

Covid Collective Research for Policy and Practice:

Covid-19: Understanding the impact of the pandemic on forcibly displaced persons

Foreword

The Covid-19 pandemic has left no corner of the world untouched. To cite just one figure, 100 million people have been pushed into poverty, according to a recent World Bank study. The two-speed recovery from the pandemic, depending on vaccine availability, is expected to leave lasting imprints on the economic performances of countries, which data suggest will have a disproportionate effect on forcibly displaced persons and their host communities.

An estimated 24.6 million refugees who have sought safety across national borders are hosted by poor or developing neighbouring countries, typically in the global South. The lack of access to vaccines and weak health systems leaves these countries more vulnerable than most in continuing to deal with the pandemic. Yet, even within this context, refugees have specific vulnerabilities that mean they are struggling more than most, and the pandemic has only exacerbated the challenges they face daily and exposed them to new health, protection, and economic threats.

This paper draws together emerging evidence and makes urgent recommendations to support displaced persons as the pandemic makes their lives even harder than ever, and pre-existing inequalities have deepened. The three papers explore diverse lived experiences, shedding light on the erosion of forcibly displaced persons' rights during the pandemic, the realities of Syrian refugees with disabilities in Turkey, and displaced Rohingya in Bangladesh.

Key messages

The authors present a series of evidence-based recommendations for positive change that could be achieved even in the most challenging contexts. There are three important messages that clearly emerge:

- Genuine community engagement and inclusive dialogue with displaced persons is essential to shape and inform sustainable and impactful pandemic responses and recovery.
- Pandemic-related information should be developed and prepared with diverse groups in mind, to ensure that it is accessible and shared with displaced persons who have many different needs and perspectives.
- Displaced persons should be included in all aspects of national responses to Covid-19, including vaccination campaigns, while also ensuring that engagement with such services will not lead to detention or refolement.



Refugees displaced during a 2020 Syrian regime offensive in nearby Idlib now living in a sprawling tented camp on a muddy hill above the city of Afrin.
 PHOTO: IVOR PRICKETT/PANOS PICTURES

These messages of inclusivity are closely aligned with the global appeal issued by the High Commissioner for Refugees (UNHCR), Filippo Grandi, to mark the 70th Anniversary of the Refugee Convention. He states that

Those of us fortunate enough to live in relative prosperity and stability cannot take these gifts for granted – the shock of the Covid-19 pandemic makes this clear. And those who think the Refugee Convention is either irrelevant or a nuisance may one day find themselves grateful for the protections it affords them. The Covid-19 pandemic has shown, as almost no other crisis can, the vital importance of inclusion, collective, concrete efforts to protect the most vulnerable and to grant these rights to the fullest.

Betsy Lippman

Chief of the Development Partnerships, Research and Analytics Service at UNHCR.

Five ways that the pandemic has impacted displaced Rohingya communities

The Covid-19 pandemic and ensuing lockdowns have impacted displaced Rohingya communities living in the camps in Cox's Bazar, Bangladesh in myriad ways. Five dimensions are important to consider for policy and practice.

- 1 In terms of **awareness and understanding of Covid-19**, as of July 2020, many camp residents were found to have a fairly basic understanding of Covid-19. Months into the pandemic, they were still lacking detailed and accurate information on the specific actions they could take to protect themselves and their families. They also lacked access to the masks, clean water, and soap that would help them stop the spread.
- 2 The pandemic dramatically impacted **Rohingya livelihoods** – especially for shopkeepers and those with public-facing businesses who could not function because of social distancing, orders from the authorities to close, and a lack of customers due to lockdown-associated movement restrictions. In a summer 2020 survey, many respondents said that economic harm was the most serious form of harm they had suffered due to Covid-19.
- 3 The pandemic impacted **family relationships** – both within Cox's Bazar and between camp residents and family residing outside – and the ability of Rohingya to maintain **communication with loved ones** during lockdown. Rohingya camp residents experienced these restrictions in a different way from others in the global community because, for them, living in camps away from their home country was already a constrained and restricted way of life.
- 4 Rohingya **perceptions of medical clinics and hospitals** impeded their ability to seek safe and timely treatment for Covid-19 symptoms. With limited access to the internet, a widespread lack of trust was fuelled by rumours; for example, that some patients were taken offsite to undisclosed locations after presenting at clinics.
- 5 Rohingya communities in Cox's Bazar cited a **lack of meaningful consultation** from international agencies and other service providers operating in the camps. Decisions about the pandemic response and other service provision were routinely made by outsiders without the meaningful participation and input of those most affected. Rohingya who were surveyed expressed a strong desire to return home to Myanmar, and they wished that agencies operating in Cox's Bazar would better understand this need. While this outlook predated the Covid-19 pandemic, the focus on return remained strong. Indeed, the experience of the pandemic served to sharpen the sense that life would be better at home in Myanmar.

The findings were developed through a community-driven project based on 'participatory action research' methods. To flip traditional Western research methods in which international researchers conduct investigations themselves – or rely upon locals as fixers, assistants, or enumerators – the project centred on local researchers who live in the camps of Cox's Bazar. Two of the three camp-based researchers who initially led the project were

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Heavy clouds hang over the Kutapalong Rohingya refugee camps near Cox's Bazar.

PHOTO: ADAM DEAN/PANOS PICTURES

youth – a subset of the Rohingya population that is eager to shape decision-making about Covid-19 and other issues of importance for Rohingya communities. Local team members designed the research project, developed a series of research questions based on their assessment of community needs, and conducted interviews in the camps. International researchers based at the University of Edinburgh and in the United States played a supporting and coaching role, helping to guide the research remotely.

To build the foundation for this engagement, the project lead travelled to Cox's Bazar in 2019 and trained young Rohingya in research skills such as project design, data verification, and reflexivity. That visit led to a modest project focused on the education of Rohingya youth. It also gave the Rohingya researchers the opportunity to present community views on education to stakeholders such as the United Nations Children's Fund (UNICEF) and the UK Foreign, Commonwealth & Development Office (FCDO).

Key points for the future:

- 1 **The importance of proactive community engagement:** genuine community engagement is essential if Rohingya perspectives are to inform the pandemic response and recovery.
- 2 **Youth empowerment:** young people have the potential to not only play a significant role as community researchers but also to serve as conduits and points of contact who can give clear information about Covid-19 to their fellow community members.

Rebecca Sutton

Leverhulme Trust Early Career Fellow at the University of Edinburgh Law School and an Associate of the Peace and Conflict Resolution Evidence Platform, University of Edinburgh Law School.

Allyson Doby

Communications Manager, Political Settlements Research Programme, University of Edinburgh.

Pandemic exacerbates challenges for Syrian refugees with disabilities in Istanbul

Turkey currently hosts 3.7 million Syrian refugees who live alongside Turkish communities, which is more than any other host country. Refugees have a higher risk of disability, with recent figures indicating that 25 per cent of Syrian refugees in Istanbul have some form of disability. Within the context of the pandemic, it is evident that having a disability magnifies their challenges.

This paper explores the experiences of Syrian refugees with disabilities in Istanbul during the Covid-19 pandemic, with the aim of identifying possible strategies to better promote inclusion of people with disabilities in pandemic response. The Covid-19 and Disability project is currently conducting qualitative interviews with 60 Syrian refugees with a range of disabilities and ten key informant interviews – all of whom will be interviewed twice to explore changes over time. Led by Koc University and local interviewers, with assistance from the Refugees and Asylum Seekers Assistance and Solidarity Association (RASAS), three key findings have emerged from the data collection process.

1 The interruption of access to health services. Pandemic restrictions in Istanbul have included curfews, lockdowns, and travel restrictions. For people with disabilities, these restrictions meant interruption to important health services that help with everyday functioning. As one young man with a physical impairment noted, 'I used to go to the hospital every Friday to take the needle for my back pain [...] and I could not get it when the pandemic started. [...] I was not able to go to the hospital, we don't have a car, so it was hard for me to go to the hospital.'

2 Lack of Covid-19 related information and preventive measures among Syrian refugees with disability. An older female with a physical disability says: 'I don't know anything about Corona[virus] or the symptoms or masks and lockdowns, I don't even go out except to pray.' While they have some awareness, this incomplete knowledge may lead to inconsistent adherence to preventive measures and leave them vulnerable to infection.

3 The pandemic has had considerable economic impacts in Turkey. Past studies have shown the reliance of Syrian disabled refugees on work and financial assistance, sometimes forgoing health services to earn income to support their families. Participants frequently described how they or their family members had lost their jobs during the pandemic, or had their financial assistance cut off, or income decreased.

To people with disabilities who are more likely to live in poverty, this loss of wages or financial aid has a more significant impact, such as affecting their access to necessities such as food, which shapes their lived experiences. As one older disabled man describes, 'I was

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Syrian refugee children stand on the street outside their apartment. Their parents fled the war in Syria and settled in Istanbul.

PHOTO: IVA ZIMOVA/PANOS PICTURES

working before Covid-19. I used to make around 2200 TL [265 US\$]. I was working seven hours a day... my work changed, now I work as a truck driver... I stopped working because I was in self-isolation... I had to be in debt. There was no one helping me. I didn't get a compensation even though I had insurance and work permit.'

These preliminary findings have direct lessons for national strategies:

- Pandemic-related information should be more accessible to Syrian refugees with disabilities.
- Impairment-related health services should be prioritised.
- Financial assistance should be provided to Syrian refugees with disabilities.
- The needs of Syrian refugees with disabilities should be considered by decision makers such as official bodies during the pandemic.

Zeynep Ilkkursun

Research Assistant, Department of Psychology, Koc University, Istanbul, Turkey.

Gulsah Kurt

Research Assistant, Department of Psychology, Koc University, Istanbul, Turkey.

Shaffa Hameed

Assistant Professor, International Centre for Evidence in Disability, London School of Hygiene and Tropical Medicine, UK.

Ceren Acarturk

Associate Professor, Department of Psychology, Koc University, Istanbul, Turkey.

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The erosion of forcibly displaced persons' rights during the pandemic

Covid-19 and the unprecedented shutdown of borders and migration restrictions in response is being used by some governments as an excuse to block forcibly displaced persons' right to seek asylum and to implement their nationalist agendas of border closures, anti-immigration policies, and pushbacks.

Refugee and asylum seekers' rights have increasingly been at risk in recent years, with many governments failing to recognise the rights of refugees and provide them with adequate protection, as well as introducing various policies that made access to asylum increasingly difficult and dangerous. International law obliges states to allow people to seek asylum from persecution and not return them to a country of persecution or danger (the principle of non-refoulement). The conditions of the pandemic have contributed to the further erosion of refugee protection rights, making their search for safety much harder.

In the context of these issues, we looked at the available literature and evidence, looking at the protection crisis and the discrimination and marginalisation faced by forcibly displaced persons during the first year of the pandemic.

Over 160 countries limited or cut off access to asylum at the height of the pandemic as they fully or partially closed their borders, making no exceptions for the right to seek protection despite this being against international law. The pandemic has been used as a reason to not accept new asylum requests and/or suspend pending applications, leaving asylum seekers stuck in limbo, often in atrocious conditions.

Asylum seekers have also been pushed back from countries such as Bangladesh, Greece, Croatia, Malaysia, Italy, and Malta, citing concerns about Covid-19, preventing them from seeking asylum and violating their rights and the principle of non-refoulement. Such violent and illegal pushbacks occurred both at sea and on land, putting lives at risk, with Covid-19 used as a further excuse for governments to evade their responsibilities in relation to search and rescue and disembarkation.

Refugees and asylum seekers have faced discriminatory restrictions aimed only at them rather than citizens, including internet shutdowns, arbitrary curfews, movement restrictions, and discriminatory policing in countries such as Greece, Lebanon, and Bangladesh. Countries such as Malaysia, Serbia, and the UK also resorted to disproportionate use of immigration detention, using public health concerns as a justification.

Refugees and asylum seekers around the world are experiencing increased xenophobia, stigma, discrimination, hate speech, and attacks directed against them during the pandemic. Some responses to the pandemic have fuelled the narrative of migrants as a threat and have been used to introduce more hostile policies.

Many host countries exclude forcibly displaced persons from their national Covid-19 responses and relief programmes, including vaccination campaigns, an area we are looking



An Iranian asylum seeker sitting in the entrance to his tent smoking a cigarette. The tents are planned as a temporary solution until the asylum seekers are relocated to other facilities in the area.

PHOTO: © MADIS NISSEN/POLITIKEN/PANOS

into further in our research. Some countries are explicitly excluding refugees or prioritising their own citizens first. This is concerning as mobility is expected to become increasingly linked to vaccination, with implications for the right to seek asylum. Previous hostile policy environments also mean forcibly displaced persons are reluctant to access Covid-19 services even when governments offer them, due to fears about being detained and deported.

However, these rights violations have been challenged and some countries introduced measures expanding the rights of forcibly displaced persons during the pandemic. For example, Portugal temporarily treated asylum seekers as permanent residents, allowing them to access public services. This indicates that these rights can be protected in the difficult conditions of the pandemic and beyond. Efforts are needed to build on these positive examples in the face of eroding refugee rights and challenging political environments, to ensure the protection of all those who need it. This includes:

- Upholding the right to asylum and protection and not closing borders to those seeking it; for example, by using **UNHCR's Practical Recommendations and Good Practice to Address Protection Concerns in the Context of the COVID-19 Pandemic**.
- Investigating and stopping the illegal pushbacks and respecting the fundamental principle of non-refoulement.
- Including forcibly displaced persons in all aspects of national responses to Covid-19, including ongoing vaccination campaigns.
- Ensuring that forcibly displaced persons can be confident that engagement with such services will not lead to detention or deportation.

Brigitte Rohwerder

Research Officer, Institute of Development Studies.

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Explore the projects

The Covid Collective brings together 28 organisations working on 63 projects to inform decision-making on some of the most pressing Covid-19-related development challenges. The research is carried out across 25 countries and comes under four broad thematic bases: governance and politics; social development and inclusion; conflict, and humanitarian.

Rohingya Youth Action Research in Cox's Bazar Camps: Covid-19 and Everyday Conflict Resolution

Partner: University of Edinburgh, Political Settlements Research Programme (PSRP)

There is a significant number of international agencies present on the ground in Cox's Bazar, Bangladesh, yet there has been minimal effort to build the capacity of displaced Rohingya so that they have adequate legal literacy to understand and articulate challenges they are facing in terms of rights, justice, and protection. The Rohingya Youth Action Research Project seeks to remedy this problem, training and supporting locally based research teams in Cox's Bazar to produce research on community needs during the Covid-19 pandemic.

Further information: <https://www.covid-collective.net/project/rohingya-youth-action-research-in-coxs-bazar-camps-covid-19-and-everyday-conflict-resolution/>

Covid-19 and Disability

Partners: Koc University and the London School of Hygiene & Tropical Medicine (LSHTM)

This project explores the experiences of Syrian refugees with disabilities in Istanbul during the Covid-19 pandemic. The study is part of a wider project that has fields in other low- and middle-income contexts such as Ghana and India. The study is managed by Koc University with assistance from the Refugees and Asylum Seekers Assistance and Solidarity Association (RASAS).

Further information: <https://www.covid-collective.net/project/covid-19-disability-global-study/>

Authoritarian Responses to Covid-19: Humanitarianism and Displacement

Partners: Institute of Development Studies, Action Aid International, World Vision International

This project looks at the links between discrimination and marginalisation of refugees and internally displaced persons (IDPs) and authoritarianism during Covid-19. Using examples and cases from different global contexts, it will examine how the dynamics of marginalisation, authoritarianism, Covid-19 responses, and International Humanitarian Law obligations interact at local to national scales and explore what, if any, are the implications for humanitarianism, peace, and stability in areas hosting large volumes of displaced populations.

Further information: <https://www.covid-collective.net/project/authoritarian-responses-to-covid19-humanitarianism-and-displacement/>



This summary highlights key messages from research focusing on how people displaced by war and conflict have been affected by Covid 19 and its secondary impacts. Diverse lived experiences are explored, ranging from the erosion of forcibly displaced persons' rights during the pandemic, to Syrian refugees with disabilities in Turkey, to displaced Rohingya in Bangladesh. This Research for Policy and Practice Paper sets out examples of the multidimensional social and economic challenges displaced people are facing during the pandemic and presents a series of evidence-based recommendations for positive change that could be achieved even in the most challenging contexts.

It is written in collaboration with research teams, and collated and edited by James Georgalakis, Director of Communications and Impact at the Institute of Development Studies (IDS). The academic reviewer for this summary was Rajith Lakshman, Research Fellow, Institute of Development Studies (IDS).

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✉ covidcollective@ids.ac.uk

🌐 covid-collective.net

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