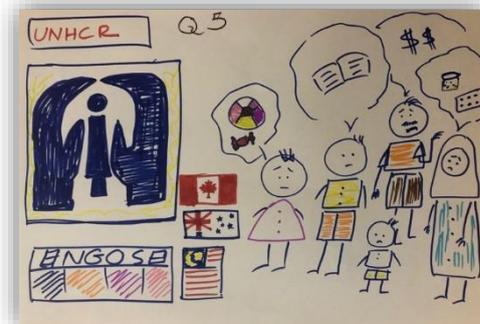
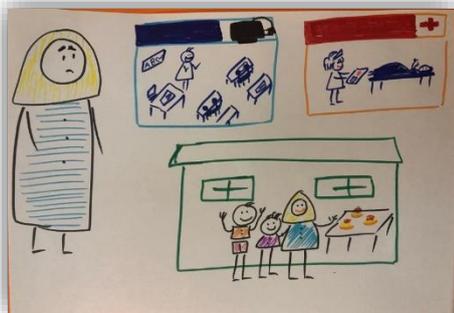
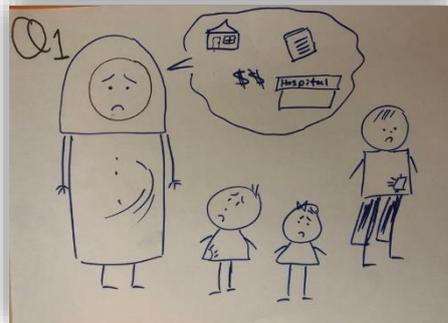


Refugee Women and Girls: Key to The Global Compact on Refugees

KUALA LUMPUR CONSULTATIONS REPORT, SEPTEMBER 2019



**“Man,
woman,
girl, boys,**

government, UNHCR, NGO have to all sit together to solve this problem because none of them can do it alone.” (Refugee women, 2019)

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INTRODUCTION

The Global Compact on Refugees (GCR), is a major new initiative which was signed by the majority of the United Nations Governments in December 2018. It is one of the strongest policies on the protection of refugee women and girls ever adopted by UN member States. Commitments include addressing gender inequality, the meaningful inclusion of women and girls in decision making and leadership and preventing and better responding to sexual and gender-based violence (SBGV)¹. The GCR is predicated on a multi-stakeholder approach, which is aimed at broadening the base of actors who share the responsibility for refugee protection.

Paragraph 13. *The programme of action is underpinned by a strong partnership and participatory approach, involving refugees and host communities, as well as age, gender, and diversity considerations, including: promoting gender equality and empowering women and girls; ending all forms of sexual and gender-based violence, trafficking in persons, sexual exploitation and abuse, and harmful practices; facilitating the meaningful participation of youth, persons with disabilities and older persons; ensuring the best interests of the child; and combating discrimination” (The Global Compact on Refugees, UNHCR, 2018).²*

The Forced Migration Research Network, University of New South Wales, Australia, (UNSW) is conducting an Asia Pacific Region action research project to support the implementation and monitoring of the commitments to refugee women and girls in the GCR. [Refugee Women and Girls: Key to the Global Compact on Refugees](#)³.

Working with local partners, the project is taking place in Malaysia, Thailand, Bangladesh and Myanmar⁴. It is being led by a team⁵ from the Forced Migration Research Network, University of New South Wales, Australia, funded by the Australian Department of Foreign Affairs and Trade. Consultations involving refugee women and other key stakeholders are being undertaken in each site using the UNSW team’s signature participatory research methodology *Reciprocal Research*⁶. The aims of the Malaysia consultations were to explore the situation of refugee women and girls living in Kuala Lumpur and to work with multiple stakeholders to develop strategies for implementation of the GCR commitments to this group. This included a particular focus on the barriers to participation faced by women and the impacts of endemic sexual and gender-based violence. The consultations were held over two weeks in July 2019 and included: a one-day training with interpreters, a five day

¹ <https://www.unhcr.org/en-au/the-global-compact-on-refugees.html>

² For a copy of the GCR with gender commitments highlighted, see [this link](#)

³ For project website see <https://www.arts.unsw.edu.au/research/forced-migration-research-network/projects/refugee-women-and-girls-key-to-the-global-compact-on-refugees/>

⁴ A parallel separately funded project is being undertaken in Australia

⁵ The research team for these consultations were Dr Linda Bartolomei, Adjunct Professor Eileen Pittaway and Geraldine Doney from UNSW, Associate Professor Shanthi Thambiah, and Ayesha Faiz from UM and Rachel Tan from APRRN.

⁶ Eileen Pittaway, Linda Bartolomei, Richard Hugman, ‘Stop Stealing Our Stories’: The Ethics of Research with Vulnerable Groups, *Journal of Human Rights Practice*, Volume 2, Issue 2, July 2010, Pages 229–251, <https://doi.org/10.1093/jhuman/hug004>

training and research workshop with 34 refugee women leaders from 12 ethnic groups⁷, a one day training and research workshop with six refugee men, a one day training and research workshop with UNHCR and NGO representatives, a presentation by the refugee participants to UNHCR and other stakeholders, a roundtable workshop to identify stakeholder commitments and plan next steps, and a debrief and planning meeting with UNHCR and NGO project partners.



“The gates are already open for the women. Women can have a chance to get business owner, own a house, chance to go to university. They have a chance to be leaders, make business. Every girls will have the chance to go school. The last picture is seeing the colourful, brightful future, the rainbow is shining. If men and women got the equality chances.” (Refugee Women 2019)

⁷ Women participants included 8 women from 4 different Myanmar ethnic minorities plus 12 Rohingya women, 6 Farsi speaking women from Iran and Afghanistan, 2 women from Sri Lanka, 2 women from Palestine and Syria, 4 Arabic speaking women from Yemen, Somalia and Sudan.

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KEY FINDINGS

“We are really thankful that we were able to live in this country, breathing—if we were in our country we would have been killed, chopped, burned alive. So we are thankful to be in this country... We are not able to live in our country as we are living here. We are still blessed and thankful to Malaysia. That is another reason why we really want to contribute for that. We also thankful to NGO to UNHCR who help us to stay in this country”. (Refugee Woman 2019)

While expressing their very real gratitude to the Government of Malaysia, the women were also very honest about the problems they face as refugees. As noted above, the focus of the research is on the barriers faced by women and girls in achieving participation in decision making and gender equality and an examination of the role of endemic sexual and gender-based violence on this. It confirmed that refugee women face high risks of sexual and gender-based violence in all aspects of their lives. Participants reported endemic levels of rape, sexual harassment and other forms of gendered violence. This violence is perpetrated in the wider community, in the market, the street, the workplace, educational institutions, hospitals, and at times by the police. It also happens within their own communities.

Women are commonly excluded from any decision-making processes related to their lives. For many, their lack of access to rights in Malaysia is further exacerbated by cultural and religious norms that perpetuate gender inequality, and their limited access to effective justice systems. Although the women in the consultations were invited to participate as women ‘leaders’, they noted that the formal leadership and decision-making opportunities available to them are very, very limited. Their leadership is, in general, at an informal community level, and even in that sphere they described ways in which they face discrimination and opposition. Importantly the women all expressed frustration at being excluded from meetings with people who had power over their lives.

Both women and men living in Kuala Lumpur experience lack of access to a range of human rights related to their lack of legal status and work rights. This leads to a lack of security and limited access to basic needs including safe shelter, affordable healthcare, good quality education, and safe and secure livelihoods. These issues are intersectional, each exacerbating the other.

It was noted that refugees are living in various towns and rural areas in Malaysia and that circumstances differ from site to site. Any solutions, therefore, must sit within a country plan, but be site specific. To enable this to happen effectively all stakeholders must have access to sound evidence-based information, which includes good gender-disaggregated data collection, local program mapping and a skills audit of refugee communities and local staff and considers the situation of the local host community. These will provide a solid basis for planning service provision consistent with the principles underlying the Global Compact on Refugees and underpinned by age, gender and diversity considerations.

Methodology Used in the Kuala Lumpur Consultations.

The 'reciprocal research' methodology of the project was developed by the project leaders over many decades of working with refugee women and girls⁸. The training component of the consultations explored the development of the GCR and its commitments to women and girls, and topics including human rights, gender, privilege, intersectionality, women's participation and leadership, advocacy, understanding structural violence and sexual and gender-based violence. This set the framework for a series of research activities, including an analytical matrix activity and 'storyboards' to document issues related to different thematic areas, the impacts of these issues (including cross-cutting impacts) on diverse groups of women, and potential solutions. Overarching themes throughout the activities and discussions were women's participation and the impacts of SGBV, in keeping with the key commitments of the GCR and the aims of this project. Following a five-day consultation with the refugee women leaders and separate one day consultations with the men and NGO/UNHCR group, the refugee women and men made a half-day presentation to a larger group of stakeholders which included representatives from NGOs, States and UNHCR. The presentation outlined key concerns, and ideas for actions and programs to address those concerns. The NGO/UNHCR delegates and the refugee women and men then participated in small group discussions, to further share their concerns about particular thematic issues and their ideas for solutions. This laid the foundation to start to identify strategies for joint approaches to issues related to the GCR commitments, and potential actions to take this forward in Malaysia.

Intersectionality and Human Rights



Theoretical framework - Human Rights, and Intersectionality.

The Human Rights framework was introduced through a series of graphics illustrating groups of rights, and the discussions were framed in the context of how refugees accessed these rights.

Intersectionality is a theory that seeks to examine how various socially and culturally constructed categories, such as gender, age groupings, race, class, disability, sexuality and other identity labels interact and contribute to systematic inequality. Intersectionality holds that the layers of oppression and discrimination which prevent people accessing their human rights do not act independently of one another. Each type of discrimination compounds the effects of other discriminations suffered by refugee women and girls thus reducing their ability to access many of their rights. They cannot be alleviated by stand- alone solutions. In the training

⁸ For more information see [here](#) or go to <https://www.arts.unsw.edu.au/research/forced-migration-research-network/resources/>

day, women were introduced to this theory through the use of a complex road map, with a major intersection, where roads named after discriminations, such as Sexism Street, Religious Persecution Highway, Patriarchy Place, Racism Road etc crossed each other, and cars caught up at the intersection crashed. They demonstrated their understanding by applying the concept to produce complex and sophisticated analysis of the problems they are experiencing.

Given the strong focus on the importance of an Age Gender and Diversity⁹ (AGD) approach in the implementation of the GCR, the women and men completed an exercise over two days using a matrix as a tool of analysis. They examined the different impacts of eight thematic areas which were: The impacts of SGBV; Barriers to Participation and Decision Making; Livelihoods and Jobs; Education, Protection Capacity; Energy and Infrastructure; and Durable Solutions through the lens of eight diverse groups: Girls 1 – 12, Girls 13 -17 Women 18 – 25; Women 25 – 50; Older women; Women with a disability; LGBTI women and Single women and Single mothers. Their analysis clearly demonstrated the intersectionality of issues for each age group. They were very frank in naming problems and were very clear about root causes, and the structural issues which both caused and exacerbated the problems. While the intersectionality of the issues was clear in all thematic groups, the crosscut of SGBV, and the various barriers to participation across the majority of thematic areas were very stark.

Cross-cuts demonstrating the intersectionality of Sexual and Gender Based Violence (SGBV) and Barriers to Participation (BtP) across the thematic areas. (For detailed analysis see below)

Groups	Girls 0-12	Girls 13-18	Women 19-24	Women 25-50	Older Women	LGBTI Women	Women with Disability	Other Groups?
Impacts and Barriers for thematic areas								Widows Deserted wives, single mothers
Impact of sexual and Gender Based Violence	1.1 SGBV	1.2 SGBV BtP	1.3 SGBV BtP	1.4 SGBV BtP	1.5 SGBV BtP	1.6 SGBV BtP	1.7 SGBV BtP	1.8 SGBV BtP
Barriers to Participation and Decision making – inc. Responsibility sharing	2.1 BtP	2.2 SGBV BtP	2.3 SGBV BtP	2.4 SGBV BtP	2.5 SGBV BtP	2.6 SGBV BtP	2.7 SGBV BtP	2.8 SGBV BtP
Barriers to Education	3.1 SGBV BtP	3.2 SGBV BtP	3.3 SGBV BtP	3.4 SGBV BtP	3.5 BtP	3.6 SGBV BtP	3.7 SGBV BtP	3.8 SGBV BtP
Barriers to Livelihoods and Jobs	4.1 SGBV	4.2 SGBV BtP	4.3 SGBV BtP	4.4 SGBV BtP	4.5 BtP	4.6 SGBV BtP	4.7 SGBV BtP	4.8 SGBV BtP
Barriers to Protection Capacity	5.1 SGBV BtP	5.2 SGBV BtP	5.3 SGBV BtP	5.4 SGBV BtP	5.5 SGBV BtP	5.6 SGBV BtP	5.7 SGBV BtP	5.8 SGBV BtP
Barriers to Energy and Infrastructure,	6.1 SGBV BtP	6.2 SGBV BtP	6.3 SGBV BtP	6.4 SGBV BtP	6.5 SGBV BtP	6.6 SGBV BtP	6.7 SGBV BtP	6.8 SGBV BtP
Barriers to Durable Solutions	7.1	7.2 BtP	7.3 SGBV BtP	7.4 SGBV BtP	7.5 BtP	7.6 BtP	7.7 BtP	7.8 BtP

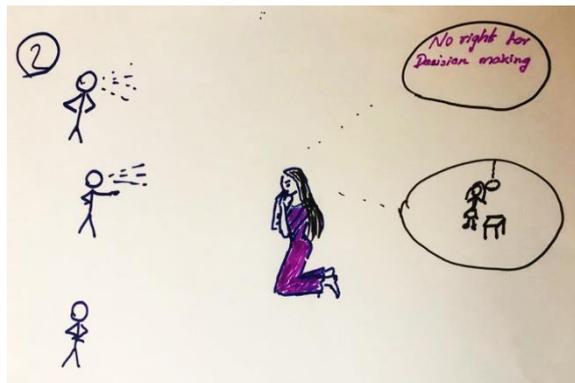
The analysis by the women of the challenges they are facing clearly demonstrate the intersectionality of issues for each age group. It also demonstrates that what happens in one age group has ramifications across other groups.

⁹ For UNHCR's AGD policy, see <https://www.unhcr.org/5aa13c0c7.pdf>

Please Note. Reports from each of the 5 sites in the Asia Pacific will use the same format to enable a direct comparison between each site. As findings emerge from different consultations, there are many similarities in the experience of women and girls, and some things which are specific to each site. To enable a quick identification of these, issues common across sites have been put in blue where issues which are country specific are in black.

Refugee Women’s Analysis of Thematic Areas.

Thematic Area 1 – SEXUAL AND GENDER-BASED VIOLENCE



“the woman is shamed – depressed - isolated - she does not know what to do she only thinks of suicide” (Refugee Woman 2019)

SGBV is an overarching concern that cross cuts almost every age and diverse group in each thematic area. The Matrix above illustrates this, and the intersectional analysis using an AGD lens follows.

Girls 0 – 12

“for the kids, if they are abused physically or sexually ..it will affect the physical development and then it will remain black spot in their entire life ...but when she is older, a lot of people in her environment, women and men will judge her and that will affect her a lot. .. that kind of things happen when we don’t have a safe school, a safe environment. And then, if they are pregnant they will be giving birth at a very young age. It will affect their physical development”. (Refugee woman 2019)

The women relayed many examples of young children experiencing sexual and gender-based violence. This included rape and sexual harassment by stepfathers, in particular when mothers had remarried to seek protection for themselves and their children. They are victims of severe family violence, including watching their mothers being abused. Risks of SGBV for children are increased by lack of parental supervision while their parents try to earn money. The impacts discussed included low self-esteem, dropping out of school, running away from home and poor mental health.

The impact of these problems has serious implications for girl children in their future lives, as they create vulnerability to future SGBV and produce even more barriers to participation in decision-making.

Girls 13 – 17



Forced and early marriage is a major problem, and a major manifestation of sexual and gender-based violence.

"This is a child, and she is playing with a toy. Now she is in and she is playing with her toy. The father is with cane and he say "You will marry a man. And he arranged marrying. But this girl, she didn't know

anything. Her body is not ready for marriage. Now she is waiting to grow up. Now she is crying, when the father cane and she holding her doll because she doesn't know what the father is do." (Refugee Woman 2019)

"So what happened - the girl she got in pregnant. Her body is not ready for pregnant. She is facing body problem. This man he don't love the daughter. Because her father give this man so she don't have any idea about marriage, any idea about the pregnant. And she is a child carrying another child. the man he beating the girl because he don't love. Finally she taking two decision: to make suicide another one to take divorce."



The women described sexual violence in this age group as endemic. Many issues are the same as those for girls aged 0 -12. Girls who are raped and "shamed" often drop out of school and take whatever illegal work they can get to support their families. Levels of sexual violence in these situations are extremely high.

There is also a high incidence of child marriage (including forced marriage) and early motherhood. *"The other thing is dowry And we can say that, it's a kind of selling girls and women. and it is mostly related to poverty. "*

These girls are often deserted by their husbands and left with children at a very young age. Many do not have the skills and knowledge to raise a child, which places their babies at risk. *"They are too young to manage a family."* While early marriage is often attributed to 'culture', the women analysed its structural causes in displacement, including lower access to education for girls. It is exacerbated by the lack of access to government schools, fees in private and community schools and lack of other meaningful activities, high levels of sexual violence, poverty, and the view that marriage is a means of protecting young girls from rape and sexual harassment.

There were many complaints of sexual abuse in schools, by school bus drivers, and by fellow students, who felt they could act with impunity because of the attitudes of their teachers. Women also discussed that when very young girls give birth, the babies were often not documented because of shame. *"that for teenage mothers, when they are not physically or mentally very strong, if they get pregnant they will tend to be more stressed, more*

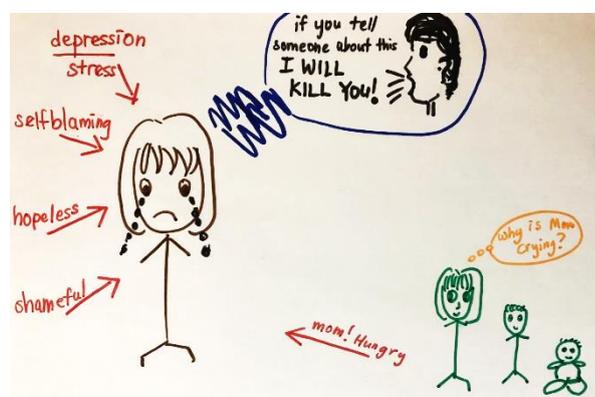
depressed, and sometimes it can lead to suicidal thoughts. They will become afraid of going outside, they will be isolated” (Refugee Woman 2019).

“If something bad happens that they are going to just take it all out on the girl from the family so girls are used for honour killings as well. ...Yes, even here” (Refugee Woman, 2019).

Women 18 - 24

“Some women can sell her body to feed her children because there are no job opportunities. Also ... when a woman faced rape she will be silent, she cannot talk. Because if she talks about that, she may lose her husband, she may lose her children and her community. ...But if she keep on silent she cannot get the solution for this problem SGBV”. (Refugee woman, 2019).

“Women are raped in refugee camps... then when they run, at borders....., then here in Malaysia...in schools...in jobs....in the market... by the police” (Refugee Woman, 2019).



Once again rape and sexual abuse are endemic for this group, and women reported an alarming increase in domestic and family violence. Both married and single women are forced to seek illegal work which puts them in danger of sexual abuse. Women in this age group often have the care and responsibility of young children, and are unable to leave even severely abusive relationships. There is a chronic lack of safe longer- term shelters which means that many women who do flee for safety have to return to the abusive situation from which they fled.

The women also reported lack of access to justice for women who have experienced rape, domestic violence or other gender- based violence, The high level of impunity results in significant underreporting of SGBV.

Cyber-bullying is a growing problem in Malaysia, with men promising to marry girls, taking suggestive photographs, and then threatening to post them online if the girl does not have sex with him. Women stated that when they are sexually abused, victims often just remain silent. Sometimes they choose drugs, or suicide. If they fall pregnant and have the baby some are forced into prostitution to feed themselves. They then don't participate in anything.

Women 25 – 50

“Survivors of SGBV need mental health care. If we go for counselling and are sent to a psychiatrist, there is no counselling - we are given medication...they are handed to us like candy. Women are like dead people – like walking zombies” (Refugee Woman 2019).

Once again, this group suffers from endemic levels of violence including domestic violence. The impacts are depression, despair and sometimes suicide. They also have less access to livelihood opportunities. Many have not completed their education, which makes them vulnerable to workplace exploitation and harassment. If they are widows or single mothers, the reduced food and other rations makes them even more vulnerable to sexual abuse.

Some are forced into survival sex to support themselves and their families. This also happens to younger women. Their houses are not safe.



“and if they run to a shelter, they can only stay one month, and then there is no-where for them to go, so they go back to that toxic place, to the hell” (Refugee Woman, 2019)

Older Women

Older women are often the victims of domestic violence, either directly or as witnesses of violence in the homes they share with their children. Some are seen as burdens by families already struggling to survive, and they are subject to both physical and psychological violence.

LBTI Women

“for LGBT woman, in our culture and religion we really tend to deny and then ignore them in our society. And then for all those cases if you are abused sexually you will have sexually transmitted diseases and there is no cure, you can die”. (Refugee woman 2019)

This is a mainly hidden group because homosexuality is little understood or accepted. As well as being vulnerable to the abuses experienced by other women, they can endure additional layers of violence from the community. Many see it as against their culture and/or religion. Those who are identified as LBTI endure both physical and verbal abuse and shaming. Due to the stigma that they suffer, they are even less likely to seek protection and justice than other groups when they experience violence, abuse and harassment.

Women with a disability

The women reported that women and girls with a disability are stigmatised and discriminated against. They have less access to education and employment than other women and girls, and are consequently very vulnerable to SGBV. They suffer from very high levels of sexual abuse because of these issues. If they need to go out they have to take taxis, and taxi drivers have raped women with a disability. In cases where a person with a severe disability has had a child of rape, they are often unable to care for the child. This affects their mental health and ability to cope at any level. It also puts an additional burden on their family.

Men also reported being raped in the workplace, by “gangsters” and in immigration detention centres. They reported that sometimes when women have to work and leave the children at

home, the boy children are targeted for abuse. This also happens when families are forced to share accommodation with other families.

Thematic Area 2 - BARRIERS TO PARTICIPATION AND DECISION MAKING



“This is the world. This is the Man have a so many chance. They can enter the noble places, can drive the plane, drive the car, they can go everywhere they want to go. women cannot enter in this world. So and then see then observe the women world, the women is very the pregnant, The woman is look after the children.” (Refugee woman, 22019)

Girls 0 – 12

“And the more sad thing is that there is a stigma related to giving birth to a baby girl. If there is a new born baby girl, the family feels sad, they are just feeling dishonoured that we are making a baby girl” (Refugee Woman 2019).

The main barrier to participation in decision making for this age group was identified as the cultural expectation that children should be seen and not heard. There is no expectation that girls would be allowed to participate in decision making.

Girls 13 – 17

Again, there is little expectation that girls in this age group should have any part in decision making. Dropping out of school, early forced marriage and pregnancy also present huge barriers for their participation.

The simple fact of danger of harassment on the way to meetings stops girls participating – their parents do not like them going out alone.

“The more you are left out, the more you become incompetent. ... and the child feel that they don't want to do anything for their life decision. Sometimes because they have been abused kids.” (Refugee Woman, 2019).

Women 18 -24

“Our culture might stop us women and girls to be a leader, but that does not stop me to lead my community, my family and my own self!” (Refugee Woman, 2019).

Women reported that there is a cultural expectation that fathers make decisions on behalf of their daughters, until they are married, then husbands take on that role. They said that this is very hard to challenge, and that women who do are often victims of domestic violence.

Women also take the major responsibly for child rearing, care for the elderly and disabled,

and home duties. This is very time consuming and also precludes them from participating in meetings and training opportunities.

Women 25 – 50



“So here the effects in this picture is represent all ... as a woman. This can impact the woman mentally and emotionally. She has a lot of negative thought, falling into – because mental health is [affected]. Her children are crying and asking for attention. But she cannot do anything because her thoughts are consuming her and her mental health is affecting her” (Refugee Woman, 2019).

“Women are second class – they even have to eat after the men” (Refugee Woman 2019).

The situation of these women is in many ways similar to the women 18 – 24 age group. This puts even more stress on the women to hold the household together, leading to even less time for participation in other activities, even if these were available. They reported depression, suicide and suicidal thoughts.

Older Women

In a reversal of the respect that the elderly would have expected as part of their culture, in the harsh conditions of displacement older women are often seen as a burden and discriminated against. Their wisdom is no longer sought or respected, leading to depression and despair. They are not even considered to have a role in decision making. If they are given a role it is that of child minding while their adult children work.

LBTI Women

Women who are known to be LBTI are stigmatised and marginalised. This places a very big additional barrier to participation in decision making.

Women with a disability

This group is also stigmatised and marginalised. Women and girls with mental illness are ignored, shamed and at times confined to their homes. These situations effectively prevent women with disabilities from any form of participation.

Widows/single mothers

These women experience all of the barriers to participation listed above, with the additional stigma and burden of being a single mother.

Thematic Area 3 - EDUCATION



“If this lady she can follow her dream and she can get education, this has an effect in the family life and children She would be able to work in her own profession, tailor, teacher or, lawyer or doctor whatever it is.... she would be able to enrol her children in a good quality school. And she would be able to bring her children up with a good childhood.” (Refugee Woman 2019).

Education was seen as a major protection measure by all of the women, across all of the age groups. In addition to SGBV and Barriers to Participation, the major cross cuts are with livelihoods and jobs, energy and infrastructure.

“because since young children, female children were told “you don’t have to study”... there is no point...even after marriage she will not get any kind of education because of the same mentality.... Because she is a refugee she is uneducated – because she is uneducated she faces many barriers in her life” (Refugee Woman 2019).

Girls 0 – 12.



“This picture represents a Malaysian school for refugees—they force very young girls from age 3- to 12 to wear hijab, which is not related to Islamic religion, while boys can wear whatever they want. They wear hijab in the school but at home and outside they don’t wear hijab, which affects their personalities—becomes like double personalities. Sad girls in the school; happy and different appearance outside the school. And this will affect to make their confidence, lower confidence, also lead to lower educational level, confused children.” (Refugee Woman, 2019)

Access to education was a major problem for all children and in particular for girls. Where family resources are limited often girls will be withdrawn from schools to assist with household chores while women go out to seek work.

Participants also reported incidents of sexual abuse of young girls in the schools and on the way to school.

Girls 13 – 17

“education is more important for boys than girls. So if our family can afford only one child to send to school, then they will obviously send the boys than to send the girls” (Refugee Woman 2019).

“We want them to go to school, but salary is not enough to pay the fees” (Refugee Woman 2019).

This group faces similar problems to those of younger girls. Girls in this age group (and even younger, as noted above) are often required to care for younger siblings and/or family members with a disability while their parents work, so cannot attend school. Lack of educational opportunities denies girls the protection this affords and contributes to early marriage and a cycle of disadvantage and violence for young mothers and their children. It leads to low self-esteem, loss of hope for the future, working in dangerous illegal jobs, and vulnerability to SGBV. It also fosters a loss of trust in adults in their community and of NGO service providers, who they see as often powerless to assist them.

“Girls miss opportunities for secondary education and vocational training because they are afraid of being sexually abused” (Refugee Woman 2019).

Women 18 -24

Concerns were expressed that women and girls’ lower access to education further entrenches gender inequality. This restricts opportunities to make decisions in their own lives, and to take leadership roles in their communities. Lack of education is a contributing factor to early marriage and its consequences; and in a vicious cycle, early marriage also prevents girls from completing their education.

“For these women, there is lack of any higher education opportunity”. (Refugee Woman 2019).

Women 25 – 50

By the time women reach 25, there is no opportunity for further education, nor remedial education to make up for lost opportunities. This ties women who have not had an adequate education to either home duties or illegal and dangerous work. It increases their vulnerability to SGBV and severely limits the possibility for leadership opportunities, participation and decision making. Participation in training offered is usually not available to these women.

Woman identified that English language is the most important thing for them to get jobs or to have a future but they don’t have this opportunity. They reported that the {available educational} centres are very poor quality.

Older Women

It is generally considered that older women are not able to learn, and there are no educational services to assist them. Women who are preliterate are not able to access written information. This increases their dependence on family and marginalisation and isolation from the wider community.

“As most of these women are illiterate, they need special centres to help them but there is no such chance” (Refugee Woman 2019).

LBTI Women

Unless women in this group are willing and able to hide their sexuality, the discrimination and violence they experience in all areas of their lives will also exclude them from accessing education and the multiple benefits and protection this can bring. Women reported that known LBTI girls are stigmatised and shamed at school, which often leads to them dropping out of school.

Women with a disability

There are few specialist services available to women and girls with a disability.

Single women/mothers

As noted above, single women (in particular single mothers) face extreme difficulties in procuring sufficient food and other basics for survival. They have neither resources nor time to access education, and most often are unable to raise the fees for their children to attend school.

Thematic Area 4 - LIVELIHOODS AND JOBS

Many women do work in order to support their families, but because they lack work rights, the majority of this is illegal and informal. Women take great personal risks in accepting employment. They spoke of the horror of going to work each day, knowing that they were very likely to be raped or sexually abused, but that they had no other option. They stated that many women consider suicide because of this, and some do kill themselves. Lack of access to learning English was a major barrier to work for women who had qualifications in their own language.

In addition to SGBV and Barriers to Participation, the major cross cuts are with education, protection solutions, and energy and infrastructure.

“She is pregnant ..., so she has to go to work. She has to leave the children alone without any supervision, without any education because there is no day care. She is at the chance of SGBV by the owner, by the boss, even though she is pregnant. So this is how these problems affect this woman's life” (Refugee Woman 2019).



Girls 0 – 12

While livelihoods and jobs should not affect this age group, many young girls who are forced to drop out of school do informal work. There are many cases of exploitation and sexual abuse of young girls engaged in this work.

Girls 13 – 17

Many girls in this age group are forced by circumstance to find work. The women discussed the need for income generation and training for girls who are not able to attend school.

Women 18 -24 and Women 25 – 50

“And also refugee women doesn’t report about SGBV cases at workplace because they are afraid that this won’t help because they are refugees and also the employer may blackmail her that “if you report to police they might arrest you because you are working here illegally”. So women have to keep silent” (Refugee Woman 2019).

Older Women

The major work opportunity for older women is to care for their grandchildren. It was mentioned that they are seldom if ever given opportunities for livelihood training.

LBTI Women

Unless they elected to keep their sexuality hidden, stigma and marginalisation excludes LBTI women from training and job opportunities.

Women with a disability

Lack of access to education, marginalisation and structural barriers all combined to exclude women with a disability from job opportunities, even though some of them have high levels of skills and knowledge.

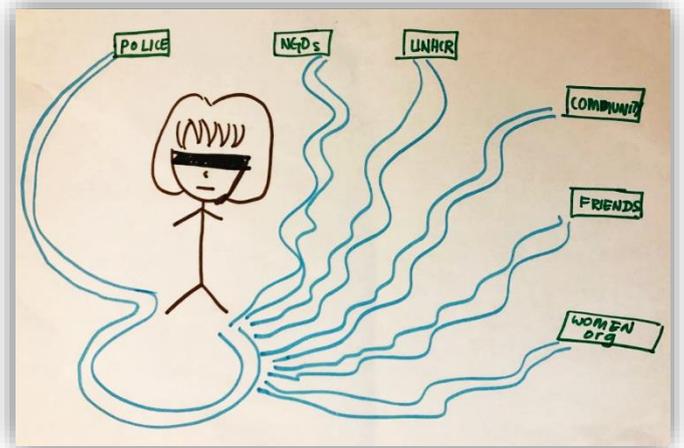
Widows

This group was identified as one of the most impoverished and vulnerable groups, facing enormous challenges to keep themselves and their children alive. For reasons cross cutting all of the themes they were unable to access training or safe and legal jobs.

Thematic Area 5 - PROTECTION CAPACITY

“There is help – but unfortunately, she cannot see because she is blinded by fear, by all the worry and shame and trauma.” (Refugee Woman, 2019)

In addition to SGBV and Barriers to Participation, the major cross cuts are with education, solutions, and energy and infrastructure



Apart from the specific examples mentioned below, the issues discussed in this theme covered all groups, including age groups up to and including the elderly, women with a disability, LGBTI women and widows.

The fact that the Government of Malaysia, despite generously hosting refugees for over thirty years, has still not signed the 1951 Refugee Convention makes the refugees feel very insecure. They requested that a strong case for signing the Convention be advocated to the Malaysian Government, as a pathway to realising more of their human rights.

The women reported numerous examples of lack of access to justice systems and the protection offered. There were also some disturbing reports of harassment and sexual abuse by authority figures leading to a serious under-reporting of SGBV and pervasive impunity for perpetrators. The women reported that they felt that SGBV, in particular domestic violence, was often not considered as or treated as a criminal act.

Finally, the women and the service providers commented on the lack of data, or “evidence” collected on the key issues that affect them. They perceived this as a major barrier to addressing the problems.

Specific issues

Girls 0 – 12

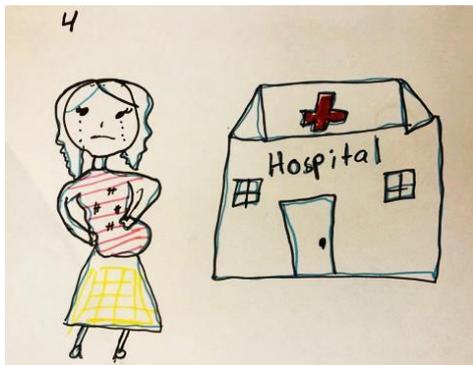
“First I want to advocate for my documents – legal documents which I don’t have.... For me and my children. Next advocate for me is education – the right of education for our children because they are our next generation and I don’t want them to be like us – uneducated!” (Refugee Woman 2019)

Girls 13 – 17, Women 18 -24, and women 25 – 50

Women discussed how lack of adequate protection services and access to justice for parents who suffered from sexual violence often rebounds on children, who witness violence in the home and are often the targets of violence.

“A woman was raped by her violent husband and became pregnant, they could not even feed the children they had, and had no money for healthcare. She went to the hospital and begged for an abortion, and was told “You should have thought about it before you had unprotected sex – so it is your fault and you cannot have an abortion” (Refugee woman 2019)

Thematic Area 6 - ENERGY, HOUSING, HEALTH, FOOD, WATER AND INFRASTRUCTURE



“She is a young girl and pregnant but she cannot afford to go to the hospital.... she has no-where to go and there is no long term shelter for her” (Refugee Woman, 2019)

In addition to SGBV and Barriers to Participation, the major cross cuts in this thematic area are with education, and protection services.

Girls 0 – 12

Unsafe shelter was discussed as the major problem for all age groups including young girls. Refugees cannot afford to rent homes by themselves so are forced to share housing often with strangers. Children left alone while their parents work, and who cannot attend school are at high risk. There are no safe spaces where the children can go to play.

Girls 13 – 17

As above, and it was reported that many children of this age could not attend school because they had to work to assist in providing their families with basic goods. Again this was seen as a contributing factor to early marriage.

“If these girls are raped and become pregnant ... because they are too small and get damaged...often they need to spend a long time in hospital and their families cannot afford this” (Refugee Woman 2019).

Women 18 - 24 and women 25 – 50

Participants discussed problems in being able to get enough cash to survive. They were often requested to provide sex to landlords.

“The owner’s brother asking “you are a refugee, how you are rented the house?”, so she said “your sister already know about this”. So the police offer said “ok you can stay our

house rental period if I ask to sex with me continue you can stay the in the house” (Refugee Woman, 2019).

It was discussed that only having a UNHCR card as identity made them vulnerable to this sort of abuse as the landlords thought they could abuse them with Impunity. They reported that at times they could not get enough food for their families, or medicine or transport. While they did have access to local hospitals, they discussed being sexually abused by guards and medical personnel.

“.. sometimes the Doctors do the harassment – this is really happen”. (Refugee Woman 2019)

Often women could not afford medication and this forced them to take, and to remain in employment where they were being sexual abused but saw no alternative.

“These women are of childbearing age, and there is no affordable health care for them, so things go wrong” (Refugee Woman (2019).

Women reported that there was only short-term shelter available for women fleeing violence. This was also not safe, with many cases of rape and harassment in the shelters. They are advised to go and find a job, but if they do, there is no-one to look after the children. They just have to leave them in an unsafe space while they work. After one month the women have to leave and often return to their abusive husbands because they have nowhere else to go.

Some women are resorting to survival sex as a means to feed their families. It is having an extremely negative affect on family life, and at times causing an increase in domestic violence.

Older Women

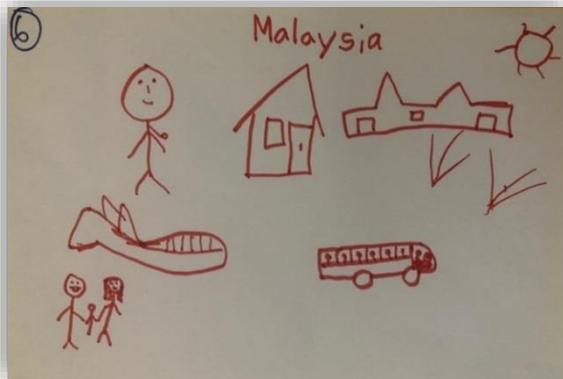
There are no specialised physical or mental health care services available to this group, many of whom have been in exile for years. They have many and often complex health issues but cannot afford to get help

LBTI Women, Women with a Disability and Widows

As already marginalised and stigmatised groups, the participants saw the situation of these women as very similar.

Thematic Area 7 - DURABLE SOLUTIONS

The major cross-cut for this theme for the women was with protection capacity, as an uncertain future looms large in their minds.



“We do not know what will happen to us and where we will go... what will happen to our children” (Refugee Woman, 2019).

Girls 0 – 12 and 13 - 17

Durable solutions for children were entirely in the hands of their parents.

Women 18 - 24, Women 25 – 50, and Widows

Mature women across these age groups reported that they had little choice in major decisions on Durable Solutions. Most married women are dependent on the decisions and status of their husbands. Lack of education and family violence which exacerbate the lack of opportunities for participation in decision making render them silent. Only a small number of extremely vulnerable single women have access to resettlement. All discussed the fear of forced return. Women stated that they are often not given information and that even their fathers and husbands could not access this at times. This leads to rumour, misinformation, myths and speculation, which causes disquiet, mistrust and a sense of hopelessness. Unfortunately, this in turn contributes to an increase in family disharmony and antisocial behaviour. Above all they wanted a place at the planning and decision-making tables, to put forward their analysis and suggestions for the future.

Older Women, LBTI Women and Women with a disability

The participants noted that these very marginalised groups had little or no say in the major decisions which will shape their future. They were totally dependent on the males in their families to make these decisions, and were usually given no information about their options, and what was happening.

Statelessness

Women raised statelessness, or the perception of statelessness, as a key problem which affected women across all categories of not being a citizen of any country.

“We need a document which gives us a state, to be a citizen we are not able to live in our country as we are living here. We are still blessed and thankful to Malaysia. That is another reason why we really want to contribute for that. We also thankful to NGO to

UNHCR who help us to stay in this country. we are really thankful that we were able to live in this country, breathing—in our country, if we were in our country we would have been killed, chopped, burned alive. So we are thankful to be in this country... At least if we have that document we can be standing on our own feet.

Because of not having this document, we are not allowed to work if we request a job we are not accepted, we cannot study, cannot go to school. Because of not having documents, it's hard to survive. It is so many big issue to being undocumented, we are not even accepted in hospitals" (Refugee woman 2019).

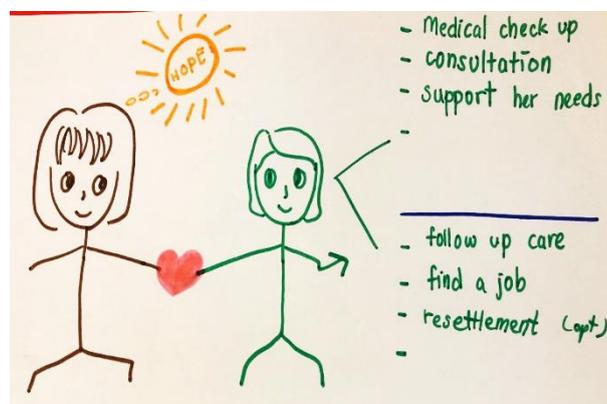
"We are able to bring benefit to this country – we can be contributors" (Refugee Woman 2019).

POTENTIAL SOLUTIONS AND RECOMMENDATIONS MADE BY THE PARTICIPANTS

"We are from different countries and different religions and different traditions, but we all have the same problems as women and girls. By listening and sharing our experiences we learn from each other and that encourages us to be strong and to overcome these challenges." (Refugee woman 2019)

The women suggested a detailed range of potential solutions and recommendations to address problems in each of the thematic areas.

"So what we can do immediate – where she can go when she is raped. ..she is traumatised so we need concentrations. .. we need to support her to see what she needs and what's her vulnerability. For the long-term care, for the time being we have to keep in touch with her and take care of her. Even though she is a survivor, there is still a lot of things going on in her mind that make her traumatised. And then we should find a job for her, that is safe for her to get income to support her family. And then we put the resettlement. Sometimes when you if you are abused it's always dangerous for you, and when they hunt you. It's better when you go somewhere where he cannot find you" (Refugee Woman 2019)



While recognising that the majority of the problems currently experienced are structural and political, and that many of these are beyond the jurisdiction of local stakeholders, women requested that these local stakeholders work in partnership with the refugee women's groups and CBOs to advocate at an international level to seek solutions.

They identified that without some of the intersectional barriers and challenges being addressed, their recommendations alone would not solve the endemic problem of sexual and gender-based violence. For example, child marriage is unlikely to decrease as long as

families experience such deep levels of poverty that they are unable to feed their families and while it is unsafe for young girls to move around in the cities and refugee sites. It will also need the recognition by the community that SGBV and child marriage are crimes and that structures are put in place to ensure that adults complicit in this are punished.

The barriers to participation are similarly interconnected. Without education the women cannot access viable livelihoods, nor can they participate in training that would support their place in the decision-making process. Without childcare for young children, they cannot attend training and meetings even if invited. The need to find food and other essential items for their families consumes their time and energy and hinders participation in other activities. The overarching recommendation from the women was that steps be taken to lower these

barriers to enable them to join in decision making processes about their futures, on an equal parity with men. They requested that UNHCR and NGOs consult with them and make their participation a reality at a local regional and international level.



It was also apparent that without more rigorous data collection about the problems it would be difficult to find sponsors/donors for solutions. Another plea for help across all areas was for better co-ordination of all services.

The solutions proposed by the women crosscut many of the thematic areas.

Recommendations for prevention and response to SGBV

Their suggestions included:



A new system be designed and introduced to ensure that there is a safe place with on-going support for women to report abuse, and to be confident that their complaints will be taken forward to the Thai police and action taken against the perpetrators.

Women's groups and CBOs meet regularly with the UNHCR SGBV Focal Point and service providers to work together to identify and implement solutions.

The community receive training, raising awareness about the dangers of child marriage, that it is a negative protection move, and is against the law.

Programs to prevent child and forced marriage

An effective system be put in place to respond to domestic violence, including training and awareness raising for both men and women.

Support and resources be provided to women's CBOs for shelters and long-term solutions for women and girls who have to leave violent relationships, and that refugee women and girls be leaders in designing and implementing these services. *"We are doing this ourselves; we do not need them to come and do it for us, just provide resources."*

Women-led support group for survivors of SGBV with proper support and training from service providers and UNHCR. (This could also provide an employment opportunity for refugee women, and a skills development program).

Training and awareness raising within communities about the risks of SGBV and ways to address this.

Training of men and steps to build more and stronger male allies for women's rights.

Sex education for refugee girls and for adult women.

Information on referral pathways and channels for immediate responses to SGBV.

Confidentiality training to be provided to community members, also for community workers, NGOs and other officials.

Ensuring coordinated follow-up, counselling, physical and medical assistance, and access to mental health care for survivors of trauma, torture and SGBV.

Safe secure long-term shelters or half-way houses for women and girls who have suffered abuse or who are vulnerable to abuse.

The provision of childcare to enable women to attend training and work.

Strategies/actions for better access to justice systems.

Training and monitoring to end current risks of SGBV from authorities including in hospitals.

Durable solutions for single women in shelters.

For the longer term, women suggested that the root causes of SGBV be addressed. (See Protection Capacity below).

Recommendations relating to Barriers to Participation and decision making

Their suggestions included:



Building on the overarching recommendations from all groups, across all thematic areas, UNHCR and women's groups sit down together on a regular basis to identify problems and solutions, then plan together for future programs and implementation strategies in which the women take an active and equal role.

Women refugee-led organisations and their appointed focal points to be the bridge and link between refugees and the service providers and the appointed focal points in each community.

Adequate childcare centres provided.

Support and actions from UNHCR and NGOs to involve women in decision making, and to encourage/influence community to have women in their own leadership and decision-making processes.

Democratic process for electing female community leaders to ensure gender parity in all leadership structures supported by UNHCR.

UNHCR/ NGOs to involve women in decision making processes, community meetings, government advocacy meetings, meetings with parliamentarians etc. by programming meetings to suit women's work and childcare obligations.

Empowering women through activities such as the Image Theatre program.

Sensitisation training on women's rights and SGBV for UNHCR and NGO frontline staff, health and justice authorities.

Leadership training, and access to all relevant information to enable women to participate and contribute effectively in meetings and other activities must be provided for women on an ongoing basis.

Training programs be designed with the women, and provided to support their participation and gender equality. These must be on-going to ensure that multiple women receive the training and are able to participate as leaders.

Trainings and capacity building for refugee women, including: legal and practical training relating to human rights; capacity building for participation; advocacy skills, computer skills.

Training on the importance of Gender Equality, the human rights of women and girls and the importance of participation be provided to male leaders. This must be positive, and not punitive in its approach.

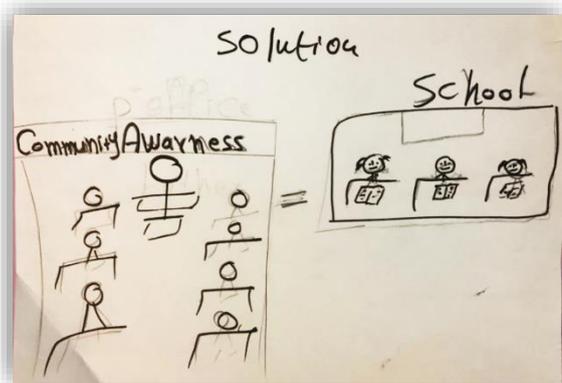
Access for women must be guaranteed at all meetings, with a quota of 50% men and 50% women.

Issues such as childcare, income replacement and safe passage in transit must be addressed to enable women to attend meetings.

Women have to be issued with travel documents and guaranteed return so that they can travel within Malaysia and internationally to advocate on behalf of their communities.

Recommendations relating to Education

Their suggestions included:



“The community and the children and young people have to see that there is some value in school for girls too – if not they will not find the fees”. (Refugee Women, 2019)

Close monitoring of all refugee schools by UNHCR and service providers (to address the very high risk of SGBV).

Provide a proper education syllabus, and support formal recognition of qualifications from refugee schools.

Improving the quality and professionalism of teachers.

Primary and secondary school for all children, and pathways for children with potential for higher education.

The Government be requested to allow refugee children to attend local Malaysian schools.

Advocating for refugee children to be able to attend government schools.

Steps must be taken to ensure that teachers are fully trained.

All schools be monitored to ensure the quality of teaching and the safety of students.

Steps be taken to keep young girls at school as an immediate physical protection measure, and to ensure that they receive the education which has been proven to be the best protection measure against SGBV. This includes a decrease in forced and child marriage.

Recommendations relating to Livelihoods and Job



“We want to work, but... we have no education..... no work rights.... and it is not safe”
(Refugee Woman, 2019).

Their suggestions included:

UNHCR, NGOs and the international community advocate with the Government to grant legal work rights to the refugees.

Women identified safe employment and livelihoods programs as a key to their protection.

More employment opportunities offered by service providers for refugee women.

Identified safe spaces where women might work.

Training on livelihoods skills for refugee women.

English language training for refugee women and girls.

Freedom of movement be ensured to enable refugees take up employment legally.

Support services be made available to identify non-exploitative employment for all refugees.

Employers who abuse and exploit refugee workers be brought to justice.

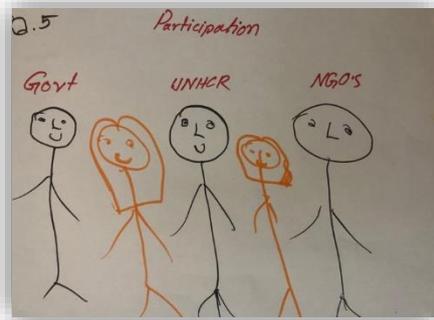
Prevention and protection services are provided for refugee women who are raped and physically abused at work.

More effective livelihood training be provided, linked to viable markets. Small grants and market training must be made available to enable women to start a business.

Protection services (including access to schools) be established to ensure that children are not forced to work illegally in dangerous situations.

Services be established to provide employment and targeted vocational training for people with a disability, many of whom have skills and ability which is not utilised.

Recommendations for Protection Capacity



Without effective protection in its broadest sense women did not see how they could safely be active participants in decision making and advocacy, which they considered as a major part of protection.

Steps to be taken include:

The Government National be encouraged to sign and implement the 1951 Refugee Convention as a matter of priority.

Providing refugees with legal documentation in Malaysia.

Media advocacy in highlighting human rights abuses amongst refugee women.

Teaching refugees how to write and tell their stories (and how to use these as advocacy tools).

Better networking and communication between service providers and UNHCR – not working in siloes.

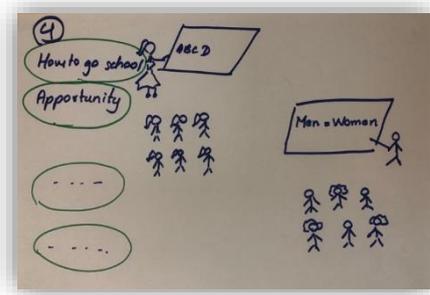
Access to justice is improved through training of local police, and officials in the areas where refugees live.

All refugees who are victims of criminal acts have access to a functioning justice system and to the National legal system.

A concerted campaign be undertaken to ensure that women feel safe to report cases of SGBV and that all perpetrators be prosecuted through the National legal system.

A rigorous system of gender, age, disability and diversity disaggregated data collection be developed for all refugee sites, to identify needs in the areas of education, health, shelter, livelihoods, access to justice etc. incidents of SGBV and to inform responses to these.

Recommendations for Energy and Infrastructure



The women identified insecure housing as a key problem, and that the solution to this is again intersectional. Lack of education, lack of work rights and lack of legal status makes it impossible for refugees to find safe housing.

They requested that all relevant agencies meet together to work out a solution to this problem.

Recommendations for Durable Solutions

The participants requested that the International Community work closely with the Government of Malaysia to identify long term solutions for all communities living in Malaysia, either local integration or resettlement.

That information about durable solutions be shared with the whole community in an accessible manner.

That no-one would be returned to their homeland without security and against their will.

Refugees in Malaysia be given papers which give them legal status until durable solutions are found for them.

Recommendations for Statelessness

The groups who were most concerned about statelessness were those from Myanmar, although the other participants also noted that without any papers they too regarded themselves as Stateless.

They requested that:

[The International community advocate with the Government of Myanmar to bring about a peaceful solution to the conflicts in the country and to ensure a safe and secure return for refugees from Myanmar which includes full citizenship.](#)

The solutions proposed by the refugee women in Malaysia are not unreasonable, nor unachievable, nor even particularly aspirational. They merely reflect their fundamental Human Rights and as such, the International community has the responsibility to address them.

MULTI STAKEHOLDER COMMITMENTS TO ADDRESSING SEXUAL AND GENDER BASED VIOLENCE and BARRIERS TO REFUGEE WOMEN'S PARTICIPATION

In a roundtable meeting on the final day of the consultation process, refugee community members, the Malaysia-based UNHCR leadership team and local NGOs working with refugees all expressed strong commitment to working together to address issues identified in the consultations and to contribute to the commitments to women and girls in the GCR. The different groups identified what they can contribute to this and discussed ways in which actions and solutions could be prioritised in joint discussion with all stakeholders, including refugee women and men.

Initial commitments made by service providers included:

Academic partners:

The team from the University of New South Wales will return later in the year to undertake a series of trainings to be decided by local stakeholders. They can commit AUD\$4,500 to that activity and a wide range of well-developed training modules. They will return for a week in 2020 to provide further support and/or training. They will include advocacy messages from the Malaysia consultations in presentations at the Global Forum on Refugees in Geneva in December 2019 and seek to have the work in Malaysia showcased as an example of good practice.

Professor Shanthi Thambiah from the University of Malaya can provide Gender Equality training and, with the support of UM, make spaces available for meetings and trainings for refugees and service providers. Professor Shanthi will seek further funding for related work from the 'UM Cares' unit at the university that support small funding for community-related work, and from the Centre for the Initiation of Talent and Industrial Training (CITra) which engages in community development.

Non-government organisations:

During a free ranging discussion, NGOs made a commitment to work to provide safe spaces and shelters, and continue to search for organisations who are willing to provide shelter and support services.

They will invite and engage refugee advocates into any existing coalitions and discussions relating to refugees.

There will be follow up with regard to legal action against perpetrators, extending efforts for legal support for refugee survivors, documentation and capacity building within the existing network of service providers, and training and sensitising young lawyers undergoing practical training.

Staff will incorporate SGBV awareness into some of the ongoing trainings with government agencies, hospitals and other stakeholders. They will contribute to training and mentoring refugee advocates (e.g. youth and emerging leaders) to self-represent in parliament and lobbying with political allies. They will work to build on media advocacy and engagement (e.g. continued efforts in identifying allies) as well as an effective communications and media strategy. A program to create awareness on SGBV was discussed. Planning the implementation of outreach about what each agency can provide, what other possible

capacity building trainings can be identified - for example gender training, was suggested and the mapping of stakeholders: refugees, teachers, volunteers, host community was seen as critical.

Developing information and communication materials was also proposed as a strategy to increase local host community awareness of and support for refugees e.g. sharing refugee stories on an online platform to create awareness, with a focus on engaging local neighbourhoods and Member of Parliament.

UNHCR

UNHCR is committed to introducing access to services, information to services, quality services and participation of refugees in key areas of interest. In order to do this, ways to disseminate information will be explored, such as through technology on applications or websites and video messages. UNHCR and NGO partners sat together and developed these recommendations. They included identifying research gaps, developing a joint advocacy strategy and exploring suggestions made by colleagues from the University of Malaya, for formulating a series of roundtable discussions on issues relating to refugees. It was agreed by UNHCR and partners that these were some follow up actions they would carry out together. UNHCR will provide training on Child Protection, SGBV, Gender Equality, Case Management and anything identified by the community (e.g. Leadership skills). Training will be provided to teachers and community focal points, and information disseminated via community learning centres to share information on services available. Research on legal gaps will be explored with the government, and refugees will be included in the conversations. They will explore ways of creating safe spaces for survivors of SGBV to talk and process their issues. Community outreach will be enhanced by involving community focal points and refugee advocates in discussion and meetings. A joint advocacy strategy will be developed with service providers and refugee leaders and advocates.

It was unanimously agreed between stakeholders that there would be a follow-up meeting in a month's time to take the project forward and develop more concrete strategies for implementation of strategies and commitments.

ENDNOTE

Since these initial meetings, UNHCR and NGOs have taken important steps forward, meeting with refugee women leaders, NGOs, and including them in key working groups, and discussions with key stakeholders. Joint Training and planning sessions with UNHCR staff, NGOs and refugee leaders will be facilitated by the UNSW and UM team in January 2020. Details of these activities will be included in the project follow up reports.

Refugees in Malaysia

A context for understanding the issues and barriers identified by the refugee women in Malaysia

Malaysia experienced the first wave of refugees from Vietnam who arrived in boats in May 1975. In the early history of managing refugees, Malaysia established eight camps with the assistance of the United Nations and one such camp was established in Pulau Bidong.¹⁰ In August 1978 with assistance from UNHCR, the Malaysian government and Red Crescent Society hastily transformed this one-square-kilometre island into a refugee camp.¹¹ At the time, Malaysia accepted these refugees with the expectation that they would be repatriated as soon as possible, and Malaysia's current status as a transit country was established then. Since then these Vietnamese asylum-seekers have been repatriated or resettled throughout the years with the last of the refugees leaving Malaysia in 2005.¹²

Today Malaysia is host to a large number of refugees and asylum seekers. As of the end of August 2019, there are some 177,690 refugees and asylum seekers registered with UNHCR in Malaysia. The majority of the refugees are from Myanmar and they number 153,770. About 23,920 refugees and asylum seekers are from other countries including Pakistan, Yemen, Somalia, Syria, Afghanistan, Sri Lanka, Iraq, Palestine, and others. From this, 68% of refugees and asylum-seekers are men and 32% are women. The number of children below the age of 18 is 45470.¹³ The manifestation of sexual and gender-based violence experienced by refugee women and girls have to be contextualised to this skewed sex ratio and the percentage of children in the population (25.2%). The skewed sex ratio of the refugee population in Malaysia points to a context for the prevalence of sexual and gender-based violence.¹⁴ The lack of rights of refugee women in these settings has been well documented. Sexual and gender-based violence is endemic and women remain significantly under-represented in decision-making and leadership roles in the refugee communities and settlements, and in repatriation and peace processes.¹⁵ However, it is important to note that SGBV is not solely experienced from 'within' refugee communities. SGBV is experienced

¹⁰ Tran, Q. T. (2012). Remembering the Boat People Exodus: A Tale of Two Memorials. *Journal of Vietnamese Studies*, 7(3), 80-121.

¹¹ The Vietnamese refugee crisis was a part of the larger Indochinese refugee crisis. For a comprehensive study of this refugee crisis, see W. Courtland Robinson, *Terms of Refugee: The Indochinese Exodus and the International Response* (London: Zed Books, 1998).

¹² Kaur, A. (2007). Refugees and refugee policy in Malaysia. *UNEAC Asia Papers*, 18(1), 77-90.

¹³ <https://www.unhcr.org/en-my/figures-at-a-glance-in-malaysia.html>

¹⁴ Dyson, T. (2012). Causes and consequences of skewed sex ratios. *Annual Review of Sociology*, 38, 443-461.

¹⁵ See Freedman, J. (2016). Sexual and gender-based violence against refugee women: a hidden aspect of the refugee "crisis". *Reproductive Health Matters*, 24(47), 18-26.; Keygnaert, I., Vettenburg, N., & Temmerman, M. (2012). Hidden violence is silent rape: sexual and gender-based violence in refugees, asylum seekers and undocumented migrants in Belgium and the Netherlands. *Culture, Health & Sexuality*, 14(5), 505-520.; Turner, S. (2017). Victims of chaos and subaltern sexualities?: Some reflections on common assumptions about displacement and the prevalence of sexual and gender-based violence (pp. 44-57). New York: Berghahn Books. ; Ward, J., & Vann, B. (2002). Gender-based violence in refugee settings. *The Lancet*, 360, s13-s14.

across all areas of refugee women and girl's lives. There are strong indications of the structural nature of the violence, which women and girls encounter such as at the workplace, in trying to organise living arrangements, and even while dealing with Malaysian authorities.¹⁶

Today refugees do not live in camp settings in Malaysia. They predominantly live in urban and peri-urban areas and are usually living in low-cost high-rise dwellings, which are occupied by working class and poor members of the host community. This presents an immense challenge in the provision of protected and safe space for refugees.¹⁷ Refugees are heavily concentrated in the Klang Valley (Selangor and Kuala Lumpur, which includes Ampang, Gombak, Selayang and Pudu and smaller pockets of refugee settlements in the surrounding suburbs such as Hulu Langat, Kajang, Balakong, Klang, and Rawang). Selangor state and the federal territory Kuala Lumpur are where most refugees reside. Selangor has 66,030 refugees followed by Kuala Lumpur at 27,370. Penang has 18,660 refugees, Johor 14,332, Kedah 12,570, Terengganu 5,780, Pahang 5,630, Kelantan 4,520, Perak 3,780, Nigeria Sembilan 2,670, Melaka 1,990, Putrajaya 450 and Perlis 280.¹⁸ Refugee women in urban settings have very little protection and are left to fend for themselves, often placing themselves at considerable risk.¹⁹

Malaysia has not ratified the 1951 UN Convention relating to the Status of Refugees or its 1967 Protocol, nor has it established a system for providing protection to refugees. Refugees have no legal status and no right to work or legal residency. There is no difference between an undocumented migrant worker and a refugee but generally, Malaysia does not deport such individuals recognised as persons of concern by UNHCR. The Malaysian government initiated a widespread campaign to crack down on undocumented migrants in 2004 and has since reported an "intention to deport more than one million undocumented migrants" through mass arrests. This initiative has led, on average, to the arrest of 700-800 UNHCR recognised refugees each month. This ambivalent policy position by the state is the policy context in which the refugees are living and contributes to the refugee women's experience. Besides that, the safety of refugee women living in urban areas is greatly compromised by their attempts to make a living. For a refugee woman in Kuala Lumpur having a job increases her vulnerability to gender-based violence, arrest, detention, and extortion.²⁰ While the state does not grant refugee status or asylum, it has cooperated with UNHCR and generally does not impede other humanitarian organisations from assisting refugees.²¹ However, this very uncertain policy position of Malaysia on refugees is a contributing factor to the issues and challenges faced by refugee women in Malaysia.

¹⁶ For an extensive explanation please refer to the report "Refugee Women and Girls - Key to the Global Compact on Refugees", by Eileen Pittaway, Linda Bartolomei, Geradline Doney UNSW, Shanthi Thambiah, and Ayesha Mohd Faiz UM (September 2019)

¹⁷ Protection space refers to the extent to which a conducive environment exists for refugees against: threat of refoulement, arbitrary detention, harassment; extent of enjoyment of freedom of movement; access to livelihoods; availability of adequate shelter and living conditions; availability of legal and secure residency rights; and harmonious relationship with host population see UNHCR. (2009). UNHCR policy on refugee protection and solutions in urban areas. Retrieved from <http://www.unhcr.org/4ab356ab6.pdf>

¹⁸ Geographical Map of UNHCR Persons of Concern in Malaysia - <https://www.unhcr.org/en-my/figures-at-a-glance-in-malaysia.html>

¹⁹ Nah, A. M. (2010). Refugees and space in urban areas in Malaysia. *Forced Migration Review*, (34), 29-31

²⁰ 'Desperate Lives: Burmese Women Struggle to Make a Living in Malaysia', Women's Refugee Commission, May 2008: http://www.womensrefugeecommission.org/docs/mys_rep.pdf

²¹ Kaur, A. (2007). Refugees and refugee policy in Malaysia. *UNEAC Asia Papers*, 18(1), 77-90.