In Rohingya refugee camps of Southeastern Bangladesh, psychological distress among adults is widespread. Women represent 52% of the adult population living in the refugee camps in Cox’s Bazar district, but maternal mental health has not received much dedicated attention. Symptoms of stress, depression, trauma, and anxiety are common mental health issues experienced by these women who were displaced from their homeland and forced to live in congested areas within the camps. In addition, limited opportunities for work and limited availability of support in camps add to the overall unalleviated burden of housework and care. Together, these experiences make it extremely challenging for them to take care of their malnourished children.

Written by Muhammad Shaikh Hassan, Kh. Shafiur Rahaman, Karine Le Roch, Amanda Nguyen & Sarah Murray- January 2023
The Story of Shahida Begum

A Rohingya beneficiary of ACF Baby Friendly Spaces (BFS) program illustrates how difficult the situation can be for women in the camps. Shahida Begum (pseudonym) was 18 years old when she got married. Soon after her marriage her husband migrated to Bangladesh, leaving her alone in Myanmar. She had to take shelter in her mother’s house and started to feel vulnerable living alone with her siblings without her husband to protect her. When massive wave of violence began in Myanmar, she moved to Bangladesh with her family and started a second life in the Rohingya camp with her husband. There, Shahida gave birth to several children amidst various problems. While struggling to cope with life in displacement, her husband had an affair with her younger sister. He even moved to another camp with the sister, again leaving Shahida in an extremely vulnerable situation. Shahida was completely devastated by her husband’s behavior and did not know how she would survive with caring for her mother who was sick, and small children. Her husband did not divorce her but also did not provide her or the children with any kind of financial support. This put a lot of pressure on her life and Shahida stopped eating, cooking and taking care of her children. Sometimes she even forgot to breastfeed the little one who began to suffer from malnutrition.

MOTHERS’ MENTAL HEALTH

Many mothers like Shahida experience different mental health and psychosocial problems in displacement. It is important for humanitarian organizations to provide assistance by adopting a wider range of Mental Health and Psychosocial Support (MHPSS) services, to help them improve their ability to cope and function, and to strengthen resilience among refugees like Forcefully Displaced Myanmar Nationals in Bangladesh. These interventions could function more efficiently if integrated within other community support mechanisms; they would not only function more efficiently but they would also provide a culturally acceptable, viable, and accessible approach for success in reaching mothers.

BABY FRIENDLY SPACES (BFS)

In 2017, Action contre la Faim initiated BFS programs within Integrated Nutrition Centers (INC) to address both psychosocial and physical health needs of malnourished children under 2 living in Rohingya camps. The MHPSS sessions, both individual and group, contributed to the improvement of mothers’ mental health and functioning, in turn enabling them to provide better care for their children.

One of the goal of BFS services is to support the improvement of mother-child interactions through various activities run by trained psychosocial workers.

Mothers are delighted to be able to visit a “Shantikhana” (BFS center) and talk to the “Moner Daktar Apa” (Psychosocial worker). While receiving pushti/shuji (nutrition services) from nutrition centers, mothers do not worry about anything at all because they have “shantikhana.” Mothers, fathers, adolescents and other community groups highlighted the usefulness of BFS centers. Even fathers who were not really aware of what the BFS centers offered at first, they expressed happiness for how these services have helped their partners and babies in different ways. They want the centers to continue to support mothers and their children by engaging them in different activities.