No longer able to endure political persecution and military-orchestrated violence in Myanmar, over 900,000 Rohingya fled their homes to survive in Bangladesh refugee camps. The Government of Bangladesh, local organizations and communities, as well as the international aid agency network responded to the humanitarian crisis, yet all face the challenge of how to identify sustainable solutions across sectors for what is framed politically as a temporary situation. (Governing bodies agree that eventual repatriation of the Rohingya is the goal; however, in the continuing absence of secure, humane conditions, this possibility remains quixotic.)

Precarious infrastructure and dangerous climes exacerbate existing health challenges faced by the Rohingya. Populations studies have identified 80 percent of those encamped to be women and children; an estimated 60,000 women are also pregnant (largely believed to be the result of mass rape by the Myanmar military) with anticipated delivery this summer. While there are approximately 300 health facilities, there is extremely limited capacity to support these vulnerable populations: only 14 places specifically provide sexual and reproductive health services; monsoon weather impedes access; and referral hospitals are an hour-plus drive.

My research identifies how the HOPE Foundation, a local non-profit, transformed from a maternal health care provider into an emergency response unit. My approach dissected the layered implications of environmental and health hazards, using data provided by Bangladesh’s Meteorological Department, situation reports from ReliefWeb, and documents from the Sexual and Reproductive Working Group. Additionally, I conducted interviews with HOPE staff and people from their partnering organizations. Investing in local health organizations enhances their capacity for care, and I found that the HOPE Foundation was motivated to apply their expertise (in maternal health and of Bangladesh) to serve the escalating humanitarian crisis. As a smaller non-profit, HOPE was also nimble and open to adapting their data practices to better integrate within the health sector at-large.

Refugees are a growing class around the world and building the capacity of on-the-ground organizations is critical to provide sustainable health care for displaced persons and local populations, as shifting demographics give shape to potential new city-scapes and social structures.