



# Misunderstanding + misinformation = mistrust:

How language barriers reduce access to humanitarian services, reduce the quality of those services and aggravate social exclusion for Rohingya communities

**PART I: CROSS-BORDER TRENDS**

*September 2019*



**TRANSLATORS**  
WITHOUT BORDERS

# A three-part report

Translators without Borders (TWB) is pleased to launch a three-part report and accompanying language guidance on an innovative cross-border study. The series explores the role of language in humanitarian service access and community relations in Cox's Bazar, Bangladesh and Sittwe, Myanmar.

- **Part I.** Cross-border trends: Challenging trends in Cox's Bazar, Bangladesh and Sittwe, Myanmar
- **Part II.** Cox's Bazar, Bangladesh: Findings from Bangladesh including sections on challenges, adaptive programming, and recommendations
- **Part III.** Sittwe, Myanmar: Findings from Myanmar including sections on challenges, adaptive programming, and recommendations

We are grateful to the many organizations and individuals that supported or participated in this study.

The cross-border study was conducted and authored by a TWB team in Myanmar and Bangladesh. Many others also contributed feedback and valuable comments to the final series of reports.

## METHODS AND FURTHER INFORMATION

Detailed information on methods and limitations is available at [https://translatorswithoutborders.org/wp-content/uploads/2019/09/Methods-and-limitations\\_Cross-Border.pdf](https://translatorswithoutborders.org/wp-content/uploads/2019/09/Methods-and-limitations_Cross-Border.pdf).

For detail on the languages of the Rohingya response in Bangladesh and Myanmar, see [https://translatorswithoutborders.org/wp-content/uploads/2019/09/Languages-in-the-Rohingya-response\\_Cross-Border.pdf](https://translatorswithoutborders.org/wp-content/uploads/2019/09/Languages-in-the-Rohingya-response_Cross-Border.pdf).

## USAGE

**Language and ethnicity names:** We use the official language or ethnicity name designated by the national government in Bangladesh or Myanmar respectively. For example, we use Bangla instead of Bengali and Myanmar instead of Burmese.

If a language is not officially recognized, we use the name recognized in American English or the preferred term of self-identification used by interviewees. For example, Rohingya.

**Language speakers:** The terms "English speaker," "Myanmar speaker," "Rakhine speaker," and "Rohingya speaker" indicate the language a person is most comfortable speaking.

This does not imply that the person is a native speaker of that language or that their ethnicity necessarily mirrors that language. For example, a Rakhine speaker may be ethnic Rohingya.

# Executive summary

**“We speak a *hala hotha* [black language]... That’s what we call languages that don’t have too much power. Our language is one of them.”**

**- A Rohingya man aged between 25 and 49**

The Rohingya are marginalized in Myanmar society, as reflected in their lack of legal status and recognition as citizens. Across the border in Bangladesh, they are also unable to fully participate in society due to their lack of legal status and recognition as refugees.

One consequence of this is to reduce their opportunities to learn other languages such as Myanmar or Bangla. This locks in their exclusion through language.

Monolingual Rohingya in both countries are unable to access information, voice their needs and wishes, or engage with decision-makers except through other people. The groups that are most commonly monolingual are also disadvantaged in other ways. This language dependency reinforces their relative lack of power and agency.

Forced displacement increases reliance on others from outside the Rohingya community for support. This makes it even more essential for them to communicate across languages and cultures. The role of intermediaries becomes more important and the risk of exclusion for monolinguals even greater.

Effective two-way communication is a key component of user-centered, equitable service provision and accountable humanitarian action. In the linguistically diverse humanitarian response in both countries, organizations struggle to get that communication right. The result is reduced access to quality services, further exclusion, and missed opportunities to help improve intercommunal relations.

Humanitarian organizations can improve communication effectiveness by increasing staff language capacity, cultural awareness, and knowledge of interpreting principles.

More fundamentally, language and cultural awareness should inform every aspect of program design, resourcing, and implementation. That is how we ensure that under-served Rohingya can understand their options, make their needs and wishes heard, and build better relations with neighboring communities.

# Recommendations

This assessment highlights ways in which humanitarian organizations can communicate more effectively with the affected population.

## 1. **Apply plain language principles**

Develop information, education and communication materials in plain language, especially those intended for the Rohingya community. Explain concepts using familiar words and clear sentence structure. Avoid or explain technical jargon and words that are not commonly used. Ensure content is field-tested, appropriate for the intended audience, and addresses key community concerns. (For an overview of plain language principles, see <https://translatorswithoutborders.org/wp-content/uploads/2019/09/Basic-plain-language-principles-for-humanitarians.pdf>.)

## 2. **Invest in formal training for interpreters and field staff in language and cultural skills**

Assess Rohingya language skills as part of staff recruitment, and engage Rohingya staff and volunteers to support community engagement. Training and support programs can build interpreters' and field workers' capacity, including in complex terminology such as health interpreters may require. This can draw on tools like TWB's multilingual glossaries of humanitarian terms. Humanitarian organizations can foster cross-cultural communication skills by encouraging collaboration between Rohingya staff and volunteers and those from other backgrounds.

## 3. **Test comprehension of critical messages**

Develop and test message banks to see which messages are best understood, convey the intended meaning, and resonate with target groups. Whenever possible, co-design or co-redesign messages with community members. This will also help to track progress and raise awareness of the importance of clear messaging. Ultimately this should increase the effectiveness of humanitarian communication practices over time.

## 4. **Promote and support empathy with service users and understanding of their needs**

Train and brief service providers in language and cultural awareness. Enable them to apply that learning by designing programs to allow adequate time for communication. In health clinics, for instance, this means organizations should plan for doctors to spend longer with patients, especially new patients. It is common for interpreting into an unstandardized language to take a few minutes longer. Plan for any interpreted meeting or gathering, such as focus groups, to take at least twice as long. As far as possible, don't rush interactions with Rohingya community members: it can readily be taken as rude and disrespectful.

**5. Design a bridging strategy from Rohingya to the other languages of instruction (Myanmar in Rakhine State, Myanmar and English in Cox's Bazar)**

Expanding the use of the Rohingya language in education will improve children's learning across the curriculum, including learning additional languages. This is especially important for disadvantaged groups such as girls, children with disabilities, and those who have missed years of schooling. Starting immediately, provide stronger guidance for the use of Rohingya in teaching and learning, teacher training, management, and assessment. Consider developing an approach to teaching Myanmar as a second language and progressively using it as a language of instruction as students become more confident. In the long term, work with the

Rohingya community to explore scope for standardizing Rohingya as a language of instruction.

**6. Develop social cohesion programming that addresses language-based exclusion and does not perpetuate it**

Design social cohesion and peacebuilding programs to be accessible to monolingual Rohingya, as well as to other groups. This should inform everything from activity planning to staff recruitment and training, to communication. Model and promote intercommunal respect by referring to social groups by the names they prefer: call Rohingya, Rohingya. Explore the role of language intermediaries and shared problems like gender-based violence as entry points for promoting intercommunal understanding.

*A facilitator and Rohingya-speaking interpreter conduct a focus group with young Rohingya women on language barriers in the Sittwe rural camps and villages.*



# Language barriers limit access to quality services

Rohingya speakers who do not also speak another language are vulnerable to exclusion from information, access to services and quality service provision. Such monolinguals make up the vast majority of the Rohingya population. They are predominantly people with no or low education, those from rural areas, women, and in Cox's Bazar newly arrived refugees.

In both contexts, Rohingya speakers who do not speak other languages depend on those who do. This results in diminished individual agency, and gives the intermediary a critical role in the individual's ability to access quality services. Our assessment found that generally humanitarian organizations are not ensuring staff and volunteers have the skills, training, and support to play that role effectively.

## **LANGUAGE BARRIERS LIMIT ACCESS TO QUALITY HEALTH SERVICES**

The study identified common communication problems in humanitarian health services. These reduce effectiveness, trust, and ultimately access.

### **Limited language and literacy skills prevent patients from fully understanding health information.**

Among refugees surveyed in Bangladesh, over 20 percent felt they did not have enough information to make good health decisions. While this is a minority, it is one already disadvantaged by lack of education: predominantly women, non-Myanmar speakers, and households with no literate members. Extrapolated to the total refugee population this would be 200,000 people.

In Cox's Bazar, the vast majority of refugees surveyed are using humanitarian health services, but many reported communication problems affecting the care received. They identified doctors and dispensers in particular as hard to understand. Of refugees who visited a health service provider, 29 percent did not feel all their questions were answered and that they understood everything. Thirty-five percent claimed they had received the wrong medicine. Language barriers with staff, poor staff behavior and unavailability or mistrust of interpreters were all factors.

**“Doctors say that you don't need to come here if you don't understand the language.”**

- A newly arrived Rohingya man aged between 15 and 24 in Cox's Bazar, Bangladesh

**Women and girls use euphemisms to refer to parts of the body, such as “chest” for “breasts”, particularly when speaking to male service providers.**

Intermediaries, typically Rakhine- or Chittagonian-speaking community health volunteers, often fail to spot the euphemism and instead interpret literally. The health professional consequently lacks critical information to carry out an effective examination and reach an accurate diagnosis. Targeted training and guidance on cultural and language awareness could significantly reduce such misunderstandings.

**The community health volunteers and medical professionals do not learn and apply standard interpreting and cultural mediation practices which could improve communication between doctor and patient.**

Best practice centers on the intermediary (in this case the community health volunteer) supporting direct engagement between the interlocutors. The intermediary relays communication completely and directly in both directions and provides additional information where needed to facilitate cross-cultural understanding. The patient and doctor can then interact more fully, increasing the potential for real understanding and trust.

In current practice, health volunteers hold side conversations with patient and doctor and do not relay all information in both directions. This gives them a degree of control over what information is conveyed which disempowers the patient. Some patients and doctors

told TWB that they do not always trust the information relayed by the health volunteers. Guidance and training based on direct interaction between patient and doctor being the norm could improve trust and effectiveness.

**“The doctor sees us but does not explain to us what kind of diseases we have or what our condition is, he just prescribes the medicine”.**

- A newly arrived Rohingya man aged over 50 in Cox’s Bazar, Bangladesh

**“When I get fever, I get the same medicine [paracetamol] as when I have diarrhea. Why?”**

- A Rohingya man aged over 50 in Sittwe, Myanmar

**Time constraints linked to the planning and availability of humanitarian health services do not promote culturally and linguistically sensitive communication and patient-centered care.**

Real communication takes longer.

**“We don’t have enough time with the doctors. First there is a long wait and then only two to three minutes of consultation.”**

**- A Rohingya man over 50 years old in Sittwe, Myanmar**

People with disabilities also reported other challenges accessing health services, including a perceived or actual lack of social support.

**“At the clinic, they don’t allow caretakers to come inside the consulting room.”**

**- A Rohingya woman with disabilities in Sittwe, Myanmar**

### **More effective signage is needed to point the way**

External signs directing patients to health facilities are often not wholly effective. Agency logos and taglines are more prominent than information on services or opening hours. Signs in the camps in both Sittwe and Cox’s Bazar are also in English and (in Bangladesh) Bangla, with Myanmar translations in smaller print. Vulnerable individuals therefore depend on multilinguals to direct them to health service centers. Pictograms can be helpful, but should take culturally specific meanings of symbols and audience preference into account.

Certain symbols which are clear in English or Myanmar do not always translate with the same meaning in Rohingya. For example, many people derive the meaning “not allowed” from a circle with a line through it. We learned that the Rohingya community in Bangladesh does not understand this. Instead, a Rohingya audience will take the same meaning from a red hand, palm forward.

## Build communication needs into service provision

These problems are compounded by distrust of Western medical practice, which conflicts with traditional beliefs held in the Rohingya community. Promoting healthy practices and recourse to formal health services without disrespecting these beliefs requires cultural awareness and understanding as well as tact.

Our study indicates that Rohingya patients are often dissatisfied with health services but generally fail to raise their concerns with health providers. This seems to be due to a combination of culture, pragmatism, and ignorance of rights. Social emphasis on saving face, by not revealing the extent of one's needs, combines with concern that criticism may lead to services being withdrawn. Concepts of patient-centered care and the right to quality health services are also unfamiliar.

**“No one offers to help us with these [language] challenges and we don't know how to complain. And we also dare not complain.”**

**- A newly arrived Rohingya man aged over 50 in Bangladesh**

**“[The Rohingya community] will say things that will please the [non-Muslim] program staff because they are afraid of them... They are less afraid of the Muslim staff.”**

**- A Myanmar-speaking humanitarian project officer in Myanmar**

In this context, it takes considerable tact, cultural sensitivity, and time to establish a dialogue where the patient's concerns can truly be heard. Clearer messaging and an investment in patient-centered care and communication could go a long way to improving the actual and perceived quality of health services.

By incorporating cultural and language awareness into their practice, health service providers can ensure the effective communication needed for patient-centered care. That implies:

- Service planning to allow time for communication
- Building language and cultural awareness skills among staff
- Ensuring that doctors and health volunteers alike understand good communication practices as part of their job

## LANGUAGE BARRIERS LIMIT ACCESS TO QUALITY EDUCATION SERVICES

UNICEF<sup>1</sup> recommends that education content should be learner-centered and nondiscriminatory. This implies that it presents information to the learner in the way that they can best engage with and in a language they understand.

Using the mother tongue of the children as the language of instruction improves equity and learning outcomes and reduces repetition and drop-out. It can also increase parental and community participation.<sup>2</sup>

In multilingual settings, mother tongue-based multilingual education is acknowledged best practice<sup>3</sup>. In this approach, children learn new concepts and ways of communicating in their first language while also learning and gradually receiving instruction in additional languages.

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- 1 [http://www.oosci-mena.org/uploads/1/wysiwyg/Quality\\_Education\\_UNICEF\\_2000.pdf](http://www.oosci-mena.org/uploads/1/wysiwyg/Quality_Education_UNICEF_2000.pdf)
  - 2 Bender, P., Dutcher, N., Klaus, D., Shore, J. and Tesar, C. (2005): *In their own language : education for all* (English). Education Notes. Washington, DC: World Bank, accessed at: <http://documents.worldbank.org/curated/en/374241468763515925/In-their-own-language-education-for-all>
  - 3 Susan Malone 'The rationale for Mother Tongue Based Multilingual Education: Implications for Education Policy' SIL 2007 accessed at: [https://www.sil.org/sites/default/files/files/mtbml\\_e\\_implications\\_for\\_policy.pdf](https://www.sil.org/sites/default/files/files/mtbml_e_implications_for_policy.pdf)

## Language and cultural diversity compound resource and policy constraints

Achieving high-quality, learner-centered, mother tongue-based multilingual education is challenging in both contexts studied. These challenges primarily result from resource and policy limitations, but are compounded by cultural and language barriers.

Policy constraints include the exclusion of accreditation and restrictions on the language of instruction in both contexts. Resource limitations affect the quality and extent of teacher training and professional development provided for teachers.

Cultural norms restricting girls' access to education after puberty are also a powerful constraint on education access. Any change in those attitudes will take time, and our assessment did not address them directly.

However, we found a lack of trust in humanitarian education and unfamiliar teaching approaches also reduces enrollment and attendance. More effective communication practices could help to overcome parents' reservations and allow their insights to inform education delivery.

Our assessment, and a parallel TWB education study in Cox's Bazar,<sup>4</sup> highlighted language- and culture-related obstacles to educational access and quality that humanitarian practice can address:

- Language barriers to accessing education-related information and effective dialogue with parents
- Low Myanmar language skills of ethnic Rohingya teachers and low Rohingya skills of Chittagonian-speaking teachers and humanitarian education managers
- Unfamiliarity with learner-centered education practice among teachers, students, and parents
- Assessment of student competence in languages other than Rohingya, meaning many children in Cox's Bazar were reportedly streamed at a lower grade

In this difficult context, effective communication practices and targeted training and guidance can mitigate these challenges.

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4 TWB, UNICEF (2019) *Language, education and the Rohingya refugee community of Cox's Bazar* [forthcoming].

## Communication needs improving inside and outside the classroom

Interviews, focus groups, and observation identified practices which could be improved to promote better access to quality education in both contexts.

### Classroom communication

Teachers lack quality training, guidance, and teaching and learning materials to support multilingual education based on the use of Rohingya. In the absence of such support, the tendency is to fall back on rote-based learning, with limited opportunities for learners to talk and develop cognitively in any language. Learner-centered approaches need time, training and practice to become effectively used by teachers for whom the techniques are new.

Teachers are making pragmatic use of Rohingya to explain new concepts, but they are not supported to do so effectively. Nor are they currently guided in how to develop learners' Myanmar skills as a basis for transition to that as the language of instruction. Teachers themselves often lack skills in other languages. Teachers and parents alike cited the poor Myanmar, Rakhine and (in Cox's Bazar) English language skills of teachers as causes of concern.

### Management communication

Language barriers impede teacher supervision and training. In Bangladesh, technical and program officers who train and supervise local Bangladeshi and Rohingya teachers are mostly Bangla or Chittagonian speakers. In the Sittwe rural camps and villages, teacher supervision happens in Myanmar and Rakhine, despite their limited fluency in those languages. As a result, Rohingya

teachers receive feedback and guidance in a language they may struggle to understand.

Rohingya has a central role both as a language of instruction and for the acquisition of other languages of instruction. Course documents, teacher competencies and management, and student assessment systems do not currently reinforce this.

### **Communication with communities**

Communication challenges between supervisors, trainers, teachers, learners, and families have resulted in a limited understanding of the learner-centered approach of temporary learning centers and classrooms.

In Cox's Bazar, many parents don't see temporary learning centers as serious places of education, because of the focus on play-based learning activities. In the Sittwe rural camps and villages, low education levels and Myanmar language skills among Rohingya teachers do not match the expectations of many parents. Prior to displacement, parents were accustomed to native Myanmar- or Rakhine- speaking teachers.

Parents who do not speak Myanmar - themselves therefore probably not well educated - commonly struggle to understand information about their children's education. A sizable minority (25 percent) of refugee households surveyed in Bangladesh felt they did not have enough information to make good education decisions for the family. These were mostly households where no one speaks Myanmar, the language of education and literacy.

Community engagement in the right language is lacking to overcome parents' concerns and involve them in their children's education. International

education specialists are not always effective in communicating learner-centered approaches in ways that resonate across cultures. National staff of education sector partners can also struggle to convey the related concepts without adequate support and preparation. Parent-teacher meetings in Cox's Bazar are held using spoken Chittagonian, which may be difficult for some parents to understand.

A strong communication campaign is lacking to engage parents in education, build trust, and discuss the effectiveness of mother tongue instruction and learner-centered approaches.

### **Better community participation and more multilingual resources are needed to deliver quality education**

Mother tongue-based multilingual education is a challenge to deliver in these difficult contexts, yet the benefits for educational outcomes are well documented. To achieve it, teachers, learners and parents need support and resources adapted to their language and cultural diversity.

Despite external constraints, humanitarian education service providers can improve access to quality education by taking better account of language in their practice at every level.

### **Provide stronger guidance on the use of Rohingya in teaching and learning.**

This should include explicit objectives to encourage students to explore subjects in their mother tongue and track their progress in that language. It also implies translating course documents into national languages (Bangla and Myanmar) and producing audiovisual guides in Rohingya to explain the approach and

objectives to teachers, learners and parents.

**Promote the use of spoken Rohingya as the initial language for new learning and a stepping stone to learning in Myanmar.**

This involves developing Rohingya language teaching and learning materials for use alongside existing resources like TWB's multilingual glossary mobile app.

**Support teachers to improve their Myanmar skills to teach in that language.**

Consider also providing them with guidance on teaching Myanmar initially as a second language, so that children progressively build the vocabulary they need for learning in the official language of instruction.

**Improve language support during teacher recruitment and training.**

This implies making teacher development resources available in relevant languages and formats and ensuring that complex ideas are presented and discussed in Rohingya. The teacher learning circles in Cox's Bazar are a positive model to build on.

**Increase community participation in education planning and programming.**

This entails translating key educational documents and messages into Myanmar, holding parent-teacher meetings in Rohingya, and involving students, teachers, and parents in decision-making.

*Children learn the Arabic alphabet at a madrassa in a Bangladeshi community neighboring the refugee camps in Cox's Bazar. Credit: TWB / Fahim Hasan Ahad*



# Language barriers reinforce the exclusion of Rohingya in society

The Rohingya are marginalized in Myanmar society, a fact reflected in their lack of legal status and recognition as citizens. Across the border, they are also unable to fully participate in society due to their lack of legal status and recognition as refugees by the Bangladesh government. One consequence of this is to reduce their opportunities to learn other languages such as Myanmar or Bangla, whether at school or through interaction with neighboring communities.

This locks in their exclusion through language. Monolingual Rohingya adults are unable to access information, voice their needs and wishes or engage with decision-makers except through other people. As the groups most commonly monolingual are those also disadvantaged in other ways, this dependency on multilinguals reinforces their relative lack of power and agency within the community.

Forced displacement increases Rohingya individuals' reliance on others from outside their own community for support,

increasing the need for communication across languages and cultures. Internally displaced Rohingya in Myanmar rely on Rakhine and Myanmar speakers from within and outside the Rohingya community to communicate with service providers. Rohingya refugees in Bangladesh rely mainly on local Bangladeshi Chittagonian speakers for that communication.

Direct engagement with humanitarian decision-makers and neighboring communities is extremely rare for monolingual Rohingya in both contexts. Policies on both sides restricting or prohibiting Myanmar and Bangla language learning respectively will perpetuate that situation for younger generations.

The reliance on language intermediaries is complicated by existing animosity and distrust between the different language groups. The use of pejorative terms by Rohingya communities and some neighboring groups to refer to one another are linguistic markers of those tensions.

**“On service-related things (food, latrines, training), the Rohingya community trusts speaking to [ethnic] Rakhine, but on return, protection, emotional stuff, it is challenging.”**

**- A Myanmar-speaking woman who is a humanitarian program manager**

These intercommunal dynamics feed mutual distrust and miscommunication which impede the effectiveness of humanitarian support for the Rohingya, as we have seen. Longer term, they risk making intercommunal tensions more intractable – in both a return and a protracted displacement scenario.

Yet to date there has been limited social cohesion programming in Sittwe and in Cox’s Bazar to counter this. What there has been, has unintentionally reproduced the exclusion by being fully accessible only to Rohingya who also speak Rakhine or Myanmar. Organizations planning and implementing such programming should consider language as a factor of exclusion and design their interventions accordingly to maximize reach and impact.

## **Humanitarian programming can counter language-based exclusion**

This is clearly a complex and challenging context in which to promote positive intercommunal relations. Yet language, as well as a barrier, can be an enabler here.

The first step is to design programs to be accessible to monolingual Rohingya, as well as to other groups. This should inform everything from activity planning to staff recruitment and training, to communication.

Referring to the Rohingya by that name, which they prefer, is one way of signaling and promoting respect both within teams and externally. This is a fundamental of rights-based programming. Ethnic Rakhine and Bamar colleagues may appreciate such sensitivities better in the context of a conversation about the Rohingya community’s use of the term *mog* for their ethnic groups. This can be interpreted pejoratively as “pirate”, although its standard meaning is “Buddhist”.

The non-Rohingya and multilingual Rohingya who often act as intermediaries for displaced people and refugees could be a bridge between communities. The same is true of the registered Rohingya refugees in Bangladesh. There are varying levels of mutual distrust and hostility between these groups and mainstream Rohingya society. Yet their language skills and knowledge of other cultures also earn them respect. This presents so far unexplored entry points for practical social cohesion programming.

In wider rights-based programming, action to reduce gender-based violence and other abuses could also support intercommunal dialogue on issues of shared concern.

# Effective humanitarian communication depends on clear messages and high professional capacity

To address the negative impact of poor communication on access to quality services for the Rohingya community, we must first understand what goes wrong at present.

Effective humanitarian communication that builds knowledge and trust uses languages and formats that are accessible to affected people. It depends on:

- a clear source message
- the technical and interpersonal capacity of the people involved in the communication and
- checking comprehension at each stage.

## HUMANITARIAN MESSAGING IS OFTEN UNCLEAR

Humanitarian communication worldwide often uses very specific or technical vocabulary that non-specialists may not understand even in English, the sector's dominant language. When these terms are translated into other languages, they can become even harder to understand. This is a particular challenge when they are translated into

languages without strong academic or technological traditions such as Rohingya or Chittagonian. Translate technical terminology through a succession of languages, as in the Rohingya response, and meaning is easily lost altogether.

TWB and other humanitarian organizations in Cox's Bazar have identified many terms which present translation challenges in the Rohingya response. These can make it difficult for humanitarians to understand members of the refugee community and to be understood by them.

The word "safety" does not seem to have a consistent meaning among Rohingya refugees, which can lead to misunderstanding between them and humanitarians on matters of protection.<sup>5</sup> The Rohingya word *hefazot* is often used by new Rohingya arrivals in Bangladesh, and refers to a variety of safety-related concepts such as "protection", "security",

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5 Action Against Hunger, Oxfam, Save the Children (2018) *Rohingya refugee response gender analysis: recognizing and responding to gender inequalities*, <https://reliefweb.int/sites/reliefweb.int/files/resources/rr-rohingya-refugee-response-gender-analysis-010818-en.pdf>

and “guard”. Chittagonian interpreters and field workers did not initially understand *hefazot*, as they use the Bangla-derived word *nirafot* for these safety-related terms.<sup>6</sup> The word “gender” does not exist in Rohingya, and interpreters supporting the 2017 refugee response initially translated it as meaning “women”. This led to “gender-based violence” being confused with “violent women”.

Complex terminology too often combines with complex syntax, poorly organized presentation of information, and overlong sentences and documents. The humanitarian sector is not alone in this, but the consequences of miscommunication should make such poor communication less common in emergency response. The principles of plain language, summarized in an annex to this report, also entail checking audience comprehension – a practice as rare as it is essential.<sup>7</sup>

Messages in the Rohingya responses in both Myanmar and Bangladesh are not routinely tested. Conditions in the camps, particularly in Cox’s Bazar, are continuously changing due to geographic and environmental factors, as well as Bangladeshi government and military mandates. Messages relating to these conditions must also be adapted and tested for applicability.

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6 BBC Media Action, *Internews, TWB (2018) What Matters? Humanitarian Feedback Bulletin*, issue 19 <https://app.box.com/s/qy8aectiwqbfqgikmzgdd8ypeioej0ua>

7 <https://translatorswithoutborders.org/wp-content/uploads/2019/09/Basic-plain-language-principles-for-humanitarians.pdf>

## ENGLISH- AND ROHINGYA-SPEAKING COMMUNICATORS RELY ON INTERMEDIARIES SPEAKING CHITTAGONIAN, RAKHINE AND MYANMAR

The Rohingya response in Myanmar and Bangladesh is linguistically diverse: at least six spoken and three written languages are used, with varying degrees of fluency and literacy. Most English speakers and Rohingya speakers only speak and understand one language. The information flow therefore depends heavily on intermediary languages and communicators.

Even a clear original message depends on the capacity of the intermediary if it is to be understood and accepted. At one level, capacity is about language skills and technical proficiency in interpretation, translation, and localization. Equally important however, are the interpersonal components of cultural sensitivity, awareness of body language, and patience.

Both types of capacity are frequently lacking in the Rohingya response. This is due to the varied levels of education, training, and experience of the individuals and organizations communicating.

To build that capacity, humanitarians should invest in developing staff proficiency in relevant languages, understanding of good practice in interpretation and translation, and awareness of and sensitivity to cultural norms and practices.

### Information providers and recipients

The various language speakers face different challenges in communicating with each other. These are due to both linguistic and cultural differences and

varying opportunities for interaction. Understanding these differences could help to devise ways to overcome the challenges they create. At either end of the information flow, Rohingya- and English-speaking communicators are monolingual and at the greatest linguistic and cultural distance from each other.

As Rohingya is not a standardized language, people across Rakhine State and in Cox's Bazar speak a variety of dialects. In Cox's Bazar, the main differences are between longer-established, or "registered", refugees, and those who arrived from 2017 onwards. In the Sittwe rural camps which were the study focus in Myanmar, the main differences of dialect are between people displaced from urban and from rural areas. These differences create some additional scope for miscommunication. However, the language gap in Sittwe appears to have narrowed over time.

### **Information intermediaries**

In Myanmar, Rakhine speakers are the main information intermediaries at the field and camp levels, between Myanmar and Rohingya speakers. Chittagonian speakers play a similar role in Bangladesh between Bangla or English and Rohingya speakers in the camps. Myanmar speakers in Sittwe are usually information intermediaries at coordination and managerial levels, between English and Rakhine speakers. Bangla speakers play a similar role between English and Chittagonian speakers in the Bangladesh response.

As direct intermediaries with Rohingya volunteers and service users, Rakhine and Chittagonian speakers determine what information is passed to them, and how it is interpreted. Equally, they can determine what information is passed from refugees and displaced people to humanitarians and how those messages are interpreted.

At this central point in the flow, technical and language capacity is very important. Highly technical information from humanitarian managers in English, Bangla or Myanmar might easily be misunderstood and misinterpreted by intermediaries without technical training.

It is therefore important to hire Rakhine and Chittagonian speakers with English, Myanmar, and Rohingya language skills. Training them in interpretation, translation, and cultural mediation is equally important.

### **UNCLEAR COMMUNICATION AND LOW CAPACITY CAN LEAD TO MISINFORMATION, MISTRUST, AND POWER IMBALANCES**

In Sittwe rural camps and villages, Rakhine speakers are the main intermediaries between humanitarians and the displaced people. In Cox's Bazar, Chittagonian speakers play that role.

Yet in both cases, the intermediaries generally lack knowledge of and experience in the topics that humanitarians and displaced people typically communicate about. This inadequate understanding of the topic, combined with limited language ability and a general lack of awareness of cultural nuances, often leads to an incorrect or incomplete information exchange.

Consequently, humanitarians and displaced people alike are wary of the information that intermediaries provide. The shortfall in skills also explains the presence of conflicting information about the similarities, differences, and mutual intelligibility between Myanmar and Rakhine, and Rohingya and Chittagonian. Humanitarian communication is further impaired by a faulty understanding of the language and literacy skills of the Rohingya population.

# Humanitarians appear to misunderstand Rohingya language and literacy skills

A TWB survey of humanitarians in both locations found that many believe a majority of Rohingya can read and write.<sup>8</sup> In fact, just 40 percent of Rohingya in Sittwe Township claim to be literate in any language according to the most recent study.<sup>9</sup> Similarly, in Cox's Bazar, 34 percent of Rohingya households TWB surveyed said they were literate, chiefly in Myanmar.

The same studies confirm that knowledge of Myanmar, Rakhine, and Chittagonian is also lower than humanitarians believe. Knowledge of these languages is particularly low among women, young adults and adolescents, and people from rural areas. This means that communication in Rohingya is essential.

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8 "Humanitarians" were defined as any staff member, national or international, working at any level for any organization focused on the Rohingya response in Rakhine State. The online survey was shared in English and Myanmar. Detailed information about the online survey including methods and the original questionnaire is available at [[https://translatorswithoutborders.org/wp-content/uploads/2019/09/Methods-and-limitations\\_Cross-Border.pdf](https://translatorswithoutborders.org/wp-content/uploads/2019/09/Methods-and-limitations_Cross-Border.pdf)].

9 The JIPS measure for literacy was self-reported ability to read or write a simple sentence with understanding in any language. This is slightly different from the wording of TWB's online survey ("In your opinion, what percentage of Rohingya IDPs living in camps in Rakhine State understand the following written languages?").

A large majority of humanitarians believe that Rohingya is very similar to Rakhine and Chittagonian, and that most Rohingya understand those languages. A clear majority believe that most Rohingya understand Myanmar. Yet in fact Rohingya is not mutually intelligible with either Rakhine or Myanmar and only a minority speak either. Women, younger people, and people displaced from rural areas are least likely to speak either language. While Chittagonian and Rohingya are related, TWB's research in Cox's Bazar since 2017 has found that they do not use the same or similar words for many important concepts.<sup>10</sup>

Inevitably the mismatch between humanitarian assumptions of refugee language skills and the reality results in reduced comprehension. TWB's survey of refugees in Cox's Bazar found that refugees who had arrived in Bangladesh since 2017 faced particular problems communicating with humanitarians.

Thirty-five percent of newly arrived households surveyed reported that they don't understand all the spoken words

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10 <https://translatorswithoutborders.org/rohingya-refugee-crisis-response/>

that humanitarians use. While the use of specialized vocabulary is part of this problem, it may also be due to the fact that field-based humanitarian staff tend to be Chittagonian or Bangla speakers.

## **MONOLINGUAL ROHINGYA SPEAKERS ARE THE MOST VULNERABLE TO LANGUAGE BARRIERS**

In the multilingual humanitarian response, monolingual Rohingya are at greater risk of misunderstanding and misinformation about and mistrust of humanitarian services. They access services at lower rates and experience lower-quality services compared to multilingual Rohingya speakers. They are also less likely to qualify for paid volunteer and professional growth opportunities.

Those most likely to be monolingual speakers among Rohingya in Sittwe and Cox's Bazar are people with no or low

education, those from rural areas, and women. This is linked to these groups' restricted opportunities to access education or interact with other language groups.

A TWB survey among refugees in Cox's Bazar found that self-reported literacy among women and girls is lower than among men and boys in all age groups. Ninety-eight percent of women aged 50 and over described themselves as non-literate.

Because of movement restrictions limiting interaction with non-Rohingya groups and exclusion from higher education, people in the Sittwe camps who were displaced from rural parts of Sittwe tend not to speak Myanmar or Rakhine. This group have some difficulty communicating with urban Rohingya. Newly arrived refugees in Cox's Bazar are also predominantly monolingual, while the "registered" refugees who arrived in earlier decades have acquired local language skills.

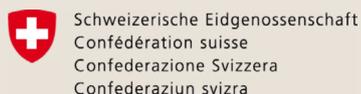
*A member of the assessment team interviews a community health worker at a clinic in the refugee camps in Bangladesh.*



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Translators without Borders (TWB) envisions a world where knowledge knows no language barriers. The US-based nonprofit provides people access to vital knowledge in their language by connecting nonprofit organizations with a community of language professionals, building local language translation capacity, and raising awareness of language barriers. Originally founded in 1993 in France (as Traducteurs sans Frontières), TWB translates millions of words of lifesaving and life-changing information every year. In 2013, TWB created the first crisis relief translation service, Words of Relief, which has responded to crises every year since.

For more information about this study or to find out how TWB is supporting the Rohingya response in Bangladesh and Myanmar, visit our website or contact: [bangladesh@translatorswithoutborders.org](mailto:bangladesh@translatorswithoutborders.org) or [myanmar@translatorswithoutborders.org](mailto:myanmar@translatorswithoutborders.org).



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