KRC and the Transit Center indicated they were willing to serve as trusted intermediaries between their communities and service providers but require training, supervision, and support to play this role responsibly. Teachers and protection partners also described pockets of improved trust where complaints were followed up on and actions communicated clearly demonstrating that change is possible with consistent effort. Communication improvements proposed by refugees include developing pictorial guides and audio recordings to overcome literacy barriers. They recommend training "information ambassadors" from different age groups and neighborhoods to cascade messages effectively. Many stress the importance of regular, predictable information sessions at mosques and community centers, suggesting these could double as feedback collection opportunities. Several tech-savvy youth have offered to help develop simple mobile apps or voice message systems for service information.

Solution To strengthen feedback and communication systems, participants proposed a comprehensive overhaul based on local context, linguistic access, and real-time responsiveness. First, there was broad consensus that the CFM should be restructured and decentralized, with complaint boxes, mobile help desks, and trained volunteers embedded in each block—especially in larger or geographically spread-out camps such as Camp 27.

Participants called for clear, consistent messaging using multiple channels—audio announcements, community radio, pictorial messages for low-literacy populations, and periodic community meetings facilitated by COMs and trained partners. Youth and minorities requested that feedback boards be posted in visible, safe spaces, showing actions taken on past complaints to restore credibility and transparency.

Protection actors were advised to assign, and train dedicated focal points for each sector to ensure that complaints related to health, GBV, WASH, or shelter receive specialized follow-up. Refugees further recommended that humanitarian partners regularly review feedback logs, publicly share trends in community concerns, and close the loop through direct outreach to affected populations.
Several groups emphasized that meaningful communication is not just about delivering messages but ensuring that communities feel heard and respected including by involving them in feedback analysis, service planning, and complaint resolution review committees.

> *"If only the complaints board could talk back to us—we post our pain, and nothing comes back."*
> *@Youth woman, Camp 6*

Community engagement

Problem The most frequently cited challenge was the concentration of decision-making power among Majhis and a small number of male figures, leading to the exclusion of, predominantly, youth and female voices. In Camp 1E and Camp 26, youth women reported being "invited to attend but not to speak," particularly during community meetings led by block leaders. Participants explained that decisions are made without broad consultation and that individuals expressing dissent often face stigma, ridicule, or social isolation.

> *"They say it's a community meeting, but only Majhis talk. We just sit and clap."* @Youth woman, Camp 26

In Camp 6, adolescent girls and education partners noted that gender norms and household restrictions severely limit female participation in community structures. Female volunteers described being denied entry into certain meetings or receiving pushback from families for taking public roles. GBV partner staff confirmed that community engagement often reproduces patriarchal hierarchies, rather than challenging them. As a result, youth women, single mothers, and marginalized individuals are left out of processes meant to support community development.

Another critical issue is the passive nature of engagement, where communities are viewed as beneficiaries, not active agents. Refugees in Camp 1E and KRC shared that many residents feel "disconnected from decisions" and "afraid to challenge authority," with humanitarian engagement perceived as one-directional. Refugees in Camp 26 stated that feedback mechanisms are transactional, with no expectation that their voices will influence policies or service planning.

Additionally, some community leaders themselves are seen as reinforcing harmful practices, such as early marriage, gender-based exclusion, or tolerating abusive behaviors by those in power. Protection staff noted that despite holding leadership roles, Majhis are rarely held accountable, and often prioritize their own kin or political networks in aid and shelter allocation.

Capacity Despite these concerns, refugees identified strengths within the community that can be harnessed. In Camp 6 and KRC, youth groups and faith-based volunteers have led awareness sessions on rights, inclusion, and gender equality, particularly around issues like GBV and health. Education partners shared that school-based clubs have provided space for children to develop leadership skills and confidence.

Child protection actors emphasized that community-led childcare groups and peer-based support systems are strong in several camps, and these platforms could be expanded to include advocacy and service planning. In Camp 26, religious leaders and some Majhis expressed willingness to engage in more inclusive leadership, particularly when supported with training and tools.

Some GBV and protection partners have piloted community-led action plans, with mixed success. When properly resourced, these groups have facilitated dialogue on security risks, awareness of legal rights, and inclusive planning for services. However, sustainability remains an issue due to high turnover and limited integration into formal camp governance.

Solution To address the exclusion and imbalances identified in community engagement structures, refugees proposed a set of people-centered, inclusive, and forward-looking solutions. A key recommendation across all camps was the formal integration of youth, women, and persons with disabilities into community governance and leadership bodies. Rather than limiting participation to a few token individuals, participants called for the creation of structured focal points at the block level—ensuring that all demographic groups are represented in regular coordination meetings and can influence decisions that affect their lives. Youth groups in Camp 1E emphasized that their inclusion

should be meaningful and continuous, describing current involvement as "symbolic at best."

Alongside representation, there was a strong demand for capacity-building initiatives targeting Majhis, faith leaders, and block-level committees. Participants stressed that those holding community power must undergo training in ethical leadership, rights-based programming, and inclusive dialogue. These sessions would help shift leadership away from patronage models toward participatory decision-making. Refugees also recommended that Majhis be subject to periodic community assessments, including anonymous feedback or scorecards, to ensure transparency and responsiveness in their roles.

To promote collective ownership of humanitarian action, participants proposed the establishment of multi-stakeholder community advisory groups in each camp. These groups—composed of Majhis, women leaders, COMs, youth representatives, and religious figures—would meet monthly to discuss camp-wide issues, review sectoral gaps, and co-design action plans. Community members believe that these forums, if inclusive and consistent, could transform grievance-based engagement into proactive problem-solving.

Refugees and community-based actors also underscored the importance of embedding community engagement across all sectors—beyond just protection. Participants noted that service delivery in areas such as shelter, WASH, health, and education must be accompanied by community consultations, leadership in design processes, and accountability systems that include refugee voices at each stage. Several groups suggested that UNHCR and partners initiate camp-wide participatory mapping to identify households and individuals currently excluded from leadership, ensuring that future initiatives do not repeat existing patterns of marginalization.

Furthermore, participants highlighted the importance of consistent and values-based dialogue. They called for long-term, community-wide sensitization efforts on rights, responsibilities, peaceful coexistence, and inclusion—delivered through accessible and culturally relevant platforms such as mosque announcements, storytelling sessions, community radio, and youth clubs. Participants emphasized that this dialogue must go beyond awareness to spark attitudinal change, especially among influential men.
Finally, refugees stressed the need for greater recognition and support of community-led initiatives. Women and youth leaders in Camp 6 recommended the introduction of small-scale funding, logistical facilitation, and mentorship opportunities for groups interested in running their own engagement campaigns. These grassroots efforts, if enabled, were seen as vital for building trust and demonstrating that refugee communities are not passive beneficiaries—but resilient actors committed to protecting and shaping their collective well-being.

> *"The leaders tell us what's already been decided. That's not engagement. That's control."*
> *@Adult woman, Camp 6*

Peaceful coexistence/ social cohesion

Problem Several groups of refugees—especially religious minorities and youth—reported experiencing exclusion, verbal abuse, and isolation. In Camp 27, Christian refugees described avoiding participation in block meetings or social events for fear of being marginalized or stigmatized. Even among fellow refugees, some were hesitant to disclose their faith, as it reportedly influenced how they were treated by neighbors or community members. In NRC areas and TC, refugees recounted tensions with host community members around access to employment, markets, and shared resources, including forests, firewood, and water points.

Intra-community tensions were also prominent. Women and older persons in Camp 1E shared that conflicts regularly erupt over access to water, queuing for aid, and shelter boundaries, with fights occasionally escalating into physical confrontations. These incidents were frequently driven by perceived inequality in service distribution or favoritism by community leaders, particularly in shelter and NFI allocations. Refugees in Camp 26 noted that individuals who speak out about injustice or mismanagement are sometimes silenced or excluded from communal decisions.

A growing number of respondents cited the increasing burden of rent and shelter space disputes as a source of daily conflict. In Camp 27 and KRC, vulnerable households shared that they are sometimes forced to pay informal rent for shelter space to more powerful families or Majhis, creating a sharp divide between those who can assert themselves and those who must remain silent to avoid retribution. Across several camps, youth and child protection actors expressed concern that the normalization of this tension is contributing to intergenerational resentment and social withdrawal, particularly among boys and adolescent girls.

> *"The leaders tell us what's already been decided. That's not engagement. That's control."*
> *@Adult woman, Camp 6*

Capacity Despite these tensions, participants recognized several existing efforts and community resources that could support greater cohesion. Youth and women in the NRC area reported participating in joint livelihoods or sports programmes that brought together individuals from different backgrounds, easing tensions through teamwork and meaningful engagement. Community leaders in Camp 26 noted that past dialogues between refugee and host groups had temporarily improved relationships, especially when linked to practical issues like water access, fencing boundaries, or fire prevention.

In Camp 1E and TC, protection and WASH staff highlighted examples of informal mediators—such as Imams, elders, and schoolteachers—who play important roles in de-escalating tensions at household and neighborhood levels. These actors, however, are often overstretched and untrained, and operate without consistent institutional support. Several communities also referenced the resilience of informal social norms, like sharing during festivals or helping during emergencies, which continue to foster a sense of solidarity despite rising tension.

Solution To rebuild peaceful coexistence and improve social cohesion, refugees proposed multi-layered, sustained solutions rooted in inclusion, justice, and dialogue. One of the most urgent calls was for the establishment of structured community dialogue platforms—safe spaces where inter-group concerns could be addressed through moderated conversations involving refugees, host communities, service providers, and local authorities. These platforms, participants stressed, should be accessible to all segments of society, particularly minorities, women, youth, and persons with disabilities. In Camp 27, youth recommended regular "coexistence circles" where members of different backgrounds could exchange views and collaborate on block improvement plans.

Participants also emphasized the importance of transparent and equitable resource allocation, for water, shelter, and communal services particularly in contested areas. Refugees called for the creation of block-level dispute resolution teams, composed of trained community members and neutral actors, tasked with identifying tension points and mediating resource-sharing conflicts before they escalate. These teams could work closely with shelter and site management partners to address shelter rent extortion and promote fair space allocation.

Youth and child protection staff advocated for the expansion of inclusive recreational, cultural, and livelihood programmes—bringing together diverse groups around shared interests like football, handicrafts, and storytelling. Such programmes not only build trust but provide a critical outlet for displaced youth to interact outside of the regular environments. Some also proposed the integration of peace education and diversity messaging into religious sermons, school curricula, and community

meetings, emphasizing coexistence and compassion as shared values.

Refugees consistently called on UNHCR and partners to engage influential community leaders—including religious authorities, Majhis, and host elders—in promoting social cohesion through public pledges, collaborative events, and joint community service initiatives. They also urged humanitarian actors to adopt and disseminate simple codes of conduct or coexistence charters, co-developed with communities and visibly posted across camps to reinforce shared norms and accountability.

Freedom of assembly and association

Problem Across multiple camps, refugees expressed frustration that gatherings of more than a few people are often dispersed or forbidden, especially if the group is perceived as political, critical, or youth-led. In Camp 6 and KRC, youth men shared that any sign of public protest or mobilization is met with intimidation by the APBn, including surveillance, detention, and threats. Even peaceful awareness-raising events or commemorations have reportedly been halted or pre-emptively blocked by CiCs or security forces, with no justification provided. In Camp 27, shelter and settlement workers noted that efforts to establish informal advocacy groups or refugee-led committees have been disbanded or pressured to align with camp leadership structures.

> *"We do not ask to fight or protest. We ask to sit together and speak for ourselves."* @Youth man, Camp 6

Refugees also noted that there are few channels for forming independent organizations, and that any association not registered through government channels is considered illegal. As a result, youth, women, and marginalized groups lack collective representation and the ability to advocate for their rights or needs. In the NRC area, adult men reported that even requests to hold internal discussions on employment, peace, or dispute mediation have been flagged as suspicious. These practices have created a chilling effect—where communities are reluctant to organize even informally, for fear of collective punishment, aid disruption, or individual retaliation.

In some cases, attempts to speak out through peaceful demonstration or coordinated petitioning have led to blacklisting of participants by authorities. Youth leaders reported being excluded from distributions or block-level decisions after attempting to challenge injustices, further entrenching power imbalances and disempowering future engagement. Refugees observed that while they are expected to follow rules, they are given no voice in shaping or questioning them, creating deep disillusionment among youth and those hoping to act as community advocates.

Capacity refugees have demonstrated an underlying capacity and commitment to organize themselves constructively. In KRC and Camp 6, youth men described forming informal discussion groups and WhatsApp network**s** to share protection risks, educational ideas, or youth-based support mechanisms. While unofficial, these groups have become vital for solidarity, early warning, and mutual aid.

Some shelter workers and adult community leaders have attempted to mediate between security forces and refugee organizers, proposing constructive alternatives such as dialogue circles or supervised town halls. In Camp 27, a group of community mobilizers developed a plan for structured leadership training, intending to build capacity among future refugee organizers. However, these efforts often go unsupported due to lack of authorization or follow-through from CiCs or partners.

Community members also noted that engagement with faith leaders, teachers, and community health workers has been a safe pathway to gather and share messages—though limited in scope and usually restricted to service-related discussions. Refugees are ready and willing to organize

peacefully when given space, protection, and recognition.

> *"If we cannot form groups or raise our voices, how can we call this protection?"* @Community leader, Camp 27

Solution To promote safe and constructive community organizing, refugees urge UNHCR and partners to advocate for clear, consistent frameworks that allow freedom of peaceful assembly and association. Participants recommended the development of guidelines co-signed by CiCs and humanitarian partners, outlining permitted types of gatherings, preconditions, and protection protocols. This would replace the current system of ambiguity and arbitrary enforcement, giving communities legal and physical space to engage safely.

Another priority was the creation of refugee-led networks and associations, formally recognized by protection actors and designed to represent youth, women, elders, religious minorities, and persons with disabilities. These associations should have a role in consultation processes, accountability reviews, and participatory planning—ensuring refugee perspectives are included meaningfully and systematically. In Camp 27 and NRC areas, respondents asked for training and mentorship for future community leaders, with emphasis on rights-based organizing, ethical leadership, and non-violent negotiation.

Youth and adults also called for the revival of camp-wide peacebuilding forums, facilitated by neutral actors, where grievances could be aired and resolved collectively. Participants requested that CiCs and APBn officers receive targeted training on the importance of peaceful civic space, and that UNHCR continue to document and elevate cases where violations of assembly rights occur.

Finally, refugees asked for protection guarantees for those who step forward to lead. This includes non-retaliation commitments, effective complaint channels, and emergency protection referrals for organizers who face backlash. Several groups proposed that humanitarian agencies assign dedicated staff to monitor the enabling environment for civic space, ensuring that refugee engagement is not only permitted, but actively supported.

> *"We are always told what not to do. But no one tells us what we are allowed to do."* @Adult man, NRC

> *"They say feedback is welcome, but when we give it, there's silence. What's the point of speaking?"* @Adult man, TC

Well-being and basic needs (OA8)

Food security

Problem The most pressing concern raised by nearly all focus groups and key informants was the reduction in food assistance, particularly the anticipated decision to decrease the WFP stipend from $12 to $8. This cut would lead to a dramatic erosion of purchasing power, forcing families to make impossible choices between eating and meeting other basic needs. In KRC and Camp 27, adult women and community leaders shared fears that the reduction would lead to widespread malnutrition, especially among children, pregnant women, and the elderly. These fears are compounded by rising market prices, which have made staple foods such as rice, oil, and lentils unaffordable even with limited cash support.

> *"We used to eat three times. Now it's once—and not even enough."* @Adult woman, KRC

In the Transit Centre, adult men and persons with disabilities described an even more acute situation, as residents do not have the freedom to cook and must rely entirely on hot meal distributions, which are frequently inadequate in portion, diversity, and nutritional value. Respondents reported receiving repetitive meals lacking in protein and fresh produce, unsuitable for children or individuals with dietary needs. These concerns were echoed in NRC areas, where complaints about the poor quality of rice, lack of fresh food options, and unmet cultural or nutritional preferences were common.

Beyond quantity and quality, lack of autonomy over food choices was a major theme. Refugees consistently voiced that the inability to select or prepare food for their families diminishes their sense of dignity and well-being. In Camp 6 and Camp 26, some families reported resorting to skipping meals or splitting portions between adults and children, with women often sacrificing their own food for their children. Persons with disabilities described relying on neighbors for leftovers or donations when rations were insufficient.

The food insecurity situation has also contributed to secondary protection risks, including an increase in stress, petty theft, receptiveness to smuggling, and harmful coping mechanisms. In Camp 26, youth and community leaders warned that desperation may drive some to unsafe work, migration, or transactional behavior in order to feed their families. These risks are especially elevated for single mothers, adolescent boys, and minority groups with limited community protection networks.

Capacity Despite these trying circumstances, refugees continue to demonstrate remarkable resilience and community solidarity. In TC and KRC, some families pool rations or take turns preparing communal meals, especially for households with elderly or disabled members. Others have begun small-scale vegetable gardening in any available space, particularly in NRC areas, where agricultural skills are more widespread.

Community-based actors, including Majhis and refugee leaders, have mobilized informal support networks to share excess food when available and advocate with service providers for more equitable distribution. In Camps 6 and 27, a few youth-led groups have taken initiative to document food-related complaints and support older residents in navigating distribution systems. Some protection focal points have tried to direct cases of severe food insecurity to existing assistance mechanisms, though the scope of this support remains limited.

However, these community efforts remain unsustainable without formal support and systemic reform, as the root issues—ration cuts, market barriers, and lack of agency—lie far beyond the capacity of informal networks to resolve.

> *"What kind of dignity do we have if we can't feed our children or even cook for them?"* @Person with disability, TC

Solution To mitigate the worsening food security crisis, refugees proposed both immediate relief measures and longer-term resilience strategies. The most urgent request is for UNHCR and humanitarian actors to advocate for the retention or increase of food assistance, particularly the reinstatement of the previous $12/month WFP ration. In Camp 27, adult women emphasized that without this adjustment, "families will collapse," and children will drop out of school due to hunger or the need to work to provide for food.

In areas like TC, where hot meals are provided but self-cooking is restricted, refugees recommended that menus be diversified and adapted to meet the needs of children, elders, and people with specific dietary restrictions. Participants also urged partners to ensure the cultural relevance and nutritional balance of provided meals, and to involve the community in designing distribution models that are transparent and participatory.

Several participants from NRC areas called for community-managed food kiosks or voucher systems, where families can purchase their own food according to need and preference, reducing dependency on fixed aid packages. Others proposed livelihood initiatives to supplement food purchases—such as small-scale farming support, skill-based work programmes, and market access initiatives for skilled artisans and farmers.

Protection and GBV actors emphasized the need for a referral mechanism for high-risk food insecurity cases, particularly for single mothers, people with chronic illnesses, and elderly-headed households. In Camp 26 and KRC, community leaders suggested integrating food assistance with referral pathways for psychosocial support, acknowledging the growing mental health toll of chronic hunger and helplessness.

Finally, across all sites, refugees asked for greater transparency, participation, and accountability in food-related decision-making. This includes camp-wide consultations, complaint mechanisms for food quality and quantity issues, and community monitoring of meal preparation in locations without home cooking.

> *"If this continues, people will start doing anything just to survive. It won't be safe for anyone."* @Community leader, Camp 26

Harmful coping strategies

In Kutupalong Registered Camp (KRC), adolescent boys between the ages of 10 and 14 expressed growing exposure to and normalization of harmful coping strategies—manifesting in risky behaviors adopted in response to mounting survival pressures, limited recreational outlets, and family stress caused by poverty. Though only one formal account was recorded in the dataset, the implications are far-reaching and warrant close protection monitoring and intersectoral follow-up.

Problem Boys reported witnessing or being encouraged by peers to engage in behaviors such as theft, smuggling, physical confrontations, and dropping out of school to work informally or transport goods. Some described being used by adults or organized groups for tasks like moving items across camps, due to their ability to avoid detection by security actors. These patterns are particularly concerning given the age of the respondents and the increasing economic desperation of families following ration cuts and the decline of humanitarian assistance.

Adolescents also raised concerns about peer pressure to conform, noting that those who do not participate in risky behaviors are sometimes bullied or excluded. The lack of structured activities, educational support, or safe spaces was cited as a factor in their growing sense of boredom, helplessness, and alienation. In some cases, boys mentioned imitating what they see among older youth, including substance use or aggressive behavior. These are not isolated acts of rebellion but rather symptoms of a broader erosion of safe coping mechanisms, adult supervision, and psychosocial resilience.

In the background of this is the invisibility of boys' protection concerns in humanitarian response. While attention has rightly been given to the needs of girls and women in GBV-focused programming, young boys—especially those from low-income or female-headed households—often fall through the cracks of service provision, leaving them to navigate these risks alone or under the influence of harmful community norms.

Capacity The boys in KRC displayed a willingness to reflect critically on their environment and called for more structured, safe, and stimulating alternatives. Some boys shared that they turn to trusted teachers or older siblings for guidance, and a few noted that religious classes or football sessions help them stay out of trouble. Protection actors in KRC have previously piloted youth-based activities and informal mentorship initiatives, which boys praised as positive but said were not available consistently across all blocks.

Community leaders and education partners recognized that boys face growing behavioral risks but noted the lack of dedicated male youth mentors, sports coaches, or safe corners tailored to this age group. Shelter and child protection staff acknowledged that while spaces like child-friendly zones exist, they often cater to younger children and are not designed to retain or engage older boys.

Solution To address the rise of harmful coping strategies among adolescent boys, participants and community stakeholders recommended a series of tailored interventions that combine protection, psychosocial support, and skill-building. First, they called for the expansion of structured, age-appropriate recreational spaces, including football fields, game zones, and arts or storytelling groups—facilitated by trained mentors with a focus on positive masculinity, peer support, and emotional regulation.

Second, education partners and protection actors were encouraged to revive and sustain after-school learning and mentorship circles, particularly for boys who have dropped out of formal education or are struggling to re-engage. These should include life skills, negotiation, and rights-based sessions, helping boys resist negative influences and build a sense of agency and accountability.

Third, participants proposed the creation of a boys' peer outreach team, with select adolescents trained to deliver prevention messages, model positive behaviors, and refer their peers to protection or psychosocial services when needed. In parallel, parents—especially mothers—should be engaged through awareness sessions on adolescent mental health, non-violent discipline, and recognizing signs of harmful behavior.

Lastly, refugees strongly urged that boys' experiences be made visible in all protection and MHPSS assessments, ensuring that adolescent males are no longer excluded from service design, consultation, or resource planning. This includes disaggregating data by age and gender and including boy-specific vulnerabilities in child protection frameworks.

Core relief items

Across Camp 6, Camp 26, Camp 27, KRC, TC , and NRC, refugees expressed escalating concerns about the inadequacy, inconsistency, and inequity of access to core relief items (CRIs). These include daily essentials such as soap, LPG gas, cooking materials, clothing, sanitary products, and lighting, all of which are vital not just for health and dignity but for sustaining minimal protection standards in crisis settings.

Problem One of the most consistently cited concerns was the insufficiency of distributed items, particularly LPG gas and soap. Persons with disabilities in Camp 6 and TC explained that current quantities of LPG do not last through the entire month, especially for larger families or households where cooking must occur indoors due to accessibility needs. In Camp 27, refugees noted that newborns or newly arrived family members are not included in LPG allocations due to registration delays, forcing families to either purchase extra fuel from local vendors at unaffordable prices or revert to firewood collection—an unsafe and unsustainable alternative.

In the Transit Center and KRC, both men and women highlighted the complete absence or extreme scarcity of winter clothing, mosquito nets, sanitary items, and cooking utensils. These gaps are even more pronounced for persons with disabilities and minority groups, who often lack the social networks or physical access to receive leftover or redistributed items. Adult women in Camp 26 further reported challenges with heavy NFI distributions, stating that single women and elderly persons struggle to carry bulky packages without support.

Logistical challenges also contribute significantly to access barriers. In NRC and Camp 26, refugees complained that distribution points are located far from their shelters, sometimes outside camp boundaries altogether. This not only increases the burden on vulnerable households but also exposes women and girls to potential protection risks when collecting items alone. Some women also described being discouraged or pushed back from distribution points due to miscommunication, overcrowding, or prioritization of other groups.

Participants in Camp 26 raised concerns about bias and lack of transparency in relief item allocation. Reports indicated that some Majhis manage distribution lists informally, leading to perceived favoritism or the exclusion of less connected families. Others noted that when stock runs out, replacements are not guaranteed or equitably distributed.

Capacity Despite these structural constraints, refugees continue to rely on community resilience and solidarity. In several sites, families reported sharing items—especially soaps, clothing, or mosquito nets—with neighbors in need. In Camp 6, some men described bartering LPG refills informally within the block to bridge supply gaps. Refugee leaders in NRC zones have stepped in to advocate for families with missing documentation or newly arrived members, helping them access overlooked services.

Many women and youth also expressed willingness to support more efficient and equitable distribution, suggesting that trained volunteers or female porters could assist with heavy item transport for the elderly and single mothers. In Camp 27 and TC, households with informal skills such as sewing, knitting, or basic tool-making are using limited raw materials to repair worn-out items or make do with improvised solutions. These efforts, while resourceful, remain reactive and insufficient to meet long-term needs.

Solution Refugees proposed a set of realistic, context-informed solutions aimed at restoring dignity, access, and sustainability in CRI distribution. First and foremost, there was a strong request for increasing the quantity and regularity of key items, especially LPG, soaps, menstrual hygiene kits, winter clothes, and torches. Participants stressed that these should not only be restored to prior levels but also adjusted to match family size, cooking needs, and seasonal demands.

In Camp 6 and KRC, persons with disabilities proposed the creation of flexible distribution rosters, including door-to-door or escorted delivery for individuals who cannot safely travel to distribution

points. They also emphasized the need for inclusive registration updates, enabling new births, separated families, and newcomers to be included in item allocations without delay.

Participants recommended revising the location of distribution centers to bring them closer to residential blocks, especially in NRC zones where current collection points are considered too distant or unsafe. In cases where movement cannot be reduced, the deployment of trained female porters or mobility support staff was strongly advocated—particularly to assist single mothers and older women.

To improve fairness and accountability, refugees called for the removal of gatekeeping by Majhis in CRI distribution lists. Instead, community representatives suggested that distribution planning and monitoring should be conducted in partnership with neutral humanitarian actors, and include representatives from youth, women, persons with disabilities, and religious minorities.

Several participants also proposed the reintroduction of NFI feedback sessions where communities can express complaints, track follow-ups, and be consulted on needed items for upcoming seasons. Finally, they requested the reinstatement of item repair support or basic repair toolkits, especially for tents, tarps, and cooking tools, as a cost-effective way to extend the life of distributed goods.

> *"The gas ends before the month ends, and we don't have the money to refill it. What can we do but cook with fear or stay hungry?"* @Adult man, Camp 6

Cash-based interventions

In Camp 1E and TC , refugees emphasized the critical role that cash-based interventions (CBIs) could play in restoring dignity, promoting self-reliance, and expanding household choices. The existing absence or underutilization of CBIs—especially among marginalized groups such as minorities, persons with disabilities, and educated individuals without formal jobs—was cited as a missed opportunity to vulnerable groups within the limitations that exist.

Problem In Camp 1E, males from minority groups described widespread reluctance to participate in current community activities, which are often physically demanding or politically sensitive, due to both exclusion and safety concerns. They explained that they have grown more isolated and disengaged from community life without alternative livelihood options or the ability to earn or spend independently. This economic disempowerment compounds existing discrimination, making them feel invisible in both programming and decision-making.

In TC e, persons with disabilities described having no access to jobs, no physical outlets for work, and no available cash transfers to meet unique needs such as medical expenses, transport, or preferred nutrition items. Aid, while consistent in-kind, remains rigid and does not account for individual or family-level differences. Residents in TC underscored that the absence of CBIs reinforces dependency and helplessness, stripping individuals of the dignity to choose what best meets their needs.

Participants from both camps raised concerns about the inequity of in-kind support, with some families receiving aid that does not align with their household size, dietary restrictions, or living conditions. Many expressed the belief that cash would allow them to adjust, bridge gaps, or invest in essentials like hygiene products, education, or medicines—which are not always covered through standard distributions.

Capacity Despite the challenges, refugees show strong potential for successful cash-based programming. In TC, several persons with disabilities noted that they are well-educated or possess informal skills, such as tailoring or mobile phone repair, but lack capital or material input to

generate income. In Camp 1E, minority groups highlighted their capacity to manage budgets, engage with markets, and participate in cash-for-work programmes, if designed with safety and inclusion in mind.

Refugees in both settings stressed their willingness to contribute to community services, especially if cash incentives are paired with training, protection, or clear accountability mechanisms. Many referenced prior exposure to digital systems or ID-linked assistance models and believed that mobile-based or voucher models could be introduced with minimal risk, especially if local shops and vendors are engaged early.

Some residents also proposed that community-led cash monitoring groups could support safe implementation, ensuring that cash interventions remain transparent and responsive to household-level variations.

Solution Refugees called for the introduction or expansion of cash-based interventions that are equity-focused, protection-sensitive, and locally adaptable. In Camp 1E, participants proposed a multi-purpose cash grant tailored to vulnerable groups, particularly minorities, female-headed households, and those excluded from traditional work structures. These grants could be delivered monthly or seasonally to support household essentials, reduce harmful coping strategies, and foster agency.

In TC, refugees requested the piloting of restricted cash or voucher schemes, linked to prioritized needs such as medical expenses, nutrition, and hygiene. These could be delivered via pre-paid cards or e-voucher platforms, which would allow tracking while still giving recipients flexibility in purchasing decisions.

Participants also encouraged the use of CBIs in repair and maintenance programmes, particularly for shelters and latrines, where cash-for-labor opportunities could engage skilled yet unemployed community members. Additionally, protection actors were urged to integrate cash transfers with case management—enabling personalized support for survivors of violence, persons with chronic health issues, or families facing eviction.

Finally, respondents emphasized the importance of building feedback and grievance redress mechanisms into any cash programme. This includes pre-distribution orientations, monitoring visits, and complaint pathways to ensure fair targeting and to prevent coercion, exploitation, or misuse.

Sustainable housing and settlements (OA9)

Housing & accommodation

Across multiple camps—including Camp 6, Camp 26, Camp 27, KRC, TC, Camp 1E, and NRC areas—refugees described the severe conditions of their shelters. The issues range from overcrowding and weak construction to discriminatory distribution practices and the absence of tailored support for vulnerable groups. Despite being one of the most fundamental protection rights, shelter remains a persistent source of vulnerability and indignity for a significant portion of the refugee population.

Problem Participants across all sites described their current shelters as overcrowded, structurally unstable, and ill-suited for families with children, elderly individuals, or persons with disabilities. In Camp 26 and NRC areas, respondents noted that many families are forced to share shelters despite overcrowded conditions, or rent space for setting up their shelters due to a lack of available plots. Women and girls expressed concerns about the lack of privacy and personal space, often sleeping in one room without secure partitioning. In Camp 1E, shelters made of bamboo and tarpaulin were described as structurally deficient, unable to withstand monsoon rains or storms. During the rains, these shelters often collapse or leak, causing damage to bedding, food supplies, and important documents.

In TC and KRC, persons with disabilities flagged inaccessibility of shelter due to steps, narrow pathways, and uneven flooring making it nearly impossible to move independently. During emergencies like floods or fire outbreaks, families in Camp 27 explained that evacuation becomes chaotic and dangerous, especially for households located on slopes or congested areas. In several instances, fires have spread quickly due to lack of space between shelters and the use of flammable construction materials, placing entire blocks at risk.

Several key informants also highlighted issues of discrimination and inequity in shelter repair assistance, with Majhis or committee members allegedly favoring relatives or politically connected families. In Camp 6, a shelter volunteer was reported to distribute repair tokens selectively, leaving others to wait indefinitely for needed repairs. Similarly, some communities reported that newly arrived households or those who had experienced fires received no structured support and were left to rebuild using borrowed tarps or community donations.

In winter, the shelters provide little insulation from the cold, and residents must layer clothing or burn firewood indoors, leading to health risks from both cold exposure and smoke inhalation. During summer, the heat becomes unbearable in the tarpaulin roofed shelters without adequate ventilation. These seasonal vulnerabilities were echoed across all camps.

Capacity Despite the dire conditions, refugee communities continue to demonstrate resilience, problem-solving, and mutual support. In NRC areas, skilled individuals have formed informal shelter repair teams, helping neighbors fix damaged roofs or replace structural bamboo poles. In Camp 6 and TC, several persons with disabilities or elderly residents received support from youth volunteers, who assist with cleaning, repair and construction as needed.

Where possible, refugees salvage and re-cycle materials, and in some camps, they have developed rotational systems for rebuilding during dry months, with collective labor easing the burden for vulnerable families. Community leaders, though often limited in resources, sometimes mediate disputes over space, and in a few documented cases, managed to mobilize extra tarpaulins through advocacy with humanitarian partners.

Shelter partners and protection actors acknowledged that volunteerism and local technical and traditional construction skills within the community remain strong—but noted that without structural reinforcement, official oversight, and consistent material supply, this capacity alone is not enough to guarantee safe and dignified housing.

Solution Refugees proposed a comprehensive set of shelter-related reforms and immediate interventions. The most urgent recommendation was to upgrade existing shelters using more durable and weather-resistant materials. In Camp 1E and KRC, participants requested replacement of bamboo-and-tarpaulin structures with treated bamboo, concrete flooring, or semi-permanent walling to reduce exposure to flooding, heat, and cold.

Communities strongly advocated for reinstating and expanding shelter repair and maintenance programmes, with transparent and non-discriminatory processes for selecting beneficiaries. Several suggested the use of block-level shelter needs assessments, carried out jointly with trained volunteers and shelter partners to ensure fairness and inclusion of vulnerable households.

In Camp 27 and NRC, participants recommended double-story or mezzanine designs for large or multi-generational families, especially where space on the ground is limited. Persons with disabilities asked for barrier-free shelter designs with ramps, smooth flooring, and handrails, and called for UNHCR to develop a checklist of accessibility features to be used in all construction or upgrades.

For areas at risk of flooding or fire, residents urged that shelter clusters be re-planned, spaced appropriately, and equipped with firebreaks or sand buckets. Camp 6 and TC residents also asked that CiC offices and site management partners support the development of emergency shelter plans, including stockpiled tarps and designated shelter kits for rapid response following disasters.

To reinforce self-reliance and reduce dependency, participants suggested the provision of shelter repair toolkits—including hammers, nails, rope, and tarpaulins—accompanied by short workshops on basic maintenance and safe construction. They also asked that feedback and complaint mechanisms be strengthened to ensure that families excluded from support are able to seek redress.

Housing, land and property (HLP)

In Camp 1E and NRC, refugees raised significant concerns regarding their housing, land, and property (HLP) rights, particularly for those residing on land originally belonging to the host community or controlled informally by local entities. The lack of formal tenancy agreements, protection mechanisms, or long-term planning has created a

climate of fear, insecurity, and potential forced displacement for thousands of families.

Problem Refugees—particularly those on the fringes of established camp perimeters or in blocks adjacent to host settlements—described being at constant risk of eviction or pressure from local landlords. In Camp 1E, youth women explained that families who have informally occupied host community land are often coerced into verbal agreements without documentation, leaving them vulnerable to abuse or abrupt removal. They reported instances of landowners threatening to reclaim property, demand money, or force modifications to shelter structures without consultation.

> *"You sleep with one eye open—not because of rain or fire, but because the land might not be yours tomorrow."* @Adult man, NRC area

Shelter and settlement workers further confirmed that disputes over land ownership and space allocation have grown more frequent in recent months. As host community tensions increase and the refugee footprint increases, the line between formal and informal land tenure has blurred—leading to legal ambiguity and confusion among refugees, service providers, and government actors. In some cases, entire shelter clusters have been labeled as "irregular" or "unauthorized," even after years of occupation, undermining confidence in their permanence or upgrade potential.

In NRC, adult men highlighted the emotional and psychological impact of living in constant fear of eviction. They noted that uncertainty around land rights discourages families from investing in shelter improvements or building community infrastructure, reinforcing dependency and eroding social stability. This fear is especially heightened for families with no social ties or formal registration in the camp—many of whom arrived later and settled on privately negotiated plots.

Capacity Despite the precarious situation, communities have sought to navigate HLP risks through informal mediation and self-protection. In Camp 1E, refugee leaders have attempted to negotiate temporary agreements with host landowners, sometimes through Majhis or religious leaders. While these arrangements are not legally binding, they have helped prevent confrontations or delays in access to housing.

Some settlement workers mentioned that households with stable informal agreements have taken initiative to improve shelter conditions, plant trees, or build fences—signaling a desire for permanence and accountability. In NRC zones, families with relatives in formal camp plots sometimes share address codes or rotate occupancy to avoid eviction from "unregistered" sites.

There is also a recognized understanding among protection actors that coordinated advocacy, and joint documentation can support community stability. Several humanitarian staff expressed readiness to collaborate on mapping exercises or host-refugee dialogue, provided there is policy space and coordination from the CiC and local authorities.

Solution Refugees and shelter stakeholders proposed a set of practical and protection-sensitive solutions to address HLP insecurity. First, they requested that UNHCR and partners initiate a multi-stakeholder HLP mapping and documentation exercise, identifying informal plots, assessing risk, and exploring paths to regularization. Youth women in Camp 1E emphasized that this process should include community consultation and anonymous reporting, to avoid backlash from landowners or political actors.

Participants also recommended the development of temporary occupancy agreements or "interim tenure certificates", jointly signed by local authorities and CiCs. While not equivalent to legal title, such certificates could offer a degree of predictability and accountability, protecting families from arbitrary eviction or exclusion from shelter services.

In high-risk areas, protection and shelter partners were advised to pilot community-based HLP mediation committees, made up of refugee representatives, host elders, and neutral facilitators.

These groups could work to prevent land conflicts, mediate disputes, and ensure humanitarian access.

NRC participants urged that HLP guidance be integrated into shelter upgrades and planning tools, including the prioritization of infrastructure only in sites deemed safe or regularizable. They also requested legal literacy and awareness sessions, helping families understand their rights, risks, and options, particularly for women-headed households or displaced families living on the edge of formal camp space.

Lastly, refugees and field workers called for district-level dialogue with host communities to frame HLP as a shared issue—not just for refugees, but for longer-term stability in Cox's Bazar.

Energy

Across Camp 26, Camp 27, Camp 1E, KRC, NRC, and the Transit Center, refugees described a deeply strained energy environment. Most families rely on a fragile combination of LPG, solar lights, and firewood, yet even these limited solutions are often delayed, degraded, or altogether unavailable. Refugees emphasized that energy access is not a convenience, but a daily protection issue, impacting health, safety, and survival.

Problem One of the most urgent concerns across all sites was the frequent delay and inadequacy of LPG distribution. In Camp 1E and NRC areas, respondents reported that LPG cylinders often run out 3 to 5 days before scheduled refueling, forcing families to purchase gas at inflated market prices or switch to firewood. Women and persons with disabilities raised alarm over the risks associated with firewood collection—including harassment, injury, and smoke inhalation from indoor burning. In Camp 26, families noted that LPG distribution is sometimes delayed by 7 to 8 days, leaving entire blocks without a safe cooking source.

At night, many shelters plunge into darkness. In Camp 27 and TC, participants shared that streetlights are frequently broken, and home-based solar units are aging or entirely dysfunctional. In some cases, families have resorted to using mobile phone lights for cooking, sanitation, and childcare. Adolescent girls in Camp 27 described being afraid to use latrines or walk alone after sunset, with several areas now considered "unsafe zones" due to lack of lighting.

> *"We are afraid after sunset. We stay inside—not because of rain or fire, but because there's no light."* @Youth woman, Camp 27

Residents of KRC and NRC also flagged the economic burden of replacing solar lights, many of which were distributed years ago and are no longer functional. Refugees described having to purchase solar units privately at high costs, often sacrificing food or medicine in the process. Without grid connections or reliable backups, the poorest households are forced into cycles of dangerous and unaffordable coping strategies.

Energy constraints are also undermining hygiene. In KRC, refugee leaders explained that insufficient lighting near water points and bathing spaces limits access, especially for women, children, and elderly persons. Some reported skipping evening hygiene practices altogether due to lack of visibility and safety fears. Others spoke of increased reliance on candles or kerosene, posing fire risks in already flammable shelters.

Capacity Despite these obstacles, refugees have adopted creative and community-driven coping strategies. In Camp 26 and TC, several youth and male community leaders formed informal torch-sharing groups, taking turns loaning out functioning solar units within their blocks. In NRC, adult men reported repairing solar lamps using salvaged components, while others described negotiating informal LPG-sharing agreements with neighbors.

Where possible, households with slightly more stable income purchase backup solar units, and in

some camps, local entrepreneurs have begun renting torches or battery-powered lanterns. In KRC and Camp 27, youth groups also suggested organizing community patrols during the evening to support safe movement, especially for women and girls.

Environmental and energy actors noted that community engagement in energy planning remains high, with refugees consistently willing to report malfunctioning lights and suggest improved layouts. However, this capacity is underutilized in formal decision-making and distribution processes, limiting the long-term sustainability of these coping mechanisms.

Solution Refugees urged UNHCR and partners to prioritize comprehensive, protection-sensitive energy planning. First, they requested the restoration of monthly LPG cycles, with flexibility to adjust for family size and cooking needs. Respondents proposed establishing block-level gas monitoring committees, where selected community members could report early shortages and coordinate emergency distributions before households revert to firewood or dangerous alternatives.

In areas like Camp 1E and NRC, participants called for systematic replacement of non-functioning solar lights, and the distribution of durable, waterproof, rechargeable torches per household. They also recommended that solar streetlight repair be prioritized in high-risk zones, especially near latrines, water points, and learning centers.

Youth and women in Camp 26 and Camp 27 emphasized the need for gender-sensitive placement of lights, including bathroom lighting and latrine corridors, ensuring safe access at night. Persons with disabilities recommended the introduction of motion-sensor lights or low-hanging lamps, which are easier to access and maintain. Several suggested the establishment of energy “maintenance hubs” staffed by trained youth volunteers, with technical support and parts supplied by shelter or site management partners.

Participants also requested that energy access be integrated with MHPSS and protection referral pathways, particularly for survivors of violence, families with newborns, and elderly-headed households who may be unable to safely cook or move without consistent lighting.

Settlements

In camps such as Camp 26, Camp 27, Camp 1E, TC, and NRC, refugees and shelter staff raised deep concerns about the structural and spatial configuration of settlement areas. The current layout and condition of these sites—shaped by self settlement and lack of site planning, land scarcity, and ongoing pressure from growing populations—have now created overlapping protection, environmental, and public health risks. These challenges have been magnified for marginalized groups, including Christian refugees, persons with disabilities, and those living on rented or informal plots.

Problem In Camp 27, members of the Christian minority community reported being concentrated in isolated areas with fragile infrastructure, poor lighting, and minimal oversight from camp authorities. These settlements were said to be neglected during distributions and site improvement plans, increasing the community’s exposure to crime, environmental hazards, and exclusion from services. In Camp 26 and NRC , respondents described overcrowded shelters built along narrow pathways, with minimal spacing between structures and no safe zones for fire breaks, communal gatherings, or emergency access.

Multiple respondents from TC and Camp 1E flagged structural vulnerability of shelters, particularly the widespread use of tarpaulin roofs and makeshift walls, which collapse easily under rainfall or wind. Women in TC described how Relief Housing Units (RHUs) lack ventilation, privacy, or safety barriers, creating constant discomfort and heightening the risk of respiratory illness and gender-based violence. Camp 1E residents noted the absence of protective equipment for shelter construction and

repair, with untrained residents handling sharp tools and heavy bamboo without gloves, helmets, or protective shoes.

Fire outbreaks were another frequently cited issue, particularly in Camp 26 and NRC. Refugee leaders explained that proximity between shelters, absence of sand buckets or extinguishers, and lack of training have contributed to repeat fire incidents. In some cases, old or damaged electrical solar systems were blamed for sparking blazes, while others pointed to children playing unsupervised around cooking areas. Congested blocks located on rented land were especially at risk, as they often exist outside formal planning and receive delayed support during emergencies.

Capacity Despite these systemic challenges, community members and settlement workers pointed to localized capacity and initiative. In NRC, some affected families are managing small host community spaces nearby, using them for shelter expansion or planting. In Camp 26, refugee volunteers have organized patrolling teams to detect fires and manage emergency evacuations, particularly during the dry season. These groups operate without formal recognition but are trusted by the community and provide basic protection during high-risk times.

> *"We can build and repair, but without gloves or shoes, we injure ourselves trying to survive."*
> *@Refugee man, Camp 1E*

Several shelter focal points noted that community familiarity with traditional construction methods—such as bamboo framing, palm thatching, or elevated flooring—remains strong, and could be incorporated into settlement upgrades. Refugee leaders also highlighted the potential of youth groups and women's associations to serve as community mobilizers, capable of overseeing

Environment

In Camp 1E and NRC, environmental degradation was raised as both a direct risk to safety and a longer-term threat to the sustainability of refugee life. Deforestation, unplanned settlement growth, and cleaning campaigns, latrine usage, or safe passage mapping in congested settlements.

Solution Refugees and settlement actors proposed a series of settlement-focused solutions, rooted in spatial justice, safety, and local participation. First, they called for a review of existing camp layouts, particularly in informal or rented areas, to assess whether blocks can be restructured, decongested, or upgraded with better access to services. This should include mapping of high-risk fire zones, dead-end paths, and vulnerable shelters that need immediate reinforcement.

To address daily risks, participants in TC and Camp 1E urged for the distribution of protective construction equipment, including gloves, helmets, and protective shoes for families engaged in self-repair. They also recommended technical orientation sessions on safe shelter construction, delivered by trained settlement volunteers, especially ahead of the monsoon season.

In response to the increasing threat of fire, residents requested that fire-prevention kits be standardized across all shelter blocks, including sand buckets, fire blankets, and fire extinguishers. In addition, they proposed establishing community fire response units, composed of trained refugee volunteers, including youth and women, to act as first responders and educators within their communities.

For vulnerable populations especially minorities and those living on rented land refugees proposed the creation of refugee-led monitoring committees to track settlement conditions, advocate with site management actors, and ensure equitable access to upgrades. Finally, participants encouraged co-design of communal infrastructure, such as shaded areas, children's play zones, and climate-resilient gathering spaces, using local knowledge to reinforce environmental sustainability and social cohesion.

climate-exacerbated hazards such as flooding, and landslides were reported as increasingly frequent and harmful. These environmental issues are not only impacting the physical stability of shelters and

infrastructure, but also undermining food security, mobility, and community health.

Problem In NRC, refugees and community leaders described the ongoing deforestation of surrounding land—driven by both firewood collection and settlement expansion. Adult women noted that tree cover has significantly decreased, resulting in exposure to heat, dust, erosion, and loss of shaded communal space. These changes have made the camp hotter during dry months, and muddier, more dangerous during the monsoon.

> *"We used to have trees. Now we have dust and heat—and no shade to rest in."* @Adult woman, NRC

In Camp 1E, environmental and energy workers reported that heavy rainfall in recent years has led to shelter collapse, water contamination, and flooding in multiple blocks. Residents noted that stormwater has no effective drainage route, turning walking paths into stagnant pools and causing waste runoff from latrines to contaminate living areas. The lack of natural buffers like trees and bamboo has made soil erosion more aggressive, particularly along slopes and areas near the edge of camp boundaries.

Compounding these physical risks is the lack of community awareness around emergency preparedness. Workers in Camp 1E observed that many residents do not understand environmental warning systems or how to respond during sudden-onset weather events such as flash floods or landslides. This leads to last-minute panic, uncoordinated evacuations, and increased exposure to harm for children, older persons, and persons with disabilities.

Capacity To address both immediate environmental risks and longer-term sustainability, refugees and community stakeholders proposed a combination of policy-level coordination and grassroots adaptation. First, they called for a comprehensive reforestation campaign, prioritizing degraded and high-risk slope areas. Community members proposed that this be coordinated with site management and implemented through community cash-for-work programmes, ensuring both environmental restoration and income support.

Participants emphasized the need for stronger government and partner involvement in environmental protection, particularly through enforcement of tree-cutting restrictions and the creation of protected green corridors. In NRC, refugee leaders proposed formal collaboration with host communities, to ensure that replanting and soil management efforts are coordinated and do not create new tensions.

In Camp 1E, participants suggested the development of camp-specific climate resilience plans, including structured training on flood risk, erosion control, and safe evacuation. They requested that each block be equipped with drainage toolkits, as well as visual signage explaining how to maintain water flow and report blocked paths.

Energy and environment workers also proposed reviving school- and mosque-based environmental education sessions, helping children and adults understand their role in protecting shared resources. They recommended that future tree-planting or composting initiatives include follow-up visits, to ensure survival and practical usage.

Finally, participants called for dedicated emergency preparedness outreach before each rainy season, using loudspeakers, mosque announcements, and block-level orientation to share practical, life-saving steps families can take before, during, and after extreme weather events.

Solution Refugees proposed a comprehensive set of shelter-related reforms and immediate interventions. The most urgent recommendation was to upgrade existing shelters using more durable and weather-resistant materials. In Camp 1E and KRC, participants requested replacement of bamboo-and-tarpaulin structures with reinforced bamboo, concrete flooring, or semi-permanent walling to reduce exposure to flooding, heat, and cold.

Communities strongly advocated for reinstating and expanding shelter repair and maintenance programs, with transparent and non-discriminatory processes for selecting beneficiaries. Several suggested the use of block-level shelter needs assessments, carried out jointly with trained volunteers and shelter partners to ensure fairness and inclusion of vulnerable households.

In Camp 27 and NRC , participants recommended double-story or mezzanine designs for large or multi-generational families, especially where horizontal space is limited. Persons with disabilities asked for barrier-free shelter designs with ramps, smooth flooring, and handrails, and called for UNHCR to develop a checklist of accessibility features to be used in all construction or upgrades.

For areas at risk of flooding or fire, residents urged that shelter clusters be re-zoned, spaced appropriately, and equipped with firebreaks or sand buckets. Camp 6 and TC residents also asked that CiC offices and site management partners support the development of emergency shelter plans, including stockpiled tarps and designated shelter kits for rapid response following disasters.

To reinforce self-reliance and reduce dependency, participants suggested the provision of shelter repair toolkits—including hammers, nails, rope, and tarpaulin—accompanied by short workshops on basic maintenance and safe construction. They also asked that feedback and complaint mechanisms be strengthened to ensure that families excluded from support can seek redress.

Climate Action

Across Camp 1E and NRC, climate action remains a critical yet under-addressed theme. Refugees are acutely affected by shifting weather patterns, environmental degradation, and seasonal shocks—yet they are rarely engaged in structured climate programming or equipped with the tools to protect their environment. The entries gathered reveal a mismatch between vulnerability and readiness, compounded by low awareness, limited coordination, and a lack of inclusive action plans.

Problem In Camp 1E, energy and environment workers noted a significant lack of understanding among residents about climate change, mitigation, and adaptation. Most refugees attributed flooding, heatwaves, or crop failure to divine causes or seasonal misfortune, rather than recognizing these as part of a broader climate crisis. This gap in understanding prevents proactive behaviors, such as slope stabilization, tree planting, or household-level conservation, and limits the effectiveness of messaging when emergencies arise.

In NRC, adult men acknowledged being aware of climate shifts—particularly longer dry seasons, and more intense rains, - as well as reduced firewood availability, but felt they had no structured channels through which to act. While the physical impacts of climate change are visible and deeply felt, they remain decoupled from collective response, leaving refugees to adapt individually and without technical guidance. Refugee leaders reported that many community members were not included in past DRR or environment-related trainings, and thus lacked both the vocabulary and confidence to participate in climate discussions.

The consequence of this exclusion is more than informational—it undermines social resilience. Without climate preparedness, community responses to environmental threats remain fragmented, reactive, and inefficient. It also reinforces reliance on humanitarian actors and restricts community-driven recovery and protection.

Capacity Despite limited awareness, there is strong latent capacity for localized climate action. Refugee leaders in NRC shared that community members already participate in seasonal DRR messaging, particularly when it comes through trusted sources like religious leaders, teachers, or Community Outreach Members. Participants pointed to the use of loudspeakers, Friday Mosque announcements, and peer-to-peer WhatsApp groups as effective platforms for disseminating information.

Several participants—especially male youth and community mobilizers—expressed interest in

becoming environmental stewards or climate champions, if given training and materials. Some cited past involvement in waste management, gardening, or bamboo planting, but noted that these activities were one-off and never institutionalized. There is clear demand for climate-sensitive livelihood opportunities, especially in energy conservation, reforestation, and eco-friendly construction.

Energy and environment staff highlighted that even minimal interventions—such as using raised planting beds, composting pits, or slope netting—had shown promise when piloted in small areas, suggesting that scaling through community ownership is feasible with proper support.

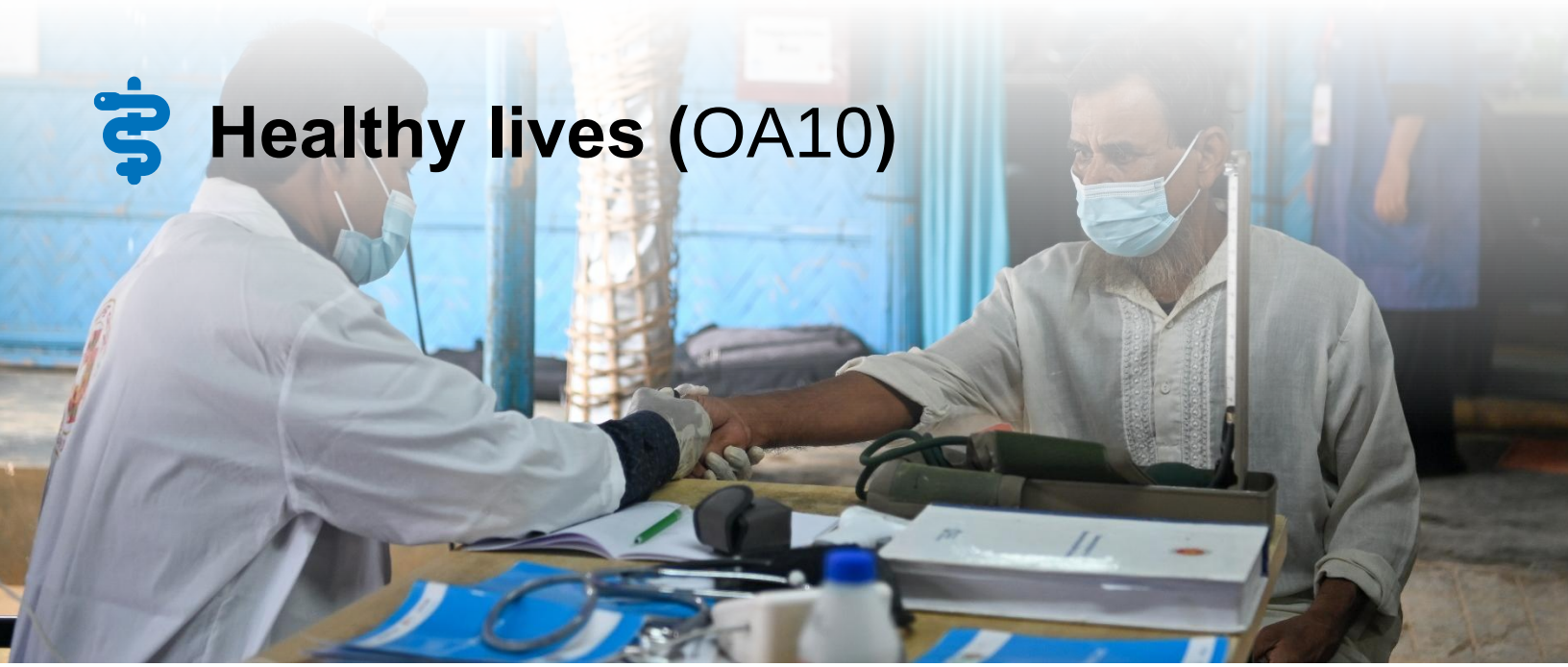
Solution Refugees and actors proposed a multi-layered approach to embed climate action into everyday camp life. First, they called for the development of a refugee-friendly climate education toolkit, using visuals, community theatre, and translated messaging to build literacy across all age groups. This should be complemented by structured training cycles for community leaders, volunteers, and youth, ensuring that DRR and climate resilience become integral to their roles.

Second, participants recommended the launch of climate action working groups at camp and block levels—linked to existing protection, shelter, and site management structures. These groups would be tasked with coordinating reforestation drives, waste separation, and community-based weather preparedness. In NRC, refugees requested seed kits and tools for eco-gardening, emphasizing the dual benefit of nutrition and environmental restoration.

> *"If you give us the tools, we'll build the solution. But someone must show us the path first."*
> *@Refugee leader, NRC area*

Youth and men also suggested that UNHCR and partners provide climate-related cash-for-work opportunities, especially targeting slope protection, storm drain clearing, or fire prevention landscaping. Some called for the expansion of solar infrastructure and training on maintenance of energy-saving devices, such as clean cookstoves or low-voltage lights.

Finally, refugees asked that all new projects include environmental impact review and community feedback—ensuring that infrastructure upgrades, energy distributions, or shelter expansions align with broader climate goals. Several leaders called for joint refugee-host dialogues to address shared risks and foster environmental cooperation.



Healthy lives (OA10)

Health

Health access remains one of the most consistently flagged issues by refugees in all major sites—Camp 6, Camp 26, Camp 27, TC, Camp 1E, KRC, and NRC. Refugees highlighted systemic shortcomings in service quality, infrastructure, medicine availability, and specialized care. With constrained funding and growing population needs, health risks are being internalized by the most vulnerable persons with disabilities, older persons, religious minorities, and women with Sexual and Reproductive Health (SRH) needs.

Problem Participants described a health system under severe strain. In Camp 26 and NRC, respondents reported chronic shortages of essential medicine, including those for chronic conditions such as diabetes, high blood pressure, and asthma. Refugees noted that some clinics limit distribution to one or two days a week, and if stocks run out, families must either pay out-of-pocket or go without. In Camp 6, persons with disabilities expressed concern that they often receive only painkillers, even when their condition requires long-term specialized attention or referrals.

In TC and KRC, respondents shared that referrals for emergency or specialized care are delayed, unclear, or denied altogether. Many raised concerns about lack of transportation for urgent cases, with several highlighting the absence of ambulances for elderly patients, pregnant women, and persons with disabilities. Families spoke of being forced to carry loved ones manually through camp terrain, risking injury and loss of life.

> *"We carry our mothers on our backs to clinics—just to be told there is no ambulance and no doctor."* @Youth, NRC-supported area

Older persons in Camp 1E and Camp 27 shared that even when facilities exist, discrimination and dismissive attitudes from clinic staff deter them from seeking help. They noted that care is often rushed, without proper listening or follow-up. Refugees belonging to minority groups reported disproportionate exclusion from health campaigns, including vaccinations and SRH outreach.

Participants in nearly every site flagged the unavailability of treatment for major diseases such

as TB, hepatitis, and HIV, and the lack of consistent follow-up care. Clinics are often focused on acute issues, without systems for tracking long-term or recurring cases. Mothers in Camp 26 also raised the absence of sufficient maternal care and nutrition support, with some women delivering at home in risky conditions.

Finally, refugee leaders and educated men in NRC noted that some health service providers are under-trained, lacking both the technical expertise and empathy to manage the complexity of refugee health needs.

Capacity Despite these gaps, refugees have developed resourceful means to access care. In Camp 1E and KRC, families often combine support from neighbors to buy medicine, and some sell food rations or borrow money to access private clinics. Youth volunteers assist elderly persons in lining up for care, and in some areas, community networks identify the most vulnerable and escort them to clinics on specific days.

In NRC, a few community members with basic medical training assist neighbors in minor wound care or health education, although they are not formally linked to the system. Protection and shelter actors noted that peer-to-peer health guidance is functional but lacks technical accuracy and backup.

Health actors acknowledged that refugees remain engaged in health-seeking behavior, even under difficult conditions. Many are willing to provide feedback through CFM desks and are proactive in reporting drug shortages or discriminatory behavior—showing both resilience and readiness to co-lead improvement.

Solution Refugees proposed a comprehensive overhaul and strengthening of the health response in camps. The most urgent request was for the restoration of medicine availability, particularly for chronic illnesses, mental health conditions, and pediatric care. Many asked that health stocks be posted publicly and monitored by community committees to ensure transparency and trust.

Participants called for more trained medical staff—especially female doctors, specialists in SRH, and practitioners trained in working with persons with disabilities. In Camp 6 and Camp 26, refugees asked that consultation time be increased, and that health workers receive training in refugee-sensitive communication and patient dignity.

In response to referral challenges, refugees proposed the deployment of emergency ambulances per camp, along with clear criteria and transparent referral forms shared with all community leaders. They also suggested that caseworkers or protection focal points accompany referrals to reduce miscommunication and discrimination at receiving facilities.

Communities also requested targeted health awareness and mobile clinic days, particularly in underserved blocks and for minorities or isolated families. SRH services were flagged for immediate expansion in TC and Camp 27, with calls for dignified, confidential, and well-equipped services led by trained female staff.

Finally, refugees proposed an integrated feedback and monitoring system, where community members could report complaints or health concerns via help desks, WhatsApp, or suggestion boxes—and receive acknowledgment and resolution from health partners.

> *"We carry our mothers on our backs to clinics—just to be told there is no ambulance and no doctor."* @Youth, NRC

Nutrition

In TC, Camp 6, Camp 26, KRC, and NRC, refugee communities raised urgent concerns around access to adequate nutrition, particularly for vulnerable groups such as young children, pregnant and lactating women (PLWs), and persons with disabilities. With ongoing ration cuts and non-

adapted food systems, the risk of malnutrition, dietary deficiency, and preventable health deterioration is rapidly rising.

Problem Across all locations, one of the most urgent concerns was the age-based cutoff for nutritional support. In Camp 26, participants reported that children are no longer eligible for supplementary nutrition after the age of five, despite evident need. Similarly, in NRC , adult men flagged that children over the age of two are excluded from support, which leaves many families unable to meet the needs of growing toddlers, especially in large households with minimal income options.

In TC , adult women expressed frustration that the fixed daily meal menu lacks essential nutrients and diversity, particularly for children and PLWs. The current food offered—often consisting of repetitive carbohydrate-heavy meals—was said to be unsuitable for child development and maternal recovery, especially in hot weather or during periods of illness. Mothers in TC noted that no accommodations are made for special dietary needs, and there is no system to report or adjust menus.

In KRC and Camp 6, participants described how ration cuts have created food insecurity that compounds nutritional stress. Adult women in KRC shared that reduced food quantities and prices have forced families to eat once or twice daily, with little protein or fresh produce. Persons with disabilities in Camp 6 raised the alarm about possible starvation in vulnerable blocks, especially among individuals who are bedridden or isolated.

Another issue raised was the lack of targeted nutritional screening and follow-up, especially for children and women who previously received assistance. Refugees noted that they are no longer routinely screened for malnutrition or anemia, and referrals to supplementary feeding programmes are inconsistent or absent.

Capacity While most communities expressed low capacity to manage these gaps, a few promising practices emerged. In Camp 6, families have begun sharing child portions among households, particularly for disabled or elderly residents who are not covered under formal nutrition programmes. In TC, some mothers described saving parts of the child meal ration to stretch across the day, though this often means each portion is nutritionally inadequate.

Protection staff noted that refugee mothers remain willing to participate in health screenings and nutrition sessions, when made available and respectful of their time. In Camp 26, community volunteers occasionally support PLWs with food delivery or cooking, particularly in post-natal recovery periods. However, these efforts remain small-scale and lack structured support from health and food sector partners.

Respondents also pointed out that many refugees have prior farming or cooking experience, and expressed interest in kitchen gardening or nutrition education—if the programmes are designed to reflect camp realities.

Solution Refugees across all camps called for urgent review and resumption of age-inclusive and PLW-specific nutrition support. First, participants requested that nutrition programmes be extended to cover children up to age 10, with clear pathways for high-risk referrals. In Camp 26 and NRC zones, adult men stressed that no child should be dropped from support due to an arbitrary age threshold, especially when physical and dietary needs remain unaddressed.

In TC, participants demanded a revision of the meal menu to incorporate child-friendly, nutritionally balanced items—such as eggs, lentils, fruits, and fortified snacks—tailored for pregnant women and growing children. They also suggested allowing some flexibility for special diets (e.g., allergies, recovery nutrition), and involving community members in food review processes.

In Camp 6 and KRC, women requested that supplementary nutrition screenings resume, particularly ahead of Ramadan and monsoon seasons. These should be paired with referral-based food support, especially for malnourished children, post-natal mothers, and people with chronic illnesses.

Youth volunteers and women's groups expressed willingness to participate in camp-based nutrition outreach, including awareness sessions on infant feeding, basic meal planning, and hygiene. Community leaders further recommended small-scale kitchen gardening or vertical vegetable kits, coupled with training and seed supply to boost dietary diversity.

Finally, participants across all locations asked that UNHCR and partners advocate for cross-sectoral planning between food, health, protection, and shelter actors, ensuring that malnutrition is addressed not just with rations—but through a comprehensive, family-centered approach to dignity and wellbeing.

Education (OA11)

Learning

Across KRC, Camp 26, and Camp 27, refugees—especially adolescent boys and adult men—shared a sobering observation of the current state of learning within the camps. While learning centers exist and many children are technically enrolled, the quality and sustainability of the educational process are undermined by poor teaching practices, weak classroom management, low teacher accountability, and limited access to continued education pathways.

Problem In KRC, boys aged 10 to 14 reported that teaching quality is inconsistent and often disengaged. They described during the class time teachers were using their phones and sometime absent without informing. This contributes to classroom disruption, lack of motivation, and increased absenteeism among learners. Students explained that they struggle to follow lessons and often find themselves repeating the same material without understanding, which leaves them disengaged and bored.

> *"Sometimes the teachers are not teaching. They are just sitting. We sit too."* @Boy, KRC

In Camp 26, participants shared that some teachers teach edtech lessons using personal phones instead of using appropriate digital devices resulting fail to engage the whole classroom. Boys said that learning feels passive, and without structured assignments or follow-ups, many students lose interest and drift toward informal work or idle socialization.

In Camp 27, adult men reported that children are often seen playing outside during learning hours, suggesting either weak enforcement or disinterest in attending sessions. They also noted that after school

hours, there are no structured opportunities for revision, peer learning, or study groups, particularly for children whose parents are illiterate or unable to support them academically.

Respondents expressed particular concern about the lack of pathways to secondary or higher education. As one father explained, once a child finishes the basic education, “there is nothing next,” leading to frustration, early dropout, and lost potential—especially for boys, resulting engaging to informal labor or unsafe migration routes in search of purpose and income.

Capacity Despite these constraints, community members consistently showed a strong commitment to education as a protection strategy and a hope for the future. In Camp 26, boys shared that they enjoy learning when teachers use child friendly and interactive teaching methods. Refugees in KRC noted that when teachers use interactive methods to explain concepts, attendance improves and increases students' enthusiasm.

In Camp 27, adult men expressed willingness to support students in Mathematics and English trough forming study groups facilitating by elder siblings if guidance or space will be provided. Parents also said they would like to engage in learning center monitoring, ensuring attendance and teaching quality improve through stronger community-school collaboration. There is a clear readiness to volunteer, observe, and co-facilitate learning support—but they require institutional recognition and guidance.

Solution To strengthen learning in the camps, refugees proposed a comprehensive package of reforms focused on teaching quality particular focus on student engagement and learning continuity beyond basic education. They also recommended to improve teacher monitoring and accountability with regular feedback from students and community observers. Boys suggested introducing student-led activities and peer-to-peer tutoring, particularly for slower learners. In Camp 27, participants called for the creation of evening study circles—facilitated by older students, volunteers, or educators—using existing learning spaces or community shelters.

Refugees also urged education actors to explore secondary education pathways, including formal expansion or certification options beyond the current basic learning package. Where not immediately possible, they proposed the integration of vocational or life skills modules into upper-grade classrooms, allowing students to graduate with tangible abilities.

Parents and youth recommended that learning centers be equipped with age-appropriate materials, including books, math aids, and reading corners. They also encouraged greater collaboration with teachers and school management committees, so that learning spaces become centers of activity and purpose—not just routine attendance.

Finally, community members emphasized the need for psychosocial support within the classroom, especially for children affected by trauma, family separation, or economic hardship. This would include teacher training on student wellbeing and stronger referral links to protection partners.

Education Programmes

In KRC, Camp 6, Camp 26, Camp 27, Camp 1E, TC, and NRC, the refugee community expressed broad disillusionment with the current state of education programmes. While learning centers exist and are often attended, their content, scope, and delivery mechanisms fail to meet the aspirations of children and parents. Communities highlighted a lack of meaningful education pathways, discontinuity after grade 8, low teacher motivation, and uncertified curricula, all of which undercut the credibility and perceived value of learning.

Problem Across all camps, participants raised the absence of secondary and tertiary education options as a major barrier to educational continuity. In Camp 27 and Camp 6, both youth and adults noted that learning ends at grade 8, with no formal system to proceed further. Students who complete primary

education face a dead end, which leads to high dropout rates and frustration. The minority communities emphasized that religious and ethnic discrimination within learning spaces further undermines their trust in education programmes.

In TC and Camp 1E, adult men and child protection actors described poor alignment between education programmes and future employment or resettlement pathways. The absence of formal certification, particularly for the Myanmar Curriculum, was cited as a significant demotivator. Without recognized credentials, parents feel that the time invested in learning is not rewarded, and students cannot use their education to access future opportunities.

> *"Without a certificate, you are always starting from zero. We need education that gives us a way forward."* @Refugee leader, NRC-supported area

Refugees also raised serious concerns about teacher quality and commitment. In Camp 26 and KRC, multiple respondents shared that teachers are unqualified, undertrained, or disengaged. Boys described being taught by teachers who arrive late, leave early, or spend time on their phones. Some parents observed that children who attend learning centers still struggle with basic literacy and numeracy, complaining curriculum delivery is not effective.

Lastly, infrastructure and access remain persistent issues. Families in Camp 27 and NRC areas cited Insufficient learning centers, lack of safe transportation for girls, and gender imbalance in teacher recruitment. Refugees in Camp 6 and 26 also noted that the Learning centers are not inclusive for children with disabilities.

Capacity Despite these gaps, communities remain deeply committed to learning. In Camp 1E, minority groups and youth leaders described organizing private tuition classes and study circles for children unable to attend formal learning centers. In KRC, parents have established informal school committees to advocate for better facilities and teacher oversight.

There is also strong support for curriculum expansion and reform. Youth and community members have expressed interest in supporting peer learning initiatives, particularly around English, math, and basic life skills. In Camp 6, some youth with higher education backgrounds have offered to volunteer as tutors, though they require teaching materials and coordination support.

Protection actors confirmed that block-level community structures are willing to mobilize around education programming—provided they should be consulted in curriculum design and involved in monitoring. Participants also expressed openness to skills-based programming and digital learning, if it is age-appropriate and community-endorsed.

Solution Refugees and stakeholders proposed a comprehensive overhaul of education programming. First, they strongly recommended that education pathways be extended beyond grade 8, either through secondary-level classes or alternative learning programmes. In Camp 27, Camp 6, and Camp 26, youth demanded that tertiary education and vocational training opportunities be introduced, even if limited, to offer children tangible prospects.

Second, community members asked for certification especially for the Myanmar curriculum—so that completed education can be recognized within the camps, in Myanmar or resettle countries. Parents emphasized that education without certification "holds no value" in the eyes of children or adults.

To improve teacher quality, participants recommended to facilitate teacher's competency assessment and develop an accountability system, including regular classroom observations and feedback. In NRC and KRC areas, respondents suggested that local educated refugees be trained and hired as teaching assistants, both to build ownership and increase community relevance.

Women and minority groups urged the development of inclusive education facilities, including those tailored for girls, persons with disabilities, and isolated communities. Recommendations included gender-segregated classrooms, safe transportation

options, and the recruitment of female and disability-aware teachers.

Finally, all camps advocated for the diversification of curriculum content, including life skills, peace education, digital literacy, and mental health awareness. Several respondents in Camp 1E and TC proposed the establishment of youth-led learning clubs and digital learning hubs, with rotating facilitators and materials provided by partners.

Governance

Refugees in Camp 6, Camp 27, TC, and NRC zones raised governance-related concerns tied to education access, policy restrictions, and implementation inconsistencies. From the absence of accredited certification pathways to inequitable teacher deployment and lack of long-term educational planning, the governance gap has become a source of frustration, aspiration denial, and community distrust in education systems.

Problem In Camp 27 and NRC adolescent girls and youth groups expressed a strong desire to continue their education beyond Grade 8 but lamented that no system is in place to support progression to secondary or higher-level learning. Girls described feeling "cut off" from their goals after early schooling, and some mentioned dropping out due to early marriage pressure, safety concerns, or community doubts about the value of non-certifying education.

In TC, adult women emphasized the need for more female teachers—not just as role models, but as essential for safe, gender-sensitive learning environments. Their absence contributes to early dropout among girls, discomfort in mixed classrooms, and a lack of trust in formal institutions. One respondent explained that when girls face harassment on their way to school, or discomfort inside, families often withdraw them altogether.

In NRC, community members—including teachers—reported that Rohingya children are excluded from national education systems, with no rights to formal integration and are not allowed to sit for public exam. They cannot register for public exams, move to higher levels, or transfer between educational tracks. Adult men noted that even where private or informal institutions exist, legal ambiguity and fear of government interference discourage enrollment.

Child protection structures in Camp 27 also highlighted a disconnect between teacher availability and population need. Some blocks have multiple educators while others are underserved, often due to political dynamics or non-transparent hiring practices. Refugees noted that these disparities lead to inconsistent learning quality, teacher overload in some areas, and resentment within the community.

Capacity Despite structural constraints, refugee families and youth continue to value education and work creatively to fill the gaps. In Camp 6 and Camp 27, parents have created home-based learning pods—small informal groups where older students tutor younger ones or read religious texts and storybooks to maintain learning flow.

In TC, adult women and youth women shared that educated community members, including girls, are willing to serve as assistants or shadow teachers if properly trained and supported. Several said they would volunteer in classrooms or conduct outreach on education retention, particularly for girls.

Some community actors, especially child protection volunteers and religious leaders, have tried to advocate for upper-grade learning, raising the issue in sectoral meetings or with CiC offices. These efforts are well intentioned but have yet to influence formal governance.

Solution Refugees across all groups recommended urgent governance reforms to expand access, clarify rights, and increase accountability within the education system. First and foremost, they requested that UNHCR and education partners work with national authorities or any educational institutions to secure learning certification pathways, including creating a pathways to higher education or vocational education. Participants in Camp 27 and

NRC called for the deployment of more qualified female teachers, prioritizing underserved blocks and upper-grade classrooms. Where teacher shortages persist, they suggested creating a pool of community-based teacher assistant groups through providing pre-service training special focus can be given to female. Refugee leaders in Camp 6 proposed the mapping of teacher locations and qualifications across blocks, allowing site managers and education actors to balance deployment and reduce service inequity. They also encouraged transparency in recruitment, calling for clear hiring criteria and community oversight of education staffing.

In TC, adult women and child protection staff recommended that anti-harassment and protection messaging be integrated into education governance, including safe transport plans and structured complaints channels for girls and parents. They also called for education governance committees with representatives from students, parents, teachers, and youth—ensuring that governance is rooted in community needs.

Finally, participants urged education authorities to coordinate closely with protection, child protection, and women's structures, ensuring that governance frameworks are responsive to social and cultural dynamics—not just academic metrics.

> *"We want a system where our learning counts where our years in class mean something real."*
> *@Youth man, NRC-supported area*

> *"We can dream of graduation. But without a pathway, it's just that—a dream."* *@Girl, Camp 27*

Clean water, sanitation, and hygiene (OA12)

Water

Access to safe and sufficient water remains a top priority and critical challenge for refugees in Camp 6, Camp 26, Camp 27, Camp 1E, KRC, TC, and NRC. Refugees rely almost entirely on humanitarian-supplied water systems, which—despite initial coverage—have become inconsistent and inadequate over time. Across all sites, community members underscored that water is not just a service issue—it is central to dignity, health, safety, and gender equality.

Problem Refugees across multiple sites reported that water quantity is insufficient to meet daily needs, especially for bathing, cooking, and personal hygiene. In Camp 26 and Camp 1E, water is supplied only once per day, with no clear timing. Participants described long queues, missed supply windows, and inequitable access between blocks. In Camp 6, several blocks face water delivery of only 10 liters per person per day, far below Sphere standards.

> *"If water is life, then life here is on hold—because it doesn't flow where it should."* @Youth, Camp 1E

In Camp 27 and NRC, refugees raised concerns about water quality, with reports of murky, foul-smelling, or visibly contaminated water. In KRC, the community shared that pure water is sometimes unavailable, leading families to store water in unclean containers or purchase bottled water from local markets—an unaffordable option for most. In Camp 1E and TC, refugees reported unequal water distribution, with specific blocks, often inhabited by minorities or marginalized households, receiving less pressure or delayed access.

Refugees with disabilities noted a lack of inclusive water access points, with no ramps, adapted tap heights, or support personnel at water points. In Camp 6 and TC, older persons and persons with disabilities are forced to wait long hours or rely on children to collect water—often leading to skipped hygiene practices or unsafe dependency.

In Teknaf and other hilly areas, community members explained that tap stands are sparse or absent, and water availability depends on elevation. Residents of elevated blocks often receive less pressure or no water at all, while low-lying zones may face stagnant pooling. Furthermore, many respondents cited lack of maintenance, with broken tap heads, leaks, and algae-covered tanks left unrepaired for months.

Capacity Despite these constraints, community-driven solutions were emerging. In NRC and Camp 27, youth volunteers and WASH mobilizers assist vulnerable families by collecting water or reporting faults. In KRC and Camp 26, households informally coordinate time-sharing at tap stands and sometimes store water for elderly or disabled neighbors.

WASH workers noted that refugees are eager to support maintenance and oversight, and several community leaders have participated in feedback sessions or system mapping, although they are rarely informed of outcomes. In Camp 6, some blocks are taking part in clean water handling campaigns, though these remain localized and irregular.

Solution To improve water access and equity, refugees proposed a coordinated series of actions. First, they requested that water supply frequency and duration be increased to at least twice daily, with posted distribution schedules and community monitoring to ensure adherence. In Camp 1E, refugee leaders proposed assigning block-level water managers, responsible for reporting issues and coordinating with WASH partners.

Communities across Camp 26, TC, and KRC called for an expansion of tap stands, especially in overcrowded or underserved areas. Participants emphasized the importance of installing tap stands with inclusive design—including lower taps, handrails, and ramps—so that elderly individuals and persons with disabilities can access water without risk or shame.

In response to quality concerns, residents urged UNHCR and WASH partners to conduct regular water quality checks, publish results, and share findings with the community. They also recommended the distribution of water purification tablets or household filtration kits for high-risk families.

Participants further asked for the establishment of a community-based water maintenance team, trained and equipped to address small repairs and keep tap points clean. In hilly zones, participants called for additional piping and booster systems to ensure pressure reaches upper blocks, particularly during summer and Ramadan seasons.

Finally, across all sites, participants highlighted the need for ongoing water awareness campaigns, focused on safe storage, hygiene during water scarcity, and joint responsibility for system maintenance. These should include accessible formats for children, the elderly, and those with low literacy.

Sanitation

Sanitation access and facility management remain critical challenges across the refugee camps, with particularly severe conditions reported in Camp 6, Camp 26, Camp 27, Camp 1E, KRC, TC, and NRC. Poor sanitation undermines personal safety, public health, and dignity—particularly for women and girls, older persons, and persons with disabilities. Despite efforts to maintain baseline access, the system is overstretched and under-resourced, with notable decline in cleanliness, accessibility, and safe design.

Problem Across nearly all sites, refugees raised alarm over insufficient and poorly maintained communal latrines. In Camp 6 and Camp 26, participants noted that many blocks have only a handful of functioning toilets—forcing long waits or the use of nearby open spaces, particularly during nighttime or illness. In Camp 1E and Camp 27, shelters located adjacent to full or overflowing latrines reported unbearable smells and increased fly infestations, making daily life difficult, especially for those with limited mobility or chronic illness.

In KRC and TC, adult women emphasized the lack of privacy and lighting in sanitation facilities, which discourages use at night and increases the risk of harassment or assault. Adolescent girls reportedly avoid latrines during menstruation due to the absence of locks, water, or disposal bins, often resorting to poor hygiene practices as a result.

The problem is compounded by limited cleaning services and a sharp reduction in WASH volunteers. In Camp 27, refugees explained that WASH volunteers used to clean latrines regularly, but that support has declined due to funding cuts or reassignment. As a result, facilities are left uncleaned for days, contributing to health risks like diarrhea, skin infections, and respiratory problems. Septic tanks in Camp 1E were described as completely full, with solid waste backing up into surrounding areas, particularly in the rainy season.

Persons with disabilities in Camp 6 and Camp 26 noted that latrines are physically inaccessible, with no ramps, handles, or space for caregivers. In NRC, latrines were said to be structurally compromised, with broken doors and sharp bamboo protrusions creating injury risks.

Capacity Despite inadequate infrastructure, refugee communities show strong commitment to maintaining dignity and sanitation standards where possible. In Camp 6 and Camp 1E, women and older persons have organized informal cleaning schedules or contribute soap and water to keep shared toilets usable. In Camp 26, youth volunteers help clean blocked drains and latrine corridors on a rotational basis, especially before community events.

In KRC, some households collaborate to purchase cleaning items and self-manage the sanitation of nearby facilities, though these efforts are difficult to sustain without consistent external support. WASH workers in Camp 6 acknowledged that communities are capable and willing to co-manage latrines, provided they receive equipment, training, and periodic reinforcement.

Solution Refugees proposed a series of urgent and practical solutions to improve sanitation conditions across the camps. First, they called for increased number of gender-segregated latrines, especially in crowded and underserved areas. In Camp 6 and Camp 1E, participants recommended that each block have a minimum sanitation ratio, with construction adapted to user needs and local terrain.

To address exclusion, refugees requested the construction of disability-friendly sanitation facilities, with handrails, wide doorways, non-slip surfaces, and proximity to disability households. These facilities should be paired with private bathing spaces for elderly individuals and persons with disabilities, supported by WASH or protection partners.

Women and girls across multiple camps stressed the importance of lighting and locks for all latrines, alongside regular provision of menstrual hygiene materials and safe disposal bins. Participants asked for latrines to be equipped with soap and buckets, and for water connections to be prioritized where gaps exist.

WASH partners were urged to reactivate and scale WASH volunteer teams, ensuring each block has a designated team responsible for cleaning, reporting, and minor repairs. In Camp 27, youth suggested forming "WASH guardian groups" involving both male and female youth, trained in hygiene messaging, latrine maintenance, and early warning reporting for broken infrastructure.

Communities also requested that septic tank maintenance be restored as a regular cycle, with clear reporting channels and emergency desludging services. Several proposed that block committees or site management teams receive oversight training, helping ensure sanitation services are monitored with transparency.

Hygiene

Across camps including Camp 26, Camp 27, Camp 1E, TC, KRC, and NRC, refugees described a deteriorating hygiene environment, marked by reduced access to basic hygiene materials, declining service quality, and unsafe or inadequate hygiene infrastructure. The current state of hygiene undermines protection efforts, particularly for women, girls, persons with disabilities, and minority communities, who are most affected by service gaps.

Problem The most frequently cited concern was the insufficiency and irregularity of soap and hygiene product distribution. In NRC and Camp 26, adult women and minority group members noted that the quantity of soap provided has decreased significantly over the past three months, especially for laundry and personal use. In several areas, the reduction was from two bars of laundry soap to one per month, making it difficult for families to maintain basic cleanliness.

In TC and Camp 26, respondents expressed dissatisfaction with the quality of sanitary pads, describing them as thin, uncomfortable, and not absorbent enough to meet real needs. Additionally, the number of pads per eligible person was said to be inadequate, forcing women and girls to either reuse materials or rely on cloth—raising risks of infection and discomfort. In many cases, women also reported that menstrual kits are distributed irregularly, without prior notice, and often without privacy or proper explanation.

Water-related hygiene concerns also emerged across multiple camps. In Camp 1E, older persons flagged that bathing spaces are encroached upon by adjacent shelters, leaving little privacy or safety. In TC, persons with disabilities described bathing areas as distant and poorly covered, exposing users to risk and embarrassment. Respondents in Camp 26 and NRC blocks raised concerns about blocked household drains, which contribute to standing water, mosquito breeding, and foul odors—particularly near food preparation or child play areas.

Participants also noted a decline in hygiene promotion activities, particularly those involving community mobilization and outreach. In NRC areas, adult men and women alike said they hadn't seen any hygiene campaigns in months, and that the shift from regular to sporadic hygiene sessions has created confusion about product use and best practices.

Capacity Despite these issues, refugees continue to take initiative to uphold hygiene standards. In Camp 26, several families have built makeshift bathing units inside their shelters, using plastic sheeting or tarps for privacy. In NRC zones, adult women organize informal rotation systems for handwashing stations, taking turns to clean and refill water containers for community use.

Some blocks have initiated their own drain clearing activities, particularly where young men or child protection volunteers take the lead. In TC, a few persons with disabilities reported receiving occasional help from neighbors to reach bathing areas or manage hygiene routines. Where community-based hygiene volunteers exist, they are seen as valuable, but limited in number and often untrained or unsupported.

Women in Camp 26 and TC emphasized that there is strong community willingness to maintain hygiene standards, but only if tools and materials are provided consistently and communication is clear and respectful.

Solution Refugees called for the restoration and standardization of hygiene kit distributions, with regular delivery, community consultation, and improved content quality. In Camp 26 and NRC zones, participants requested that the quantity of soap be increased, particularly for larger families or blocks with limited water access. They also emphasized the need for household-specific tailoring—taking into account children, disability, and menstruation needs.

Women and girls urged WASH actors to improve the quality, comfort, and absorbency of sanitary pads,

and to increase the number of pads in each kit. They also recommended monthly awareness sessions on menstrual hygiene, facilitated by female hygiene volunteers or community health workers in private settings.

In terms of infrastructure, refugees across camps proposed that bathing spaces be relocated, restructured, and properly enclosed, with plastic or tarpaulin walls to ensure safety and privacy. They also asked that accessible bathing and handwashing stations be introduced, particularly near disability-dense blocks and at night-lit areas.

Respondents recommended a camp-wide drain rehabilitation plan, where WASH actors and community volunteers could work together to clean, map, and maintain drainage lines. For sustainability, they suggested the creation of community hygiene committees, trained to report gaps, manage small repairs, and liaise with NGOs for larger issues.

Finally, participants requested the return of hygiene promotion campaigns, including awareness sessions in mosques, schools, and community spaces—delivered through culturally appropriate messaging, drama skits, posters, and peer outreach.

Durable solutions (return)

In 2025, refugees across camps 1E, 6, 26, 27, KRC, TC, and NRC continued to articulate complex perspectives on their future and the search for durable solutions. These discussions captured through FGDs and Key Informant Interview (KIIs) reveal a population caught between long-standing displacement and deep uncertainty about voluntary return, local integration, or resettlement. While individual aspirations vary, three overarching themes emerge consistently: the need for legal identity and recognition, the desire for dignified living through integration and voluntary return, and a pervasive lack of agency in shaping the path ahead.

For many, the notion of **voluntary return to Myanmar** remains theoretically desirable but practically unviable. Respondents expressed strong emotional connections to their places of origin and reiterated their hope to return “when peace and recognition come.” However, participants repeatedly emphasized that current conditions in Myanmar—marked by ongoing violence, property destruction, and lack of citizenship guarantees—make return unsafe and unrealistic. A majority of respondents, particularly in camp 26, camp 1E, and camp 6 express conditional willingness to return, only if fundamental rights such as safety, citizenship, freedom of movement, and property restitution are guaranteed. These demands are nearly unanimous among adult men (25 to 59 years) and girls (10 to14 years) across different camps, reflecting non-negotiable priorities across generations. For instance, community leaders in camp 26 emphasize the need for international monitoring and the right to return to their original villages, while youth women (15 to 24 years) in camp 1E and camp 6 highlight the importance of dignified repatriation with full citizenship and access to education and livelihoods. Respondents also provide several key barriers that hinder the repatriation of Rohingya refugees. Distrust in authorities remains a significant obstacle, with many fearing persecutions by the Arakan Army (AA) and the Myanmar government, as expressed

by adult women (25 to 59 years) in camp 6. Older persons with memories of Myanmar may be more open to repatriation, while younger ones, having grown up in camps, see their future elsewhere.

Across nearly all sites, refugees identified **documentation and legal identity** as both a practical barrier and a symbolic erasure of their rights. Many respondents reported lacking birth certificates, national identity documents and exclusion limit access to education, movement, and services, but more profoundly, it reinforced a feeling of invisibility in Myanmar. In Camp 1E, a youth participant described their primary aspirations which include a safe and dignified return to Myanmar with full citizenship and rights. Others noted that even when some documents are present, they often go unrecognized or are insufficient to prove family links, nationality, or residency, particularly in the context of potential return or resettlement. Compounding these challenges are the difficult conditions in host country Bangladesh, including ration cuts that threaten basic survival, particularly highlighted by youth women in KRC. These barriers collectively undermine confidence in safe and sustainable return.

Despite **local integration** clearly being unattainable in the context of Bangladesh, refugees acknowledged that they have built lives within the camps—raising children, forming communities, and accessing humanitarian services. Yet, these efforts are constrained by a lack of legal pathways, work rights, or land ownership. Respondents from NRC spoke about the exhaustion of temporary existence, calling for recognition as residents. Youth women in KRC explicitly reject repatriation, citing no connection to Myanmar and demanding local integration with education and livelihood rights. Calls for more inclusive education policies, formalized job training, and the right to live outside the camps echoed through multiple discussions, particularly among adolescents and adults who fear generational stagnation.

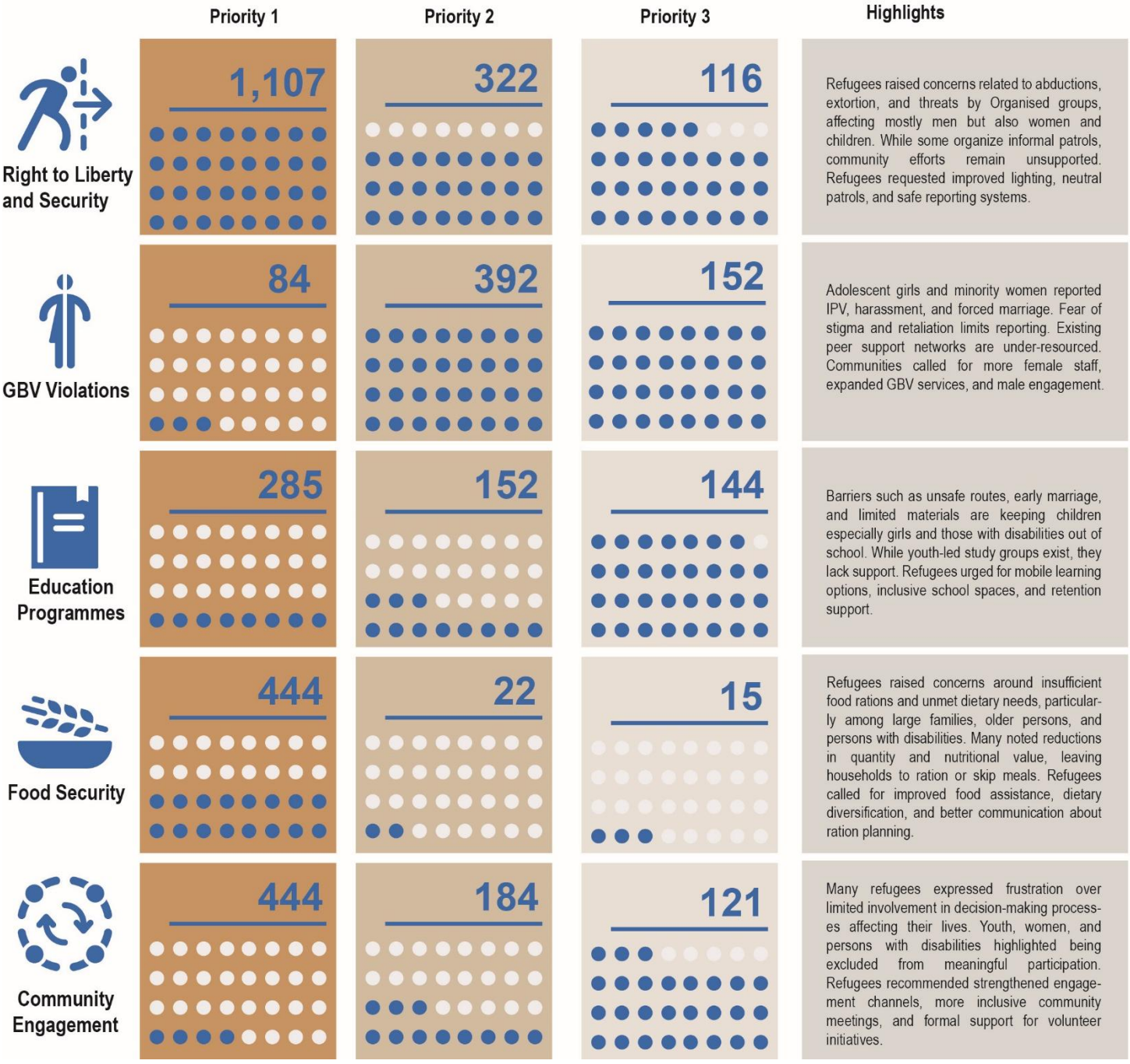
While **resettlement** was frequently mentioned, it was viewed with both aspiration and skepticism. There is a higher preference for resettlement in KRC and NRC, especially among those born in the camps or long-term camp residents. Adult women (25 to 59 years) from NRC prefer resettlement, fearing unsafe conditions and emphasizing their roots in Bangladesh. Some refugees—especially those with specific vulnerabilities, such as survivors of violence, persons with disabilities, and minority groups—saw third-country resettlement as their only pathway to dignity and safety. Others view third-country resettlement as the only viable solution, reflecting skepticism about both Myanmar and Bangladesh's willingness to integrate them.

Across all responses, one unifying concern emerged: the lack of information and participation in decision-making around their futures. Refugees expressed a strong desire to be part of any conversation related to solutions—whether voluntary repatriation, integration, or resettlement. They called for community consultations, transparent communication, and accessible information that would allow the refugees to make informed decisions about their lives.

In conclusion, access to durable solutions remains a challenge due to access to durable solutions remain a challenge. Refugees are surviving in a state of prolonged temporariness, unsure which future, if any, is being designed for them. Moving forward, durable solutions must be reimagined through a participatory lens, one that centers dignity, documentation, and dialogue.

Priority needs

The matrix below highlights the top five priority areas identified by refugee communities, based on data collected through the Participatory Assessment. Each issue was ranked by respondents as Priority 1, 2, or 3 depending on urgency. A weighted score was then applied to reflect both frequency and importance, giving greater value to higher-ranked priorities. The accompanying dot scale (●) offers a visual representation of how strongly each issue was prioritized, with more dots indicating higher significance.



Cross-cutting themes

Throughout the 2025 Participatory Assessment across all camps and locations including Camp 6, Camp 26, Camp 27, Camp 1E, TC, KRC, and NRC several cross-cutting issues emerged that transcend specific sectors. These themes reveal how structural inequality, identity-based barriers, and shifting community dynamics shape refugees' access to services, protection, and dignity. They also highlight the areas where coordination, inclusivity, and tailored approaches are most urgently needed.

1. Gender and age inclusion

Gender inequality continues to profoundly influence refugee experiences. Women and girls reported disproportionate barriers in accessing health services, WASH facilities, education, and legal documentation, often due to entrenched social norms and safety concerns. Adolescent girls in Camp 27 and TC cited early marriage pressures and lack of menstrual hygiene support as key reasons for school dropout and social isolation. Women frequently reported feeling unsafe while accessing communal bathing spaces or fetching water after dark, especially in areas without lighting or with limited protection monitoring.

Meanwhile, men and boys, particularly adolescents, highlighted their exclusion from structured programming, leading some to disengage from education or adopt harmful coping mechanisms such as smuggling, exploitative labor, or risky migration. Across Camp 26 and NRC zones, boys emphasized the need for more male-focused recreational and mentorship spaces, particularly those that promote constructive engagement and prevent harmful behaviors.

Children across age groups—especially those with disabilities or from single-headed households—also face limited educational continuity and informal caregiving burdens, impacting both development and protection outcomes.

2. Disability and accessibility

Persons with disabilities consistently described a lack of inclusion in nearly every sector. From inaccessible bathing and latrine facilities in TC and Camp 6 to the absence of disability-sensitive consultation during distribution planning, many respondents felt invisible in humanitarian programming. Several persons with disabilities reported relying on children or neighbors to access water or health services, reinforcing cycles of dependency and exclusion.

In both KRC and Camp 1E, refugees with visual, physical, and cognitive disabilities described a deep desire to participate actively in community life but cited a complete absence of assistive devices, mobility infrastructure, and adapted learning materials. Some disability focal points noted that while disability is recognized in assessments, services are not designed for real inclusion, and needs remain unmet due to lack of funding or trained staff.

3. Diversity and minority protection

Religious and ethnic minorities, particularly Christian and Hindu refugees in Camp 27 and NRC, expressed discriminatory access to services, safety risks, and social exclusion. In areas where shelter assistance is community-managed, minority respondents felt they were deprioritized, and some cited harassment or underreporting of their complaints due to fear of retribution.

LGBTQI+ individuals, while rarely openly identified in the assessment, were indirectly referenced by community members as facing severe stigma and invisibility, particularly in protection and health sectors. Their protection needs remain unaddressed, and respondents across locations stressed the importance of safe and confidential referral pathways for all individuals, regardless of identity.

4. Community-based protection and participation

While formal community structures exist, respondents voiced frustration that meaningful participation remains limited, particularly for women, youth, persons with disabilities, and minorities. In Camp 26 and Camp 1E, several community members explained that most decisions—especially those around distributions, shelter upgrades, or referrals—are still made by male-dominated leadership, with little opportunity for broader engagement.

Nonetheless, refugee communities remain highly proactive in shaping solutions. Across sectors, participants described grassroots efforts such as informal volunteer groups for fire watch, peer learning, drain clearing, or escorting elderly persons to distributions. However, these efforts are rarely recognized or resourced. Participants requested more inclusive planning processes, especially during camp-level coordination meetings or service design workshops.

5. Safety, dignity, and accountability

Across all sites, dignity and safety emerged as shared concerns. Whether in the context of cramped shelters, undignified hygiene conditions, or refoulement at the border, participants described everyday indignities that compound vulnerability. In Camp 1E, for instance, multiple women described being forced to deliver at home due to lack of safe, gender-sensitive maternal spaces. In NRC, older persons spoke of fearing they would die without ever having legal identity, a concern also echoed in discussions on durable solutions.

Participants consistently called for improved accountability mechanisms. While community feedback desks and hotlines exist in some camps, most respondents said these are either poorly communicated or inaccessible due to language, literacy, or fear of retaliation. Calls for more transparent, multi-channel complaint systems—including WhatsApp hotlines, in-person booths, and regular community feedback meetings—were repeated throughout.

Recommendations

These recommendations prioritize immediate protection, long-term resilience, and dignity-based approaches, aligning with community-identified needs.

1. Access to territory, documentation, and asylum (OA1)

- UNHCR should advocate with relevant authorities to establish dedicated reception and screening centers at strategic border points, ensuring dignified and rights-based entry for asylum-seekers, including immediate provision of food, shelter, and medical assistance.
- Ensure that all new arrivals receive provisional documentation within 24 hours of entry to reduce their exposure to protection risks such as arbitrary arrest, trafficking, and exploitation.
- Expand and deploy mobile registration teams and improve outreach efforts in remote or informal entry zones, with a focus on identifying vulnerable individuals such as unaccompanied children, elderly persons, and persons with disabilities.
- Strengthen coordination with CiCs and protection partners to promote community-level awareness on the right to seek asylum, documentation processes, and access to legal support for undocumented refugees.

2. Gender-based violence (OA4)

- Expand access to survivor-centered GBV services across all camps, including increasing the number of female GBV caseworkers, ensuring confidential service points, and integrating trauma-informed mental health support for women and girls.
- Scale up preventive engagement of male leaders, Majhis, and adolescent boys through structured, recurring workshops that challenge harmful gender norms and promote positive masculinities.
- Strengthen SEA prevention and response mechanisms by institutionalizing anonymous reporting channels, ensuring survivors are protected from retaliation, and reinforcing accountability through robust investigation protocols.
- Mainstream GBV risk mitigation across sectors—particularly in shelter, WASH, and camp infrastructure—by improving lighting, ensuring the availability of gender-segregated latrines, and conducting regular community safety audits with the participation of women and girls.
- Ensure that refugee women and youth are involved in the design and monitoring of GBV programmes to promote survivor agency, community ownership, and long-term impact.

3. Child protection (OA5)

- UNHCR and child protection partners should strengthen both preventive and responsive child protection systems by prioritizing inclusive programming for at-risk groups, especially girls, children with disabilities, and UASC.
- Establish community-led monitoring mechanisms for corporal punishment, child marriage, child labor, and recruitment, and ensure these are directly linked to formal case management pathways and rapid referrals.
- Introduce conditional cash transfers for families and expand vocational apprenticeships for adolescents to reduce child labor driven by economic hardship.
- Support the formation of peer-led adolescent protection groups and youth councils, especially in underserved camps, to build awareness, leadership, and accountability among youth.
- Scale up alternative care programmes, ensuring that foster families caring for UASC receive training, psychosocial support, and modest incentives to maintain quality care.

- Provide joint training for teachers, health staff, CPCVs, and religious leaders on early identification of protection risks, with a focus on child safeguarding, referral protocols, and inclusive practices.

4. Safety and access to justice (OA6)

- UNHCR and protection actors should work with law enforcement and camp authorities to strengthen camp-level community-based protection committees, ensuring diverse representation of women, youth, and minority groups, and formalizing their role in reporting and mediation.
- Establish and promote confidential, survivor-safe reporting channels for protection violations including abduction, extortion, and physical threats—particularly in areas where organized group activity or inter-communal violence has been reported.
- Expand access to legal aid and mobile legal clinics, especially for cases involving domestic violence, land/property disputes, or arbitrary arrest, with targeted outreach to persons with disabilities, women heads of households, and ethnic/religious minorities.
- Improve coordination between CiCs, APBn, and protection actors through regular security briefings, shared incident mapping, and inclusive community dialogues that build trust and transparency in enforcement.
- Ensure training and oversight of Majhis and other informal leaders on humanitarian principles, protection standards, and survivor confidentiality to prevent abuse of power and strengthen community accountability.
- Promote the establishment of camp-level early warning systems for escalating tensions or threats, linked to a rapid protection response plan jointly developed with community stakeholders and UN security focal points.

5. Community engagement and women's empowerment (OA7)

- Strengthen the meaningful participation of refugees in governance structures by expanding community consultation mechanisms and ensuring the inclusion of women, youth, and persons with disabilities in leadership and decision-making forums.
- Establish or reactivate inclusive refugee advisory boards and community forums that regularly engage with CiCs and humanitarian actors on issues affecting their safety, services, and access to information.
- Increase the visibility and support of women-led initiatives and safe spaces, providing flexible funding and technical support for income generation, literacy, legal awareness, and rights-based trainings.
- Mainstream gender equality in camp coordination structures, ensuring that women's voices are not tokenized but actively shape protection strategies, complaints mechanisms, and service delivery design.
- Ensure that accountability to affected populations (AAP) principles are operationalized by creating structured, multilingual feedback systems (e.g., hotlines, suggestion boxes, in-person outreach) that are consistently monitored and responded to.
- Support the mobilization and protection of community-based volunteers, including female CPCVs, by providing regular capacity-building, psychosocial support, and safeguards against retaliation or overburdening.

6. Well-being and basic needs (OA8)

- Ensure a predictable, sufficient, and accessible provision of food and core relief items by harmonizing distribution schedules, accommodating vulnerable individuals (e.g., elderly, pregnant women, persons with disabilities), and using needs-based targeting where applicable.
- Expand access to cash-based interventions to allow refugee households greater autonomy in meeting their basic needs, especially where market access is feasible and protection risks are minimal.

- Develop and implement community-based identification and referral systems for households facing harmful coping strategies such as child labor, forced marriage, or survival sex—linking them with immediate support through food, cash, or psychosocial services.
- Strengthen coordination between food, protection, and livelihoods actors to identify individuals and families at heightened risk of malnutrition, neglect, or exploitation due to inadequate resources.
- Promote the inclusion of women and minority groups in planning and monitoring distributions, ensuring transparency and reducing complaints around unfair targeting or diversion.
- Establish safe, accessible collection points for food and CRIs, including shaded waiting areas, gender-segregated queues, and mobile distribution options for persons with reduced mobility or chronic illness.

7. Sustainable housing and settlements (OA9)

- Upgrade and maintain shelters with a focus on safety, privacy, and resilience, particularly for female-headed households, persons with disabilities, and families with small children—using inclusive design standards and regular assessments to guide improvements.
- Expand access to individualized shelter repair and upgrade support, prioritizing vulnerable households and those in disaster-prone or congested zones, while linking upgrades to protection and WASH risk mitigation.
- Promote community-led site maintenance and settlement planning, including regular hazard mapping, drainage management, and the use of refugee feedback to identify and address shelter-related protection concerns.
- Integrate climate-responsive shelter solutions using locally available, sustainable materials and techniques that reduce environmental degradation, strengthen resilience to monsoon and cyclone seasons, and lower maintenance burdens on families.
- Strengthen collaboration between the Shelter, Protection, Site Management, and Energy sectors to ensure cohesive site planning that addresses safety, lighting, accessibility, and public space inclusion.
- Expand access to clean, safe, and sufficient household energy including LPG or alternative cooking fuels—to reduce exposure to fire risks, health hazards, and protection concerns associated with firewood collection.
- Ensure consistent and equitable LPG distribution, with clear communication of distribution schedules, functioning complaint mechanisms, and targeted support for the most vulnerable households, including older persons and female-headed households.
- Promote the use of solar lighting solutions across shelters, public spaces, and latrines to improve safety and mitigate GBV risks, especially in under-lit areas and during the evening hours.
- Support reforestation and tree-planting initiatives in collaboration with refugee and host communities, while introducing incentives for community-managed green spaces and soil erosion control practices.
- Strengthen environmental awareness activities in schools, learning centers, and through youth clubs, focusing on sustainable energy use, waste management, and the long-term impact of deforestation.

8. Healthy lives (OA10)

- Strengthen access to inclusive, quality primary health care services by increasing the availability of trained medical staff, female health workers, and mobile health units in underserved blocks and isolated areas.
- Scale up mental health and psychosocial support (MHPSS) services through both community-based and facility-level interventions, ensuring tailored support for survivors of violence, youth, and persons with disabilities.

- Improve adolescent and reproductive health services by expanding youth-friendly clinics, ensuring discreet access to menstrual hygiene materials, and training staff to provide confidential counseling and information.
- Address barriers to maternal and newborn care, including distance, cost, cultural stigma, and lack of information, by promoting community birth preparedness plans and incentivizing skilled birth attendance.
- Enhance nutrition screening and referral systems for children under five, pregnant and lactating women, and individuals with chronic illness, while linking them with supplementary feeding and counseling programmes.
- Engage refugee outreach volunteers and community health workers in nutrition education and behavior change communication, promoting breastfeeding, balanced diets, and hygiene practices through trusted peer channels.

9. Education (OA11)

- Expand access to quality, inclusive, and age-appropriate education by increasing the number of learning centers, recruiting additional teachers (especially female educators), and ensuring shifts accommodate both younger children and adolescents.
- Strengthen efforts to retain children in school by addressing key barriers such as safety concerns, child labor, early marriage, and lack of school materials, while integrating flexible learning pathways for over-aged learners.
- Ensure learning environments are child-friendly and protection-sensitive, with safe infrastructure, gender-segregated WASH facilities, and mechanisms to prevent corporal punishment, harassment, or discrimination.
- Prioritize the inclusion of children with disabilities by adapting physical infrastructure, providing assistive devices, and training teachers in inclusive education practices.
- Introduce or expand life skills and adolescent education programmes, especially for out-of-school youth, including components on health, leadership, and digital literacy to enhance future opportunities.
- Promote community engagement in education, including through parent-teacher associations and refugee education committees, to increase accountability, encourage enrollment, and foster ownership.

10. Clean water, sanitation, and hygiene (OA12)

- Ensure safe, equitable, and uninterrupted access to clean water by maintaining water points, expanding tap coverage in under-served blocks, and ensuring regular water quality testing to prevent outbreaks of waterborne diseases.
- Prioritize hygiene promotion activities that are age- and gender-sensitive, led by trained community hygiene volunteers and tailored to specific risks during seasonal changes or outbreaks.
- Improve access to gender-segregated, well-lit, and disability-friendly sanitation facilities, especially in high-density areas, and ensure that repairs and desludging are conducted regularly and communicated transparently.
- Strengthen the distribution and monitoring of hygiene kits, ensuring timely provision of menstrual hygiene materials, soap, and cleaning items, with adaptations based on age, disability, and family size.
- Promote community-led waste management initiatives and environmental hygiene campaigns, engaging refugee youth, volunteers, and women's groups to reduce open defecation and improper waste disposal.
- Integrate WASH considerations in all shelter upgrades and site planning, ensuring that water and sanitation access is central to camp design, emergency preparedness, and dignity in daily living.

11. Durable solutions (return)

- Enhance community awareness of durable solutions, including voluntary repatriation, resettlement, and local integration, through accessible, multilingual information campaigns using trusted community channels.
- Work closely with refugee leadership, youth groups, and religious figures to clarify the criteria, processes, and limitations of each durable solution pathway, reducing misinformation and managing expectations.
- Promote participatory approaches to return planning, ensuring that any future discussions around voluntary repatriation are informed by protection thresholds, safety assessments, and refugee intentions—especially those of women, youth, and marginalized groups.
- Expand resettlement and complementary pathways for the most vulnerable refugees, including survivors of violence, persons with disabilities, and separated families, while ensuring transparent selection and follow-up mechanisms.
- Support refugees' legal identity and documentation to facilitate their future inclusion in solutions planning, including birth registration, refugee ID renewal, and civil documentation for return or third-country processing.
- Strengthen opportunities for self-reliance and community resilience through vocational training, cash-for-work, education, and formal skills certification, which build the foundations for durable outcomes regardless of the eventual solution.

12. Cross-cutting priorities

- Ensure that age, gender, and diversity (AGD) considerations are systematically integrated across all sectors, planning, and service delivery, with specific inclusion of persons with disabilities, minority groups, and gender-diverse individuals.
- Institutionalize protection mainstreaming across shelter, WASH, health, and education interventions by conducting regular risk assessments and adapting programming to prevent exclusion, exploitation, and GBV.
- Strengthen the role of refugee-led structures in monitoring protection risks and raising community concerns, ensuring their feedback directly informs sector decision-making and is visibly acted upon.
- Scale up the use of disaggregated data collection and analysis in assessments, targeting, and reporting to ensure that vulnerabilities are accurately identified and addressed in programming.
- Promote inter-sectoral collaboration and information-sharing, especially for cases that require multi-sectoral response (e.g., children at risk, GBV survivors, or UASC), to enhance case follow-up and support systems.
- Ensure transparent and accessible feedback and complaints mechanisms, including those tailored to non-literate persons, minority languages, and children, and provide timely responses that foster community trust.
- Invest in capacity-building for frontline staff and volunteers on protection principles, inclusive programming, accountability to affected populations (AAP), and community-based protection approaches.