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EE361/EE363 ECONOMICS OF CLMV COUNTRIES

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[Rohingya People's Health]

GROUP 10

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The idea and topic are sound. However there needs to be more effort to elaborate, explain and connect the sections into a good report. There is still much work to do.

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- **Overview**

Rohingya people, once called Burma before 1989, are an ethic group from Myanmar, especially in the western coast, Rakhine State. Those people are not accepted by most of the Burmese for the specific reason that they are a small group of Muslim and Hindu in contrast to most of the majority Buddhist. Besides, this ethic minority is considered "the most persecuted minority in the world" by the United Nations.

Nowadays, Rohingya are regarded as non-citizens and stateless, which means that they do not have any access to the basic rights. The World Health Organisation (WHO) stated that the highest attainable standard of health is a fundamental right. Additionally, Rohingya are illegal immigrants by Myanmar and the law does not recognise issues related to Rohingya.

- **Identification of Key Issues and Challenges**

The Rohingya were eliminated from citizenship in Myanmar, which caused them to be 'stateless'. With this reason, they have to challenge an endlessly poor infant, child health, malnutrition, and etc. Moreover, the major health issues occurring among these refugees are unexplained fever, acute respiratory infection, and diarrhea, and many other non-communicable diseases. Furthermore, more than half of the Rohingya refugees are women and parts of them have been facing sexual tolerance. However, the main problem, in this case, is the lack of access to sufficient food and nutrient consumption.

- **Government/State Strategies, Policies and Legislation**

Both the Myanmar and Bangladesh governments do not accept the Rohingyas . In Myanmar, only those who have parents with Myanmar nationalities can accept Myanmar nationality. Other Rohingyas would go to the refugee camp on the aid of Myanmar and Bangladesh. Rohingyas are banished from accessing the health system because they are not Myanmar people. Moreover, their health is not in good condition. However , the Rohingyas may be the carrier of some diseases such as Malaria. The government has to spend money on dealing with these health problems. From WHO information , the Rohingyas refugee camps are at risk. Because of the lack of clean water , Rohingyas may face cholera . However, the WHO has prepared the health center for the refugee camp.

- **The Role of Various Development Actors**

Controlling the refugees and their impact on the settlement area has been a key policy concern of the Thai government. As a response to perceived and real threats, they have encamped UNHCR-registered refugees and martial law was declared in some provinces to contain the self-settled Burmese in delineated areas. Despite UNHCR's effort to

Describe the geography, location, socio, economi descriptn of the study area.

Idea is sound but needs more elaboration

provide graph, chart, other descriptn of the situatn

Therefore what is being done to address the probs?

put protection and burden-sharing firmly on the international agenda through the Convention Plus Initiative, nothing has changed for refugees.

- **Lessons learned**

According to the historical events in previous periods, there were complicated emergencies in health and human rights. As a result, Rohingya people suffer from a large number of diseases and difficulties in having good health, or at least meet the health standard. The illness includes a cycle of poor infant and child health, lack of obstetric care, waterborne illness, and malnutrition. This violates the right of accessing health care and therefore human rights. In accordance with the information from WHO, human rights creates a legal obligation on states ensuring access to health care, which must be in appropriate time and quality as well as acceptable and affordable.

Needs to link to issues and strategies

- **Conclusion**

Rohingya refugees are far away to achieve their basic human rights and they have become stateless without a legal nationality from 1962. Considering the importance of the nationality crisis of the Rohingya and problems associated with these following steps can be taken: Supplies of adequate Medicine, Increase Doctors' and Nurse, Modernized treatment, Increase Childcare hospital, Decrease pollution, Mass awareness of life threatening disease.