Physicians for Human Rights

Shot While Fleeing

Rohingya Disabled by Myanmar Authorities’ Targeted Violence

Executive Summary       June 2019
Five-year-old Muriam Khathu* was at home with her parents and grandparents in their village in Myanmar when soldiers approached, firing rifles and throwing grenades at houses belonging to Muslim Rohingya. As the family ran out, soldiers shot and killed Muriam’s father, and several members of the security forces grabbed the 40-pound girl and threw her against a wall. They began stomping on her and kicking her with their combat boots, ignoring the pleas of Muriam’s mother and grandparents that they stop.

When Muriam’s assailants finally moved on, her family escaped to Bangladesh. Muriam was sent to a hospital, but the damage could not be undone: she had suffered a pelvic fracture and serious neurological injury as a result of the attack. She could move her legs only slightly and was unable to bear any weight on them at all. Months after the attack, she still felt pain whenever she moved.

Muriam cannot play, walk, or even sit up. Her mother attends to her every need. According to doctors who examined her, it’s unlikely that she will ever be able to move without pain.

This report tells the story of dozens of Rohingya like Muriam who, as a result of the brutal violence inflicted on them by Myanmar forces, likely face a lifetime of chronic pain and disability.

* All names changed for security reasons.
In August 2017, Myanmar security forces and Rakhine Buddhist civilians attacked hundreds of villages in northern Rakhine state, massacring thousands of Muslim Rohingya residents and burning their homes to the ground. That targeted violence prompted approximately 740,000 Rohingya to flee to Bangladesh, where they have remained since. Physicians for Human Rights (PHR) has collected extensive forensic evidence of the atrocities and human rights violations committed against the Rohingya in those attacks. A PHR report published in July 2018 presented clear medical evidence to corroborate survivors’ accounts of the shootings, beatings, stabbings, and other forms of violence inflicted upon the Rohingya.

This supplemental report focuses on a separate, underreported outcome of the August 2017 attacks on the Rohingya: survivors whose wounds have left them with potentially permanent disabilities that will hinder their ease and freedom of movement, limit their ability to seek gainful employment, and impose other restrictions on their ability to live productive, pain-free lives. The Rohingya survivors with long-term disabilities highlight how the ruthless violence that the Myanmar security forces and their agents inflicted on the Rohingya in August 2017 will have a decades-long, painful, life-altering legacy for potentially thousands of survivors and their families.

PHR conducted evaluations of 90 Rohingya survivors from 19 different villages in northern Rakhine state who had fled to neighboring Bangladesh as a result of the 2017 attacks. Of those survivors, PHR found that 43 had sustained physical injuries resulting in long-term disabilities. The vast majority of these people were gunned down as they fled from Myanmar security forces, and the resulting bullet wounds have left them with lasting neurological damage that can limit nerve functioning in key limbs or cause enduring pain, both of which can make simple tasks like walking, grasping a pot, or lifting a bag of rice extremely painful or simply impossible. Other survivors suffered shrapnel wounds from grenades or were injured by landmines that were apparently deliberately laid in fields surrounding Rohingya villages in an effort to inflict maximum harm on Rohingya residents. Some Rohingya survivors who were unable to flee were seized and brutally beaten by Myanmar security forces.

Those featured in this report are the survivors: unlike the at least 10,000 estimated killed in the attacks, these people were rescued by relatives and taken to shelter in surrounding forests or in nearby villages before making the long, dangerous journey to Bangladesh. In most cases documented by PHR, other villagers told victims that Myanmar doctors would report the injured to the authorities, and hence most received little or no treatment until they reached Bangladesh. As a result, they often had to resort to traditional natural remedies for wound treatment and pain relief, such as turmeric, on the days- or weeks-long trek to refuge in Bangladesh. PHR clinicians have concluded that this lack of medical attention often exacerbated severe wounds. Neurological damage was often worsened by delayed surgery, while infections led to amputations that earlier treatment would have prevented.

To date, the Myanmar government has denied scrupulously well-documented allegations of widespread and systematic violence by security forces who targeted the Rohingya. It has
also blocked international human rights organizations and the United Nations Special Rapporteur on Myanmar, Yanghee Lee, from accessing the country in an effort to investigate these allegations. The Myanmar government has likewise made no public mention of the disabilities inflicted upon thousands of Rohingya by the targeted violence of August 2017. The Myanmar government has also failed to acknowledge its obligation to provide rehabilitation and reparations for disabled Rohingya civilians or to create conditions for their safe, dignified, and voluntary return.

The attacks by Myanmar security forces should be investigated as crimes against humanity and recommendations by a UN fact-finding mission to refer Myanmar to the International Criminal Court or an ad hoc criminal tribunal should be implemented. By inflicting indiscriminate injury and thus long-term disability on many Rohingya, Myanmar security forces also violated the right to health and the right to work of their Rohingya victims. Myanmar now has forward-looking obligations toward those Rohingya who were disabled by the 2017 attacks, including guarantees of financial compensation for those who can no longer work; free and comprehensive access to medical services and education; and rehabilitation for disabled Rohingya returning to Myanmar.1, 5

Among the 43 survivors who were left with long-term disabilities were those who had suffered neurological damage as the result of a gunshot wound (27 people); amputations to limbs after gunshot wounds became infected (three); debilitating fractures and lasting pain from blunt-force trauma (four); and debilitating burns and shrapnel wounds from explosive devices (nine).

Salim Uddin*, 18, was shot in both legs when Myanmar security forces attacked his village and now has difficulty walking.

Photo: Salahuddin Ahmed for Physicians for human Rights

Of the 90 injured Rohingya evaluated by PHR, 43 were left with long-term disabilities as a result of the attacks. These disabled survivors came from 19 different villages throughout Myanmar’s northern Rakhine state.

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The survivors with disabilities included 32 adults and 11 children under the age of 18.

Major causes of disabilities

- Neurological injury due to gunshot wounds 27%
- Debilitating and disfiguring burns and shrapnel wounds from explosive devices 9%
- Debilitating fractures and persistent pain from blunt-force trauma 21%
- Amputations to limbs after gunshot wounds became infected 63%
To the United Nations Security Council:

- Implement the recommendations of the UN’s Independent International Fact-Finding Mission on Myanmar, including:
  
  ▪ Investigate and prosecute crimes committed by the Myanmar government by referring the situation to the International Criminal Court, or by creating an ad hoc criminal tribunal;
  
  ▪ Impose an arms embargo against Myanmar until independent international observers certify that the Myanmar government no longer supports or perpetrates gross human rights violations against the Rohingya and other minority groups and vulnerable populations in Myanmar;
  
  ▪ Adopt individual sanctions, including travel bans and asset freezes, against responsible Myanmar officials, including at the highest levels of government and the security forces;
  
  ▪ Support safe, dignified, and voluntary repatriation of refugees only with assurances and international monitoring of safety and individual choice, with explicit human rights protections, including citizenship, for the Rohingya;
  
  ▪ Create a trust fund for victim support, including psychosocial support, legal aid, livelihood support, and other means of assistance.
  
- Convene a session dedicated to the commission of atrocity crimes in Myanmar, with a specific focus on genocide prevention tools that should guide UN policy toward Myanmar in order to mitigate future risks to Rohingya and other groups in the country.

To United Nations Member States:

- Create an internationally-funded mechanism to provide the resources necessary for sustained treatment, rehabilitation, and vocational training for Rohingya victims physically disabled in the 2017 attacks.
  
- UN Member states who are party to the 1948 Convention on the Prevention and Punishment of the Crime of Genocide (“Genocide Convention”) and who have already recognized the crimes against the Rohingya as Genocide – including Canada and Malaysia – should file complaints to the International Court of Justice (ICJ) for the Myanmar government’s violation of the Genocide Convention and press the ICJ to seek reparations.

To the UN Special Rapporteur on Disability and the UN Division for Social Policy and Development, which oversees enforcement of the Covenant for the Rights of People with Disabilities:

- Support the creation of a systematic assessment of the Rohingya population disabled in the August 2017 violence in order to triage the most serious cases for immediate treatment and for longer-term rehabilitation and vocational training with transition to economic dependence and psychosocial support of those individuals.
  
- Urge the government of Bangladesh and UN member states supporting Bangladesh’s humanitarian support for Rohingya refugees to respect their obligations under Article 11 of the Convention on the Rights of Persons with Disabilities, which requires state parties to “ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.”
  
- Urge only safe, dignified, and voluntary repatriation of refugees, including those Rohingya with disabilities, and only with assurances and international monitoring of safety and individual choice, with explicit human rights protections, including citizenship, for the Rohingya, in line with Article 15 of the Convention on the Rights of Persons with Disabilities, which requires state parties to “take all effective legislative, administrative, judicial or other measures to prevent persons with disabilities, on an equal basis with others, from being subjected to torture or cruel, inhuman or degrading treatment or punishment.”

- Urge UN member states supporting international accountability efforts for Rohingya victims and survivors of the August 2017 violence to respect their obligations under Article 13 of the Convention on the Rights of Persons with Disabilities, which requires states to “ensure effective access to justice for persons with disabilities on an equal basis with others.”
  
- Urge the government of Bangladesh and UN member states supporting Bangladesh’s humanitarian support for Rohingya refugees to respect their obligations under Article 16 of the Convention on the Rights of Persons with Disabilities, which requires state parties to “take all appropriate measures to promote the physical, cognitive and psychological recovery, rehabilitation and social reintegration of persons who become victims of any form of exploitation, violence or abuses, including through the provision of protective services.”

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“I could work and run normally before. Now I cannot.... People say: ‘He got an injury.’ I feel bad about that – I used to be a normal person.”

Salim Uddin*, 18, was shot in both legs and still has difficulty walking or working.

“I used to be a hard laborer ... I can’t work now, I can’t even lift the small water pot that is used at the latrine ... I feel so sorry that I can’t use my hand anymore.”

Abu Tayuba* 25, a farmer, lost all function in his left hand after being injured by a landmine when Myanmar security forces attacked his village.
Recommendations continued

To the Government of Myanmar:
- Cease segregation of and human rights violations and discrimination against the Rohingya people.
- Appoint an independent third party to investigate and prosecute human rights violations and crimes against humanity committed during the August 2017 attacks as well as other violations committed against the Rohingya and other religious and ethnic minorities in Myanmar.
- Grant access to United Nations officials, agencies, and other international organizations to investigate human rights violations in Myanmar, particularly in Rakhine state.
- Provide assistance to all Rohingya people with disabilities, including those disabled in the violence of August 2017, including:
  - Creation of a trust fund or other financial mechanism to provide sustained support to those who were injured in the August 2017 attacks and are unable to achieve financial independence as a result;
  - Provision of funding for free and comprehensive long-term access to health care and rehabilitative services, with the explicit aim of promoting vocational and professional rehabilitation; and
  - Creation of return-to-work programs designed for people with disabilities, and full access to and promotion of educational opportunities for the disabled.
- Guarantee safe, dignified, and voluntary repatriation of Rohingya refugees by explicitly protecting their human rights, including with guarantees of citizenship.

To the Governments of the European Union and the United States:
- Expand existing financial sanctions against the Myanmar government and military, and specifically link the lifting of those sanctions to measurable benchmarks – including the end of human rights violations, discrimination, and segregation targeting the Rohingya – and to cooperation with international mechanisms for accountability.
- Expand visa bans and asset freezes to include all senior Myanmar security officials for whom the United Nations Fact-Finding Mission and domestic and international human rights organizations have compiled convincing evidence of complicity in grave rights violations against the Rohingya people.
- Impose broader trade sanctions on specific industries within Myanmar, including imposing the loss of tariff-free access to European Union (EU) markets by revoking Myanmar’s EU trade access via the “Everything but Arms” agreement of the Generalised Scheme of Preferences.
- Impose foreign investment bans on businesses with proven close links to the Myanmar military.
- Support resolutions in national and international fora to protect Rohingya refugees from forced repatriation, and to ensure the safe, dignified, and voluntary return of displaced persons.
- Maintain or expand current suspensions on military relations between Myanmar and the EU or the United States and specifically condition the full resumption of military relations on specific human rights and accountability benchmarks, including those referenced and recommended in this report.

Endnotes

3. According to the UN fact-finding mission, “Thousands of Rohingyas were killed or injured. Information collected by the mission suggests that the estimate [by MSF] of up to 10,000 deaths is a conservative one.” UN Human Rights Council, Report of the independent international fact-finding mission on Myanmar, 12 September 2018, A/HRC/39/64, available at: https://www.ohchr.org/EN/HRBodies/HRC/MyanmarFFM/Pages/ReportoftheMyanmarFFM.aspx.

For more than 30 years, Physicians for Human Rights (PHR) has used science and the uniquely credible voices of medical professionals to document and call attention to severe human rights violations around the world. PHR uses its investigations and expertise to advocate for persecuted health workers and facilities under attack, prevent torture, document mass atrocities, and hold those who violate human rights accountable.

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