Two Wishes.... Many Lives
Ahnu Thutaythana (Arts-Research) Essays
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Acknowledgements

Firstly, we offer thanks to the residents and civil society organizations of Sittwe and Kyauktaw townships in Rakhine State and Paletwa township in Chin State for their participation, allowing the successful completion of the research titled “Rapid Situational Analysis of COVID-19 in Rakhine and Chin States”. This research was undertaken by Enlightened Myanmar Research Foundation (EMReF) through utilizing our collective knowledge, creativity, technical expertise and financial resources. We would also like to offer our thanks and respect to Mr. Markus Kostner for his support to make this research possible. Translation of the essays from Burmese to English was made possible with the financial support from “Everyday Justice and Security Project (Ever-Just)”. We also offer our thanks to Sayarma Mae Udam for her help in enriching and refining the literary value of these essays.

Enlightened Myanmar Research Foundation (EMReF)
Introduction

The first positive case of covid-19 in Myanmar was reported by the Ministry of Health and Sports on 23 March 2020. It happened in a village in Tedim township. After this announcement, everybody in Myanmar was instilled with fear. Covid prevention procedures were being introduced to protect our communities and families. What could be happening in ground zero, in Tedim? The village where the case had been found was the first to face a village-wide “lockdown”, something unfamiliar and unheard of for most of Myanmar. Most houses in the village were placed under quarantine. How did the residents face this situation? How did the first family to be tested positive, considered responsible for introducing the virus to the whole country, face this situation?

This little village in Tedim, being the first to face the hard-hitting reality of covid, suffered much social, economic and emotional harm that many in Myanmar did not hear about. After the announcement stated that the first positive case was a man who had come back from America to celebrate his wedding, his entire family faced blame for bringing virus from the community. The bride also faced criticism and ostracization from the community. Despite not having tested positive, she
became a victim of harassment on social media.

The village residents were the first in the country to experience the necessary but painful measures of containment and prevention such as quarantining away from family and loved ones or being sent to the hospital against their wishes. There were many tensions, conflicts, and quarrels between local government officials, communities and families of covid patients who tested positive. Under lockdown for the first time ever, this little village suffered from food shortages on top of the initial fears that plagued them. Many reported that any admission of being from Tedim prompted everyone, including those from Yangon, to react with shunning them.

Not many people were aware of these happenings. The real situation in Tedim may be worse than what can be described here. The only way to know is through researching the effects of Covid-19 on society. In times of crises, what is happening on the ground can be worse than what most people can gather or guess. Usually there are challenges that most people could not even imagine.

The nation and its people need to be informed about these conditions as they try to offer help to their struggling fellow citizens. We thus set out to shed light on the predicament, needs and hopes of people caught between covid-19, the current armed conflict between the Arakan Army and the Tatmadaw and the long-standing communal conflict between ethnic and religious groups in Rakhine State.

The research was conducted through phone interviews with residents in Sittwe and Kyauktaw townships of Rakhine state and Paletwa township in Chin state during the second half of August 2020. The 38 respondents were staff of civil society organizations and residents of six villages and six IDP camps.

The research report is accompanied by this compendium of literary short stories as part of the
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arts in research project. The short stories were written by researchers from Enlightened Myanmar Research Foundation based on case studies and conversations they had conducted during the study. Main research findings are portrayed in the form of three short fiction stories and one non-fiction story.

“Convergence of Goodness” by Lu Chi and Thang Sorn highlights the importance of cooperation and communication between government and civil society organizations in their response to covid-19. It is a comparison of results where cooperation was present and where it was lacking. The meaning behind ‘Convergence of Goodness’ is that individuals with a sense of ethics, diligence, kindness and empathy who work in organizations that follow ethical and moral rules can change the lives of those who suffer for the better. When all these conditions are met, everybody stands to benefit.

‘Tears’ by Lu Chi paints a stark portrait of the oppression and difficulties Rohingya, who identify themselves as Muslims, face as they are navigating between a pandemic and a civil war. They have been living here for generations, perhaps centuries. Still, whether required by discriminatory local laws or imposed by other people, they are deprived of the freedom to move freely and other human rights. Yet, they are willing to share with these people in similar need whatever little they have. Courage and faith keep them going.

Sar Mo's ‘Bridging the rift’ exposes the effects discrimination by society has on covid-19 patients and their families through the eyes of a Rakhine family. It portrays how individuals, out of fear of societal blame, try to take matters into their own hands by self-prescribing treatment for their illness instead of consulting health officials. “Bridging the rift” shows us that in a society that discriminates, people struggle to attain emotional security. Only through the collective understanding and
support from the rest of society can we fulfill the needs of other human beings.

Thawng Za Pum’s non-fiction ‘Two Wishes.... Many Lives’ is a researcher’s personal reflection on the daily experiences and feelings of people in the thick of civil wars and covid-19. Through quotes from research interviews Thawng lays bare how we all exist within the same time zone and live under the same sun and the same moon, yet those caught in a conflict, with their livelihoods threatened by disease and starvation, are at a point of desperation where they can no longer even remember what it was like to lead a normal life.

We hope that presenting our research through creative means will help readers to understand the predicament of people who are caught between wars and covid-19, and who find themselves in a struggle about ethnic identities. Imagining themselves in their shoes, we hope readers will be prompted to help to care for those in dire need of empathy, justice and protection.

With love and respect,
Myat Thet Thitsar
Editor
Convergence of goodness

By Lu Chi and Thang Sorn
Mai Khin Mar Shein is a Chin woman who works as a program manager for a civil society organization in Sittwe. The organization’s usual legal education activities are currently on hiatus due to social distancing measures. Instead, they are currently providing volunteer work as a community organization to prevent and treat the coronavirus disease.

The second wave of Covid-19 hit the country hard within a short period of time, with the number of positive cases in Rakhine State on a steady incline. Sittwe, its capital, has one of the highest case numbers in the country. As such, within the first week of the upsurge, Mai’s team donated and distributed masks as well as hand sanitizers around Sittwe’s May Yu and Myoe Ma markets and the town’s quarantine centers. Additionally, U Htin Lin, the head of operations, applied for a grant to offer aid to the community.

The Arakan Humanitarian Coordination Team (AHCT), a coalition of six different civil society organizations, has been able to provide effective assistance to all 14 quarantine centers in Sittwe during the coronavirus’ second wave. They work hand in hand with government offices in Sittwe and help other local organizations to get in touch with donors and deliver aid, and for general management.

When applying for the grant, U Htin Lin chose two towns that were still without Covid-19 aid or volunteers,
If the grant was approved, they would follow the example of the AHCT to structure and organize their own project. They soon received the good news that their proposal was supported and financed by the Metta organization. It was decided that Mai would be the person to spearhead the project.

The first thing Mai did when the approval came through was to meet U Nyunt Khine, the leader of Kan Ni township, to discuss how they could begin their activities. She found that the quarantine center could barely qualify as one. It was effectively a building merely labeled a quarantine center; people had to get there on their own and bring everything they needed with them. There was nobody to monitor who was going in or out. The facilities were poorly managed and the patients were left dealing with problems ranging from meals to lavatories.

So, in her first meeting with U Nyunt Khine, Mai proposed that they would provide four volunteers for the quarantine center for 24 hours in 14-day shifts. Additionally, they would provide amenities from mattresses to hygiene products so that patients would no longer have to bring their own. The government would merely have to provide two police officers for security from 6am to 6pm as well as two rooms in the quarantine center, for storage and as a volunteer dormitory.

U Nyunt Khine asked if Mai had a letter of appointment letter from the state minister. Mai responded that it would simply take too long to process a request letter through the minister’s office and wait for a reply. It would be a hindrance for addressing the urgent needs of the people at this critical moment so she would not submit a request. All he could say in reply was that he’d

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¹Not the real names of the two towns and township administrators
take time to think about it.

While waiting for his response, Mai and her team did their best to provide as much aid as they could at the quarantine center. They provided each patient with three bottles of drinking water and five bottles of nutritious drinks every day; in addition, they gave each a mattress. However, they could not begin the planned 24-hour assistance to patients without approval from the government. The quarantine center still lacked government healthcare workers and security at the gates. The township’s interaction with the quarantined was limited to daily visits by healthcare staff of about half an hour to an hour before promptly leaving.

Three weeks later, there was still no response from U Nyunt Khine. So, Mai paid him another visit. She proceeded to cover the same points as before and added that she wanted to install Wifi for the patients in the quarantine center. He replied yet again that he would ask people at the top for approval and then get back to her. It was now almost the end of October and there was still no response from him.

Mai and her team continued to do what they could without cooperation from the government. One day, the lavatory facilities were so overused and under-maintained that the sewage system was blocked and overflowed. Finally, Mai received a call from U Nyunt Khine, asking for her help. She helped to organize a vacuum truck to fix the problem. Still, there was much else left without maintenance. The bushes in front of the center were left to grow so big, they became a breeding ground for mosquitoes. Thus, with U Nyunt Khine’s approval, she arranged for the overgrowth to be trimmed.

One morning, on their usual trip to the quarantine center to distribute water and nutritious drinks, Mai and the team found out that a woman had gone home the
night before because she was too scared to sleep at the center by herself. She had snuck back in in the morning. The quarantine center was actually a converted high school building. It’s a big building and when there aren’t many patients occupying the space, it can be scary for those easily frightened. Mai felt bad for the woman.

Mai was worried that, without any management, or presence of healthcare staff, patients were free to come and go as they pleased. Some even gathered in large groups to socialize. Though the lavatories were separated between male and female, there weren’t any actual measures taken to prevent the further spread of the virus through better hygiene. Regarding these issues, Mai’s team had already offered help and donors had provided aid, but just because U Nyunt Khine wouldn’t give the green light, they were not able to carry out these tasks. It broke Mai’s heart to now witness this situation. By the end of October, there were already 30 positive cases and 100 people under quarantine in this small town.

While the situation with Kan Ni brought disappointment due to a lack of cooperation between the government and Mai’s organization, the experience in Gyun Swel proved to be more hopeful. In this town, the township administrator, U Khine Win, and the public health official happily cooperated with her team and valued their assistance and input.

Here, Mai and the team were able to provide four volunteers for 24-hour assistance at the quarantine center. They could set up barriers between patients for proper social distancing, and also provided blankets, pillows and mattresses. Whatever they could not provide, the AHCT was only a call away, ready to help. Wifi was installed so patients were able to watch videos, read up on the news, and pass time without having to spend money on 3G; this helped the patients deal with
boredom and loneliness to a degree. Additionally, the police department provided three police officers from 6am to 6pm for security.

Mai’s organization was not able to provide food for all the patients. However, they were in touch with donors and managed to gather about half of the food the patients needed. On days without any donation, volunteers would go out three times a day to buy takeaway meals and snacks as per the patients’ requests.

While Mai could not be present at the quarantine center all the time, she was in daily contact with the volunteers and tried to tend to all the needs and requirements. She spent much of her time seeking out donors. Although they were supposed to be working from home because of Covid, those days were rare for Mai.

But Mai is happy. Though some people might not recognize or value the work they do, there are others who do. However miniscule her impact may be, Mai is happy that she is able to help those in need; especially during a global pandemic like this one. U Khine Win also looked happy and satisfied that he was able to help his people. He even took the initiative to ask Mai if they could continue their work in Gyun Swel after the pandemic was over.

Mai thought about the two towns in comparison. In Gyun Swel, with an administration willing to cooperate, in the end it was all the people in town who benefitted, not just those in quarantine. Because of better health provisions and center management, they won’t even know how much they were able to protect the people from the dangers of Covid. The benefits that the country and society can gain from a healthy and strong population are invaluable. And this is only possible through more effective prevention and protection, civil and government action, and social safety nets.

Then U Nyunt Khine entered Mai’s mind. Couldn’t
he see how there was so much to be gained from cooperation? Even if he hadn’t thought that far, wouldn’t it bring him satisfaction to help those in need? Was this not happiness for him? Mai was glad to hear that a simple act such as tending to the bushes outside the center helped the patients to deal with the mosquito problem. Likewise, she felt second-hand happiness from U Khine Win who felt joy through the people in his quarantine center being safe and satisfied. So, this made Mai wonder why U Nyunt Khine wasn’t the same.

Mai was plagued by questions. She thought to herself, “I’m someone who could be happy just by attending to the needs of other human beings. It would be a nice world to live in, if there were more people who found happiness in helping others in need. I guess it depends on each person. It would have been great if U Nyunt Khine was someone who enjoyed helping to fulfil the needs of others.”

“But wait! Just because someone had the will to help others, does this mean she will be successful at it?” She asked herself why was she able to help the way she did.

These things aren’t possible through the sheer will of someone wanting to help others. It needs to be a collaborative effort from everyone involved. Just look at the activities of Mai’s organization related to Covid-19. To help those in need, they needed more people, more money, more ideas, better technology. Without the help of international organizations and Metta, they would not have had adequate financial backing. Even once they had the money, to get it to those most in need they still needed to figure out where to they would direct the help, to whom, and what exactly the people needed. This concerns ethics and operating standards on the part of organizations like Mai’s. Her organization needed to practice proper ethics by having a clear idea and goal of whom they wanted to prioritize, and which

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needs they were going to prioritize. Only then were they able to provide help effectively.

Without such ethics and discipline, Mai’s organization wouldn’t have been able to fulfill the needs of the people it wanted to help. Mai felt proud that her group prioritized helping the disabled, elderly, women and children on top of their general goal of helping those most in need. But, she wasn’t just saying this because it was her organization.

After much reflection, Mai is very thankful to the AHCT and U Khine Win. Because of their help, Mai and her team were able to carry out their work effectively. The key to successful work is true collaboration. Wherever Mai’s team is, they work with people on the ground. Mai learned the importance of good team work and good networking in this project. It was evident that a network consisting of the community and civil society organizations helped them to resolve the challenges that they could not predict ahead of time. For example, when they notified the AHCT of the lack of food and other urgent needs at the quarantine center, the AHCT immediately spread the information through their network so that they could pull through.

One time, Mai saw donations from a group called “Taingyinthar brothers and sisters from regions across Myanmar” spearheaded by youth in Natmauk in Magway Region. She felt joy thinking to herself, “Wow, there are many others like me who find happiness in helping others.”

It so happened that at that time, a quarantine center in another town that was caught in the civil war was requesting donations for mosquito nets, medicine and food for pregnant women and children. Mai decided to give them the leftover budget from their project without requesting approval from U Htin line and her finance manager beforehand. She didn’t want children
to suffer from dengue fever on top of Covid-19 simply for not having mosquito nets. Unfortunately, the money they had left over was not enough to cover the needs. So, she went through the AHCT’s network to pass on the request for help. Within hours, she found donors. Mai was grateful to the donors who had given money without ever having met her. She was also thankful to her head office for giving her the discretionary decision-making power to direct the funding to a cause that was not part of their project. U Htin Lin was understanding, and patient in writing up a report for the use of this funding.

After deep consideration, Mai found her simple answer.

To help those in need, you need people who have the will to work together to help. For that help to reach those in need, many invisible factors need to converge and fall into place. And because all these invisible factors fell into place in Gyun Swel, the needs of the people in that quarantine center were satisfied. And the quarantine center in Kan Ni at least avoided a major sewage spill and a mosquito infestation.

For these reasons, Mai is happy.

Mai is certain that the “Taingyinthar brothers and sisters from regions across Myanmar” will be happy for the same reason.
Tears
By Lu Chi
Part 1

“Oh no Rawhein.... where did you hear the news? Are you sure you heard it right? The schools are closed yet again?” says Halima, Rawhein’s wife, between tears. “Yes, I just got a call from the school official. Apparently, there’s an increase in positive covid cases in Sittwe so they’ve shut down the schools again. I heard that U Khine Soe has just called Mohammad Jakel to shut down all the schools and group gatherings in the village.”

A mother of four, Halima isn’t crying because she fears her children will have to sit out the school year. Since the outbreak of intense communal violence in Rakhine in 2012, Muslims aren’t allowed to travel in and out of the village as they had done before. Under no circumstances where they allowed to travel to Kyauk Taw town and other Rakhine villages. Muslim children were also disqualified from public school registration. The youngest are still able to attend elementary schools in the villages. But middle school and high school students have to travel to Swel Taw, a neighbouring Muslim village, to attend private school. Swel Taw village is over an hour boat ride away from Shwe Taung, Hali’s village. Students have to board either in the school dormitories or stay with relatives. Wherever they choose to live, a single student’s living costs amount to 200 rice baskets per year.
Halima and Rawhein have four children. The eldest son is 17 years old and currently in 10th standard, the 15 year-old daughter in 8th standard. The second daughter is eleven and in 4th standard. The youngest son is only four years old. The two eldest live in Swel Taw village, attending their respective school. Hali and Rawhein pay 400 rice baskets per year for their living costs. They've only just recently paid the first instalment of 200 rice baskets. Since they aren't going to a public school, the parents of the students also have to pay the teachers’ fees. Tuition fees for both children amount to 100,000 kyats per month.

“Please don’t cry Hali, we’re not the only ones going through this. The whole world is having to deal with this.” Hali replies between her tears: “Rawhein, you know that the 200 baskets of rice were all we had. Do you think they’d return them to us? I don’t think they will but we don’t have any more. The kids are going to come back home and we’ll have nothing to feed them. It’s not like we can leave the village either. There aren’t any jobs. So just let me cry! Even if it’s only for a little while.”

From 2012 to 2019, Hali’s family had been receiving 15,000 kyats per person per month in aid from the World Food Programme. For the family of six, they received 90,000 kyats per month. That money was helpful in supporting the children through school. However, as of 2020, Hali’s family is no longer eligible for this aid. Regardless, Hali and her husband decided to invest what little money they had in their children’s education, especially since this is their eldest’s final year in school.

Hali was not expecting the schools to shut down again. They’re not able to stay updated with the news frequently enough to make plans efficiently. The family owns a single mobile phone and it’s mostly used for voice calls. Due to poor internet connection and their inability to afford a high phone bill, they don’t have the
faintest idea how bad the pandemic is.

Hali herself quit school after 8th standard so she was able to learn how to read and write adequately. She was still able to attend public school so there was no extra cost other than simple living expenses. She lived with distant relatives, and didn’t have to pay the whopping 200 rice baskets in fees per year. Things are surely different nowadays.

Rawhein understands her pain. Hali is the person who manages what they family eats every single day. Of course, she is concerned. What should he do? Whenever he sees Hali’s defeated face, he feels compelled to do something. He just wants everything to be okay. He wants Hali and the children to be safe and free from worries. But it seems like the situation is only bound to get worse. It’s been a while since he had last witnessed a smile on Hali’s face.

The next day, Rawhein leaves for Swel Taw to bring his son and daughter back home. He travels with other parents of students residing in Swel Taw.

The students’ parents talk about getting reimbursed for the payments they made. However, the children aren’t all boarding in the same place, so they have to negotiate with multiple people. Although it looked as if there was some hope at the beginning of the conversation, in the end, it doesn’t amount to much. After all, the parents aren’t staying overnight and these things take time to discuss and negotiate; preferably in a better setting. People like Rawhein are only allowed to take day trips and it’s especially hard in times like these when there are thorough conversations to be had. Even this trip was only possible because it’s for his children’s academic purposes and between two Muslim villages. After arriving at Swel Taw, the parents negotiate with the dormitories and hosts. Except for promises of discounts for the next school year, they come back empty-handed.
The dormitories and hosts had an unfair advantage over them as parents feared that speaking up would leave their children with no housing for the next year.

The three of them return home. Rawhein and their eldest son Rafi start fishing in a stream nearby to secure some income. Though they are fearful of both war and covid, they have no choice but to continue working in order to feed the family of six. Mohammad Jakel, the 100-household head, has given out a government order to stay at home but they don’t have any choice. For people who live on a daily wage, going without work for a while means starving. And what little money Hali and Rawhein had saved was spent on the trip to Swel Taw.

Hali rarely has healthy moments. Her health remains unstable; one day it’s hot, another day it’s cold. She suffers from hemorrhoids, too. She has to be very careful with everything she does and eats. She cannot do anything physically demanding and cannot afford much mobility. She often consults with Rawfait, the village quack doctor, over her condition.

By the end of August, the whole village came down with the flu. Hali was one of them. Eventually, it seemed the whole family caught the flu from Hali and it wasn’t long before they were all intensely ill. Rawhein felt an overwhelming sadness. They had nothing at home that even came close to medicine. He thought, “it would be nice to have at least one paracetamol.” Even if he couldn’t treat the whole family, he wanted to at least treat their youngest. Watching his whole family suffer from the flu, he thought, “Just send all their pain and suffering to me.” Rawhein questioned, “Could covid be the silent killer from which we’re all going to die? I wonder who may be the first to go.” Along with these thoughts always came tears.

Rawhein hates that he is unable to provide his wife and children with a treatment. What should he
do? Where should he seek help? His thoughts were interrupted by a cry from Hali: “Rawhein, the children’s temperature is rising. Please do something!” Rawhein no longer knows how to console Hali. He has nothing more to say. He doesn’t have the answers. But in his heart, he cried along with Hali as he let out a big sigh. After three days the two of them and the three older children got better without any treatment. Meanwhile, the youngest one remained as sick as before.

Mohammad Jakel had called U Khine Soe, the village tract leader, to notify him of the village’s collective health condition. U Khine Soe, in response, sent a nurse stationed in a nearby village. Rawhein’s eyes once again showed a glimmer of hope. He paid a visit to the nurse to consult her. Meanwhile, Hali readied the youngest boy to be taken to the nurse. It wasn’t long before Rawhein was back, looking defeated. Hali asked, “What happened Rawhein? You don’t look too happy. Did the nurse leave? Tell me what’s going on!?”

“Hali, the nurse told me she is charging patients from 15,000 to 20,000 kyats for treatment and medicine.” Hali was out of words. All she could do was to hold her youngest son on her lap as she rocked back and forth, putting him to sleep and looking at her eldest son. She wanted to let out a big cry. Instead, she uttered, “I’m right here my son. You’re going to get better soon.” Was she reassuring herself or her son? All she knew was that she could only feel a deep, all-consuming pain. Even Rawfait had stopped receiving patients as he himself was ill and out of medical supplies."

“What should we do, Rawhein. I guess we could sell two of the chickens that are ready. Let’s sell them and go to the clinic.” "Hali, whom do I sell them to? No one in the village will be able to afford them. And it’s not like we can leave this village." Hali remained still for a very long time, and then suddenly exclaimed, "Wait, Rawhein. One
of my friends from school, Hla Hla Yi, told me to ask for help whenever I needed it. I'll try to ask her if she could help sell the chickens.”

Hali called Hla Hla Yi and explained the family’s predicament. When she called, Saw Mya, another friend from school, was nearby. Her friends, both Rakhine, offered Hali a loan to get her son treated at the clinic. However, their village was a half-hour boat ride away from Hali’s. They said they were only able to come by late in the afternoon as their husbands were using the boats for work. Hali was desperate as her son was now having loose stool. Hali and Rawhein waited patiently beside their son for Hla Hla Yi’s phone call. When she called, she asked Hali to meet them halfway at the jetty as it was already getting dark. Hali rushed to the jetty as soon as she got off the phone. When she reached the jetty, Hla Hla Yi was already there. Saw Mya had come along, too.

"Hali, have you been well?" Saw Mya asked. “Yes, I'm feeling better. I’m just worried about my youngest son since he’s showing signs of diarrhea now as well,” Hali cried as she answered.

“Hali, if you fall, who's going to take care of your children? You must be strong. You were the bravest of us all! Where did all that courage go?” That made the three of them laugh.

Hla Hla Yi handed Hali some food, “Here, Hali, some soft drinks for you and snacks for your son."

Hali didn’t even get a chance to offer her thanks before Hla Hla Yi went on, “You look really worn out. Here, have a sip”, she opened the bottle and handed it over to Hali. But Hali couldn't finish her drink. “Hla Hla Yi and Saw Mya, please come by the house whenever you feel like it! Thank you so much for your help but I've got to hurry to the nurse to see if she’s still in the village.”

Hali quickly bid farewell to her friends and hurried
away, clutching the 20,000 kyats in her hand. When she arrived at the village elementary school, the makeshift clinic, she was met by Mohammad Jakel who told her the nurse had gone for the day. The next day, she was finally able to take her son to the nurse and slowly, the boy recovered.

Hali is in charge of managing what little money they have to plan meals for the family. Since they were spending more than what they were earning, they had to switch to cheaper rice. While it is cheaper, it is also tougher and incompatible with Hali’s health condition. One day, Hali found herself feeling uncomfortable sitting, standing or lying down. As she bled, she changed into one longyi after another until there she had no more. The pain was becoming unbearable. Hali wished she was dead. “Rawhein, I think it would be better if I just died”, she admitted one day. But Rawhein wasn’t going to give up on her, “We must go to the hospital.”

Hali refused. “I’m not going. What money have we got to go to a hospital? Just bring Rawfait to the house.” Rawhein fights, “We’ve been seeing Rawfait and you haven’t gotten any better. I’m going to go into the village to see if I can get a loan from someone.” Rawhein set off to the village looking for anyone who would lend him some money. He managed to secure 17,000 kyats from distant relatives. Finally, Rawhein had to pawn his fishing gear and boat for 150,000 kyats. He also had sold five young chickens to visiting vendors from a nearby Rakhine village for whatever price he could sell them for. He made 30,000 kyats from that transaction.

Out of options at this point, he had to send his oldest son Rafi away to work for his cousin on his fishing boat.

As soon as he had some money in hand, Rawhein proceeded to get in touch with other people in the village that were ill in hopes of sharing transportation to the hospital. He found three other sick villagers to
go with Hali. There were 8 travellers in their group in total; four patients, each with a companion. They asked Mohammad Jakel for help in getting in touch with a broker who could assist with acquiring the necessary travel documents from the immigration office. Whenever someone from Rawhein’s village was in a medical emergency, they would go to this broker. The broker is Muslim as well. He in turn goes through another broker, a Rakhine, to get Form (D) from the immigration officer citing medical reasons. To apply, one has to notify the officer exactly how many people were travelling and for how many nights. The broker charges 25,000 kyats per person. Even then, one might not get the papers right away; usually it takes 2-3 days.

You could say Rawhein and the group were lucky. Just a day after they put in the request, they received a call from the broker instructing them to wait on the road at 10 am the next day. He will send a car. By the next day Hali’s condition had worsened and she could not walk herself to the meeting point. Her son and husband had to support her the whole way through. The patients and their companions waited on the main road. The car finally arrived 30 minutes late. Hali struggled to hold herself together as she clutched her husband’s hand tight in excruciating pain. The morning sun seemed especially hot today, even though it was only mid-morning. Without any trees or shade around, it was as if the earth was mocking Hali with the heat.

The other travellers were in a similar situation as they had also waited till the last possible moment before they decided to go to a hospital. As such, they too were moaning in pain on the road. The broker showed up on his motorbike 15 minutes before the van did. When the van arrived, the travellers were ushered into the car, along with the broker. Once everyone was settled, the broker handed out their papers as he collected the
25,000 kyats per person; 4 lakhs in total for everybody. The broker took the cash, got off the van and rode away on his motorcycle. Rawhein and Hali journeyed on to Sittwe Hospital with their travelling companions. They will be taking the same car on the way back.

The roundtrip cost 50,000 kyats per person. So, the couple had paid 1 lakh in total for the two of them. They were lucky to have only paid this much. Without the rest of the group, they would have had to pay 2.5 lakhs for the ride. There was once a time when Rawhein could go to Sittwe whenever he wanted and only paid 5,000 kyats per round trip. After 2012, that was all gone. For people of other ethnicities, it remains the same; 5,000 kyats per person for a roundtrip to Sittwe. But for people like Hali and Rawhein, extensive documentation and costly private cars are required nowadays.

xxx

Part 2

Rawhein and Hali returned back home. Rawhein was worried about all the debts they had racked up. The pawnbrokers were kind to them. Their mutual ethnicity had gotten them a loan without interest. But if he loses his boat and fishing gear, the only things of value the family owned, he will have no way of earning an income independently. Rawhein had to borrow his own fishing equipment from the pawnbroker to fish in the stream. Now he had to spend more time fishing than he normally did. Since it was the season to fish nga tha lout, a species that fetches a high price, and there weren't a lot of other fishermen out due to the monsoon, Rawhein and Rafi's efforts were well worth it. Rakhine vendors occasionally visit Shwe Taung to buy fish and other goods so they were able to earn at last 10,000 every day they went out fishing. With all the fish they were able to catch in

Tears
early September, Rawhein expected that he would be able to buy back his equipment by mid-September. Though the pawnbroker had been doing them a huge favour, he could not rest well. Within 10 days since Hali had been released from the hospital, he was able to pay back 50,000 kyats with only 100,000 kyats remaining. Just as he gained some momentum with work, however, another problem loomed on the horizon.

That day, after a day's work, a shower and dinner, they heard gun shots in the distance. The whole village erupted in fear. The gun shots sounded not more than a mile away from their village.

A total of 174 houses in Shwe Taung village were burned down in 2012. Thus, any indication of fighting, gunshots or fire is enough to set villagers off on a frenzy. The mental wounds are still fresh from the previous time they were hit. At the first sound of gunshots the children understood the danger and ran straight into the arms of the fathers and mothers. There was no need to look for them in the chaos. The whole village fell into a deafening silence. The villagers ran to hide in shelters they had dug themselves for emergencies just beside their houses. At around 8:30 pm, after half an hour of continuous sounds of war, they learned that a neighbouring Rakhine village had been burned down. Rawhein heard the woeful cries of women and children.

The weather that evening was good. The sky was clear and blue like the sea; there were no clouds. And just like that it was engulfed in colossal flames and ash. Rawhein sat in the ditch as he drifted away into thought. It felt as if his feet were off the ground, his body floating in the air. His head felt heavy and his vision blurry. “Is it coming to us? My kids.... my kids... What do I do?” If Rawhein dies, it will be Allah’s decision. But he cannot be gone from his children's' lives that are already without a future. Likewise, if they had all gone and he was the only
one left, what would he have left to live for? There isn’t much Rawhein could do but pray to Allah Almighty for the flames to vanish. Hali was crouched beside Rawhein, covering their baby’s ears as she recited prayers.

It seems their prayers were heard.
They were safe for the night. But still, they were now unable to continue working. They didn’t dare go anywhere, not even to the stream for work. Now what should they do to stay alive?
A few days passed and Rawhein and his son could no longer stand by in fear as the family starved. They headed out to the stream. Hali suggested that they find work as daily labourers for someone instead. She was against fishing in the stream since she had heard rumours that there were mines laid there. She managed to convince them not to go back to the stream. But even people with money aren’t hiring labourers like they used to. Since covid-19, there aren’t any job opportunities in the Rakhine villages either.

Usually people came to the village to look for daily labourers to work in their rice fields. They even provided transportation.

However, Hali was right. In early October, a person was wounded in his leg from a landmine hidden in a stream. Now Rawhein and his eldest fear the stream.

Since the beginning of 2012, people have lost their lives, livelihoods and belongings to communal violence. Thousands sought protection in camps, and remain there to this day; others fled across the border to Bangladesh. To make matters worse, the authorities instructed those who stayed behind not to leave their village, and not to contact those in the refugee camps on the other side of the border. Thus, the whole village spent the next years without anyone going in or out of the village. And once again between 2016 and 2017, Muslims suffered enormously at the hands of the
security forces. Was this not their country as well? Did they not have the right to live where their forebears had lived for generations? Hoards of people had to run from the rampage to seek refuge in Bangladesh. Muslims who remained in Rakhine State found themselves either in displaced persons camps or under lockdown in their own villages.

By 2018 things started looking up again as some Rakhine vendors started to pursue their trade in the village. Rakhine business owners came to gather workers for the fields during harvest season, ensuring their safety. Some Rakhine ethnic leaders were preaching peace while keeping check on some others with strong nationalist sentiments. Likewise, Muslim leaders told the youth to be patient and avoid any sort of conflict as best as they could. Basically, they should follow the herd. They were finally transitioning from tensions with their Rakhine neighbours to friendlier relations.

Now, with conflict raging between the Tatmadaw and Arakan Army since early 2019, Muslims like Rawhein and Hali are again caught in the middle – caught like a fish between two bamboo logs, as a local saying goes. If the army came today and recruited them to fight the Rakhine, they would not be in a position to refuse. This in turn would lead to renewed hostility between them and the Rakhine. If the Arakan Army came and recruited them to fight the Tatmadaw, they would not be able to refuse either. This could lead them to be killed by the Tatmadaw. Right now, the army has troops stationed temporarily in Muslim villages. Rawhein and his family spend every day filled with anxiety.

He reflects on his circumstances: “We really are at the bottom of the chain. We have neither rights, nor opportunities. Even when we are sick, it is difficult for us to seek treatment. We aren’t recognised as an ethnicity of this country so we are relegated to second-class
citizen status. Are we left to be oppressed? When there's a war, we're just collateral. It feels we are valued less than animals.” Rawhein isn’t mournful having been born a Muslim. If his isn’t recognized as an ethnicity of this country, that’ll be fine, too. He merely wants his right to lead a dignified human life. He wishes he could push all the fear and barriers far, far away. He wants the freedom to go wherever he wants, whenever he wants. When he is sick, he wants to go to a clinic of his choice at any time. He wants to travel, perhaps even go on a holiday with his family that he loves so dearly. He wants to sit with his friends and discuss matters that are important to him – of community, of business, of their children's future – without raising any suspicion of something more insidious ... so many things. Rawhein feels a deep pain in his heart especially when he sees the sick elderly and the children who are stripped of their rights since their birth. Rawhein doesn’t know when his prayers will be heard. But he has faith that his tears will send a message to Allah Almighty.

Lu Chi
Bridging the rift
By Sar Mo Wah
“Eat more, you need the strength.” It was only when I heard my mother’s frail voice that I was reminded that I was eating. These days, my mind and body are disconnected. My body is eating but my mind is elsewhere. But I wasn’t the only one with wandering thoughts. The rest of the people at this dining table were also off in their own worlds. It used to be a lively table where we’d all have to fight to get a word in. Even if I had nothing to contribute, I was entertained just by listening to mom and aunty Nge updating us on the village gossip. Or to Baba’s updates on world and domestic news. Chay, my younger sister, is the quietest of the bunch. She only socializes with people in the house. She is disabled since a young age when she caught polio so she doesn’t know many people outside the family. And even within the family, she has a very quiet demeanor.

Today, sitting at this table, all you could hear were the clink-clank noises of the four of us eating. There was nothing anyone wanted to talk about. In all honesty, everyone knew what each of us was missing without having to say it out loud. Baba was our main supporter. Not just to us. He was also someone for our distant family and our community to lean on. He was always there to help out with a big smile on his face. But right now, instead of being by his family, he was by himself
at the hospital. I wondered whether he was eating well. Was he comfortable? There was nothing we could do except to think of him.

I remember that morning clearly. It was a Saturday so I was lazing around in bed when I heard my mother call out my name. I ran out through the front to check and saw Baba lying flat on the lounge chair. He said he was uncomfortable, dizzy and short of breath. My mother wasn't sure what she could do for him except to fan him and offer him an inhaler. My aunt couldn't do anything but stand idly by her brother, confused. In the end, we had to prepare to take him to the doctor in the neighbouring ward.

When we arrived at the clinic, my heart dropped when I discovered that the doors were closed. I looked towards the neighboring property to ask, “Hello! We have an emergency patient. We'd like to see the doctor. Is he here?” Someone came out of the house and told us that all the small clinics in the neighbourhood were closed. Any emergencies should head straight to the hospital. Right. Several positive cases of Covid-19 had been found in Sittwe recently so I should have figured out that this would be the case. So, we took off to Sittwe General Hospital with mom and Baba. As soon as we arrived at Sittwe General, we told the doctors about Baba’s status. Only then did I realize that we were too caught up in the moment to remember to wear masks, let alone gloves. The hospital staff took Baba to the ER while the family had to wait outside. The hospital staff were all dressed in PPE gear.

I lost track of how much time had passed. A member of staff eventually came out of the ER calling out Baba’s name, looking for his guardian. I quickly ran over. Baba’s condition was stable now but because his symptoms indicated that he had contracted Covid-19, he had to be quarantined as a suspected patient. The doctor in
charge explained everything to me and my mother but I wasn't sure whether I really understood any of it. He concluded by telling the two of us to go home and wait for further news. Mom and I walked out of the hospital with heavy hearts and heavy steps. Not a word was spoken all the way home. We were both lost in our own thoughts. When we arrived back home, aunty Nge and sister Chay asked where Baba was so we told them that he would have to stay at the hospital until we heard more from them. The mere thought of wondering what the results will be was too stressful.

On the third day, the mobile phone that Baba had left with us delivered some bad news. They had confirmed that Baba was a Covid-19 carrier and he had now been quarantined at Sittwe General Hospital. We would also have to be admitted to a quarantine center and needed to get ready to be picked up.

I've read news and stories on Facebook of instances like this but when you have to go through it yourself, it feels very jarring. The whole family was shaken by the news and we were lost on what to do with ourselves. When it was time, first responders in white suits came knocking on our door. The four of us carried our bags and stepped out of the house to find that the ambulance was surrounded by a big gathering of people.

Our neighbours, close friends of my mother, were gathered to watch us. Nowadays, since everyone has a mobile phone, we lost count of how many photos were taken of us. Another neighbour, Ma Ma Hla Nu, was a Facebook celebrity and influencer. Unsurprisingly, she went live on Facebook and updated her followers about the news surrounding our family. Mom’s and aunty Nge's faces looked like the sky had fallen on their backs and they were doing all they could to not fall apart. This was the first time in their lives that they encountered
something as scary as this. It was as if we had done something so horrible and unjustifiable; something so unforgivable. I could not even hold my head up. I just wanted to scream at the driver to please just drive off.

Once the car pulled out of the driveway, all the emotions I had held back came flooding through. I was in tears; mom and aunty as well. Chay had it worst. She needs assistance to do most things since she was a young girl; she must have been feeling so helpless. Would we be allowed to stay together when we got to the quarantine center? How would our living arrangements be?

We were placed in a unit within the quarantine center for patients who had had direct contact with a positive patient. The center was converted from a state gymnasium. I was glad that we were at least allowed to be together while we got tested for the virus. The next step was to wait for the results. I heard that our swab tests had to travel all the way to labs in Yangon. If they had those facilities here, I guess we would have to spend less time waiting in anxiety.

The food and living conditions were okay. The regional government and civil society groups in Sittwe helped us with food, water, and electricity. Thankfully, there was no shortage of donated food. But I did hear some people complain about inconveniences with food and the living quarters. Aunty said, no place can be as comfortable as our own home. But mom told her that this wasn’t the priority right now. Our priority were our test results.

After waiting for four days with heavy hearts, a staff member came to us with good news: all of us had tested negative. I was so happy I almost jumped up to dance with joy. The whole family felt as if we were finally freed. All there was left to do was to pass the next 14 days uneventfully at the quarantine center. We were able to get in contact with Baba at the hospital as well. His
condition was returning to normal and the last time they took a swab test, it came back negative! We were so happy. Finally, we were receiving one good news after another. As the saying goes, there is always a calm after a storm.

We were the happiest once the day came for us to return home. Mom, aunty Nge, sister Chay and I left the center happily after bidding farewell to our quarantine neighbours. We came home in the same car that had brought us there. But as soon as the car pulled into our driveway and we stepped out, our neighbors promptly ran into their homes and shut their doors. We were able to hear some of them talk about us, “Why did they send them back home? What if the rest of us catch the virus from them? The whole street has to be closed off because of them. What troublemakers! They really should not have come back.” What a harsh welcome to come home to.

All we could do was to enter our house speechless and feeling small. The healthcare workers had instructed us to quarantine at home for seven days and said that they would come to visit us every evening to do regular testing. Staff from the ward office would also pay us regular visits so that we wouldn’t have to worry about food or anything; there were volunteer groups that will be helping us out.

Once the staff had left, we all quietly shifted to attending to our own matters. Even Chay who had been the most excited about going home whispered to her mother quietly to carry her to bed. The house went quiet on the first day of our return and never came back to life.

The other day, aunty Nge seemed quite fed up with staying indoors and asked the healthcare worker who was doing her usual evening round, “Do you think I could go into the garden to gather some flowers for the prayer
shrine in the mornings?” She replied with a laugh, “Of course, aunty Nge! It’s your own home, why not!?” Aunty seemed pretty happy to hear that and the next morning she got ready to collect some flowers. She put on her mask, grabbed her scissors and basket and headed off to the garden towards the Zawlone plants. Just as she was cutting some flowers, she heard whispers from outside the garden, “How could they come back home? The one who’s in the hospital will probably come home soon, too. We need to be stricter about not letting him back into the neighbourhood or all of us will catch the virus from him.” Hearing this, aunty could no longer tend to her flowers and instead headed back into the house in resignation.

From that day on, the whole family did not dare leave the house. We spent all our time thinking about what we would say the next time we hear, “Your whole family should move away. Don’t live here anymore.” None of us could tell Baba any of this since he was only just starting to get better. Otherwise, it might get in the way of him regaining much needed strength.

The saying that goes, “You can shut a thousand bottles quickly but you can’t shut people’s mouths”, cannot be more true. Recently, I don’t even know how they had heard about it, mom’s family back in her hometown was calling to ask about our situation. What happened? Where did we catch the virus? What are we eating? How are we living? And of course, they also told us not to come visit them just yet even after we had gotten better. Is their village immune to covid or something? Are there no other possible sources of infection?

I wonder how many other families are going through the pressures of their environment the way we did. I ask myself over and over, what had I done that was so wrong for the neighbours to treat us this way? Why are they
so suspicious, so poorly informed? Who would want to get this virus on purpose? It was enough trouble for me and the whole family to go through this. Shouldn’t the community be gathering around those who are weaker? To give them warmth and support, and to help them to fulfill their needs? But instead, I feel like they’ve been creating even more problems for us.

For as long as I have been staying home, my friend Nu Nu Nge has been calling to keep me company and give me words of support. She told me not to feel bad and that this was how people were. I have been garnering more strength through our daily conversations. She lives with her older sister who is working at a private bank in Sittwe. Their parents were back home in their village three hours away from town. One day Nu Nu called me in her usual free time. I could hear her sister coughing in the background, then she called Nu Nu over for help. Nu Nu told me she had to do something now and that she would call me again another day when she was free. The next day, she didn’t call.

I waited for her call and thought to myself that she was probably just busy. I called her back three days later and she picked up the phone but only to say that she was busy right now and would call me back when she was free. Another three days later, she called. I could tell that she was trying hard to sound normal but that she was actually feeling low in energy and short of breath. I asked, “Are you well? You sound like you don’t have much energy.” She just brushed it off, “Nothing, it’s fine. I’m just tired.” There have been lockdowns and stay-at-home orders everywhere because of covid so what could she possibly be doing that would make her tired? “We’re close friends. You know you don’t have to hide anything from me,” I told her. Finally, she confessed.

Nu Nu told me that she had been staying home but her sister had been going to work every day. One day they
started to feel covid symptoms: loss of smell, coughing, an itchy throat. They didn’t want to go to the hospital or a quarantine center so they didn’t tell anybody about it. When asked why, Nu Nu said they didn’t want to be ostracized by the community the way we were. Another reason was that they heard that the living conditions in the quarantine centers were not pleasant. The two sisters thus decided that they were going to quarantine at home and self-prescribe some medication.

After speaking with Nu Nu, I thought about how many people like her were in our towns, neighbourhoods, and villages. What are they going through? Are they just going to lose their lives helplessly like that? Or, after self-prescribing medicine and if for some reason they start feeling better, will they self-diagnose themselves as recovered and start going back to work? What kind of consequences would this have? How are these issues being addressed?

Baba is finally home and in good health. Whatever people in the neighbourhood said, we are used to it by now. Baba’s family in Yangon gave him praise and considered him a hero. They told him how lucky he was to be able to return home and how impressive that was. Sittwe is now a big covid hotspot and the regulations have become stricter. Other states and regions have also started to adopt restrictions towards people from Rakhine and for people who have travelled to Rakhine State.

Since the beginning of June, the number of positive cases in Sittwe dwindled and it was a mere one or two patients every day. So, most people were just going out and about like usual. But in mid-August, a single patient from Sittwe with no international travel history tested positive. And then one by one, starting from Sittwe, the
whole of Rakhine State was overwhelmed with positive cases. Of course, people criticized Sittwe as the source of the virus.

Before the new cases started to take off, the whole country seemed to think that we were never going to be affected by the virus that badly and people started to travel again. Sure, the surge of cases happened in Rakhine. But it’s not like the people here did it on purpose, to spread the virus to everyone else. I don’t think the media should be portraying the situation as if the virus was born and bred in Rakhine.

Baba’s family in Yangon calls us every day to update us on their situation. Abaung, Baba’s mother, went to Yangon to be treated for her health condition. Now she wants to come back home to Kyauktaw but because her NRC starts with (14/) she isn’t able to buy any travel ticket. The number (14/) on our NRCs indicates that we are from Rakhine State. Apparently, other NRC holders are still able to travel as usual. So, I guess, they think that our NRCs automatically correspond to us Rakhine being carriers of covid. I think, if the intention is to prevent the spread of covid, everyone in the country should be required to make the same effort, not just the people of Rakhine State.

Why should we be victims of hate speech and other abuses just because there were positive cases found in our hometown? How will they make reparations for the damage and the pain that they inflict on us with this kind of oppression? For our lack of security?

Our Rakhine State has been facing many difficulties and much pain as of late. We face a never-ending civil war while covid gives us its own set of problems. Baba used to say all the time, “We Rakhine people will protect our home as long as we are able to do so.”

And now, while the fires from covid are burning brightly in Sittwe, the fires of war keep burning in Baba’s
hometown in Kyauktaw. Abaung cries every time she hears news about fighting in Kyauktaw. Just recently, I heard that two villages close to Sittwe were burned down and the residents had to flee for their lives with nothing but the clothes on their back. Since there was nowhere to run to, they had to find refuge in monasteries and camps in town.

The flames of war don't just affect one single person but whole villages, townships and groups of people. The worst side effect of war is starvation. I'm not sure what the people who are fighting are eating and drinking but the people caught up in the fighting are facing a huge shortage of food. Abaung's family has been going around to neighbouring villages seeking food donations.

Donors are ready to lend a helping hand in a time of need, regardless of ethnicity or religion. Muslim villages near Kyauktaw have been very helpful in providing food. They themselves have been subject to restrictions and survive thanks to aid from the WFP and other donors. Yet they are still generous and share the little they have with others who seek donations from them.

I've witnessed many instances of kindness and empathy. I've seen the support that people offer to each other in times of need. But I've also suffered from harassment, and I don't understand the reasons. Why do we build rifts between us? What does it matter if someone adheres to this faith or identifies as that group? Aren't we all human beings? Equal before the law? So, I believe that if we work together and help each other, even if little by little, we can successfully overcome all these differences.

Sar Mo Wah
No two lives are the same. We give meaning to life based on our unique individual, lived experiences. With these, each of us shapes and defines our lives, based on where we live ... and how we’re given to live.

In Paletwa and certain parts of Rakhine State, there are lives caught in the middle of both a pandemic and a war. Like that saying, “buu lay yar payone sint”, like “out of the frying pan into the fire”, they have to run from war, yet covid is telling them to stay at home. So, what should they do? Should they rely on logic – what logic? Or be motivated by fear?

Everyone is saying that they should stay at home to do their part in stopping the spread of the coronavirus. But why are people burdened by war in a time like this? Why are they running for their lives instead of being safe in their own homes with their family?

The rule of thumb in war is simply to survive. For people living in times of war there is a choice to be made: hide, or leave home and run for your life. When will the next battle take place? And how? If and when it happens, where will they go? When do they go? People
living in these conflict areas in Myanmar have become all too familiar with these questions, with facing this anxiety every day. We who live far away, in safety, feel compelled to imagine ourselves in their place, seeing it, hearing it.

A virus is an invisible and intangible silent threat. In contrast, war is something that people cannot only witness with their eyes – the lifeless bodies of people and animals and the charred houses and belongings it leaves behind. They also hear its deafening, numbing noise. Between these two dangers, the world is a place void of safety and shelter.

I have seen these war-torn and disease-ridden lives portrayed in a multitude of ways; in literature, photos, videos and other annals of war. But hearing their accounts first hand is another matter. It’s not that they aren’t scared of covid or the war. It’s that they aren’t sure which to be scared of more.

“Covid is scarier. With a virus, you never know where, when, and how you can contract it. If you are infected and you haven’t been quarantined, your whole family, your entire village, will slowly but surely catch it and your relatives, your neighbors might die from the disease. At least with war we usually know ahead of time so we have time to run,” one woman explains in a displaced persons camp.

Depending on their personal situation, some people are equally scared of both. “We’re scared of covid. We are also scared of the war. What little life we’ve had has been difficult and harsh. Between the two of them, I am suffering physically and mentally. If they both could just go away!”, another woman cries.

If they had to choose which between them is the bigger threat, most would choose war. It’s not that they aren’t scared of covid, but they understand that covid will not bring an immediate threat to their lives the same
way that bombs, bullets or landmines do. Once a village is hit by a bomb, the fire kills indiscriminately between humans and animals. It destroys homes and crops. Even if one doesn't face death right away, one could become disabled for life. That would bring even greater problems in the future.

Even in death, covid and war aren't the same. If a person dies from covid at a quarantine centre, there are people who will take care of the body. At the very least, they will bury or cremate it.

If a person dies from war, the surviving family will have to worry about the body. Would they even be able to find and recover it? Even if they had somehow managed to get the body back, who would cremate it for them, and where? Could they get killed in the process of trying to retrieve the body? They're left full of anxiety and uncertainty.

The people facing war and covid at the same time bear too many burdens. They need to confront the harsh reality of their lives brought on not only by violence, but also by a worldwide pandemic. A thin line separates their fates. Hailing from the same village, facing the same struggles, some are able to make it to a quarantine centre or displaced persons camp while others are left to fend for themselves – searching for shelter and hoping for safety there, or continuing to run in spite of all the obstacles.

“There's a probability that you will recover after contracting covid but the physical and mental wounds of war are hard to heal and here to stay with us for a long time.” These are people who have to sleep with one eye and one ear open for any indication of the next fight. It doesn't matter whether it's day or night. As soon as someone opens fire between Arakan Army and the Tatmadaw, they are on the run. It is especially difficult for pregnant women, young children and mothers.
There are so many suffering. Those who successfully made it to a camp and those who weren’t as lucky – each with their own unique experiences. Those at the camps say they don’t want to go back home. Do they not want to go home or is there no home to go back to? Their homes have effectively vanished; their houses brought down by fire and their brothers and sisters struck down by bombs and bullets. Even after the war and pandemic are over, their future will remain uncertain, and void of hope.

Those who are stranded in a war zone and lockdowns are left clueless; unable to get to a quarantine centre or displaced persons camp. They aren’t sure where they would even run to. The camps are unlikely to admit newcomers due to covid. They can’t reach the outside and the outside cannot reach them. They aren’t able to make a living so there’s also the added fear of possible starvation. With so much anxiety and uncertainty, they are relegated to a life of alternating between hiding and merely trying to survive. Those who have been in hiding for a long time have even forgotten what it means to lead a dignified human life.

Take a look at residents of Paletwa town. The people who managed to reach a camp at least have access to food aid through the World Food Programme. The majority of the residents who still remain in town, however, risk starvation as road closures and lockdowns caused by covid and the war are causing food shortages. Road closures increase the cost of goods sold in town while some of the food already rots on the way there given how difficult it is to reach Paletwa. Even if you had money, it wouldn’t guarantee you food. A single packet of instant coffee mix cost 200 kyat before the war. It is now 500 kyat per packet. Even then, there isn’t a lot of stock going around. If only the authorities opened the road to Sami. But the reality is, rather than opening the road they’ve built even more barriers and gates. To
get through, you need approval from the immigration department with documents. Most people don’t even know where to obtain those papers. Authorities say one thing but reality is another. With the roads closed, the future is something many don’t dare think about.

In the camps there is food to eat and it should be okay for the time being as long as the World Food Programme is providing rice, oil and beans. But, there is still much to struggle. Just listen to this one woman:

“The experience of living in the camp can change quickly based on the weather. In the monsoon season, the flood reaches up to here and fills up the entire space beneath the house. If you leave your house, it’s like walking through a pond. Once the sun is back out, the water in the puddles evaporates and the smell of the dirt is so foul and intense it’s hard to tolerate. When it’s time to cook, everyone cooks together in the same kitchen. There is so much smoke trapped in there, you wouldn’t be able to go five minutes without tearing up, like your eyes are popping out. You can’t stay in there for very long, you have to go in and out, in and out.”

“I never want to hear the sounds of guns and bombs again. All we can do is keep asking for the fighting to stop. About covid, at least it seems like eventually there will be treatment. After all, it’s a global pandemic. But this war is something that can only be resolved by those who fight it. Please help bring peace to this country”, laments another woman.

In these conflict areas, residents cannot afford to worry about covid. For them, questions like “What do I do? When could I die from these bullets? When should I run? Where do I run to? How do I run?” plague their minds every day. How long must it have been since they got a good night’s rest.

In Myanmar, in the same time zone, under the same sky, we all go through the cycle of day and night. But
for the people living on the fault line between covid and war, the days and nights are vastly different from the rest of us.

They count those days and nights ... waiting for the day when hope for a better future can be felt again, praying “Please stop these senseless wars,” and simultaneously praying that a new vaccine be developed and given to everyone as soon as possible.

This is the reality of their lives.

Thawng
Recommendations

This list of recommendations is based on feedback from respondents.

Communication and Cooperation

To assist and aid citizens who face the dangers of violent conflict and covid-19 – ensuring their safety, protecting their good health, providing effective treatment for covid patients, delivering food aid – communication and cooperation between national, regional, township and village authorities as well as civil society organizations and NGOs are fundamental.

The Arakan Humanitarian Coordination Team (AHCT) in Sittwe is a coalition of six civil society organizations that have been working hand in hand with government authorities to help to manage quarantine centres and address patients’ needs. It is evident that their work has been helpful not only to the community, but also to the authorities.

However, women are not yet very actively involved and integrated in the work of CSOs and NGOs and there is also a lack of women’s organizations. Thus, if these groups welcome and include more women in their
activities, they will be better able to identify and address the specific needs of women who experience the effects of covid-19.

**Community Involvement**

It is essential that local authorities offer current news and general knowledge about covid-19 in an accessible form. Information that is accessible in the local languages will be helpful to the communities in dealing with the issues they are struggling with today.

Secondly, home quarantine systems with support from health workers are recommended in place of quarantine centres with strict rules. Doing so can help to eliminate the common fear of contracting the virus from others in quarantine centres as well as to overcome stigma and societal exclusion.

Thirdly, we recommend a bigger involvement by village administrators and other community leaders in supporting the covid-19 prevention and control measures. This will aid in observing the needs of the community and identifying vulnerable groups. Amongst these leaders, there needs to be adequate representation of minorities within the community.

The fourth recommendation is to open up channels for the public to give confidential feedback through reporting ineffective measures and other concerns and offering recommendations. This would make covid-19 operations more relevant and increase responsibility and accountability. It would be best to channel such feedback through organizations that are independent and not also implementing covid-19 activities.

**Necessary Aid and Livelihood**

Residents of northern Rakhine state and Paletwa township in Chin state are in dire circumstances due to the armed conflicts and covid-19. Those in the epicenter
of battle experience this dilemma the worst. Adequate nutrition, shelter, healthcare and other pandemic protection measures are necessary for their continued survival. Their safety is paramount.

As the pandemic is unlikely to end in the near future, people need to attend to their livelihoods; they cannot simply keep relying on aid. The government needs to make proper arrangements at the earliest possible date to enable people to make a living during the pandemic in the safest possible way. Failure to do so would lead to people suffering from hunger instead of the coronavirus.

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Two Wishes....
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- Lu Chi
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