Check for updates

OPEN ACCESS

EDITED BY Diotima Chattoraj, National University of Singapore, Singapore

REVIEWED BY Lucy Williams, University of Kent, United Kingdom Mallik Akram Hossain, Jagannath University, Bangladesh

*CORRESPONDENCE Bulbul Siddiqi ⊠ mohammad.siddiqi@northsouth.edu

RECEIVED 17 December 2024 ACCEPTED 05 June 2025 PUBLISHED 27 June 2025

CITATION

Siddiqi B and Khan NN (2025) COVID-19 induced challenges in refugee management: lessons learned from Rohingya camps in Bangladesh. *Front. Hum. Dyn.* 7:1547030. doi: 10.3389/fhumd.2025.1547030

COPYRIGHT

© 2025 Siddiqi and Khan. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

COVID-19 induced challenges in refugee management: lessons learned from Rohingya camps in Bangladesh

Bulbul Siddiqi* and Nur Newaz Khan

Department of Political Science and Sociology, North South University, Dhaka, Bangladesh

Bangladesh's Rohingya crisis is more complex than ever due to several factors. Failure to repatriate Rohingya refugees to their homeland, declining sympathy among the host communities, funding reductions from the international communities, the 2021 military coup in Myanmar and the recent war between the Arakan Army and Myanmar military are the key factors behind such complexity. In addition to all these difficulties, COVID-19 created new barriers and left its mark on this ongoing crisis, which has created further vulnerabilities among the mass population of Rohingya living in Bangladesh. Reduced job opportunities, failure to address increasing internal conflicts, and restricted mobility of the various aid workers during COVID-19 have made the situation worse for the Rohingya. Based on qualitative research among the Rohingya and the humanitarian workers in the Rohingya camps, the paper argues that COVID-19 puts the life and future of the Rohingya at further vulnerability. We conducted a total of 30 interviews, 15 with the Rohingya community and 15 with the humanitarian actors working on the ground. The impact of many such vulnerabilities is still visible in the Rohingya refugees and has created prolonged difficulties in managing the Rohingya in the camps.

KEYWORDS

COVID-19, Rohingya, refugee management, vulnerability, Bangladesh

Introduction

Rohingya, known as the most persecuted community globally, have been living in various countries worldwide without a state. The Rohingya crisis in Bangladesh is a historical one that started in the late 70s when many Rohingya had to flee from their homeland and take shelter in Cox's Bazar, a South-Eastern district of Bangladesh, which has a sporadic border with Myanmar. About 300,000 Rohingya entered Bangladesh in 1977–1978, and the majority of them were repatriated (Farzana, 2015; Haque, 2017). Since then, Bangladesh witnessed repeated episodes of the Rohingya influx in 1991–1992 and 2017. 742,000 Rohingya fled from Myanmar to Bangladesh in 2017 to save their life (UNHCR, 2022) and it continued in the later years. The present number of the Rohingya in Cox's Bazar is 1133981 (UNHCR, 2025). However, the Rohingya influx in 2017 in Bangladesh has been more complex than ever due to geopolitics in the region, the poor negotiation power of Bangladesh with Myanmar, the Military coup, the present war situation in Myanmar and the funding strain of Bangladesh. In addition, the absence of a comprehensive refugee management policy in Bangladesh created difficulties for Bangladesh (Siddiqi and Kamruzzaman, 2021).

The present situation of the Rohingya shows no hope for a dignified solution to the crisis even after 7 years of influx, and the repatriation mostly remained a "myth" (Siddiqi, 2022a,b) as we have not seen a single Rohingya refugee being repatriated after the 2017 influx. Instead, it is piling up the challenges of addressing the Rohingya crisis. Furthermore, declining sympathy among the host communities has become a leading factor in ensuring a cohesive relationship between the Rohingya and host communities (Siddiqi, 2022a,b). The host communities welcomed the Rohingya community in 2017 with a sympathized attitude when they sought refuge in Bangladesh. However, the present situation tells a different story where the host communities are unwilling to take it further as the Rohingya refugees have been seen primarily as burdens (Kamruzzaman et al., 2024). The lack of tolerance and inter-communal respect created discrimination against Rohingya during COVID-19 (Auethavornpipat, 2023). On top of this, there remains a fear of a shortage of funding from the international communities. It has already created difficulties for the Government of Bangladesh (GoB) to manage the Rohingya population during the past years. As per the news report, the decline in funding for the Rohingya crisis has become visible since 2021. Hence, humanitarian management for Rohingya is becoming more challenging, such as difficulties in providing education services, shrinking income-generating activities for the Rohingya, increasing domestic violence, drug trade and so on (Palma, 2021).

Along with all these realities and difficulties, COVID-19 has appeared as an unprecedented new barrier to this ongoing crisis, which has created additional vulnerabilities among the mass population of Rohingya living in Bangladesh (Ullah et al., 2020; Islam and Yunus, 2020; Barua and Karia, 2020; Islam et al., 2020; Mistry et al., 2021). Under this complicated situation, based on qualitative primary data and secondary sources, the present paper shows that the COVID-19 pandemic put the life and future of the Rohingya into further vulnerabilities. The paper also discusses how such added vulnerabilities created challenges for the humanitarian actors and jeopardized the fate of repatriation in the present time.

Methods

We aimed to understand the impacts of COVID-19 by applying a qualitative approach consisting of in-depth interviews, group and informal discussions and field observation. We conducted a total of 30 interviews, 15 with the Rohingya community and 15 with the humanitarian actors working on the ground. Although the data collection was conducted during COVID-19 in 2020, the analysis and discussion in the paper also benefited from the authors' timeto-time research interactions with Rohingya communities after the pandemic. Authors have continued field engagement in Rohingya camps since the influx in 2017, such as short visits to the field at least twice a year. Such long interactions with the Rohingya communities in the camps provided us with an opportunity to better understand their daily challenges and difficulties and how it has changed over time. Therefore, when we visited the camp before and after COVID-19, we effectively compared the situation. It also gave us a familiarity with their culture and language due to the continuous interactions, which is an important factor in getting rich data from the field. With this the paper benefits from long-term field interactions with the Rohingya community. The authors availed an ethical review clearance from North South University to collect data at the Rohingya camps. The interviews were conducted with informed consent, and the research objectives were explained to those participants who could not read to get verbal consent before interviewing. Data were analyzed using a thematic approach (Braun and Clarke, 2022) and presented with pseudonyms to prevent any identification of the participants.

COVID-19 in Rohingya camps in Bangladesh: a brief review of literature

The first case of COVID-19 in the Rohingya refugee camps was confirmed in May 2020 (Aljazeera, 2020). According to the World Health Organization's weekly report update, as of April 3, 2022, the number of COVID-19 cases was 6,690 and 44 Rohingya died in various camps. According to the WHO Health Sector Bulletin released in January 2024, 20 cumulative COVID-19 cases were detected, with no deaths reported (WHO, 2024). Unprecedented fear was also apparent at the national level in Bangladesh, which, in a way, affected the Rohingya community. As they were on various social media-based platforms, rumors and misconceptions were spread very fast. Misconceptions about COVID-19 were also evident in camps (Mistry et al., 2021).

It was predicted in the early days of COVID-19 among the Rohingya in Bangladesh that Rohingya refugee camps could be one of the hotspots for COVID-19, making the situation for the Rohingya harder (Ullah et al., 2020; Islam and Yunus, 2020; Barua and Karia, 2020; Islam et al., 2020). However, the Rohingya camps were not a hotspot as predicted because of strict measures taken by the Government. The strict lockdown and movement restrictions for the Rohingya had impacts on the humanitarian actors carrying out their regular activities in camps, making the Rohingya's lives difficult, as they could not get many services on time. COVID-19 contributed to an increasing pattern of depressive symptoms among the Rohingya as the lockdown and several restrictions to control COVID-19 have also restricted the Rohingya from availing of several routine health services in time (Mistry et al., 2021).

Moreover, the social stigma around COVID-19 in Bangladesh significantly impacted various levels (Siddiqi and Khan, 2022), which also affected the Rohingya. Evidence suggests that social stigma existed among the Rohingya in camps, which acted as a barrier to availing of various COVID-19-related services in camps (Mistry et al., 2021). Religious belief and cultural tradition shaped their attitudes toward the pandemic. Several myths among the Rohingya regarding COVID-19 have created mistrust between the service providers and the Rohingya (Sakib and Siddiqi, 2022).

Most of the previously published research articles focused on the Rohingya's health perspectives as it was primarily a health concern. The key concerns were to ensure the preventive measures in the early days of COVID-19 in the Rohingya camps. Several papers can be found on the health consequences of the Rohingya population in camps. For example, the impact of COVID-19 on Rohingya adolescents (Guglielmi et al., 2020); mitigating the crisis (Islam et al., 2020); the lack of basic sanitation facilities, face masks, gloves, lack of awareness among the people in the refugee camp (Barua and Karia, 2020); general health perspective (Banik et al., 2020; Khan et al., 2020); resistance against the health impact of COVID-19 among the Rohingya (Ullah et al., 2020); desperate efforts of migration of the Rohingya during the COVID-19 in the sea (Khanna, 2020).

Few articles highlighted the difficulties that the humanitarian actors faced implementing regular camp activities, which made the lives of the Rohingya difficult (i.e., Guglielmi et al., 2020; Islam et al., 2020). Funding constraint was an issue during the height of COVID-19 that created challenges in ensuring food security and the overall wellbeing of the Rohingya (Hossain, 2021). Strict regulations and restrictions in camps also limit humanitarian actors' activities. Likewise, with the nationwide impact of COVID-19 in Bangladesh, the Rohingya children suffered from the closure of learning centers at camps (Guglielmi et al., 2020). Guglielmi et al. (2020) highlighted that resuming the education system is important for the Rohingya children as it has long-term benefits. The Rohingya situation is not a unique case, as refugee lives worldwide have suffered from the pandemic due to the administrative, legal and financial barriers by both government and non-governmental institutions (Badanta et al., 2023). Furthermore, hate speech against the Rohingya during COVID-19 created a negative image of the Rohingya among the host community that persists in the present time in different countries (Auethavornpipat, 2023). Besides all these difficulties, the Rohingya suffered from reduced food supply and limited health services due to the lockdown and restricted mobility in the camps (Ullah et al., 2020).

There remains a significant lack of understanding of the difficulties in managing the Rohingya and vulnerabilities other than health vulnerabilities during COVID-19 that persisted in post-COVID-19 time. This dimension has not been explored much by academics, which is the scope of the present paper to identify other persistent vulnerabilities other than health-related issues that COVID-19 has induced among the Rohingya. Among various recent vulnerabilities, shrinking opportunities for the Rohingya, economic hardship, and delayed repatriation of the Rohingya are the most notable, which the next section will elaborate on based on the field data and insights.

Findings and discussion

The Rohingya community has been living in vulnerabilities in makeshift camps for many years, and COVID-19 has intensified it further. Many challenges have remained even after COVID-19. The following findings and discussion sections will provide insights into the Rohingya and humanitarian perspectives on increased vulnerabilities and challenges. The first section starts with the Rohingya's shrinking opportunities and associated vulnerabilities. The second section begins with the challenges the various humanitarian actors faced during the COVID-19 pandemic. The third section deals with the prolonged sufferings of the Rohingya due to the delayed repatriation since 2017 and how the COVID-19 pandemic further aggravated it.

Shrinking opportunities and increased vulnerabilities among the Rohingya

Although the Rohingya have been living with many such problems since they arrived in Bangladesh, research data indicates that COVID-19 further aggregated the challenges and vulnerabilities of the Rohingya living in the refugee camps. The key problems during that time revealed by the Rohingya are the limited and shrinking job opportunities in the neighboring areas, the lack of effective educational facilities for their children, and uncertainty around their repatriation. Although it is well known that the Rohingya cannot work as they do not have the legal right to work in Bangladesh due to their non-refugee status as they are officially known as forcibly displaced Myanmar Nationals (FDMN).¹ However, many Rohingya have been working in the neighboring areas of their camps since the beginning of the influx in 2017 secretly. Rohingya are willing to offer cheap labor to the host community members, encouraging many host community members to hire the Rohingya instead of laborers from their host community. This pattern shows that the Rohingya had relatively better informal job opportunities before COVID-19 in the neighboring areas. Such difficulties in getting informal jobs during and after COVID-19 put pressure on their daily life.

Data and insights from the field suggest that in many cases law enforcement agencies captured many Rohingya from their work and handed them over to their camp management authority as they are not allowed to work outside the camp. However, the tendency of the Rohingya to work outside the camp also created tension between the host and Rohingya communities. The Rohingya community understands that there has been an increased vulnerability in the livelihood of the host community due to their working tendency. As one of the Rohingya men stated, "I understand that the host community people need to buy a product with a higher price due to the Rohingya influx in the area". Such increased tension was also evident in other research (i.e., Siddiqi, 2022a,b; Kamruzzaman et al., 2024).

Their working opportunities were reduced significantly during the COVID-19 pandemic. COVID-19 and its subsequent impacts put strict restrictions on their mobility, cutting off and limiting their sources of income-generating activities in the neighboring host communities (Hossain, 2021; Chattoraj et al., 2021). Interestingly, our findings suggest that despite such limited opportunities, very few Rohingyas are still making a way out to work outside the camps, even with pandemic restrictions. Many Rohingya pursued leaving the camps to take refuge in other neighboring countries with the help of human traffickers (Auethavornpipat, 2023).

Prolonged stay in congested refugee camps without improving the quality of their lives seemed to be a problem for the Rohingya. Rohingya participants mentioned they could hardly afford to buy meat and fish for their family members as they only received certain amounts and categories of essential foods from the food distribution center. As they do not have the opportunity to earn extra income or cash, in many cases, many of them sell some of their relief goods to the local market to buy other necessities, for example, meat, fish, milk and so on. Many people from the host

¹ The Rohingya who entered Bangladesh in 2017 was not granted the refugee status by Bangladesh. Since the Government of Bangladesh is not a signatory of 1952 refugee convention, it defines the Rohingya Forcibly Displaced Myanmar Nationals (FDMN). However, many Rohingyas who already have been living in Bangladesh for decades were given the refugee status. This is also another challenge and dilemma to ensure the wellbeing and a dignified live of the Rohingya in makeshift camps in Bangladesh.

community treated this as an opportunity to buy cheap products from the Rohingya community. The "relief market" has become popular among the host community as they can buy things from the Rohingya at lower prices. The Rohingya population could also get options to buy things that they need.

This is why many Rohingya are desperate to go outside the camp to find jobs in the neighborhood. One of the participants mentioned that,

"I quietly go outside the camp when I need money. I know the way out and in. However, many Rohingya do not like to take such risks because if the law enforcement agency finds us going outside to work, it could be a problem. I generally go early in the morning and return in the evening to avoid the eyesight of the members of law enforcement agencies. A middle-aged Rohingya man."

As he mentioned, many Rohingya do not want to take such risks during the pandemic, as it is even more difficult in COVID-19 due to restricted mobility. Several Rohingya participants in different research encounters mentioned that they used to travel to various places (districts) in Bangladesh to explore work in the pre-COVID-19 times. However, they mostly confined their mobility to the neighboring districts of Cox's Bazar, like Chattogram, Cumilla, Bandarban, Rangamati, etc. This indicates that they could easily do this in pre-pandemic time if they wanted to work outside. The significant factor that gave them benefits is their ability to speak and communicate through the local language and dialect, as the spoken languages of the Rohingya and Chittagonian have similarities. So many people from the host communities used to hire them for work. However, many participants noted that this livelihood opportunity shrank significantly during COVID-19 due to fear of infection among Rohingyas and imposed mobility restrictions by the camp authorities. That impact was prolonged even after the pandemic, as the camp management authority kept strict measures on their physical mobility outside the camps. This created job scarcity for the Rohingya. As one of the Rohingya participants explained the problem this way,

"Despite the restrictions, we used to get out of camps and disguise ourselves as locals to get daily labor jobs, but during COVID-19, many of us stayed in camps because of infection fear and lockdown in local areas. As you can realize, there is no fixed job, and the *Mohajons* (contractors) are not waiting for any person. If you are not regular in the market, you lose the job for a long time, and getting another chance to get the work is very difficult. Since COVID-19 days, I have been unable to go out for a month. I found it difficult to get *Mohajon* to hire me after COVID-19 because he had already hired others. So, I had to stay jobless for many days and could not find a fixed *Mohajon* to work with. You know, we Rohingyas try to disguise our identity and speak the Chatgaiya (Chattogram) language. Still, competing with local (host) people with better networks in the job market is not always easy."

However, the Government of Bangladesh sees the issue of working or such income-generating opportunities of the Rohingya differently. Defining the Rohingya as FDMN does not allow them to gain the status to work. Besides, letting the Rohingya work formally may create the fear of integration of the Rohingya within Bangladeshi society, which the GoB does not want. Maybe this is the key reason for the GoB not to define the Rohingya as refugees and not allow them to work and integrate with the host community. But the reality is different at the local level. Evidence suggests that many Rohingya and host communities have slowly started intermarriage (Uddin, 2021). This gives many Rohingya a sense of gradual and slow social integration with the host community. The uncertain nature of the repatriation put the lives of the Rohingya in limbo, where they are literally stuck in refugee camps and unable to go back to their homeland with dignity (Siddiqi et al., 2023). This situation forces them to find a way out to survive in the difficult situation of living in congested makeshift camps in the hilly areas of Cox's Bazar. This can also be seen as an example of the resilient nature of the Rohingya.

The next continued problem is related to the education of the children, which has been a key concern in camps. A Rohingya middle-aged man stated:

"Our children can only study at camps from 10–15 years old. The government of Bangladesh made it class ten for them. We started to face this problem when we entered Bangladesh. The educational situation for our children has not improved since then."

Such deprivation of education was also highlighted by Ullah and Chattoraj (2021), who stated that half of the refugee children do not receive any education, and the rest of them receive limited schooling. The middle-aged man also raised concerns about shrinking opportunities and problems living in camps, for instance, the problems with cooking, the lack of enough spaces for children to play and spend leisure time, floods and land sliding risk during the monsoon, limited medical facilities, and using firewood may increase the risk of fire. Even after COVID-19, the situation did not improve for them on these occasions. All these factors have been facilitating the vulnerabilities of the Rohingya living in refugee camps (Siddiqi et al., 2023).

Challenges faced by the humanitarian actors

The overall COVID-19 situation in the Rohingya camps was not bad, as the participants from various humanitarian actors revealed. As discussed in the literature review section, several studies, reports, and journal articles predicted that the Rohingya camps could have been a hotspot of COVID-19, but that did not happen as we noticed at the end of COVID-19. As we aimed to understand the COVID-19-induced challenges in the camps for the humanitarian actors, overall findings refer to the following difficulties: unwillingness to test COVID-19 and follow COVID-19-related guidelines; restricted physical mobility and reduced service provision for the Rohingya; reduced staff at many humanitarian organizations; limited or no facilities of education for the children; funding difficulties. Many such problems and difficulties were prevalent during COVID-19, but some created prolonged problems for which the impact remained after the COVID-19 period. The challenges around education and the decreased nature of funding are the two key constant challenges for the humanitarian actors that can be found in the Rohingya management.

One challenge that most of the humanitarian actors faced was the reluctance of the Rohingya to test if they had any symptoms of COVID-19, which is also the reason for the lower number of COVID-19 cases in camps. Besides, it does not always mean that having COVID-19-like symptoms may show a positive result, but it certainly does not add to the official results and data. Thus, there remains a lack of actual data on the camps. Moreover, humanitarian actors could not give their full efforts due to various restrictions during the pandemic. The authority provided a binding deadline for the staff working in the camps to leave the camps by 3-4 p.m. every day for safety reasons. Thus, humanitarian actors were not in camps in the afternoons and evenings. This was the situation for the pre-COVID-19 time. However, due to further restrictions during COVID-19, humanitarian actors had to reduce many of their activities, keeping the essential service delivery options during the pandemic. A letter issued by the Office of Refugee, Relief and Repatriation Commissioner (RRRC) in 2020 instructed that the humanitarian actors should reduce the number of staff by 80% (Human Rights Watch, 2020). Later, they mentioned that only essential services would be delivered in the Rohingya camps. This had a tremendous impact on the lives of the Rohingya in camps. A humanitarian actor mentioned that,

"The initial days of the pandemic were challenging. Due to the restrictions and lockdown in the early days of the pandemic, we strictly followed the Government's guidelines."

In the early incubation of the pandemic in 2020, following the COVID-19 protocol was mandatory for humanitarian and health workers while carrying out activities in camps. The working hour of humanitarian actors in camps was significantly reduced during the pandemic. This was another reason for not providing all the required services during the pandemic. They mainly needed to provide some essential services during this time. It was also instructed that the functioning of the learning centers (child education points) would depend on the situation, and the decision would be communicated later. Throughout the year 2020, educational services for the Rohingya children were severely interrupted due to the nationwide impact of COVID-19. A seniorlevel humanitarian actor from an international organization echoed a similar perspective. As he mentioned:

"With the movement restrictions in and outside the camps, almost all the activities were halted, and formal education was completely closed until 2021, starting from 2020. Besides, due to fewer income-generating activities, it is believed that many young Rohingya people are involved in illegal activities, and human trafficking has increased. Most of the funding was reprogrammed for other critical activities such as health, food distribution, etc."

Another humanitarian actor mentioned that,

"The pandemic has delayed much work, and we must reprogram many project activities. The workflow has slowed down the usual progress. Several training programs and educational activities were stopped."

It was also found from the discussion with the humanitarian actors that the Rohingya people have a mixed perception regarding COVID-19. Most of them did not want to accept COVID-19 as a deadly disease. During the field interaction in June 2021, one of the humanitarian actors (who frequently visited camps) mentioned that since the number of COVID-19 cases was below a hundred, using masks and following other COVID-19-related health precautions were practiced less in camps. While our field visits during COVID-19 show a similar perspective and tendencies. Ironically, some people even laughed seeing researchers wearing masks in camps, which reflects a reduced fear of infection and ignorance of the preventive guidelines.

Rohingya were unaware of maintaining social distancing and other COVID-19-related health precautions in camps. They are reluctant to follow this mostly as they do not feel comfortable with the top-down approach of the COVID-19-related protocol. Besides, they were not thoroughly convinced and were not adequately communicated. Again, field observation suggests that it was hard to maintain social distancing in camps. The living arrangements and housing are closely located where distancing is nearly impossible. Humanitarian actors also shared a more twisted experience from the Rohingya people in the camps as some of them shared that few Rohingya believed that the only way the virus spread in camps was through the physical movements of the humanitarian workers inside the camps and their interactions with Rohingya people for different service and research purposes. Such narrative and view can be understood as Scott's idea of resilience (Scott, 1985) in the viral infection context like COVID-29, where the subalterns show their reluctance and refusal to the upper class (in this case, the humanitarian workers and host community) by counter-narratives of virusspreading reasoning (Henriques et al., 2022; Mallette et al., 2023).

The humanitarian actors faced difficulties enforcing wearing masks and maintaining other COVID-19-related health precautions among the Rohingya. Since the service providers do not allow anyone to receive relief goods and other services without masks, the Rohingya wear masks during availing services. A humanitarian actor mentioned in this context that,

"When the Rohingya come to receive relief from different outlets, they only wear masks during this time as they are not allowed to go there without wearing masks. The Rohingya also make another point that they live closely in the camps. They do not have enough space in camps to maintain a social or physical distance. If they need to follow this strictly, they must wear masks 24 hours."

The same humanitarian actor pointed out another perspective from a Rohingya, highlighting their congested living spaces in camps, which is not enough for their dignified life, maintaining COVID-19-related precautions was a dream in such a context. While the previous section shows that the Rohingya have been facing difficulties due to the restrictions and lockdown in camps, the humanitarian actors also confirm this, as many Rohingya could not go outside the camps during the pandemic to work or to engage in different income-generating activities.

Different perceptions toward vaccines and COVID-19 acted as barriers for the humanitarian actors to ensure COVID-19related services among the Rohingya. Many Rohingya negatively perceive vaccination and are reluctant to accept the vaccine. One of the ways of seeing COVID-19 is as the punishment of God for somebody's wrongdoing. A humanitarian actor designated for providing vaccines mentioned insssss this context,

"If I see a Rohingya in a tea stall in a camp with a fever and try to convey a message of awareness regarding the COVID-19 vaccine, he or she would not listen to me. He or she would not fear the virus. If I bring up an example of someone who died because of COVID-19, he or she would see it as the punishment of God."

Some also mentioned that COVID-19 spread in camps because many women and girls did not follow seclusion while moving around. Many Rohingya resisted and told their girls not to move around the camps without seclusion and *purdah*. Many Rohingya even believed that COVID-19 was the result of not following seclusion in camps. Such mistrust prevailed in Rohingya camps heavily (Islam et al., 2021), which also prevented Rohingyas from taking precautions and vaccines that posed practical challenges for the humanitarian actors, especially those working in the health sector during the entire pandemic. Adolescent girls suffered in terms of getting education and economic disruptions in the camps during COVID-19. Besides, the practices of child marriage, poverty and discrimination have long-lasting impacts (Guglielmi et al., 2020).

Repatriation delayed is repatriation denied: heaping of sorrow upon sorrow

There is a saying that "justice delayed is justice denied"which is equally applicable to the context of the Rohingya. The COVID-19 pandemic, with its global shutdown, combined with later military coup situations in Myanmar and other global conflicts-induced displacements (e.g., the Ukraine-Russia war), worsened the Rohingya situation. Lately, the ongoing war situation between Myanmar and the Arakan Army has put the Rohingya repatriation in uncertainty and jeopardized the possibility of repatriation. It is particularly alarming that not a single Rohingya has been repatriated after the 2017 massive influx of refugees in Bangladesh. Even if the process of repatriation begins, the question remains: how many Rohingya will be able to return to their homeland after the pandemic? We are confidently unable to say that repatriation will be an option anytime soon due to another evolving situation in Bangladesh, that is, the July uprising in Bangladesh in 2024 that also shifted the attention of Bangladesh from the Rohingya crisis. Moreover, we witnessed that more than a hundred thousand new Rohingya entered Bangladesh in 2025 due to the ongoing war in Myanmar (Shuvo, 2025).

The number of forcibly displaced Rohingya is contested as Myanmar only verified 42,000, whereas Bangladesh provided detailed biometric data of 8,30,000 Rohingya (BSS, 2022). It shows the reluctant attitude of Myanmar toward accepting the displaced Rohingya in Bangladesh. COVID-19 undoubtedly has shifted the priority from the Rohingya repatriation to the dayto-day management of the Rohingya lives and health issues in camps. Thus, the COVID-19 pandemic had an immediate impact and delayed the repatriation of the Rohingya. Many humanitarian actors during our research interactions opined that the Rohingya crisis had reached a difficult situation as they did not see any hope for repatriation. Still, the hope among the Rohingya to return home remains high. Siddiqi (2022a,b) shows that the efforts for third-country relocation were not successful in the past. Apart from the possibilities of repatriation and third-country relocation, we can identify two more options: one is the relocation of the Rohingya to another place and gradual integration into the local community. The Government of Bangladesh has already started relocating the Rohingya to Bhashan Char, a remote island in the southern areas of Bangladesh. 37,028 Rohingya were relocated there as of April 30, 2025 (UNHCR, 2025). This idea is not popular among the Rohingya communities as it is an isolated island with restricted physical mobility to the mainland (Islam M. M. et al., 2022; Islam S. N. E. et al., 2022). In addition, the island can accommodate about one hundred thousand, but we are talking about a million Rohingya. The government of Bangladesh is also not accepting the idea of formal integration of the Rohingya into Bangladeshi society. With these limitations, we are only left with the idea of the encampment of the Rohingya, where they are already living.

Challenges for humanitarianism are immense in the present global geopolitical context as the global refugee crisis continued to rise after the Ukrainian crisis. The Ukrainian crisis also showed that the powerful countries in the West see the refugee crisis in developing nations differently than the crisis that emerged in the West. For example, the Rohingya community had to wait for nearly 5 years after the genocide committed in 2017 to be recognized by the USA (Hansler, 2022). Third-country relocation was not much on the table for the Rohingya. Meanwhile, 187,000 Ukrainians have been resettled in the USA as of the end of March 2024 (Montoya-Galvez, 2024).

Along with the challenge of funding reduction in the postpandemic era for Rohingya camps, such international biases would only further jeopardize the Rohingya crisis without reaching a sustainable and dignified resolution. This may create a crisis of credibility for humanitarianism in the coming days as the refugee crisis increases. Such a shift of international attention from the Rohingya crisis is also evident at the field level, as we have witnessed a major reduction in humanitarian aid and finance for the Rohingya. One of our interlocutors from the local UNHCR office mentioned that many projects are closed or merged as international aid has reduced drastically in the last 2 years. She mentioned, "More than hundreds of projects are in discontinuation, and more than a thousand humanitarian workers have lost their jobs because of this or lack of funds to run the project".

Besides, a policy challenge remains in managing the Rohingya crisis in Bangladesh (Siddiqi and Kamruzzaman, 2021, 2025). Despite the regular flow of Rohingya in Bangladesh, it failed to develop a comprehensive refugee management policy to tackle it from a holistic perspective. The political unwillingness to prepare a holistic approach to the refugee issues in Bangladesh keeps the lives of the Rohingya in a vulnerable situation. If the problem continues for an uncertain period, the question remains to what extent Bangladesh and the humanitarian actors would be able to support the Rohingya. The Rohingya life now in makeshift camps is not dignified (Williams et al., 2022). This is just a life of survival for the Rohingya. Thus, it would only increase the sorrow in their lives further.

Delayed repatriation will also impact the relationship between the Rohingya and the host community people in the refugee camps. Evidence from this research and literature also suggests that the Rohingya, in many cases, are getting involved in various petty crimes, drug and human trafficking and many other crimes within the camps and neighboring areas (Kamruzzaman and Kabir, 2019). There is also a fear of radicalization among the Rohingya (The Daily Star, 2021). This also raises the question of the peaceful co-existence of the Rohingya and host community members in the camps and neighboring areas (Siddiqi, 2022a,b; Kamruzzaman et al., 2024). It is worth mentioning that a delay in repatriation would create further vulnerability. If there is no clear indication of repatriation of the Rohingya, the sorrow would be mounted significantly for the Rohingya.

Conclusion

As the paper presented, shrinking livelihood opportunities for the Rohingya and uncertainty of dignified and voluntary repatriation could only increase their suffering in Bangladesh. Besides, the humanitarian actors have been facing various difficulties in ensuring basic and dignified life for the Rohingya. The lack of proper education facilities for their children frustrates the new generation. Many young Rohingya are living in uncertainty about whether they will have any opportunities in the coming days to pursue their higher studies either in Bangladesh or beyond, as they are living as stateless refugees. Being born and raised in a makeshift camp with limited facilities is frustrating as they do not know anything about the future of their lives. Voluntary and dignified repatriation is merely a dream in such a context.

The learning from the challenges can be addressed by adopting a holistic approach to addressing the ongoing vulnerabilities of the Rohingya living in various camps in Bangladesh. The first strategic intervention is required to ensure a dignified life for the Rohingya in camp settings. Secondly, the young Rohingya should have a clear vision and pathways to complete their education in camps and then higher studies as required. Ensuring higher study facilities for the Rohingya youth would ease their frustration as they can prepare themselves for the hard world ahead of them. Thirdly, the authority should increase the income-generating activities for the Rohingya men to find meaning in their lives in camps and take responsibility for their lives. Fourthly, livelihood training can be introduced so that they can use such expertise and experiences when returning home. Instead of seeing more than a million Rohingya as a burden, they need to be engaged in income-generating activities so that they can be treated as human resources. Fifthly, Bangladesh should take an effective multilateral diplomatic approach to keep the pressure on Myanmar to begin the dialogue for repatriation. Bangladesh had the experience of repatriating the Rohingya on several past occasions. Bangladesh can also promote the idea of third-country relocation, as the Ukrainian refugee crisis sheds some light on this. However, the third-country relocation may not solve all the problems for the Rohingya; it can bring positive changes for many Rohingya. In addition, Bangladesh needs continued advocacy at the international level to put pressure on Myanmar and to raise funding to ensure facilities to live a dignified life during their stay in camps. Finally, Bangladesh needs to formulate a comprehensive refugee policy to address the Rohingya crisis with a clear vision and approach, introducing a short and long-term roadmap. Currently, Bangladesh does not have such a policy in place, which also hinders the activities of managing the Rohingya without a long-term vision. We need to keep the fact in mind that failing to ensure such would put the lives of the Rohingya in further jeopardy with increased sorrows and vulnerabilities.

Data availability statement

The datasets presented in this article are not readily available due to the sensitive nature of the refugee context. Requests to access the datasets should be directed to mohammad.siddiqi@northsouth.edu.

Ethics statement

The studies involving humans were approved by Institutional Review Board of North South University. The studies were conducted in accordance with the local legislation and institutional requirements. The participants provided their verbal and/or written informed consent to participate in this study.

Author contributions

BS: Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Supervision, Validation, Visualization, Writing – original draft, Writing – review & editing. NK: Data curation, Formal analysis, Writing – original draft, Writing – review & editing.

Funding

The author(s) declare that financial support was received for the research and/or publication of this article. This study was supported by the generous small grant offered by the Conference, Travel,

and Research Grants (CTRG) of North South University (NSU), Dhaka, Bangladesh.

Acknowledgments

We would like to thank S. M. Asif Sazed, a graduate student, for assisting us in finding reports and articles related to humanitarian actors.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

References

Aljazeera (2020). First Coronavirus Case Found in Bangladesh Rohingya Refugee Camps. Available online at: https://www.aljazeera.com/news/2020/5/15/firstcoronavirus-case-found-in-bangladesh-rohingya-refugee-camps (Accessed June 28, 2021).

Auethavornpipat, R. (2023). Hate speech and discrimination as mundane violence against Rohingya refugees during covid-19. *Global Respons. Prot.* 15, 177–208. doi: 10.1163/1875984X-20230004

Badanta, B., González-Cano-Caballero, M., Fernández-García, E., Lucchetti, G., and de Diego-Cordero, R. (2023). The consequences of the COVID-19 pandemic on the refugee population: a rapid review. *Perspect. Public Health* 143, 225–241. doi: 10.1177/17579139221093159

Banik, R., Rahman, M., Hossain, M. M., Sikder, M. T., and Gozal, D. (2020). COVID-19 pandemic and Rohingya refugees in Bangladesh: what are the major concerns? *Global Public Health* 15, 1578–1581. doi: 10.1080/17441692.2020.1812103

Barua, A., and Karia, R. H. (2020). Challenges faced by Rohingya refugees in the COVID-19 pandemic. *Ann. Global Health* 86:129. doi: 10.5334/aogh.3052

Braun, V., and Clarke, V. (2022). Thematic Analysis: A Practical Guide. London: SAGE.

BSS (2022). Bangladesh, Myanmar Resume Talks Over Rohingya Verification. Available online at: https://www.bssnews.net/news-flash/41114 (Accessed June 19, 2025).

Chattoraj, D., Ullah, A. K. M. A., and Hossain, M. A. (2021). "The COVID-19 pandemic and the travails of Rohingya Refugees in the largest Bangladeshi Refugee camp," in *Global Reflections on COVID-19 and Cities: Urban Inequalities in the Age of Pandemic*, eds. B. Doucet, R. van Melik, and P. Filion (Bristol: Bristol University Policy Press).

Farzana, K. (2015). Boundaries in shaping the Rohingya identity and the shifting context of borderland politics. *Stud. Ethn. National.* 15, 292-314. doi: 10.1111/sena.12142

Guglielmi, S., Seager, J., Mitu, K., Baird, S., and Jones, N. (2020). Exploring the impacts of COVID-19 on Rohingya adolescents in Cox's Bazar: a mixed-methods study. *J. Migr. Health* 1–2:100031. doi: 10.1016/j.jmh.2020.100031

Hansler, J. (2022). 'Biden Administration Formally Determines Myanmar's Military Committed Genocide'—A CNN Report by Jennifer Hansler on 21 March 2022. Available online at: https://edition.cnn.com/2022/03/20/politics/biden-administration-myanmar-military-genocide/index.html (Accessed April 14, 2022).

Haque, M. (2017). Rohingya ethnic Muslim minority and the 1982 Citizenship Law in Burma. J. Musl. Minor. Aff. 37, 454-469. doi: 10.1080/13602004.2017.139 9600

Henriques, E., Schmidt, C., Pascoe, R., Liss, K., and Begun, S. (2022). Counternarratives of structural oppressions, stigma and resistance, and reproductive and sexual health among youth experiencing homelessness. *Qualit. Health Res.* 32:1447. doi: 10.1177/10497323221110694

Hossain, A. N. M. Z. (2021). Sustainable development and livelihoods of Rohingya refugees in Bangladesh: the effects of COVID-19. *Int. J. Sustain. Dev. Plann.* 16, 1141–1152. doi: 10.18280/ijsdp.160615

Human Rights Watch (2020). Bangladesh: COVID-19 Aid Limits Imperil Rohingya. Available online at: https://www.hrw.org/news/2020/04/28/bangladesh-covid-19-aidlimits-imperil-rohingya (Accessed September 13, 2024).

Generative AI statement

The author(s) declare that no Gen AI was used in the creation of this manuscript.

Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

Islam, M. M., Barman, A., Khan, M. I., Goswami, G. G., Siddiqi, B., and Mukul, S. A. (2022). Sustainable livelihood for displaced Rohingyas and their resilience at Bhashan Char in Bangladesh. *Sustainability* 14:6374. doi: 10.3390/su14106374

Islam, M. M., and Yunus, M. Y. (2020). Rohingya refugees at high risk of COVID-19 in Bangladesh, comment. *Lancet* 8, e993–4. doi: 10.1016/S2214-109X(20)30282-5

Islam, M. N., Inan, T. R., and Islam, A. K. M. N. I. (2020). COVID-19 and the Rohingya refugees in Bangladesh: the challenges and recommendations, letter to the editor. *Asia Pac. J. Public Health* 32, 283–284. doi: 10.1177/1010539520932707

Islam, M. R., Islam, M. T., and Alam, M. S. (2021). Is Bhasan Char Island, Noakhali district in Bangladesh a sustainable place for the relocated Rohingya displaced people? An empirical study. *SN Soc Sci* 1:277. doi: 10.1007/s43545-021-00281-9

Islam, S. N. E., Mookherjee, N., and Khan, N. (2022). 'Medicine in name only': mistrust and COVID-19 among the crowded Rohingya refugee camps in Bangladesh. *Med. Anthropol. Theory* 9, 1–32. doi: 10.17157/mat.9.2.5424

Kamruzzaman, P., and Kabir, M. E. (2019). Rohingya Refugees: Focusing Only on Their Return Home Ignores the Crime and Health Crises in Bangladesh's Camps. The Conversation. Available online at: https://theconversation.com/rohingya-refugeesfocusing-only-on-their-return-home-ignores-the-crime-and-health-crises-inbangladeshs-camps-118557 (Accessed June 19, 2025).

Kamruzzaman, P., Siddiqi, B., and Ahmed, K. (2024). Navigating the shift in Bangladeshi host community's perceptions towards the Rohingya refugees: a declining sympathy. *Front. Sociol.* 9:1346011. doi: 10.3389/fsoc.2024.1346011

Khan, M. N., Islam, M. M., and Rahman, M. M. (2020). Risks of COVID19 outbreaks in Rohingya refugee camps in Bangladesh. *Public Health in Practice* 1:100018. doi: 10.1016/j.puhip.2020.100018

Khanna, T. (2020). Addressing COVID-ified maritime migration in the Bay of Bengal: the case of stateless Rohingya boat people. *Austr. J. Marit. Ocean Aff.* 12, 181–186. doi: 10.1080/18366503.2020.1799705

Mallette, M. H., Mason, J., and McConn, M. (2023). Are we there yet? Ontoepistemological qualitative language and literacy research. *Int. Encyclop. Educ. Fourth Ed.* 895–901. doi: 10.1016/B978-0-12-818630-5.07089-5. [Epub ahead of print].

Mistry, S. K., Ali, A. R. M. M., Irfan, N. M., Yadav, U. N., Siddique, R. F., Peprah, P., et al. (2021). Prevalence and correlates of depressive symptoms among Rohingya (forcibly displaced Myanmar nationals or FDMNs) older adults in Bangladesh amid the COVID-19 pandemic. *Global Mental Health* 8:e23. doi: 10.1017/gmh. 2021.24

Montoya-Galvez, C. (2024). In 2 Years Since Russia's Invasion, a U.S. Program has Resettled 187,000 Ukrainians with Little Controversy. CBS News. Available online at: https://www.cbsnews.com/news/ukrainian-refugees-us-uniting-for-ukraine-russiainvasion/ (Accessed December 12, 2024).

Palma, P. (2021). Funding on Decline, Challenges UP, The Daily Star, August 25 2021. Available online at: https://www.thedailystar.net/rohingya-crisis/news/funding-declinechallenges-2160016 (Accessed April 14, 2022).

Sakib, N. H., and Siddiqi, B. (2022). "The Rohingyas during COVID-19: belief system, governance, and future policy," in *The Rohingya Crisis and the Two-Faced God* of Janus, eds. K. Ahmed, and H. Mohiuddin (Lanham: Lexington Books).

Scott, J. (1985). Weapons of the Weak: Everyday Forms of Peasant Resistance. New Haven, CT: Yale University Press.

Shuvo, M. (2025). Rohingyas Fleeing Arakan Army Persecution, The Daily Star. Available online at: https://www.thedailystar.net/news/cross-border/news/rohingyas-fleeing-arakan-army-persecution-3882501 (Accessed May 30, 2025).

Siddiqi, B. (2022a). Challenges and dilemmas of social cohesion between the Rohingya and host communities in Bangladesh. *Front. Hum. Dyn.* 4:944601. doi: 10.3389/fhumd.2022.944601

Siddiqi, B. (2022b). "The 'Myth' of repatriation: the prolonged sufferings of the Rohingya in Bangladesh," in *The Rohingya Crisis Human Rights Issues, Policy Concerns and Burden Sharing, 1st Edn*, ed. N. Uddin (New Delhi: SAGE India), 334–357.

Siddiqi, B., and Kamruzzaman, P. (2021). Policy Challenges towards Rohingya Crisis in Bangladesh The Role of National Development Experts. No. 1; Dhaka: Center for Peace Studies Working Paper Series.

Siddiqi, B., and Kamruzzaman, P. (2025). Exploring the roles and challenges of national development experts on the Rohingya crisis in Bangladesh. *Dev. Pract.* 1–17. doi: 10.1080/09614524.2025.2457050. [Epub ahead of print].

Siddiqi, B., Kamruzzaman, P., and Kabir, M. E. (2023). "Living in uncertainty: vulnerable Rohingya in Bangladesh," in *The displaced Rohingyas* (Routledge), 77–93.

Siddiqi, B., and Khan, N. N. (2022). Social stigma and suffering: perceptions, practices and impacts around COVID-19 in Bangladesh. *South Asia Multidiscip. Acad. J.* doi: 10.4000/samaj.8253. [Epub ahead of print].

The Daily Star (2021). Three Ansar Al Islam Operatives' Arrested. They Tried to Infiltrate Rohingya Camps: CTTC. Available online at: https://www.thedailystar.

net/city/news/they-tried-infiltrate-rohingya-camps-cttc-2119481 (Accessed April 15, 2022).

Uddin, M. A. (2021). The meaning of marriage to the rohingya refugees, and their survival in Bangladesh. *J. Refugee Stud.* 34, 2036–2051. doi: 10.1093/jrs/feaa054

Ullah, A. K. M., Hossain, M. A., and Chattoraj, D. (2020). Covid-19 and Rohingya refugee camps in Bangladesh. *Intellect. Discourse* 28, 793–806.

Ullah, A. K. M. A., and Chattoraj, D. (2021). "Rohingya children in Bangladesh: questioning the past and imagining the future", in *Routledge Handbook of Islam in Southeast Asia*, ed. K. Alijunied (New York, NY: Routledge).

UNHCR (2022). UNHCR and Partners Call for Sustained Funding and Support for Rohingya Refugees. UNHCR. Available online at: https://www.unhcr.org/ news/briefing/2022/3/6242b7cf4/unhcr-partners-call-sustained-funding-supportrohingya-refugees.html (Accessed April 4, 2022).

UNHCR (2025). Bangladesh. Operational Data Portal. Available online at: https:// data.unhcr.org/en/country/bgd#:~:text=Rohingya%20refugees%20are%20hosted %20in,Bangladesh%20to%20decongest%20the%20camps (Accessed May 30, 2025).

WHO (2024). *Health Sector Bulletin: January 2024*. Available online at: https://rohingyaresponse.org/wp-content/uploads/2024/03/CXB-Health-Sector-Bulletin-Jan-2024-1.pdf (Accessed December 15, 2024).

Williams, K., Kamruzzaman, P., Wardak, A., Kabir, M. E., Chivers, M., Siddiqi, B., et al. (2022). Evidencing the Experience of Violence and Loss of Dignity among the Forcibly Displaced Rohingya Refugees in Bangladesh. Cardiff: Centre for Social Policy, University of South Wales.