



BEYOND CONFLICT

# THE ROHINGYA PROJECT: DONOR REPORT

Beyond Conflict

The mental health charity for post-conflict zones

2021



“

Sometimes clients get terrified explaining the incidents that happened to them. They are mentally traumatised: some saw their mother, their father, brother, sister, babies being murdered in front of them.

”

*Cox's Bazar frontline trainee on the trauma they witness in the camp*



**Terry Waite CBE, Ambassador**

Beyond Conflict is providing a much needed mental health support service to those who have the demanding task of working with refugees. For too long, mental health has been given a low priority, but thanks to the work of Beyond Conflict, many more people are being given assistance to cope with the stress of this work, and more refugees are being helped to have a better quality of life. Our thanks go to our supporters who are making this work possible.



**Sheikh Ramzy, Ambassador**

The Rohingya refugees have lived through an unimaginable tragedy, and continue to suffer more than four years after their exodus from Myanmar. Every day the frontline workers who serve the refugees work tirelessly to help them survive. The pandemic has made that struggle even harder and exacted a heavy toll on both refugees and aid workers. Beyond Conflict's project has shown that together we can help address their trauma and save lives.



**Richard Wolf, Ambassador**

The Rohingya refugee crisis is one of the most neglected humanitarian catastrophes in the world. Over one million uprooted people face severe mental health issues. Beyond Conflict, as corroborated by its impact report, is providing key support to field workers and refugees. We can only hope that this essential assistance will grow and contribute to survival and rebuilding.

**Edmund Newell,  
Chair, Board of Trustees**

The need for mental health care in refugee camps is enormous, but the resources are scarce. Those in the best position to help – frontline workers – can also suffer from mental ill-health because of the situations and conditions in which they work. They, too, need help for their own welfare and to ensure they are fit and able to carry out their essential work to care for others.

The ambition of Beyond Conflict is to develop a simple and effective way of scaling-up mental health care for people in desperate need who are living and working in the most difficult of settings.

**Edna Fernandes,  
Co-Founder**

The mental health crisis facing the Rohingya refugees highlights the very reason Beyond Conflict was formed – to address the psychological fallout of war and displacement. We're delighted the results of our Rohingya Refugee Impact Report show that together we can make a difference.

Beyond Conflict thanks our supporters, partners Global Development Consortium (GDC) and the trainees for all their hard work. We look forward to extending help to more frontline workers and refugees in Phase 2 of the project. Please help us in our work to heal minds, change lives and restore hope.

## The Rohingya Refugee Project

Cox's Bazar, Bangladesh is the world's largest refugee camp and home to 1.1 million Rohingya refugees. The Rohingyas were driven out of Myanmar in 2017 by a military offensive that triggered the greatest exodus in Asia since the Vietnam War. The UN calls it a textbook genocide.

A UN investigation reported that hundreds of thousands of Rohingyas were forced to leave by a brutal campaign of mass killings, rape, torture and burning of villages by the Myanmar military. More than 50% of refugees are children. More than four years on, there's still no way back. This tragic history, together with crowded camp conditions and the pandemic, have placed refugees and frontline workers at grave risk from mental health crises. Fear, trauma, depression and suicide are destroying the lives of the some of the world's most vulnerable people.

In autumn 2020, [Beyond Conflict, the mental health charity for post-conflict zones](#), began a pilot project in Cox's Bazar, in collaboration with our local partner Global Development Consortium (GDC). GDC is headed by Dr Abu Mohamad Saleh, a leading British Bangladeshi psychiatrist specialising in trauma, and Golam Abbas, a former UNHCR Country Director for Bangladesh with more than three decades experience in global humanitarian relief work. Our project established mental health support aimed at local NGO frontline workers and refugees.

### We delivered:

- Free basic mental health training for frontline workers
- A free mental health support telephone hotline
- A referral pathway for refugees to access psychiatric counselling



Photo: Mahmood Hosseini

## The headline results

Frontline workers from seven Bangladeshi NGOs in Cox's Bazar took part and almost half gave their feedback. Here are some of the key findings that can be found in full in our Rohingya Refugee Project Impact Report at [www.beyond-conflict.co.uk](http://www.beyond-conflict.co.uk)

1. The pilot unequivocally proved the need and value of the training telephone hotline and referral pathway.
2. Most frontline workers (59%) had no mental health training or trauma counselling prior to the pilot.
3. All respondents said the training was vital to carrying out their work with refugees.
4. The overwhelming majority (88%) said the telephone hotline helped protect the mental health of clients and themselves.
5. Three cases were referred to specialist psychiatric counselling as part of our referral pathway, including one young man who attempted suicide twice before being referred. He is now safe and receiving help.



Photo: Saahmadbulbul, Wikimedia Commons

## Feedback from some of the trainees

Through this training I learned how we can make mental treatments effective, how we can help any mentally traumatized person to get back to normal, how we can establish relations and maintain communication with mentally distressed people, I have developed the mentality and confidence of listening to their individual problems and providing them with their respective suggestions and solutions. If in the future, I get the opportunity to work in a greater field, I will work responsibly with full dedication.

**Trainee 'A'**

It's great training. From the beginning I have learned the process of counselling, steps of mobilization and treatment. We have increased our knowledge on identification, care giving process and counselling and developed session plans for the individuals. We also have improved our passion for the ill or sick people. We have found a clear / specific idea and linkage system for mental health and psychosocially affected people. I think this training was good opportunity.

**Trainee 'B'**



## Case studies

### CASE STUDY 1

'Mrs P', aged 24, is a NGO caseworker in Cox's Bazar, offering mental health and psychosocial support to refugees.

Mrs P was born and raised in the local community and now works in the Rohingya refugee camp, a job she loves. But the stress of work and the pressures of the pandemic have led to a struggle to cope at work and her suffering domestic abuse at home. This has taken a grave toll on her mental health. Soon after she began our training on Zoom, Mrs P self-referred to Dr Saleh via the telephone hotline. She was diagnosed with depression and post traumatic stress disorder (PTSD).

***"I'm married with two children aged seven and two. My husband is 30 and he's been unemployed since the Covid crisis began. My father suffers long-term mental health problems and I care for him after dealing with the stress of my full time job helping the refugees.***

***"In my job, I've been working with highly charged, emotionally vulnerable families & children with very little help. My employer has high expectations. This increases pressure on me.***

***"At home, I've been suffering from domestic violence due to financial worries, my husband's unemployment and little or no support from my husband or his extended family."***

Dr Saleh describes how we helped

***"After our initial assessment, it became clear that she's been suffering from periodic depressive episodes and Post Traumatic Stress Disorder. Subsequently one-to-one Intensive Therapeutic Communication (ITC) was undertaken with her to manage the risk and Religio-Cultural Therapy (RCT) was provided to prevent family breakdown. These interventions took place on more than one occasion. Also, she was signposted for emergency support, should it become necessary at any stage. Up to now she has had access to our telephone hotline counselling support."***

Mrs P's feedback

***"I'm proud to be helping Rohingya refugees and this training helped me. I wish for more emotional, psychological and social support personally. I would like more training on psychosocial interventions for my own professional development. I believe better financial incentives would encourage fieldworkers like me to continue our challenging and low paid work."***

### CASE STUDY 2

'Mr M' works in Cox's Bazar refugee camp as a frontline worker

In recent months he became overwhelmed by suicidal thoughts brought on by the pressures of his work but primarily by issues relating to his sexuality. After one of our training sessions, he used the hotline to call Dr Saleh privately. He explained he was being forced into a marriage by his family, but unknown to them he is gay. He feared his future so much he did not see the point of living anymore and told Dr Saleh he had attempted to take his life. These thoughts continued to affect him.

After speaking to Dr Saleh, Mr P was referred to a psychiatrist but also continued to talk to Dr Saleh, with his psychiatrist's knowledge. Under professional guidance, Mr M explained to his family he cannot marry and that he was in counselling. His parents accepted this and the wedding was cancelled. He no longer fears that his sexuality will cause him to become an outcast and lose his job in a conservative community, where homosexuality is taboo. He no longer wants to take his own life.

Mr M's feedback

***"My work, the pressure from my sexuality was so great. I thought what is the point of living in this world? I've been living with this for two years. I tried to kill myself twice. I took tablets. I wanted to die. On the training course I decided to speak to Dr Saleh. He told me to call him privately on the hotline. I told Dr Saleh, 'This is not a hotline. It's a lifeline. It saves lives. It saved my life. Now I will encourage others to use it.'"***

Dr Saleh describes how we helped

***"Whenever a patient's suicidal thoughts are pre-meditated, their situation is urgent. He was suffering from a combination of severe workday stress helping refugees, but at home he faced a crisis because of he was being forced into a marriage but he knew he was gay. He could not explain the truth to his family because he feared the religious taboo of the Rohingya community, he feared losing his family and his job if people found out. Today, thanks to the professional help he received through the pilot, Mr P is still working, he has explained to his family he is in counselling and the wedding is cancelled. His mental health is stable.***

***"I'm not approaching these cases from a religious perspective in this community, but from a humanitarian perspective. People should not kill themselves for what they feel, who they love. You have to show them a way out. I've seen many cases like his, some as young as 15. The poorest and most desperate need the help most as they have nowhere to turn. This kind of work can save lives."***

## Our Roadmap for Phase 2: How your support will help

Beyond Conflict and Global Development Consortium's [Rohingya Refugee Impact Report](#) provides evidence of how the pilot project was a success in providing help for front-line workers, equipping them to protect themselves and their refugee clients when facing mental health problems.

### WHAT NEXT?

Beyond Conflict and Global Development Consortium (GDC) are now asking for your help to raise money for Phase 2 of the Rohingya Refugee Project. **100% of your money goes on the project.** Here is what Phase 2 looks like:

#### MORE TRAINING

Scaled-up training for frontline workers inside the camp, widening the programme to more local NGOs who need help dealing with trauma, depression and suicide. We want to offer refresher courses to our existing trainee frontline workers so they can continue to be supported.

#### A SCALED-UP HOTLINE

The creation of a panel of psychiatrists and psycho-therapists to operate the telephone hotline round the clock, providing a lifeline to those in need.

#### REFERRAL PATHWAY

The continuation of the referral pathway.

#### A WAR BABIES PROJECT

A new project aimed at refugee mothers. Beyond Conflict and GDC need your support to set up a monthly mental health clinic and lunch club inside the refugee camp to help mothers of "War Babies" – Rohingya babies and children born as a consequence of conflict and displacement. This will give mothers and their vulnerable children access to counselling and practical help as well as a support network. Why is this a priority?

- Today **50 per cent** of refugees in the Cox's Bazar camp are **children**.
- More than **100,000 babies** have been born inside the refugee camp.
- **Each day 60 babies** are born inside the camp and will never know a normal life.

#### A MENTAL HEALTH HUB

Create this inside the camp to allow frontline workers and refugees to access help remotely via screen-based counselling.

## How you can help

**We need your help to launch the next phase. Together we can help more refugees and frontline workers.**

As an individual, school, company or foundation, you can help us to expand our work by fundraising, becoming a Friend of Beyond Conflict, by taking a regular giving pledge, becoming a corporate sponsor or donor.

Please donate at  
[www.beyond-conflict.co.uk](http://www.beyond-conflict.co.uk)

Share our story  
[@beyondconflict1](https://www.instagram.com/beyondconflict1)

Contact us: [fundraising@beyond-conflict.co.uk](mailto:fundraising@beyond-conflict.co.uk)



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#### Websites and Twitter

[www.beyond-conflict.co.uk](http://www.beyond-conflict.co.uk)

[www.globaldevelopmentconsortium.co.uk](http://www.globaldevelopmentconsortium.co.uk)

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#### Impact Report

Impact Report And Recommendations, Training on Mental Health and Psychosocial Support for NGO Frontline Staff Working in Rohingya Refugee Camps: The Rohingya Refugee Pilot Project, Cox's Bazar, Bangladesh, by Beyond Conflict and Global Development Consortium published September 2021 is available at [www.beyond-conflict.co.uk](http://www.beyond-conflict.co.uk)



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