

Community perspectives of complaint and feedback mechanisms

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WHAT MATTERS?

Humanitarian Feedback Bulletin on Rohingya Response

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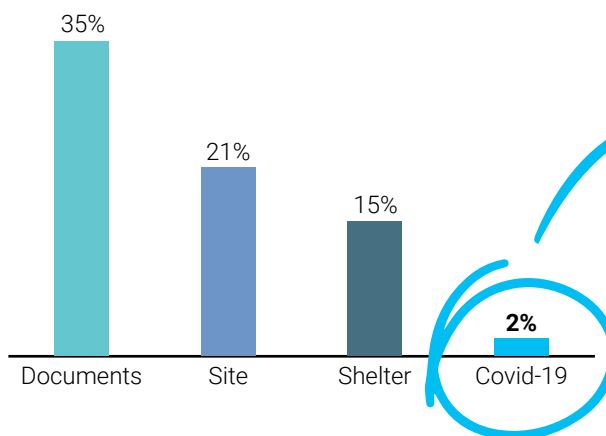
Covid-19 Vaccine concerns in the Rohingya community

Recent feedback (June – August 2021) indicated the Rohingya community continued to be primarily concerned with issues having to do with their documentation, the site (bridges, roads, stairways, sewerage or drainage, retention walls etc.) and shelter. In addition, 2% raised concerns related to Covid-19. Of these, 30% raised issues related to vaccines, such as when these would be available. These were mostly young people (age 20-29). Respondents, especially females, were aware of the importance of the vaccine.

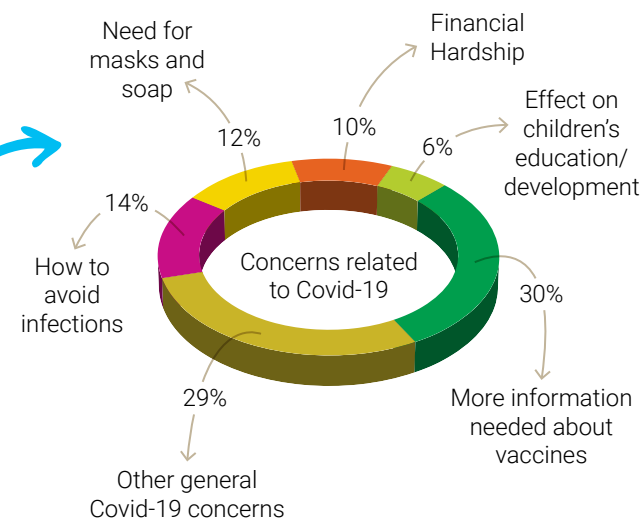
Source: Since January 2018, BBC Media Action has been collating community feedback collected by different agencies¹ through their community feedback and response mechanisms (CFRM) and listening group discussions from different camps. This issue, which focuses on vaccine related queries, is based on data collected from June - August 2021 from six camps with a base of 251 cases. To better understand these concerns, BBC Media Action conducted 11 interviews in Camp 11 (5 men and 6 women, age 20 - 40).

1. Including the office of the United Nations High Commissioner for Refugees (UNHCR), the Danish Refugee Council (DRC), Concern Worldwide, ACF (Action Against Hunger), Save the Children, and Oxfam.

General concerns raised by the Rohingya community



Specific Covid-19 concerns



There seemed to be confusion about eligibility (whether it is those over age 50 or those over 60); even as they were generally aware that it is older people who are being vaccinated. In addition, they wondered why only older people are eligible.

One female respondent said she heard older people with health issues were not being vaccinated. No male participants mentioned this.

“ I have heard that older people aged 60-70 years are not getting the vaccine as they have some diseases like diabetes. And I also have heard that vaccines will only be given to those who are healthy and have no diseases, not to those who have any kind of disease.”

– Female, 25, Camp 11

Respondents said those who received vaccines did so near the Camp in Charge (CiC) office. Mahji (local leaders) and other elders in their blocks assured them that those who were not vaccinated would be vaccinated during the next round.

Most of the male respondents said they didn't know what to do if someone had a problem after being vaccinated. One respondent said those who were sore after the vaccination used a certain type of ointment, which people living in the camps normally use for any kind of pain. Some respondents said it's normal to have some pain after receiving a vaccine.

“ If there is any pain, we use 'moov' ointment (available in the local pharmacy, generally used for joint pains). If anyone has any pain after having a vaccine, they use that too.”

– Male, 30, Camp 11

Male respondents were not as aware of the importance of the vaccine. They said that as they spend most of their time outside the home working as day labourers, they don't have as much access to information about the vaccine. Their main sources of information about the vaccine are their neighbours, mahji, and elders in their blocks. Respondents said mahji and volunteers have said they will be vaccinated in four to five months, and as it's only been a month since the vaccine campaign started, they are not worried. However, any delays would cause them concern.



Men and women receive Covid-19 information from different sources

According to male respondents, their main sources of information are volunteers, mahji and announcements from mosque loudspeakers. Women respondents said they get vaccine related information from their neighbours but not from volunteers, who some said rarely visit their households.

“ Volunteers do not come to visit our shelter as often as they used to. That's why we know very little about the importance of the vaccine, and we don't know when we will be vaccinated.”

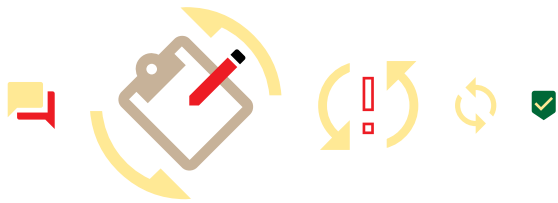
– Female, 22, Camp 11

Respondents said they are not aware of any disadvantages or side effects of being vaccinated. They said it is beneficial, and therefore they would have no hesitation.

CFRM data indicates women (mostly aged 20 - 29) are eager to know when they will receive the vaccine. They said decisions regarding vaccinations depend on their husbands, who provide food, clothing etc., as the main bread earners of the family. **Thus, even if women know the importance of the vaccine and want to be vaccinated, whether they will be vaccinated will depend on the men in their households.**

“ My husband has forbidden me to do anything without his permission. If the volunteer comes to our house to provide the vaccine and my husband is not present at that time, even if I wanted to be vaccinated, I would not be able to be vaccinated without his permission.”

– Female, 22, Camp 11



Community perspectives of complaint and feedback mechanisms

Source: To understand Rohingya community members' perspectives and experiences of complaint and feedback mechanisms, Translators without Borders (TWB) conducted interviews over the phone with 10 men and 4 women in the camps. The interviews took place in mid-October 2021.

The availability, accessibility and quality of complaint and feedback mechanisms (CFMs) is central to humanitarian accountability to Rohingya refugees and improving the quality of services provided to them. To explore current community perspectives and experiences of CFMs in the camps, TWB conducted interviews with a small group of community members.

People have varying approaches to giving feedback and making complaints

Twelve of the 15 people interviewed say they know where to go to provide feedback or make complaints in their local area. Those interviewed most commonly first speak to a mahji. Some speak to unofficial community leaders or the local CiC (camp-in-charge) office, while others go directly to NGO or UN offices or their volunteers. Three respondents reported not knowing where to go to provide feedback or make a complaint.

Most people lack information about CFMs, and most who reported issues say they were not resolved

Six interviewees say that they have received information in the past, mostly from NGOs, about how to make complaints and provide feedback, while 9 participants have not received any information. Six interviewees - 3 women and 3 men - say that they have provided feedback or made complaints in the past 12 months. Five of those did this through NGO or CiC volunteers and 1 wrote to an organisation. The issues they reported were varied and included problems relating to water and sanitation,

rations, damaged shelters, bribery, and dissatisfaction with healthcare services. Only 1 of the 6 interviewees was satisfied with the outcome of the process, while 5 say their issues were not resolved.

People are more comfortable providing feedback than they are making complaints

Eleven participants said they feel comfortable providing feedback to organisations while 4 do not. Three of the 4 who are not comfortable to provide feedback expressed concerns about having reduced access to services as a result; one of these said they are afraid to provide feedback. However, most participants (11), including these 4, say they do not feel comfortable making complaints to or about an organisation. When asked why not, they said they are grateful for the services provided by organisations, they believe the organisations have good intentions, and the services are important for their survival. Two people mentioned specific concerns that there might be repercussions if they complain, including that they may not receive assistance.

“ I don't like making complaints against NGOs because they are working for our betterment and provide us what we need.”
– Rohingya man, 22

“ We think that if we do make complaints then we will not be able to get any help from NGOs.”
– Rohingya man, 20

Some people face language-related obstacles to CFMs

Three of the 15 interviewees said that language-related issues impact their ability to provide feedback or make complaints. Two highlighted issues with CiCs or other staff only speaking Bangla and one highlighted foreign staff only speaking English. Only one interviewee identified cultural barriers to accessing CFMs. This person expressed concerns about the power dynamics between them and CiC volunteers, saying that they are often turned away when they go to complain or give feedback.

“ The best way will be if the organisations can build a separate office where the people can go to make complaints or to provide feedback openly.”

– Rohingya man, 33

“ If the female volunteers come to our house and check what kinds of problems we are having, that would be good for the women.”

– Rohingya woman, 20

People want to provide feedback and make complaints in person

When asked what will make them feel comfortable to provide feedback or make complaints, interviewees suggested having a standalone office for this purpose, getting timely responses, and, particularly for women, getting regular visits and assistance from female volunteers to guide them through the process. All interviewees prefer to give feedback and make complaints in person and in Rohingya, with the confidentiality of these interactions a key concern.



BBC Media Action and Translators without Borders are working together to collect and collate feedback from communities affected by the Rohingya crisis. This summary aims to provide a snapshot of feedback received from Rohingya and host communities, to assist sectors to better plan and implement relief activities with communities' needs and preferences in mind.

This work is currently being delivered in partnership with the International Rescue Committee with funding from the United States Government. And in partnership with ACF with funding from EU humanitarian aid.

If you have any comments, questions or suggestions regarding *What Matters?*, you are welcome to get in touch with the team by emailing info@cxbfeedback.org